



FIRST SIX MONTHLY REPORT

**IMPLEMENTATION OF THE GOVERNMENT RESPONSE TO THE
RECOMMENDATIONS OF THE REPORT OF THE
BOARD OF INQUIRY INTO DISABILITY SERVICES**

**Authorised by
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Minister for Disability, Housing and Community Services**

April 2003

FIRST SIX MONTHLY REPORT ON THE IMPLEMENTATION OF THE RECOMMENDATIONS OF THE REPORT OF THE BOARD OF INQUIRY INTO DISABILITY SERVICES.

Introduction

The following report outlines progress that has been made against the Government Response to the Recommendations of the Board of Inquiry into Disability Services since the Government Response was tabled in the Legislative Assembly on 26 September 2002.

The Government had already taken action on certain recommendations prior to the tabling of the Government Response, such as the formation of the Department of Disability, Housing and Community Services. These actions were noted in the Government's response tabled on 26 September 2002. Other recommendations were not agreed to by the Government, and no further action will be taken against them. In instances where actions have already been taken, or where the Government has stated that no action is to be taken, the relevant recommendations have been removed from this report.

Summary of Progress

The Government has:

- Established five joint community and government working groups, to provide advice and guidance to Disability ACT, the Disability Advisory Council and the sector in achieving the objectives outlined in the Government's action plan, *Steps to Reform*:
 - Access, Eligibility and Funding Working Group
 - Legislative Reform Working Group
 - Quality and Standards Working Group
 - Housing and Tenancy Working Group
 - Workforce Reform Working Group.

- Recruited three new senior staff to Disability ACT: Lois Ford - Executive Director, Roslyn Hayes – Director, Gerry Brown – Senior Manager.

- Commenced the development of a five-year strategic plan for Disability ACT. The Plan will include strategies for identifying and focusing on the specific needs of people with disabilities across the age spectrum, and promote a values-based people-centred approach to responsive and individualised care, support and accommodation arrangements.
- Established a one-off innovation fund that aims to: encourage new opportunities and approaches to supporting people with disabilities that result in flexible, person-centred improvements in the long term; and enable people to try out new ideas that expand and improve current approaches and options.
- Established a new Disability Advisory Council, following the completion of the terms of office of the Disability Reform Group and the existing Disability Advisory Council.
- Initiated consultations and discussions on the creation of a single therapy service for children and adults.
- Allocated \$500,000 to early intervention services in 2002-03.
- Allocated \$1m to the Post-School Options program 2002-03.
- Allocated \$250,000 for day support options, \$800,000 for high and complex needs clients, and \$450,000 to progress reforms and sector development in 2002-03.
- Initiated a Review of Statutory Oversight and Community Advocacy Agencies.

<i>Recommendation</i>	<i>Government Response</i>	<i>Progress: March 2003</i>	
General Recommendations			
<p>1</p>	<p>The Disability Services Act 1991 should be amended to change its focus from distribution of funds to a person centred approach. The ACT Act adopted the approach of the prior Commonwealth Act of 1986. Since its enactment, development in the provision of services to people with disabilities has evolved significantly so that the Act does not reflect best practice.</p>	<p>Agreed. The Government agrees that amendments to the Disability Services Act 1991 (ACT) (DSA), developed in consultation with the sector and tabled in the Assembly in 2003, are necessary to:</p> <ul style="list-style-type: none"> ▪ provide statutory powers and responsibility for the independent monitoring of compliance with standards and legislation, with particular focus on the health and safety of people with a disability. The Government will legislate to create a statutory officer (Disability Services Commissioner) with powers to undertake routine and random service performance audits, conduct inquiries and reviews, issue binding directives to improve and rectify services, administer a community visitor scheme, and provide education and support to services to assist service improvement. The Commissioner will have these powers in relation to all government funded disability services, and will be independent, reporting directly to the Minister for Disability; ▪ establish a community advisory body to work in partnership with Government; and ▪ provide the framework for flexible and individualised support for people with disabilities. 	<p>Update: As outlined in the Government’s action plan, <i>Steps to Reform</i>, a Legislative Reform Working Group has been established. The Group consists of 7 community representatives and 5 government representatives including Disability ACT, Justice and Community Safety and the Human Rights Office. It is jointly chaired by Andrea Simmons (previously co-chair of the Disability Reform Group) and Lois Ford (Executive Director of Disability ACT). Disability ACT is providing secretariat and research services to the Working Group.</p> <p>The Group had its first meeting on January 23, and is meeting on a twice-monthly basis. Proposed amendments to the Disability Services Act 1991 (ACT) will be tabled in the Assembly this year.</p> <p>Disability ACT and the Legislative Reform Working Group will be addressing this recommendation. Outcomes from this work will be included in the strategic plan and implemented through the operational plan.</p>

		<p>Disability Standards would be determined by Government, and promulgated through regulation or some similar instrument. Responsibility for quality would be shared between Disability ACT and the Disability Services Commissioner.</p> <p>The Government notes that the Disability Reform Group response differs from that of the government in respect of the powers and location of the statutory officer. The Disability Reform Group recommends that, in addition to the above, the statutory officer be empowered to receive and investigate complaints and provide advice and assistance to consumers and their representatives. The Disability Reform Group further recommends that the officer be the head of an independent statutory body, responsible to the Legislative Assembly and reporting to the Attorney General.</p> <p>The powers to receive and investigate complaints currently lie with the Community and Health Complaints Commissioner, and the Government is of the view that the Commissioner should continue to have these powers at this stage. A government review of statutory oversight bodies and community advocacy bodies, planned for completion by early 2003, will further inform the government's position on this issue. Advice and assistance to consumers and their representatives are provided by both the Community Health Complaints Commissioner and the Community Advocate.</p>	
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		<p>The Government is of the opinion that the ACT is of insufficient size to warrant the establishment of a new statutory body. The Government also considers that it is important for the Disability Services Commissioner to report directly to the minister responsible for disability services, rather than to another minister, to provide a direct feedback loop on the performance of services to the minister and consequently to the department. The minister and the department will be accountable for ensuring that service improvements and rectification to services are implemented.</p> <p>The Government also notes that the Disability Reform Group recommends further amendments to provide the head of Disability ACT with powers to ensure whole of government approaches, policy development, a person centred approach, funding and service provision and quality assurance across the sector.</p> <p>The Government is of the view that the Executive Director of Disability ACT and Chief Executive of the Department of Disability, Housing and Community Services should be held accountable for these matters by way of their administrative responsibilities and performance agreements with Government, and that it is therefore not necessary to create another statutory officer to undertake these functions.</p> <p>Further consideration will be given to whether the Disability Services Act should reflect the shared vision of the community and the government for people with disabilities.</p>	
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<i>Recommendation</i>	<i>Government Response</i>	<i>Progress: March 2003</i>	
<i>Recommendations in response to term of reference (a)</i>			
<p>3</p>	<p>The ACT Government should create a new statutory body which might be entitled ACT Disability Services Commission whose exclusive area of operation is the supervision, planning, policy, funding allocation, purchasing and monitoring of all disability services, including the Disability Program. These responsibilities and functions should be removed from the Department of Health, Housing & Community Care. It is apparent from the totality of the findings made in this Report against the Department and its senior managers that it has not adequately responded to the many opportunities given to it for reform and implementation of best practice over the years. Its history of management has been such as to warrant a significant reform of divorcing the administration of disability services from the Department to the proposed statutory Commission. The Government may be assisted in considering the form and structure of such a body by reference to the disability services legislation in WA.</p>	<p>Agreed with qualification. The ACT Government has not established a new statutory body. In line with the Government's response to the <i>ACT Health Review</i> and with the endorsement of the Disability Reform Group, on 1 July 2002 the ACT Government established a new <i>Department of Disability, Housing and Community Services</i>, including a dedicated disability agency, <i>Disability ACT</i>. The agency has specific functions and responsibility for disability matters including planning, policy, funding allocation, purchasing and monitoring of all government-funded disability services. Disability ACT is an integrated operating agency within the new department, reporting directly to the Chief Executive and the Minister.</p> <p>The Disability Reform Group strongly recommends that the position of head of Disability ACT be a statutory officer with statutory powers backed by appropriate legislation.</p>	<p>Update: The establishment of Disability ACT as a dedicated disability agency continues, with the three most senior management positions having been filled by highly experienced personnel from New Zealand, Queensland and the United Kingdom.</p> <p>Lois Ford has been appointed as Executive Director, and has extensive experience in managing change in the disability and health sectors in New Zealand. In these roles she created a range of flexible individualised funding models, and built strong relationships with consumer networks.</p> <p>Roslyn Hayes has been appointed to the position of Director, Disability ACT. Roslyn's most recent position was that of Regional Director of Disability Services, North and Remote Queensland. In addition to providing services to this vast area, Roslyn has had a long career committed to providing quality outcomes for people with disabilities.</p> <p>Gerry Brown has been appointed to the position of Senior Manager. Gerry joins the Disability ACT team from Scotland (UK) where he was</p>

