ESTIMATES 2007

Question on Notice

Disability and Community Services

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ACT Shelter - point 2

DR FOSKEY: To ask the Minister for Housing (Point 1)/ Minister for Disability & Community (Point 2):

In relation to the work of ACT Shelter:

1. What is the Minister's view of the Housing is a Human Right project?

2. Does the Minister believe that the Housing is a Human Right project complements the objectives of the Homeless Strategy, namely those of increasing awareness around issues of homelessness and housing insecurity? (Redirect to Minister for Disability & Community)

MINISTER GALLAGHER: The answer to the Member's question is as follows:–

The Housing is a Human Right Project is consistent with Objective 4.4 of the ACT Homelessness Strategy, which is to increase public awareness of homelessness in the ACT.

66 Disability and Community Services Foskey

Recruitment and training of carers

DR FOSKEY: To ask the Minister for Disability and Community Services:

In relation to the recruitment and training of carers:

1. Does the Minister share the concerns of community groups regarding the current levels of training and support given to carers?

2. Has any new funding been allocated in this budget to recruit and train experienced and capable carers?

3. If not, why not?

DR FOSKEY: To ask the Minister for Disability and Community Services:

In relation to the recruitment and training of carers:

1. Does the Minister share the concerns of community groups regarding the current levels of training and support given to carers?
2. Has any new funding been allocated in this budget to recruit and train experienced and capable carers?
3. If not, why not?

MINISTER GALLAGHER: The answer to the Member's question is as follows:–

Please note that 'carers' has been interpreted as meaning paid disability support workers.

1. It is unclear which "concerns" the Member's question refers to.

2. Current levels of training and support provided to disability support workers provides them with the knowledge and skills to undertake their duties. Disability ACT provides
   - an intensive six week induction program for new staff;
   - an annual training calendar that offers in-house courses specifically tailored for disability support and on going development opportunities; and
   - competency based courses (such as Certificate IV in Disability Work) to government and non government disability support workers
   - compulsory training such as manual handling and first aid certificate.

   In addition, with Disability ACT's funding of service providers, there is an expectation that some of the funding provided is allocated to the recruitment, training and development of staff including support workers.

3. Refer above.

67 Disability and Community Services Foskey

Disability services

DR FOSKEY: To ask the Minister for Disability and Community Services:

In relation to disability services:

1. Given the concerns of various advocacy groups in relation to an individual's right to privacy, respect and courtesy, is the Minister concerned that staff members may not be equipped to deal with the situations arising in relation to disability services?

132 Disability and Community Services Burke

Demand for beds

JACQUI BURKE MLA : To ask the Minister for Disability and Community Services, in relation to Budget 2007-08 Paper 4, page 203 –

1. Did the Government anticipate this level of demand for beds?

2. Why did the demand for beds exceed the available supply?

3. How did the provision of beds in facilities for emergency care affect the capacity of the centre to provide emergency care if necessary?

MINISTER GALLAGHER: The answer to the Member's question is as follows:-

1. The demand for respite care in 2006/07 exceeded the initial expectations.

2. There were a number of emergency placements which impacted on bed availability.

3. Refer to BP4, Page 203, Note 4.

168 Disability and Community Services Dunne

Staff recruitment from overseas for care and protection covering

Vicki Dunne MLA : To ask the Minister for Family and Community Services in relation to Care and Protection.

Could you provide a break down of the costs relating to staff recruitment from overseas for Care and Protection covering:

(1) What was the average cost per person for recruiting new staff from overseas?

(2) Where were the new staff recruited from?

(3) How many were hired from overseas and what is the breakdown of costs per person for relocation to Canberra?

(4) How many were hired and how many left during the 18 month bond period?

(5) How much did it cost for the overall overseas recruitment drive?

KATY GALLAGHER MLA: The answer to the Member's question is as follows:–

1. The average cost per person for the 2004 / 2005 overseas recruitment was approximately $11,780.
2. For the 2004 / 2005 overseas recruitment campaign, staff were recruited from England, Scotland and Northern Ireland.
3. There were 32 staff recruited from overseas during the 2004 / 2005 recruitment campaign. Each overseas staff member was entitled to a relocation allowance which was up to $12,000 per individual plus $2,000 per dependant up to a max of 6 dependants, and then $1,500 per dependant.
4. There were 32 staff recruited from overseas during the 2004 / 2005 recruitment campaign. One staff member left during the 18 month bond period due to family issues. This staff member repaid to the Department on a pro rata basis their relocation costs.
5. The overall cost for the 2004 / 2005 overseas recruitment drive was $377, 000, which includes the recruitment campaign costs and individual relocation allowances.

