



Follow Up Report - Models and Options for Day Services

Responding to Individual Needs and Aspirations

It is clear that no single day service model has the capacity to meet the diverse needs and aspirations of young people, and indeed adults and older people, with moderate to high level of disabilities. While the traditional models of day programs focused on a centre based service operating 9-3 five days a week, or sessional programs centre based or community access, there is a need to think beyond these models.

There is a need rather to think in terms of broader lifestyle choice that is recognising that there is a range of activities, which have different purposes and meanings as part of the individual's quality of life. This includes engagement in activities and experiences that contribute to life long learning, skill development and a personally meaningful opportunity to participate, as well as opportunities for building social relationships, for recreation and personal expression. This then requires a framework which is able to respond to the various types and times in which young people with disabilities may wish to engage in different activities, including 'out of hours' social and leisure pursuits.

Day services are fundamental in assisting the individual with disabilities to achieve a quality of life which is able to be realised, at least in part, through participation in meaningful and individually chosen pursuits. In fact, service planning should incorporate evaluation of success in terms of how the individual client experiences life. One implication of this approach is the need to orient services away from the notion of an established menu of activities. The mix, nature and type of activity need then to be in tune with the context of individual choice.

This means that a variety of factors will impact on the appropriate suite of day services that an individual will require. Personal characteristics, individual support needs, cost, location and broader family or residential arrangements will impact on the types of day service arrangements that are needed. This means that lifestyle support needs to incorporate the elements of choice, social networks, participation, skill development, life long learning and opportunities for meaningful, valued occupation. This will by definition generally suggest that an arrangement that crosses service and program boundaries is required.

This then suggests a model that encourages collaboration between all services including community, youth services and disability as appropriate for an individual in a given locality. A model of service, which is similar

to, but builds on the existing community options arrangement, would provide an opportunity to make best use of the available service systems, particularly where the scope of such services were concurrently expanded.

In short the development of a person centred approach which value adds to current infrastructure but allows it to better respond to various individual need will require:

- a better capacity to manage access to a variety of service choices in an integrated manner which generates a holistic planning and participation strategy
- increases the options available in terms of non sessional preset menu choices
- offers greater choice in terms of time (longer day, out of hours), duration, individual, group, active and passive pursuits
- significantly enhanced opportunities to link into mainstream community options in recreation, lifelong learning, skill development and valued work
- greater accessibility in terms of cost and availability.

The response then to day service development lies in the development of new models that are more individually responsive, which build upon existing infrastructure but extend and diversify methods of working and requires a mind shift in terms of service design delivery.

Potential Model for Enhancing Service Arrangements in Canberra North

Development of Integration Team that works on a person centred model, allowing an individual to participate across agency services in a planned and integrated model. The team is comprised of:

- Transition Initiator – Most likely to be a college or school who initiates the process. For young people who have already exited school, this may be a be the Department, Therapy ACT, a current service provider, or a parent, for example.)
- Transition Coordinator, who is selected or identified at a personal team meeting, assures that:
 - all members of the personal planning team receive the plan written by the team
 - follows up to see that everyone does what they said they would do in a timely fashion
 - prompts, assists and helps solve problems
 - facilitates on going communication and prepared progress report
 - calls the team, or elements of the team, together as needed
- Transition Liaison is a member of each agency or service involved in providing support / activities and is able to participate in problem solving, answer questions and negotiate for that agency.

However, unlike the existing options model, it is not about fitting a person to the services available. Rather it is about the services demonstrating a capacity to work outside their current menu and develop a program that meets the individual's needs. Funding should not be released unless the individual, and family, are happy to sign off on the arrangement that suits their need. In short, services will be required to work together

to provide a regular program, if that is what is wanted. This may require, for example, negotiating with mainstream providers where they are the most appropriate delivery agent for a particular activity or interest.

To facilitate this process, it would be desirable to establish a memorandum of understanding across agencies about how they will work together, individual agency obligations, and including obligations of ACT Government programs within this framework. This will also require establishment of a monitoring and evaluation framework to identify ways in which changes to service infrastructure may better facilitate access and equity for those with moderate and high levels of disability and which require more intensive support.

Implications for Current Providers

There are a number of implications for current service providers. This includes the lack of any alternative all day service outside of Sharing Places. Additionally any current cooperation is primarily on an informal basis, with little structure, and virtually no framework for planning holistically – with agencies focusing simply on planning what that person may do while with their service. Outside of that time, there do not appear to be any meaningful additional linkages, ergo a quite disjointed outcome for the client. This model would rely upon services being willing to adopt a team approach – and be willing to view their role not as ‘their service’ but rather as how they fit into a broader individual life plan. Again, it is about putting together the various pieces that make up a response to individuals and their circumstances. This then implies a significant culture shift that would need to be managed.

My general view is that there is no time like the present to at least trial a new approach, which pushes the boundaries beyond agency to translate the vision into practice. It will require some developmental work with the agencies to get them to revision how they see themselves, but worth the effort.