	<p>Consideration should be given to including the following matters within the aegis of the proposed Commission:</p> <ul style="list-style-type: none"> (i) Planning, policy and strategy for disability services in the ACT including children and adolescents with all forms of disabilities and their families, (ii) Planning, policy and strategy for the delivery of home care services in the ACT; (iii) Funding and contract negotiation/oversight for the range of services for people with disabilities; (iv) Supplementary funding where people with disabilities access other mainstream services or systems (eg primary and secondary education); (v) Development and introduction of community integration programs for people with disabilities; (vi) Promotion and sponsorship of new and innovative service delivery projects; 	<p>The Government will adopt a planned and continuous program of establishing and maintaining a system of best practice, focussing on choice, flexible personal and family supports, and service expansion through innovative personalised support arrangements. This focus will be accompanied by:</p> <ul style="list-style-type: none"> ▪ ‘people investments’ throughout the community, to promote innovation, leadership and networking; ▪ establishment of ‘grass-roots’ or mini-projects of innovative consumer/family partnerships with service providers and Disability ACT, resourced through a carefully targeted innovation fund; and ▪ creation of technical capacity and an appropriate funding/service agreement environment to enable delivery of more flexible and personalised supports. <p>The Government agrees with the Disability Reform Group’s recommendation that the following concepts guide the development and redesign of the system:</p> <ul style="list-style-type: none"> ▪ outreach to people with disabilities and their families across all life stages; 	<p>head of children's services at Dumfries and Galloway Council. He recently developed successful innovative approaches for support for children with disabilities and their families. His experience of the disability sector in overseas jurisdictions will be highly valuable.</p>
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	<p>(vii) Liaison with other ACT Government agencies which deliver services to the disabled, such as educational institutions, transport services, land planning and building standards and accommodation services to best ensure their needs are addressed.</p>	<ul style="list-style-type: none"> ▪ clear points of access and support for individuals and families; ▪ access to relevant and timely information; ▪ recognition that people with disabilities and their families and supporters have a legitimate authority in their own lives; ▪ support to individuals and their families includes opportunities to explore options and to plan the ways in which goals might be pursued; ▪ recognition of the importance of informal supports, natural social networks and mainstream services; ▪ adaptation and responsiveness of mainstream 'generic' service and supports; and ▪ access to flexible, formal personal and family supports which complement and strengthen existing arrangements. <p>Agreed: The Government strongly supports the need for liaison between government agencies that deliver services to people with disabilities, to facilitate a whole-of-government approach to reforms. Disability ACT and relevant government agencies will establish a series of agreements, with</p>	<p>Update: The Government will be launching an Access Audit Kit which provides a planning framework to ensure that all ACT Government programs, services and facilities are accessible to people with disabilities and meet their responsibilities under the Commonwealth Disability Discrimination Act and the ACT</p>
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		<p>associated practice protocols, to ensure comprehensive planning for life-cycle services for people with a disability. These agreements will be in place by December 2003.</p>	<p>Discrimination Act.</p> <p>The Access Audit Kit will help managers identify and reduce the risk of complaints. It will require agencies to conduct an audit using mandated reporting criteria. These audits will be used to develop a series of agency specific Disability Action Plans. The Action Plans will set specific timeframes and strategies for addressing problems. The Audit Kit also requires agencies to consider access in purchasing goods and services.</p> <p>As joint partners, ACT Housing, Disability ACT and Urban Services are collaboratively working on a community government reference group called Access in the City. Through this group, the Government has been able to set up an accessibility hotline and an accessibility design advisory service called AccessADAPT. This group has also provided assistance with the Urban Services Access Action Plan 2002-2004.</p>
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<p>3 cont.</p>	<p>Such a body would give Canberrans a single point of contact when approaching the ACT Government for services thereby overcoming the uncertainty some people have in knowing which level of government and which agency to approach. It will also provide a continuity of support to people with disabilities throughout their lives.</p>	<p>Agreed. The Government places a high priority on assisting individuals and families to get the information and assistance they need to maintain control over their own lives and pursue their goals.</p> <p>The Government will establish service access mechanisms as a central point of access where people with a disability can receive information, referral, service planning and coordination assistance.</p> <p>The service will be accessible by phone, email and through personal contact. The disability access service will aim to ensure that families and people with disabilities have someone supporting them, to help them connect with appropriate services.</p> <p>Help for some may be as simple as helping them work out what they need. Others may require assistance to develop options that may not exist and others may want to know about the options available and obtain assistance in accessing the options they choose.</p>	<p>Update: On 7 December 2002, the Disability Reform Group and Disability ACT hosted a public forum on access to information and support for people with disabilities in the ACT. The aim of the day was to give people with disability, their families and friends the opportunity to participate in a day of presentations and discussion to consider barriers, possibilities, issues and solutions for the best way for the ACT citizen with a disability to interact with the service system and the community at large.</p> <p>Over 70 people from the disability sector attended the forum. Also attending were representatives from several ACT Government agencies.</p> <p>A compilation of current access arrangements in Australia and internationally was assembled and distributed in an information pack together with other relevant information.</p> <p>Three interstate guests, from Tasmania, the Northern Territory and Western Australia, gave an overview on how their jurisdictions have approached the issues of access and information sharing.</p>
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		<p>Recent consultations with disability stakeholders indicate very strong support throughout the sector for this type of comprehensive access arrangement.</p> <p>The access mechanism will be designed by Disability ACT in collaboration with the Disability Reform Group and other disability stakeholders. Details of the number of access points and their location are still to be determined. The access services will be provided by Disability ACT in close collaboration with community service providers to ensure a strategic approach to implementation.</p> <p>The Government notes that the Disability Reform Group supports a model that incorporates elements of the role of local area coordinators in West Australia and Queensland, adapted to the circumstances and existing infrastructure of the ACT.</p>	<p>Information from this forum, as well as other research material assembled by the Disability Reform Group during 2002, has been presented to the Access, Eligibility and Funding Working Group. The Group consists of 6 community representatives and 7 government representatives including Disability ACT, Child Health and Development Services, Education, Youth and Family Services, Health and Community Care, and Treasury. Disability ACT is providing secretariat and research services to the Working Group.</p> <p>The Group had its first meeting on January 15, and is meeting on a twice-monthly basis. The Group will be presenting policy proposals to Government on each of the three areas (access, eligibility and funding).</p> <p>Disability ACT and the Access, Eligibility and Funding Working Group will be addressing the issue of co-ordinated access to services, by developing policy and project proposals for endorsement by the Executive Director of Disability ACT. Endorsed proposals will be included in the Strategic Plan and implemented through the Operational Plan.</p>
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		<p>However the Government also notes the Disability Reform Group recommendations that:</p> <ul style="list-style-type: none"> ▪ further investigation into the development of coordinated consumer access models in the ACT is required; and ▪ that the decision on where and by whom the roles and functions of an appropriate access mechanism should be performed should be made following community consultation and an examination of: <ul style="list-style-type: none"> - the current roles of existing service providers in this area; - the scope of the existing roles; - whether the existing roles should be expanded or redefined; and - whether new roles should be combined into one schema or built into the overall system; and - the service attributes required to provide a high quality service of this kind. <p>The approaches of Disability ACT and the Disability Reform Group to a comprehensive consumer access mechanism have much in common. However, Disability ACT's position is that such a service, without place any restrictions on related community activities, should be located within government. The Government will develop a service model and implementation plan in conjunction with the Disability Reform Group and a dedicated Working Group by June 2003.</p>	
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4	<p>It is important that staffing for this new statutory Commission be consistent with Dr Kendrick's recommendations regarding leadership and experience qualities.</p>	<p>Agreed. Disability ACT and the Disability Reform Group have developed the following staffing criteria to apply to key positions:</p> <ul style="list-style-type: none"> ▪ extensive knowledge of and appropriate experience in the Disability/Community Services industry; ▪ willingness and ability to commit to establishing services and supports to assist people with disabilities to take their place as full and equal members of the ACT community; ▪ demonstrated commitment to promoting the inherent right of people with disabilities to dignity and respect; ▪ demonstrated strategic and leadership skills; ▪ demonstrated managerial skills and the capacity to work effectively with other people; ▪ dynamic, entrepreneurial leader able to construct, motivate, guide and evaluate; ▪ highly skilled at communicating with diverse groups, individuals and stakeholders; ▪ demonstrated keen sense of the worth, dignity and rights of people with a disability; 	<p>Update: The staffing criteria developed by Disability ACT and the Disability Reform Group were used in the recruitment of the personnel selected for the three senior management positions in Disability ACT: Lois Ford, Executive Director, Ros Hayes, Director, and Gerry Brown, Senior Manager.</p>
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		<ul style="list-style-type: none"> ▪ relevant tertiary degree/diploma, or equivalent experience; and ▪ demonstrated ability to lead and manage change. <p>The key positions will be widely advertised and filled by December 2002.</p>	
5	<p>A change manager with proven experience in the operation of individualised service provision to the disabled and proficient in world best practice should be appointed to manage the implementation of the changes and service improvements recommended in this Report. In undertaking that task, it may be of assistance for that person also to have regard to the submissions received by this Inquiry and the extensive research materials and literature, both national and international, gathered by the Inquiry secretariat.</p>	<p>Agreed. Disability ACT has embarked on a change management process through a series of strategies, including:</p> <ul style="list-style-type: none"> ▪ establishing a partnership with the Disability Reform Group; ▪ obtaining advice from experts in the disability field; ▪ extensive community consultations undertaken by RPR Consulting; ▪ establishment of senior positions in Disability ACT with expertise in change management and disability services; ▪ research within Disability ACT; ▪ establishing a register of local and interstate experts in the disability field; and ▪ commitment to a program of reform and innovation that will commence in 2002. <p>The Government agrees with the Disability Reform Group recommendation that targeted technical advice be made available to consumers and their supporters, service</p>	<p>Update: Disability ACT's change management strategy continues, as follows:</p> <ul style="list-style-type: none"> ▪ all senior management positions in Disability ACT have been filled; the personnel selected for the three senior management positions in Disability ACT, Lois Ford, Ros Hayes and Gerry Brown have extensive experience in managing innovation and change in disability service provision; ▪ a new Disability Advisory Council has been appointed to provide strategic policy advice to the Department; ▪ the program of reform has commenced with the establishment of five joint government/community working groups, whose terms of reference emanate from the response to the Disability Inquiry and the Government's action plan, <i>Steps to Reform</i>; and

		providers and government officials to assist them in moving to more personalised support arrangements.	<ul style="list-style-type: none"> ▪ extensive community consultations will continue to be a key feature of the reform process.
6	<p>In establishing this body, the ACT Government should appoint senior managers with the following skills to plan, develop and implement initiatives and service arrangements:</p> <p>(i) Change management and reform expertise to establish a new organisation and new culture;</p> <p>(ii) A clear understanding of the wants, needs and aspirations of all people living with a disability, their families and carers;</p> <p>(iii) A capacity for service development - this would require managers to have vision, inventiveness and a desire to trial and test new and innovative arrangements; and</p> <p>(iv) Contract management and negotiation skills - this might involve external specialists to advise or participate in negotiations with service providers.</p> <p>It may assist the ACT to approach or engage local and interstate experts (such as Professor Shaddock, Ms Anne Cross</p>	<p>Agreed. The Government has established a new disability agency structure and has a strong commitment to carrying out the functions of the agency in partnership with disability stakeholders, and in a way that reflects the values inherent in the Disability Reform Group's Vision Statement, the National Disability Service Standards and human rights legislation.</p> <p>The Government will establish an advisory structure that incorporates strong community involvement, and the agency's responsibility to accept advice from stakeholders through the advisory structure will be clearly articulated. This advisory structure will be in place by February 2003.</p> <p>Disability ACT will establish a recruitment policy to ensure that appointment of staff is guided by the advice of the Board of Inquiry and the recommendations of the Disability Reform Group in their submission to the Reid Review.</p> <p>Disability ACT, in partnership with the Disability Reform Group, has established a register of consultants, both local and interstate, from which can be drawn expertise on a range of specialist topics. Appointments to the register will be finalised in October</p>	<p>Update: See progress on Recommendation 5.</p>