185 Disability and Community Services Burke

Budget 2007-08 paper BP4 page 213

MRS BURKE: To ask the Minister for Disability and Community Services

In relation to :

Budget 2007–08 Paper BP4, page 213 –

(1) Why will total revenue jump from $175.974 million in the 2006–07 estimated outcome to $183.417 million in 2007–08?

(2) Why is the negative operating result predicted to grow from -$2.232 million estimated outcome in 2006–07 to -$4.949 million?

MINISTER GALLAGHER : The answer to the Member's question is as follows:–

(1) Please refer to pages 217 and 218 of the 2007–08 Budget Paper 4.

(2) The negative operating result is expected to grow by $2.717 million due to:

- a reduction in revenue from one–off gains in 2006–07 from the re-valuation of land transferred from the Land Development Agency ($1.850 million);
- an increase in depreciation and amortisation due to the impact of the change in motor vehicle lease arrangements and the full year effect of completed capital works projects ($0.442 million); and
- an increase of $0.464 million in employee benefits as a result of wage increases.

368 Disability and Community Services Burke

Funding injection

JACQUI BURKE MLA : To ask the Minister for Disability & Community Services, In relation to Budget 2007-08 Paper 3, page 59 –

1. A recurrent funding injection of $15.754m from 2007-08 through to 2010-11 to increase services in the Disability Services sector appears on p59, BP3. Where exactly is this funding injection being directed?

2. How much will be directed to:
   - Supported accommodation options for people residing in disability group homes;
   - Respite care programs;
   - Transport options;
   - Therapy Services;
   - Individual Support Packages(ISP) and Individual Support Services(ISS).

3. How many ISP's will be funded each financial year?

4. Why isn't the funding spread evenly over the four year period, that is, why does the first funded year fall well short, over $1million, of the three remaining out years of the recurrent funding for disability services?

5. Why hasn't this funding been injected progressively over previously budgetary cycles?

KATY GALLAGHER MLA: The answer to the Member's question is as follows:–

1. Please refer to Hansard 28 June 2007, in particular Ms Ford's comments pages 20 to 24. While Output 1.1 targets have been increased to reflect the new funding the ultimate allocation of funding between Accountability Indicators will be determined through a process of assessment of individuals and will be responsive to the demand for service types that this demonstrates.

2. **Supported Accommodation Options** We seek to purchase 20 new accommodation places through this new funding, refer to BP4, page 203 Accommodation Support, Target 327, 2006-07 rising to 347 in 2007-08. As this funding will be allocated through an open application process and will be based on priority. Assessment of the value of these places is yet to be established.
   Respite care $241,000.
   Transport options No transport options have been considered under this new initiative
   Therapy Services There will be no specific allocation to Therapy services as they are under output 1.2. The funding allocation was specifically for Output 1.1.

Individual Support Packages (ISP) and Individual Support Services(ISS)
Please refer to the answer to Question 3 below. Service provision will be sourced through the Community Sector rather than the Government Individual Support Services.

3. In 2006-07 Disability ACT funded 161 ISP packages. Over the 2007-08 financial year, five additional packages will be created to respond to the need of individuals who have previously been assessed as having emergency needs. In addition Disability ACT will respond to the assessed needs of successful applicants by allocation of funding either through the allocation of ISPs, or through block funding of services, whichever is more appropriate.

4. The Initiative seeks to meet current known demand in first instance while the increase makes a provision for new demand in disability services in the forward years.

5. Since 2003, the Government has injected approximately

   $11 million in new recurrent funding prior to the announcement of the new money detailed in BP3, Page 59.

369 Disability and Community Services Burke

Disability and therapy services

MRS BURKE: To ask the Minister for Disability and Community Services

In relation to : Budget 2007–08 Paper BP4, page 196 –

(3) Why has there been a total increase of $4.003 million for the total cost of disability and therapy services seeing the figure rise from $67.786 million in the estimated outcome for 2006–07 to the budget 2007–08 figure of $71.789 million?

(4) Why is there an extra cost and where has this cost been borne in disability services?