	and Mr Jeff Chan) to provide advice on directions and options that might be pursued during the early years. Professor Shaddock is a local, highly qualified world expert. On its interstate visits the Inquiry was most impressed with the breadth of knowledge and practical experience demonstrated by Ms Cross and Mr Chan.	2002.	
7	<p>The objectives of the new statutory Commission should include:</p> <p>(i) Gradual adoption of the person-centred approach to assessing and delivering services to people with disabilities, in consultation with them and their families.</p> <p>(ii) Adoption of a policy of progressively withdrawing from the group home model as the predominant residential support arrangement, moving towards an individualised and integrated care and support model.</p>	<p>The following responses are made on the understanding that the new agency has not been created as a statutory Commission.</p> <p>Agreed. There is widespread support in the sector for increasing participation of families and for moving gradually towards a wider variety of person-centred and integrated care and support arrangements.</p> <p>Disability ACT, in partnership with disability stakeholders, will take a strong role in establishing the principles and policies that will guide service improvement and development.</p> <p>Noted. Disability ACT will target innovation and growth funds towards flexible personal and family supports while maintaining options where service users are satisfied with current arrangements.</p> <p>The Government recognises that for a number of people the group home model is working well and should continue to be supported. The</p>	<p>Update: A Strategic Plan for Disability ACT is being developed, which will include strategies for focusing on the specific needs of people with disabilities across the age spectrum, and will promote a values-based, people centred approach to responsive and individualised care, support and accommodation arrangements.</p>

		<p>objective of reforms will be to increase the range and flexibility of options without threatening existing successful arrangements, and to further develop and improve existing models.</p> <p>Streamlining of services through equitable and transparent funding policies together with clear eligibility and access policies will assist in building more choice and more comprehensive service access arrangements. Disability ACT has developed draft eligibility principles as follows:</p> <ul style="list-style-type: none"> ▪ people with disabilities and their families have confidence that the eligibility criteria for the ACT services and supports system are transparent, fair and easy to understand; ▪ individuality, human worth, and dignity are recognised through the eligibility policy and its implementation; ▪ available funding for disability services, supports and innovation is spread across the largest number of people with disabilities; 	
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		<ul style="list-style-type: none"> ▪ the caring capacity of families and communities to support people with disabilities to live in the community is strengthened; ▪ requests for support are managed in a more planned and systemic manner; ▪ people with disabilities, their families and carers are assisted in a pro-active manner to identify and establish adequate and lasting supports to reduce crisis responses where possible; ▪ a person centred and flexible approach to services and supports is encouraged; ▪ provision is made for innovation and a partnership approach to resourcing supports and supported living for people with disabilities; ▪ access to disability services and supports is based upon greatest need, taking into account risk factors and resources; ▪ the service system builds in capacity to support people with disabilities in identifying a range of alternative resources and supports; and ▪ mechanisms are available to people with disabilities to appeal against decisions perceived to be unfair in relation to eligibility policy or determination. 	
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	<p>(iii) Encouraging the design and introduction of new and innovative service models that are responsive to the needs and desires of people with disabilities - including family and community governance arrangements.</p>	<p>Agreed. Disability ACT has established an innovation fund that aims to:</p> <ul style="list-style-type: none"> ▪ encourage new opportunities and approaches to supporting people with disabilities that result in flexible, person-centred improvements in the long term; and ▪ enable people to try out new ideas that expand and improve current approaches and options. <p>The terms of reference for the innovation fund have been developed by Disability ACT in consultation with the Disability Reform Group. The innovation funds will be targeted towards small projects that encourage new opportunities and approaches for supporting people with disabilities and will result in flexible, person-centred improvements in the long term. The Government has allocated \$350,000 to the innovation fund, over the next 3 years. Applications to the fund will be publicly invited in September 2002.</p> <p>The Government and the Disability Reform Group support ‘breaking new ground’ through small projects aimed at both innovation and improving partnerships with consumers and families. This enables people involved to try out</p>	<p>Update: Over 45 applications for the innovation funds have been received, and are currently being evaluated by a joint government/community panel.</p> <p>It is anticipated that funds will be released in April 2003.</p>
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	<p>(iv) Introduction of new regulatory and inspection arrangements to review and monitor services for people with disabilities.</p>	<p>new ideas in manageable steps. Small projects have the advantage of being more responsive to people who are directly involved, and corrections and modifications are more easily made.</p> <p>The Government agrees with the Disability Reform Group’s recommendation that innovation be supported not only through the use of new monies but by:</p> <ul style="list-style-type: none"> ▪ ‘people investments’ throughout the community, to promote innovation, leadership and networking; ▪ creation of technical capacity; and ▪ an appropriate funding/service agreement environment to enable delivery of more flexible and personalised supports. <p>Agreed. The Disability Services Commissioner will have statutory powers and responsibility for the independent monitoring of compliance with standards and legislation, with particular focus on the health and safety of people with a disability. The Commissioner will have powers to undertake routine and random service performance audits, conduct inquiries and reviews, issue binding directives to improve and rectify services, administer a community visitor scheme, and provide education and support to</p>	<p>Update: Disability ACT and the Disability Reform Legislation Working Group are giving the highest priority to advising the Government on the functions and powers of the Disability Commissioner, including powers to review and monitor services for people with disabilities.</p>
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		<p>services to assist service improvement. The Commissioner will have these powers in relation to all government funded disability services, and will be independent, reporting directly to the Minister for Disability.</p> <p>The Government notes that the Disability Reform Group response differs from that of the government in respect of the powers and location of the statutory officer. The Disability Reform Group recommends that, in addition to the above, the statutory officer be empowered to receive and investigate complaints and provide advice and assistance to consumers and their representatives, and be the head of an independent agency responsible to the Legislative Assembly and reporting to the Attorney General.</p> <p>The Government has undertaken to arrange for an independent review of complaints and advocacy bodies. The responsibility to receive and investigate complaints will remain with the Community and Health Complaints Commissioner at this stage. As previously noted, the Government is of the opinion that the ACT is of insufficient size to warrant the establishment of a new statutory body.</p>	
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	<p>(v) Reduction over time of the Disability Program by establishment of a number of smaller service units to deliver care support services. Whether these units should be best managed within or outside the government sector should be determined at a later time.</p>	<p>Agreed. The Disability Program provides the following services:</p> <ul style="list-style-type: none"> ▪ accommodation support services providing suitable assistance to people with a disability to live in the community; ▪ a Community Access/Linkage Service (aCe-Link), supporting people with disabilities to maintain and develop life and social skills; ▪ centre-based respite services to give the person with a disability and their family/carer the chance to have a regular short break from each other; and ▪ access to a range of multi-disciplinary services, including psychology, social work, physiotherapy, speech pathology, occupational therapy, and recreational services. <p>Disability ACT is reviewing whether it is appropriate for all of these services to be provided by the Disability Program. The process of review will determine, for instance, whether the Government accommodation support service should target those in crisis situations requiring support and accommodation urgently.</p>	<p>Update: This recommendation will be addressed in the Strategic Plan for Disability ACT, with decisions being informed by the DRG Statement of Vision and Values.</p>
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		<p>The Government is considering the establishment of a single therapy service, with specialist teams where necessary, for people with disabilities from age 0 to 65 years who are eligible under the relevant legislation and policy for access to services. A model for this service will be developed by December 2002, for consideration in the budget context.</p> <p>Changes to the size and/or structure of the Disability Program are being considered along side such issues as:</p> <ul style="list-style-type: none"> ▪ what roles the Government and the sector should take in relation to accommodation services and crisis support; and ▪ what the impact would be of changes to the Disability Program in terms of benefits to the consumer, efficiency of the system, and consumer choice. <p>The Disability Program will continue to uphold their commitments to existing consumers, and will offer opportunities for people to explore options for increasing the flexibility and portability of the support they receive. People with disabilities accessing services offered in the current system will not be disadvantaged through the reform process.</p>	
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		<p>The Government notes the Disability Reform Group recommendation that the Disability Program should remain stable until further consideration has been given to the issues noted above, and alternatives have been fully investigated.</p> <p>The Group also recommends that the Program only provide services to new clients in circumstances where it can be shown that:</p> <ul style="list-style-type: none"> ▪ the client will benefit most by the Disability Program being the service provider; ▪ Disability Program would provide the most cost efficient service; and ▪ the client has chosen the Disability Program as their preferred service provider. <p>Where these elements are not established the Reform Group recommends that the consumer be assisted to access appropriate services and supports from other sources.</p> <p>While the Government acknowledges the need to limit growth in the Disability Program while the future is under consideration, vacancies will continue to be filled during this period as determined by the Program Placement Committee.</p>	
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	<p>(vi) Investment in support and assistance for families of people with disabilities because best practice requires that the individual should be supported in the context of their own family and the wider community.</p>	<p>Agreed. The Government will support, value and promote the roles of families, guardians, friends, carers and significant others in the lives of people with disabilities. This will be achieved through the development of new policies and by re-designing and refocusing services towards support for individuals and their families, to make it easier for people with disabilities to have the kind of life or lifestyle that is optimal for them.</p> <p>The Government will target the innovation funds to individual and family supports as explained above. Disability ACT also recognises that investment must be made in supporting people who do not have close family support or other networks to rely on.</p>	<p>Update: Disability ACT and the Disability Reform Access, Eligibility and Funding Working Group are considering the feasibility of introducing the Local Area Co-ordination model into the ACT. This model is used in Western Australia, Queensland, Victoria, Tasmania and the Northern Territory, and is designed specifically to provide support to, and promote the roles of, families, friends, carers and significant others in the lives of people with disabilities.</p> <p>Significant research was carried out by the Disability Reform Group on the Local Area Co-ordination model, and this work is being used as the basis of the Disability ACT and the Working Group's deliberations.</p>
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	<p>(vii) Ensuring that adequate forward planning is carried out to determine the future demand for services from people with disabilities.</p>	<p>Agreed. The Government agrees with the Disability Reform Group's recommendation for adequate forward planning supported by evidence-based assessment of future demand for services. A profile of people in the ACT with disabilities will be published in 2002 through Disability ACT. The specific aims of this report are to:</p> <ul style="list-style-type: none"> ▪ serve as a resource for informed community discussion about disability matters; ▪ provide an information base for policy development and program planning purposes; ▪ set benchmark data for monitoring trends; and ▪ publish information in an accessible format for government and all disability stakeholders. <p>Disability ACT has established a planning unit with a senior manager. As part of establishing a quality framework, the functions of the planning unit will include establishment of a system for monitoring service standards.</p>	<p>Update: Disability ACT is assembling a profile of people with disabilities in the ACT, which includes information from a variety of sources including the Australian Bureau of Statistics, the Australian Institute of Health and Welfare, the ACT Department of Health and Community Care, and the Chief Minister's Department. The information has four main purposes:</p> <ul style="list-style-type: none"> ▪ to serve as a resource for informed discussion of disability-related matters; ▪ to provide an information base for policy development and program planning; ▪ to begin monitoring of trends in disability in the ACT which may in future contribute to establishing benchmark data; and ▪ to provide accessible information for government and all disability stakeholders.
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8	<p>This authority should be funded to establish a service access centre, as part of its functions, to assess all people with disabilities and to assist and inform them and their families in identifying the options best suited to their individual needs. Such a centre would also constitute a single reference point to advise people as to the appropriate body with which to lodge complaints against service providers.</p>	<p>Noted. In line with stakeholder preferences gauged through consultations, Disability ACT will establish centralised service access based on the local-area coordinator concept and arrangements that operate in West Australia, Queensland, Victoria, Tasmania and the Northern Territory. With the disability sector in a phase of building an integrated and flexible service system, Disability ACT will take a lead role in the provision of access services in the first instance. It should be noted that to ensure an independent service for users, access services are provided by government in all other jurisdictions. Disability ACT has commenced a consultative policy development process in relation to access and will work in collaboration with the Disability Reform Group and other stakeholders on designing and implementing the most appropriate structures and mechanisms for access in the ACT context and to ensure a strategic approach to implementation.</p> <p>The Government's arrangements for access will encompass a significant range of functions including:</p>	<p>Update: In addition to the consideration of the Local Area Co-ordination model, Disability ACT and the Access, Eligibility and Funding Working Group is also considering the introduction of co-ordinated approaches to improving access to disability information and referral services.</p> <p>At the public forum held in December (see progress on Recommendation 3), and from a recent survey conducted by the Client Guardian Forum on this topic, a clear message was received from the community that establishment of disability information and referral services should be accorded a high priority.</p>
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		<p>throughout the sector for this type of comprehensive access arrangement.</p> <p>The Government notes that the Disability Reform Group recommends further investigation into the development of coordinated consumer access models in the ACT in consultation with consumers, families and service providers, and that the Disability Reform Group supports a model that incorporates elements of the role of local area coordinators in West Australia and Queensland, adapted to the circumstances and existing infrastructure of the ACT.</p> <p>The Government also notes that the Disability Reform Group recommends that the decision on where and by whom the roles and functions of an appropriate access mechanism should be performed should be made following community consultation and an examination of:</p> <ul style="list-style-type: none"> ▪ the current roles of existing service providers in this area; ▪ the scope of the existing roles; ▪ whether the existing roles should be expanded or redefined; ▪ whether new roles should be combined into one schema or built into the overall system; and ▪ the service attributes required it provide a high quality service of this kind. 	
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		Although the Government and the Disability Reform Group differ on who should deliver these services, their approaches to a comprehensive consumer access mechanism have much in common. A service model and implementation plan will be developed in conjunction with the Disability Reform Group and a dedicated Working Group by March 2003.	
11	The responsibility for strategic control and direction of the affairs of the Disability Program should be removed from ACTH&CCS Board and be the responsibility of a separate board managing the Disability Program. Its sole area of responsibility would be the strategic direction of the Program.	<p>Noted. On 1 July 2002 the Disability Program became an operational section of Disability ACT. Currently, the Disability Advisory Council and the Disability Reform Group both provide advice to the Minister and to Disability ACT. With attention to the Government's responsibilities under the Commonwealth, State and Territory Disability Agreement (CSTDA) and to disability stakeholders, formal advisory arrangements are currently under review and will be put in place to coincide with the end of the term of the two current groups (February 2003). The new advisory arrangements will be defined in the Disability Services Act, and will include responsibility on the part of Disability ACT to publish in annual reports its responses to significant advice provided by the advisory body.</p> <p>The Government agrees with the recommendation of the Disability Reform Group that a community advisory body should be appointed to work with the Head of</p>	<p>Update: Nominations for the new Disability Advisory Council closed on 7 February, with over 40 nominations being received. A shortlist of applicants is currently being reviewed, and the Council will commence its term in April 2003.</p> <p>The Terms of Reference for the new Disability Advisory Council are as follows:</p> <ol style="list-style-type: none"> 1. Advise and make recommendations to the Minister for Disability and other Ministers as appropriate as to: <ol style="list-style-type: none"> 1.1 Issues, policies and practices generally as they impact on people with disabilities, their families and carers and service providers, including matters affecting the rights of people with disabilities, legislation and policy proposals; 1.2 The progress in developing and implementing "Steps to Reform";

		<p>Disability ACT in a range of areas including those which set broad strategic directions for the service system. This body will be appointed by the end of February 2003.</p>	<p>1.3 Issues arising out of community consultations, complaints and other sources; and</p> <p>1.4 Any other matter, at the determination of the Council, which affects the lives of people with disabilities and their families and which arises out of, or is related to their disabilities.</p> <p>2. Work in partnership with the Department of Disability, Housing and Community Services in the development and implementation of the key activities that impact on the lives of people with disabilities and their families.</p> <p>3. Communicate the needs of people with disabilities and their families by;</p> <p>3.1 Promoting awareness and education across government and the community sectors about the needs of people with disabilities and their families; and</p> <p>3.2 Receiving advice from, and providing information to, different communities to ensure that varying perspectives are heard and considered by the advisory body.</p> <p>4. Establish links with the National Disability Advisory Council to ensure coordination of federal and ACT advice to Government.</p>
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12	<p>This Disability Program Board should include disabled people, their families, service providers and other people with relevant up to date expertise in disabilities. The Inquiry was informed of an approach adopted interstate and overseas where service providers, service users (or their families) and/or industry experts were included on management and/or advisory boards. This would ensure that the views and needs of people with disabilities can be directly injected into policy directions, programs, funding priorities and service arrangements.</p>	<p>Agreed. The Government will ensure that the formal advisory arrangements referred to in response to Recommendation 11 will include strong representation from people with a disability, their families, carers and service providers.</p> <p>The Disability Reform Group agrees with Recommendation 11, noting that processes to achieve the desired outcomes are already underway.</p>	<p>Update: Membership of the Disability Advisory Council will be between 9 and 13 people, drawn from people with disabilities, the family members of people with disabilities, service providers, people who work with people with a disability and community leaders. The majority of members will be people with disabilities and family members of people with disabilities.</p> <p>The Chair of the Council will be a person with a disability, and the Minister may appoint a deputy chair.</p> <p>Government members, including a representative of the Commonwealth Department of Family and Community Services, will be appointed ex officio.</p> <p>Selection Criteria: The following selection criteria will be applied:</p> <ol style="list-style-type: none"> 1. Demonstrated commitment to the rights of people with disabilities and to their families; 2. Demonstrated commitment to improving the position and roles of people with disabilities within the ACT community; 3. Demonstrated breadth of knowledge and understanding of issues impacting on the lives of people with disability and their families;
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			<p>4. Demonstrated understanding and knowledge of the disability service sector and the issues effecting the sector in the ACT; and</p> <p>5. Demonstrated commitment and ability to contribute to the work of the advisory body.</p>
<p>14</p>	<p>Until the changes recommended are fully implemented with any consequential alteration to the Disability Program's Placement Committee the following should occur:</p> <p>(i) The Placement Committee's procedures be revised to ensure that parents, guardians and families are advised of their entitlement to be given all relevant information relating to proposed residents prior to recommendation by the committee for exploration of a possible placement, their entitlement to present documents to the Committee and to appear personally before it at all stages of its deliberations;</p>	<p>Agreed in principle. Disability ACT will further consider arrangements for access to accommodation support across the sector through the policy development process. Research is required to develop alternative placement processes.</p> <p>Disability ACT, endorsing suggestions by the Disability Reform Group, intends to establish for the Disability Program a placement system which emphasises a culture of facilitation and promotes self-determination by people with disabilities in collaboration with their families and supporters. Other key features of the new system would include:</p>	<p>Update: This recommendation will be addressed in the Strategic Plan for Disability ACT, with decisions being informed by the DRG Statement of Vision and Values.</p>

		<ul style="list-style-type: none"> ▪ identification and publication of supported accommodation vacancies; ▪ service user access to all the information necessary for informed decision-making, including information relating to entitlements and options; ▪ transparent processes for determining priority; ▪ reinforced tenancy rights, upheld through final shared tenancy decisions being made by existing tenants; ▪ acknowledgment and reinforcement of individual tenancy rights; ▪ decisions made by people who are close to all the parties involved, and have a full understanding of the dynamics of the situation; and ▪ further research and evaluation to investigate approaches to ensuring people in group situations are well matched. <p>The Disability Program's processes for entry of people with disabilities into accommodation support have been reviewed and strategies for increased family participation implemented.</p>	
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	<p>(ii) That the composition of the Committee be amended to include sufficient parent, guardian and family representatives to ensure a meaningful governing role; and that the Disability Program appoint to the Committee people from outside the Program with expertise in service provision; and</p> <p>(iii) That the Chair of the Committee be completely independent, and free from any possible conflict of interest.</p>	<p>Agreed. The Disability Program Placement Committee has a parent as the interim chairperson and has expanded its parent and family representation. The Committee also seeks to include people with disabilities in its deliberations.</p> <p>Agreed. The Disability Program will appoint an independent person to facilitate the Placement Committee. The Government agrees with the Disability Reform Group recommendation that this is an interim response, pending activities outlined above.</p>	
15	<p>The Disability Program should not continue to be responsible as landlord for providing accommodation for its clients. Instead, disabled people should have the same rights and entitlements to enter into accommodation agreements with housing providers, both government or private, as is available in the general community.</p>	<p>Agreed. The Government agrees that people with a disability should have the same rights and entitlements as others to enter into accommodation agreements with suitable housing providers and should have access to a range of accommodation and support options appropriate to their requirements. The Department of Disability, Housing and Community Services has had input to the Residential Tenancies Act Review (2002) to this effect.</p> <p>The ACT Disability Services Act 1991 (Schedule 2 Clause 8) states:</p> <p>‘Programs and services should be designed and administered so as to</p>	<p>Update: As outlined in the Government’s action plan, <i>Steps to Reform</i>, a Disability Reform Housing and Tenancy Working Group has been established. The Group consists of 11 community representatives and 4 government representatives, including Housing, Community Services and Disability ACT. It is jointly chaired by Helen Fletcher (Housing) and John Thorn (parent of a child with a disability).</p> <p>The Group held its first meeting on February 10, and is meeting on a twice monthly basis.</p> <p>Disability ACT and the Housing Working</p>

		<p>ensure that no single organisation providing services exercises control over all or most aspects of the life of a person with disabilities.’</p> <p>In line with best practice principles and the National Disability Service Standards, future Government funding arrangements will encourage agencies to ensure that their service menu does not contravene the National Standards or the Disability Services Act 1991 by offering ‘whole of life’ services that reduce the independence and authority that people with disabilities have over their lifestyle. Arrangements must ensure that people with a disability have every opportunity for integrated supported living.</p> <p>The Government will review any changes to tenancy arrangements in the Disability Program to ensure that the consumer will not be disadvantaged, and that the right of the consumer to choose between current arrangements and the separation of tenancy is upheld.</p> <p>A Disability Housing Working Group including persons from government and peak disability organisations is being established in October 2002 to further investigate appropriate models and funding options.</p>	<p>Group will address this recommendation. Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>
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		<p>(A Government working group was established to consider the recommendations.)</p> <p>The transfer of housing and tenancy management from government and non-government support providers has a range of implications that the Government will research and explore in consultation with relevant stakeholders. Mechanisms will be developed that allow individuals to have the option of their support services being targeted directly to them rather than being tied to a particular property.</p> <p>The Government notes that the Disability Reform Group has recommended that people with disabilities must continue to have the option that currently exists of their tenancy responsibilities residing in a third party.</p>	
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<p>16</p>	<p>In order to further protect the tenancy rights of disabled people, the Residential Tenancies Act 1997 should be amended to ensure that residents in group homes have adequate security of tenure by being granted appropriate tenancy status under the Act.</p>	<p>Noted. <i>The Residential Tenancies Act 1997</i> is presently being reviewed by Justice and Community Services and the rights of residents in shared housing situations will be considered under the review. The Government Disability Housing Working Group has recommended to the review that the Act be amended to allow for establishment of shared tenancy arrangements. In particular, amendments to the <i>Residential Tenancies Act 1997</i> should provide opportunities for greater flexibility in shared household arrangements and provide adequate protection and clarify responsibilities for tenants in shared living arrangements.</p> <p>The Disability Reform Group agrees with Recommendation 16, drawing attention to the recent agreement by Government to the Reform Group's proposal that all new and amended legislation is to be reviewed for its potential to impact on people with disabilities.</p> <p>The Reform Group notes that as the Disability Sector has a strong interest in the review of the Residential Tenancies Act, but has not been given the opportunity to contribute to the process, the review must be extended to enable broader consultation to occur prior to enacting any change to the legislation.</p>	<p>Update: The Chief Minister approved the review of the <i>Residential Tenancies Act 1997</i> in 2002. The terms of reference required the Director of the General Law Group of the Department of Justice and Community Services, in consultation with a focus group, to undertake a review of the Act to identify any problems and propose solutions.</p> <p>The review has commenced and a considerable amount of work has been undertaken in both identifying issues and developing solutions. Finalisation of the review, however, was significantly interrupted by the insurance crisis and officers have been required to give priority to developing new legislation and programs required in the ACT.</p>
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17	<p>The ACT Government should establish a register of properties which have been suitably constructed or modified to meet the needs of people with disabilities.</p>	<p>Agreed. ACT Housing has commenced a stock audit of all its properties including information on the suitability of properties for people with a disability. Through the Department of Disability, Housing and Community Services, a register of suitably modified housing will be established and maintained for government owned public housing rental properties that are managed by ACT Housing and a range of community-based housing providers on behalf of the ACT Government. A register of properties may enable quicker and more appropriate matching of applicants with a disability to a suitable property. It would also provide a snapshot of properties at a point in time and assist long term planning.</p> <p>The Government notes that the Disability Reform Group supports this action. The Disability Reform Group further recommends that ACT Housing should adopt the concept of a universal design for all new government and community properties, noting that:</p> <ul style="list-style-type: none"> ▪ the universal design approach that is being considered in other jurisdictions is more comprehensive than the existing ACT building codes; and 	<p>Update: Work on this recommendation is in progress. It is expected to be completed over the next 18 months following a condition assessment and some further work on general standards for modifications that should assist in the development of a rating system.</p>
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		<ul style="list-style-type: none"> ▪ housing built to universal design standards removes the need for purpose built dwellings and reduces the costs of modifications for people with a disability by providing for a greater degree of responsiveness to a wider range of changing needs. 	
18	The ACT Government should develop and implement a strategy to attract and retain care workers to the disability sector.	<p>Agreed. The Government agrees that a workforce strategy is a crucial part of reform in the disability sector. The development of a strategy to address workforce issues will be tasked to the Workforce Working Group, with membership to include government, non-government and union representation. The Government will establish the Working Group in October 2002. The development of a strategy will involve consultation with relevant stakeholders and include consideration of the following:</p> <ul style="list-style-type: none"> ▪ high labour turn over, recruitment, selection and retention; ▪ gaps in skills levels (current and future); ▪ human resources strategies (including training) and supporting resources; ▪ systemic issues; and ▪ workforce planning. 	<p>Update: As outlined in the Government's action plan, <i>Steps to Reform</i>, a Disability Reform Workforce Working Group has been established to consider all recommendations relating to workforce issues, both within disability ACT and the sector in general.</p> <p>The Group held its first meeting on February 6, and consists of 10 community members and 6 government members, including the Chief Minister's Department, Disability ACT and Housing, and will be meeting on a fortnightly basis.</p> <p>Disability ACT and the Workforce Working Group will address this recommendation. Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>

		<p>Workforce issues in the disability sector contain a high degree of complexity. This includes the differences in the operations and conditions of the government and non-government sectors, and the complexities arising from staff working across sectors (eg. disability, mental health, ageing) under a range of service delivery models. Currently staff work under a range of awards, including:</p> <ul style="list-style-type: none"> ▪ Social and Community Services (ACT) Award 2001; ▪ Community and Aged Care Services (ACT) Award 1995; ▪ Community Care (Home Care) (ACT) Award 1998; ▪ Health Services Union of Australia (ACT Health and Community Services Public Sector); ▪ Consolidated Award 1998; and ▪ Individually negotiated awards. <p>In accordance with the Disability Reform Group's recommendation, Disability ACT will ensure expansion of the current Workforce Working Group to include people with disabilities and carers, and will provide support for skills enhancement and the capacity to participate.</p>	
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19	Having regard to the evidence from the Epilepsy Association and Dr Andrews, it is recommended that all disability support officers be educated in the management of epilepsy with regular training and retraining.	Noted. As part of person-centred service provision, Disability ACT supports the training of staff in the sector to meet the support needs of individuals. Training will be targeted at the development of core competencies, supplemented with training targeted at the identification of and support for individuals' health issues, which will include epilepsy management where applicable. The Disability Program continues to provide epilepsy training as a core component of the induction program for all new staff.	Update: Disability ACT continues to provide training in the management of epilepsy as a core component of the induction program for all new staff. The Workforce Working Group will review the provision of training in the non-government sector, to respond to the needs of people with epilepsy.
20	Consideration should be given to combining the professional services presently provided by ACTCC such as social workers, therapists and physiotherapists with the similar services provided by the Department of Education and Community Services so that one administration provides these support services for all people with disabilities irrespective of age.	Agreed. With the creation of the new Department, the therapy services component of the Child Health and Development Service (CHADS) has moved to the Department of Disability, Housing and Community Services. In keeping with eligibility criteria under the Disability Services Act 1991 (ACT) and the Commonwealth State and Territories Disability Agreement (CSTDA), this co-location of CHADS and Disability ACT under a single administration provides opportunities to improve integration of disability services for people with a disability across life stages, to the benefit of all service users. In response to the Review of Therapy Services for Schoolchildren, the Disability Reform Group has made the following recommendations: that eligibility for CHADS services be extended beyond the current limit of 12	Update: A working party of therapists from the Child Health and Development Services (CHADS) and Disability ACT was convened in late 2002 to discuss the issues and implications associated with integrating the two therapy services to form a single therapy service. A draft implementation plan was developed for Executive consideration. Initial consultations were held with the community in December 2002 to provide information on progress to date and gather community comments and suggestions on the development and implementation of the single therapy service. Discussions are currently underway with the new Disability ACT Executive on the development of a single therapy service.
		<ul style="list-style-type: none"> ▪ years to children and young people; 	

		<ul style="list-style-type: none"> ▪ that all therapy services for children and young persons be provided through a single agency. In particular, the Disability Reform Group believes that CHADS should assume responsibility for therapy services provided in the Special Schools. <p>The Government, in consultation with the Disability Reform Group, is considering the establishment of a single therapy service, with specialist teams where necessary, for people with disabilities from age 0 to 65 years who are eligible under the relevant legislation and policy for access to services. A model for this service will be developed by December 2002, for consideration in the budget context.</p>	
<p>21</p>	<p>There should be the introduction of early intervention programs and strategies to diagnose, treat and manage disabilities such as autism, developmental problems and communication and learning difficulties.</p>	<p>Agreed. The Government is committed to increasing investment in early intervention services. Additional funds have been made available to the new Departments of Disability, Housing and Community Services and Education, Youth and Family Services to increase effectiveness of diagnostic services and for improved life-cycle planning services.</p> <p>Early detection and ongoing appropriate intervention are proven, effective policies for assisting people and families to be as independent as possible.</p> <p>In the 2002-2003 budget, this Government has allocated \$500,000 per annum to expand services for children with autism in the ACT. Of this, the government has allocated \$304,327 to provide additional early intervention</p>	<p>Update: Recruitment to all Child Health and Development Service (CHADS) positions funded under the allocation for early intervention programs has been completed. This includes additional resources in psychology, occupational therapy and social work.</p> <p>The positions filled are .4 ASO2 and .6 SPON C psychologist for the Autism diagnosis program, a full-time psychologist, a part-time occupational therapist and a part-time social worker.</p>

		<p>playgroup and early intervention unit places for children with autism, which will be transferred to the Department of Education. The remainder stays within the new Department for the autism diagnosis program and additional therapy services.</p> <p>The Disability Reform Group endorses Government commitment to increasing resources in this area.</p>	
22	<p>Appropriate transition programs should be developed for people with disabilities moving from school age to adolescence to adulthood to their older age years.</p>	<p>Agreed. Appropriate transition programs that are planned in advance, offer opportunities in the mainstream community and are age appropriate are being established through current Disability ACT initiatives.</p> <p>A transition program for young people graduating from school has been developed and implemented by Disability ACT. The Post-school Options Program commenced in 2000-01. This Program is designed to assist young people with moderate to severe support needs to explore alternatives to employment including those options that increase wider community integration. The program began with an initial allocation of \$205,000 for 2000-01. Due to increased demand, \$500,000 was allocated to the program in 2001-02 and \$1million has been allocated to the program in 2002-03. Funds were provided for twenty-six graduates to participate in the program in the ACT in 2001-2.</p> <p>The Mature Carers Program provides support for carers who are ageing and approaching a</p>	<p>Update: The Post School Options program has commenced for 2003. There are 29 participants continuing from the 2002 program, and 15 new participants. Applications were lower than expected, possibly due to the recent state of emergency and the simultaneous release of funding for high/complex needs and day options.</p> <p>The Post School Options Forum of Stakeholders (brokers, employment agencies, Department of Education and Commonwealth) will embark on a formal evaluation of the program in early 2003.</p>

		<p>time when they will be unable to care for their person with a disability. The agencies funded under this Program provide:</p> <ul style="list-style-type: none"> ▪ information on possible options; ▪ planning and guidance in preparation for the time when the carer is unable to perform this role directly; ▪ skill development for the carer and the person with a disability, ▪ respite care in and out of the home; and ▪ transitional arrangements while seeking funded agency accommodation or support. <p>The goal of the program is to provide support so that a smooth transition can be made when the carer is no longer able to provide the level of support they have been providing for many years. Ideally, this transition occurs with the carer able to oversee the process. Adequate planning ensures that the level of crisis and trauma is minimised when a change in care arrangements is necessary.</p> <p>Evaluation of these programs will focus on further developing age-appropriate, developmental, well-planned transition arrangements that allow service users flexibility and an enhanced menu of options, particularly in the general community. Disability ACT is currently establishing Memoranda of Understanding with relevant disability service providers including mental health, education and Home and Community Care for transition through life stages for people with disabilities.</p>	
<p>23</p>	<p>Skill and development support programs</p>	<p>Agreed. The Post School Options Program, as</p>	<p>Update: Disability ACT is working</p>

	ought to be developed for those people with intellectual and learning disabilities beyond the age of 20 years.	described in Response to Recommendation 22, currently operates to enhance opportunities, skills and development. This area of service will be incorporated in a Memorandum of Understanding between Disability ACT and the Department of Education, Youth and Family Services. The Disability Reform Group agrees with Recommendation 23, noting that investment must be made in workforce training to ensure that the sector has the capacity to deliver these programs.	successfully in partnership with the Department of Education, Youth and Family Services on the development of the Post School Options program. The development of a formal Memorandum of Understanding is considered unnecessary at this stage.
24	Care workers, appropriately authorised, should have the right of access to medical information for the protection and care of their clients. This may require amendments to the Privacy Act 1989 and the Health Records (Privacy and Access) Act 1997 or the development of a practice guideline that aids carers and care workers.	Noted. The Disability Program is currently reviewing its policies in this area. The recommendation will be further investigated through quality improvement mechanisms.	Update: This recommendation will be considered by Disability ACT and the Legislative Reform Working Group, following completion of amendments to the Disability Services Act.

	<i>Recommendation</i>	<i>Government Response</i>	<i>Progress: March 2003</i>
<i>Recommendations in response to term of reference (b)</i>			
25	The ACT government should develop or adopt a set of practice guidelines to	Agreed. The National Disability Service Standards are ambiguous and difficult to	Update: Disability ACT and the Disability Reform Quality and Standards Working Group

	<p>explain the national disability standards in an ACT context, including examples of both good and poor practice so that organisations have consistent, clear and precise benchmarks by which to measure their performance. The literature search undertaken by the Inquiry Secretariat located the Guidelines prepared in NSW to assist service delivery organisations. There is merit in approaching NSW to seek permission to adopt the guidelines developed in that state.</p>	<p>measure. The Government has commenced work on establishing a project to develop ACT Disability Standards, which will incorporate and expand on the National Standards. The project will aim, through stakeholder consultation and expert advice, to develop ACT specific standards with measurable indicators. The project will be completed by June 2003. The Government and the Disability Reform Group are in agreement that the standards and indicators will become an integral component of Disability ACT's quality monitoring and management framework.</p> <p>The Government will establish a comprehensive quality framework for the provision of disability services in the ACT. The quality framework will include the following key elements:</p> <ul style="list-style-type: none"> ▪ a set of performance standards and quality indicators that support monitoring and evaluation of service performance, and encourage continuous quality improvement; ▪ strategies of self assessment, external assessment and auditing to monitor 	<p>are currently addressing this recommendation in the development of the quality framework for disability services in the ACT.</p>
		<ul style="list-style-type: none"> ▪ results, evaluate outcomes and provide data for an ongoing cycle of quality planning; ▪ incident reporting systems that support safe practice and continuous improvement; ▪ strong and responsive internal complaint 	

		<p>and client feedback processes;</p> <ul style="list-style-type: none"> ▪ an independent complaints resolution process, accessible and timely; ▪ independent assessment of service performance including auditing of performance and compliance with standards and legislation, with a particular focus on health and safety; and ▪ effective use of facts, data and knowledge to support the way strategies and plans are developed and how they are deployed. 	
26	<p>The criteria for external auditing by the proposed ACT Disability Services Commission should be revised to concentrate on the quality of services provided and compliance with legislation and standards rather than solely on administrative and financial performance of the service providers.</p>	<p>Agreed. The new statutory position (the Disability Services Commissioner) will have responsibility for the independent monitoring of compliance with standards and legislation, with particular focus on the health and safety of people with a disability.</p> <p>Disability Standards would be determined by Government, and promulgated through regulation or some similar instrument. Responsibility for quality would be shared between Disability ACT and the Disability Services Commissioner.</p>	<p>Update: Disability ACT and the Disability Reform Legislation Working Group are giving the highest priority to advising the Government on the functions and powers of the Disability Commissioner, including powers to monitor compliance with standards and legislation.</p>

27	<p>To ensure consistency, the Disability Program should be subject to the same form and the revised criteria of auditing as that applied to NGOs.</p>	<p>Agreed. The Government considers that issues of quality must be addressed both in government and non-government disability services. Measures will be taken to modernise and increase skills in existing services across the board resulting in a consumer focused, rigorous quality monitoring and an accountable service system. Contract managers will incorporate reviews of quality improvement plans into service agreement management procedures.</p> <p>Disability ACT and the Disability Services Commissioner will work to ensure that the same service agreement criteria, minimum quality standards and accountability requirements are applied across the government and non-government disability sectors. Reporting and monitoring of all funding arrangements will be examined in the light of any changes to funding/service agreement arrangements resulting from the Government decision to withdraw from the purchaser/provider model.</p>	<p>Update: As outlined in the Government’s action plan, <i>Steps to Reform</i>, a Disability Reform Quality and Standards Working Group has been established work with Disability ACT to develop a disability services quality framework for implementation in the ACT. The Group consists of 8 community representatives and 6 government representatives, including Disability ACT, Community Services and ACT Health and Community Care.</p> <p>The Group had its first meeting on January 28, and is meeting on a fortnightly basis.</p> <p>Outcomes from this work will be included in the strategic plan and implemented through the operational plan.</p>
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28	<p>Because the current contractual requirements for determining the outputs/outcomes purchased do not accurately reflect the nature of the services provided and are expressed in terms merely directing attention back to the vague wording of the national standards, the proposed Commission should review them. Such review should include input by disabled people, families and service providers in designing revised outputs and outcomes based on a requirement for quality in service provision.</p>	<p>Agreed. The Government will ensure that future service agreements incorporate agreed quality improvement milestones linked to the standards, and progressively focus more on quality indicators aimed at improving outcomes for individual service users. Once the quality indicators are conditions of service agreements, Disability ACT will require service providers to provide detailed annual reports on achievement of milestones.</p> <p>The Government notes the Disability Reform Group recommendation that:</p> <ul style="list-style-type: none"> ▪ the definition of quality should be concerned primarily with whether outcomes for individuals are achieved and sustained; ▪ a set of service performance descriptors relating to personal outcomes for service users should be adopted that reflects the Disability Reform Group’s Vision and Values Statement and becomes a reference point for assessing quality service as it pertains to individuals; and ▪ such descriptors should reflect graded levels of achievement by services, from non-achievement through to achievement of minimum and optimal levels. <p>The Government will consider this recommendation in the Standards Development Project.</p>	<p>Update: Disability ACT and the Disability Reform Quality and Standards Working Group will include the management of quality standards through service agreements in the development of a quality framework for the ACT.</p> <p>Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>
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<i>Recommendation</i>	<i>Government Response</i>	<i>Progress: March 2003</i>
<i>Recommendations in response to term of reference (c)</i>		
29	The Department should ensure consistency of requirements between government and non-government service providers' contracts in relation to the process for raising and resolving complaints by service users.	<p>Agreed. The Government will achieve consistency of complaints procedures through the implementation of an agreed quality framework across the sector. Complaints procedures are a requirement under the National Disability Standards, and the Government will give priority to ensuring that indicators for effective complaints and appeals mechanisms are included in the project to develop the ACT Disability Standards.</p> <p>Update: Disability ACT and the Disability Reform Quality and Standards Working Group will investigate processes for raising and resolving complaints in the development of a quality framework for the ACT.</p> <p>Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>
30	Consistent complaint resolution procedures should be an obligatory part of all contracts	<p>Agreed. Government and non-government service providers will be required in their service agreements to demonstrate levels of achievement against the Standards through the active implementation of quality improvement plans, as agreed with their contract manager. Emphasis will be given to including improvements in their complaints resolution procedures where necessary.</p> <p>Update: Disability ACT and the Disability Reform Quality and Standards Working Group will investigate consistency of complaints resolution processes in the development of a quality framework for the ACT.</p> <p>Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>

<p>31</p>	<p>The Department should ensure that the complaint resolution procedures of all service providers are reviewed independently at least every 12 months to maintain consistency, improve outcomes and update procedures for complaint resolution.</p>	<p>Agreed with qualification. The Government is of the opinion that annual reviews of complaints mechanisms will heavily burden the service sector, in particular non-government and not-for-profit organisations. The Government will conduct reviews on a 3-yearly basis as part of the independent standards monitoring processes. Service providers will be required to record information on the nature of each complaint, resolution time and outcome.</p> <p>The Disability Reform Group agrees with Recommendation 31, provided that services submit complaints statistics on a regular basis which identify the nature of complaints made, actions taken and outcomes reached. The Disability Reform Group has also recommended that an independent statutory body should have responsibility for monitoring the effectiveness of service provider's complaints processes and for complaints assessment, investigation, resolution and conciliation (see response to Recommendation 1 above).</p> <p>The outcomes from the review of community advocacy and watchdog agencies will further inform the Government's position on this issue.</p>	<p>Update: Disability ACT and the Disability Reform Quality and Standards Working Group will investigate review schedules for complaints resolution in the development of a quality framework for the ACT.</p> <p>Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>
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33	<p>The Community and Health Services Complaints Act 1993 should be amended to mirror provisions of the NSW Community Services (Complaints, Reviews and Monitoring) Act 1993 so as to make provision:</p>	<p>Noted: The Government will consider this recommendation in the light of the outcomes of the review into the possible rationalisation of existing community advocacy and watchdog agencies including the Health Complaints Commissioner, the Community Advocate and the Health Rights Advisory Council. The review will be undertaken in consultation with the relevant statutory office holders and community groups in both the health and disability service areas.</p> <p>The Government notes that the Disability Reform Group has recommended that a independent statutory body should have responsibility for complaints assessment, investigation, resolution and conciliation (see response to Recommendation 1).</p> <p>As stated, the Government has undertaken to review community advocacy and watchdog bodies, and will not make any alteration to the responsibility to receive and investigate complaints (which lies with the Community and Health Complaints Commissioner) at this stage.</p>	<p>Update: Submissions from consultants tendering for the Review into Community Advocacy and Statutory Oversight Bodies have been received and are currently being evaluated. Further action on this Recommendation is pending the outcomes of the Review.</p>
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	<p>(i) To enable any persons with an interest to lodge a complaint;</p>	<p>Noted: The Government will consider this issue as part of the review of community advocacy and watchdog bodies referred to above.</p> <p>The Government notes that the Disability Reform Group is recommending that the ability for any persons with an interest to lodge a complaint should be included in legislation establishing an independent statutory body (see response to Recommendation 1).</p> <p>As previously noted, the Government is of the opinion that the ACT is of insufficient size to warrant the establishment of a new statutory body.</p>	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>
	<p>(ii) To impose time limits on the Commissioner;</p>	<p>Noted: The Government will consider these issues as part of the review of community advocacy and watchdog bodies referred to above.</p> <p>The Government notes that the Disability Reform Group recommends that time limits be included in the legislation establishing the separate statutory agency, and that:</p> <ul style="list-style-type: none"> ▪ the legislation should stipulate that an assessment of a complaint must be made within a specified period; 	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>

	<p>(iii) To allow the Commissioner to monitor the implementation and performance of his recommendations with the service providers, including the imposition of time frames;</p>	<ul style="list-style-type: none"> ▪ once the assessment is made a timetable should be determined and provided to the complainant based on the circumstances of the case; and ▪ there should be the possibility for deviating from the timetable in specified circumstances and a 12 month time limit place on the finalisation of all complaints. <p>The outcomes from the review of community advocacy and watchdog agencies will further inform the Government’s position on these issues.</p> <p>Noted: These issues will be considered as part of the Government’s review of community advocacy and watchdog bodies referred to above.</p> <p>The Government notes that the Disability Reform Group has recommended that powers to monitor services providers be given to an independent statutory body (see response to Recommendation 1).</p> <p>The Government agrees that powers to undertake this function should be statutory, but is of the opinion the ACT is of insufficient size to warrant the establishment of a new statutory body.</p>	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>
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	<p>(iv) That failure to implement the Commissioner's recommendations be able to be reviewed on the merits by the ACT Administrative Appeals Tribunal whose decisions should replace those of the original decision-maker. The Tribunal should be given power to enforce those decisions (see Part 5, Sections 40-44 of the NSW Act);</p>	<p>Noted: These issues will be considered as part of the Government's review of community advocacy and watchdog bodies referred to above.</p> <p>The Government notes that the Disability Reform Group recommends that:</p> <ul style="list-style-type: none"> ▪ a mechanism for reviewing recommendations made by the disability service improvement agency be established in the legislation establishing the new statutory agency; and ▪ external review of decisions could be provided by the ACT Ombudsman or the Administrative Appeals Tribunal, incorporating a 'show cause' provision where the AAT or Ombudsman can be given power, after hearing argument or receiving submissions, to effectively convert a recommendation into a binding order. <p>The outcomes from the review of community advocacy and watchdog agencies will further inform the Government's position on this issue.</p>	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>
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	<p>(v) That there be a mechanism to allow independent review of the Commissioner's process at the instigation of complainants or service providers.</p>	<p>Noted. The Government will consider mechanisms for allowing independent review of the Commissioner's processes in its review of existing community advocacy and watchdog agencies referred to above.</p> <p>The Government notes that the Disability Reform Group recommends that a mechanism for independent review of the disability service improvement agency's processes be available to complainants or service providers. The Reform Group also recommends that a periodic review of the agency should be carried out at 5 year intervals, and could be the task of a Law Reform Commission, Auditor General or a Board of Inquiry established for the purpose by the government of the day.</p> <p>The outcomes from the review of community advocacy and watchdog agencies will further inform the Government's position on these issues.</p>	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>
34	<p>The ACT Government introduce a stronger and more expansive framework of regulation and inspection than that proposed in the Disability Services Improvement Scheme. The submissions of the Health Complaints Commissioner should be taken into account when drafting the powers and functions of such a scheme. The Scheme should become the responsibility of the Commissioner. In particular he should oversee the proposed Community Visitor</p>	<p>Agreed with qualification. There are two processes currently underway that will strengthen the ACT's framework of regulation and inspection. These are (a) the development of a comprehensive quality improvement framework, including quality indicators against which performance can be measured, and (b) the establishment of relevant statutory powers for independent monitoring and review.</p>	<p>Update: Disability ACT and the Disability Reform Quality and Standards working group will be developing a framework under which regulation and inspection will be carried out.</p> <p>Disability ACT and the Legislative Reform Working Group are giving the highest priority to defining the statutory functions and powers of the Disability Commissioner, including powers to review and monitor services for people with disabilities.</p>

	Scheme.	<p>The Disability Reform Group has recommended that an independent statutory body should have responsibility for carrying out the functions in this Recommendation (see response to Recommendation 1).</p> <p>The Government agrees that powers to undertake these functions should be statutory, but is of the opinion that the ACT is of insufficient size to warrant the establishment a new statutory body (see response to Recommendation 1).</p>	
35	Relevant legislation be amended to allow sharing of information between complaints bodies.	Agreed subject to the <i>Privacy Act 2001 (CW)</i> and the <i>Health Records (Privacy and Access) Act 1997 (ACT)</i> .	Update: Disability ACT and the Legislative Reform Working Group will be considering amendments to legislation necessary for the effective implementation of the quality framework in the ACT.
37	Relevant legislation be amended to ensure that the Community Advocate is fully and formally accountable to the Legislative Assembly, perhaps through the relevant Standing Committee. Complaints relating to services provided by the Community Advocate should be the responsibility of the ACT Ombudsman, if necessary by amendment of the Ombudsman Act.	Noted. The Community Advocate is an independent office holder. In this regard it is intended that the Community Advocate exercise her statutory functions free from the specific direction of government and the Assembly. It should be noted that a number of statutory office holders are required to act independently of government, for example the Director of Public Prosecutions and the Discrimination Commissioner. The arrangements that apply to Ms McGregor are consistent with those that apply to other independent office holders in the ACT and in other jurisdictions.	<p>Update: In June 2002, a meeting was held between the Community Advocate, Ms Heather McGregor, and Ms Catherine McPherson, Senior Assistant Ombudsman, to discuss the establishment of a protocol by which the ACT Ombudsman could investigate complaints relating to the Community Advocate.</p> <p>On 14 June, Ms McGregor wrote to Ms McPherson outlining the essence of the agreed position between them. Ms McPherson replied on 28 June, indicating that Ms Haase of that office would take responsibility for the drafting of a protocol. Discussions are continuing.</p>

		<p>A point not emphasised by the Board of Inquiry is that, in relation to any guardianship decisions taken by the Community Advocate, it is open for any person aggrieved by those decisions to raise their concerns with the Guardianship and Management of Property Tribunal.</p> <p>The Community Advocate is presently in discussion with the ACT Ombudsman to establish a protocol by which the ACT Ombudsman can investigate complaints relating to the Community Advocate. The Disability Reform Group is of the opinion that these concerns are adequately addressed by current arrangements.</p>	With regard to other aspects of this recommendation, no further comment is required.
38	The legislation governing the Community Advocate should be amended to separate the Community Advocate's guardianship role from the broader advocacy role. As is the situation in Queensland and some other states, this may best be achieved by the creation of a separate statutory position of Public Guardian.	<p>Noted. This recommendation must be considered having regard to the subsequent review of ACT Health conducted by Mr Michael Reid. The report following the Reid Review was tabled in the Legislative Assembly on 18 June 2002. On page 40 of the review Mr Reid notes:</p> <p>“Finally it became apparent during the review that there are a plethora of both community advocacy groups and ‘watchdog’ agencies with responsibilities for some aspects of the public/private/NGO health sector”.</p> <p>After setting out the relevant agencies Mr Reid notes:</p>	Update: This recommendation will be considered in the Review of Community Advocacy and Statutory Oversight Bodies.

		<p>“For a population of 300,000 this (the number of agencies) is excessive”.</p> <p>The Chief Minister has publicly stated that the government fully supports the adoption of the basic principles set out in Mr Reid’s report. The Reid review recommends that some rationalisation of the community advocacy and watchdog agencies is warranted (Rec. 26). In response to that recommendation the Government noted that a review will be undertaken in consultation with the relevant statutory office holders and community groups in both the health and disability services area.</p> <p>The Government notes that the Disability Reform Group recommends that:</p> <ul style="list-style-type: none"> ▪ the position of Community Advocate be renamed ‘Public Guardian’ to more accurately reflect the current roles and activities of the community advocate; ▪ the existing gap in the provision of general advocacy be identified and addressed; and ▪ the proposed review of advocacy and watchdog agencies be conducted having regard to the recommendation of the Disability Reform Group that an independent statutory body be established and that it have a service quality monitoring role. 	
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		<p>These matters will be considered in the Government review of community advocacy and watchdog bodies. As previously noted, the Government is of the opinion that the ACT is of insufficient size to warrant the establishment of a new statutory body.</p>	
39	<p>Consideration should also be given in the amended legislation to addressing specifically the question of conflict of interest in future appointments as Community Advocate. Guidance on this issue may be found in Section 150 of Powers of Attorney Act 1998 (QLD) the terms of which have been set out in the section of the Final Report dealing with the OCA.</p>	<p>Noted. Section 150 of the <i>Powers of Attorney Act 1998 (QLD)</i> was repealed in 2000 and replaced by a similar provision in the <i>Guardianship and Administration Act 2000 (QLD)</i>(section 199). Queensland is the only Australian jurisdiction which has legislated with respect to potential conflicts of interest.</p> <p>This recommendation appears to be based on findings by the Board of Inquiry that have been successfully challenged by the Community Advocate. Those findings are that the Community Advocate erred in principle in interpreting her statutory powers (finding 47) and that the Community Advocate was unable to accept that her position as Chair of the Placement Committee put her in a position of perceived or possible conflict of interest (finding 49). In the decision of <i>McGregor & Pearce v The Hon John Gallop & the Attorney-General of the ACT</i>, the Supreme Court held that the Community Advocate had correctly interpreted her statutory powers. The Supreme Court also held that Ms McGregor was clearly denied procedural fairness in relation to any findings concerning the Placement Committee.</p>	<p>Update: The Government will consider this recommendation as part of the Review of Community Advocacy and Statutory Oversight Bodies.</p>

		<p>This recommendation must also be considered having regard to the subsequent review of ACT Health conducted by Mr Michael Reid. The Chief Minister has publicly stated that the government fully supports the adoption of the basic principles set out in Mr Reid's report. The Reid review recommends that some rationalisation of the community advocacy and watchdog agencies is warranted (Rec. 26). In response to that recommendation the Government noted that a review will be undertaken in consultation with the relevant statutory office holders and community groups in both the health and disability services area.</p>	
41	<p>Having regard to the concerns raised by ACTCOSS and the evidence given by the Discrimination Commissioner, it is recommended that subsection 27(2) of the Discrimination Act 1991 be amended by deleting the words "in a way that is irrelevant to the achievement of that purpose".</p>	<p>This issue is currently under consideration by Government.</p>	<p>Update: This issue is still under consideration by Government.</p>

<i>Recommendation</i>	<i>Government Response</i>	<i>Progress: March 2003</i>
<i>Recommendations in response to term of reference (c)</i>		
<p>42</p>	<p>All funding of services/care for people with disabilities should be on an individual basis, and able to be transferred at the option of the individual to different care providers from time to time.</p>	<p>Noted. Disability ACT is giving a high priority to collaboratively developing access and eligibility policies. Funding methodologies (including methods that incorporate a mix of individual and block funding approaches) will be established by Government to complement the eligibility and access policies. This suite of policies will provide greater flexibility, portability and individualised arrangements than currently offered.</p> <p>The Government will further investigate this issue through a policy review and reform process in consultation with the disability advisory structure and disability stakeholders.</p> <p>The Disability Reform Group endorses a mix of funding options, adding that on an ongoing basis, the proposed community advisory body would have responsibility for making recommendations to the government on appropriate funding policies. The Group also supports Disability ACT giving priority to researching and investigating this area.</p>

Update: This recommendation will be addressed by Disability ACT and the Access, Eligibility and Funding Working Group.

Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.

<p>43</p>	<p>ISPs should be regularly reviewed in light of the individual's changing needs.</p> <p>That the entitlement should be based on the hours of support required rather than a set dollar amount also seems reasonable.</p>	<p>Agreed. See the Government's response to Recommendation 42.</p> <p>The Disability Reform Group agrees with this part of Recommendation 43, adding that on an ongoing basis, the proposed community advisory body should have responsibility for making recommendations to the government on appropriate funding policies.</p> <p>Noted. The Government will further investigate this issue through an eligibility and assessment policy review and reform process that will aim to increase equity and access in the disability service system as a whole. The Government is of the opinion that a person-centred approach to support for people with disabilities should begin with an opportunity for the person to explore a range of personal aspirations and lifestyle choices, and that funding of these choices should be negotiated to ensure both the best use of resources and best individual outcomes.</p>	<p>Update: An internal review of Individual Support Package policies and procedures is currently underway within Disability ACT. A report on the program will be completed by 30 June 2003.</p>
<p>44</p>	<p>In the meantime, the NGO's are underfunded and should receive a greater proportion of budget allocation. They should be funded for the full cost of each place, as is the Disability Program. Government should also encourage all service providers to obtain funding from external sources wherever possible to assist in meeting their administration costs.</p>	<p>Noted. The Government acknowledges this disparity. Non-government organisations do have other sources of funding, even though the amount of funding varies between agencies and is often limited. The Government has identified in their electoral commitments that there will be a review of the division and the allocation of funding between the government and non-government sectors.</p>	<p>Update: This recommendation will be addressed in the Strategic Plan for Disability ACT, with decisions being informed by the DRG Statement of Vision and Values.</p>

		<p>Over the next 5 years, The Government will seek, through service system re-design and renewal, to establish a more integrated and streamlined system that is highly accessible for service users. This will inevitably result in some changes to the current system and its provider organisations. For example, reviews of the service menu of the Disability Program may have implications for resource re-allocation. Changes in the system will occur through planned, carefully targeted and evidence-based decisions. Any changes will occur in close consultation with stakeholders.</p> <p>The Government notes the Disability Reform Group recommendation that a mechanism be developed to allocate to non-government accommodation service providers sufficient funding to meet the accommodation support needs of people with disabilities currently supported by them, and implemented in a staged approach commencing in 2003/4 and completing in 2004/5.</p> <p>The Government will consider the advice of the Disability Reform Group in light of budget initiatives and resource constraints.</p>	
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45	<p>ACT government should place a high priority on supporting families where there are children with disabilities. This will require significantly more funds than are currently allocated towards helping families with disabilities.</p>	<p>Agreed. Since 1 July 2002, the Department of Disability, Housing and Community Services incorporates both Disability ACT and CHADS which will assist progress towards supporting families where there are children with disabilities.</p> <p>In the 2002-2003 budget, this Government has allocated \$500,000 per annum to expand services for children with Autism in the ACT. Of this, the Government will provide \$304,327 towards additional early intervention playgroup and early intervention unit places for children with autism, which will be transferred to the Department of Education. The remainder stays within the new Department for the autism diagnosis program and additional therapy services.</p>	<p>Update: As planned, \$304,327 has been allocated to the Department of Education, Youth and Family Services. The remainder has been allocated to the Child Health and Disability Service (CHADS) for the autism diagnosis program and additional therapy services.</p>
46	<p>The ACT Government undertakes a review of the service and funding inadequacies for people within the ACT community who have a disability other than an intellectual one. The Board is particularly mindful of the submission from the ACT Deafness Resource Centre, Shaw Possibilities and Disability Program's acknowledgment of the grey area that exists for those clients with crisis mental health problems.</p>	<p>Agreed. Disability ACT has commenced a policy review process that includes review of eligibility, access and funding processes. As previously stated, Disability ACT is also working towards establishing Memoranda of Understanding with other agencies who provide services for people with disabilities to ensure service coordination and optimum and strategic resource use.</p> <p>Disability ACT and ACT Mental Health established a dual disability service for people with a disability and a mental health condition in the Department of Health in 2001.</p>	<p>Update: Disability ACT and the Access, Eligibility and Funding Working Group will address this recommendation.</p> <p>Outcomes from this work will be included in the Strategic Plan and implemented through the operational plan.</p>

		The Government is of the opinion that all funding proposals must be considered as part of the whole system of government funding. To achieve equity and planned growth, funding decisions must be based on careful research and planning in order to achieve balanced budget allocations.	
47	The ACT Government, jointly with the Federal Government, consider a joint approach to examine individual options for moving people with disabilities currently inappropriately housed in nursing homes into alternative care consistent with their needs and wishes.	Agreed. The ACT has committed additional funds in the 2002-03 budget to prevent inappropriate admissions for younger people with disabilities into nursing/aged care facilities. This has been raised as a national issue and is being discussed in that forum. Disability ACT currently communicates with the relevant Commonwealth Departments surrounding this issue. Figures state that ACT is the best performing jurisdiction on a national average for the proportion of younger people in nursing homes compared to the total population.	Update: In the short-term, Disability ACT is in discussion with the Commonwealth Government and is considering proposals for projects to progress this recommendation. To ensure this recommendation is dealt with on a long-term basis, it will be addressed in the Strategic Plan for Disability ACT, with decisions being informed by the DRG Statement of Vision and Values.
49	The Government establish an Innovation Fund to support service improvement projects, new and innovative pilot projects and trials aimed at delivering better and alternative services to people with disabilities.	Agreed. Disability ACT has established an innovation fund that aims to: <ul style="list-style-type: none"> ▪ encourage new opportunities and approaches to supporting people with disabilities that result in flexible, person-centred improvements in the long term; and ▪ enable people to try out new ideas that expand and improve current approaches and options. 	Update: Over 45 applications for the innovation funds have been received and are currently being evaluated by a panel of government and community representatives. It is anticipated that funds will be released in April 2003.

		The fund will be targeted towards small projects that will enable people involved to try out new ideas in manageable steps. Small projects have the advantage of being more responsive to people who are directly involved, and corrections and modifications are more easily made.	
50	The circumstances giving rise to this Inquiry, namely, the deaths of the three persons in the care of the Disability Program within twelve months, demand the commitment by Government to implement the necessary process of fundamental change to the ACT disability sector. In order to demonstrate to the community that the government has accepted the responsibility to make these changes, the Government might consider it appropriate to report annually to the Legislative Assembly over a five-year period on progress in implementing the recommendations of this Inquiry.	Noted. Disability ACT will report six-monthly, and the community advisory body annually, to the Legislative Assembly. Disability ACT and the community advisory body will also report publicly through annual reports.	Update: This progress report fulfils the commitment to report on a six-monthly basis to the Assembly.