(5) Where is Disability ACT attempting to make any significant efficiency savings within the service in areas such as administration?

MINISTER GALLAGHER : The answer to the Member's question is as follows:–

(1) The increase of $4.003 million in the 2007-08 Budget from the 2006 -07 estimated outcome is mainly due to additional funding for increased disability services ($3 million) and the impact of wage and other cost increases ($1.008 million).

(2) Please refer to answers in QON 368 regarding the new $3.0M appropriation in 2007-08.

Disability ACT will continue to manage its services within budget.

370 Disability and Community Services Burke

No of people seeking community support

JACQUI BURKE MLA : To ask the Minister for Disability & Community Services, In relation to Budget 2007-08 Paper 4, page 203 –

Part b) sees an increase in the number of people seeking community support from 380 in the 2006-07 target, to 561 for the estimated outcome for 2006-07.

1. How much pressure has this increase in numbers of clients placed on the department's resources, particularly if services are reaching full capacity?

2. What measures are in place to assist disability service providers who support people with a disability in a non-institutional care environment?

Part c) sees a significant rise in the number of community access hours rocketing from 105,089 in the 2006-07 target, to 116,173 in the estimated outcome for 2006-07.

3. If there is an anticipated figure of 125,700 hours for 2007-08 target, how is the department resourcing the sector adequately to cope with the influx of clients accessing support services for people with a disability?

Part d) indicates a growing increase in the number of respite (centre based) bed nights, with figures climbing from 7,846 for the 2006-07 target, to 8,566 for the 2006-07 estimated outcome, and with a target forecast of 8,900 for 2007-08.

4. How much additional funds will be injected to cover this growing demand? Where will it be sourced from?

Part e) also sees a growing trend of the number of 'in own home' hours for respite care rising from the 2006-07 target of 37,000 to 37,789 estimated outcome 2006-07, and to a forecast 38,100 hours in the target for 2007-08.

5. How much will this influx in the number of hours offered respite (in home) cost?

KATY GALLAGHER MLA: The answer to the Member's question is as follows:–

1. *The increase from 380(target) to 561 (estimated outcome) is the result of new program establishment and emergency demand, refer to BP4 2007-08, page 203, Note 2. The emergency demand has been managed through the Individual Response Team in Disability ACT. Part of the new initiative announced by the Government (refer to BP3, page 59) will cover the cost the current emergency demand services placed on Disability ACT resources.*

2. All services provided or funded by Disability ACT are provided in a non institutional care environment.

   Disability ACT assists funded agencies to develop financially viable service delivery.

   Disability ACT assists service agencies to identify and address areas of quality improvement through monitoring agreements, and implementation of quality improvement process.

   Disability ACT is continuing to work with the disability services sector to develop strategies to strengthen the sector, including development of workforce development initiatives, training and networking.

3. This increase in services will be funded recurrently through the new initiative announced by the Government (refer to BP3, page 59).

4. Approximately $200,000 (refer to BP3, page 59)

5. Estimated at $41,000

371 Disability and Community Services Burke

Estimates of unmet demand

JACQUI BURKE MLA : To ask the Minister for Disability and Community Services, in relation to Submission to the Select Committee on Estimates 2007 -2008 –

1. With reference to your submission to the Select Committee on Estimates 2007 -2008 you have indicated to the Commonwealth "estimates of unmet demand". Please can you provide details of this "unmet demand".

KATY GALLAGHER MLA: The answer to the Member's question is as follows:–

1. The basis of the information provided to the Commonwealth is contained in the Précis of the Disability ACT Funding Model which is available on the Disability ACT website at www.dhcs.act.gov.au/DisabilityACT/Publications/FundingModel.htm.

418 Disability and Community Services Foskey

QTON - Therapy Services - staff turnover

DR FOSKEY: To ask the Minister for Disability and Community Services.

In relation to : Therapy Services

What are the comparative turnover figures in the last two years?

MINISTER GALLAGHER : The answer to the Member's question is as follows:–

The permanent staff turnover rate for Therapy ACT in 2006-07 was 12% and in 2005-06 it was 9%.

419 Disability and Community Services Dunne

QTON - Therapy Services - Services to children

MRS DUNNE : To ask the Minister for Disability and Community Services.

In relation to : Therapy Services

How many services do you deliver to children in groups as compared to as individuals?

MINISTER GALLAGHER : The answer to the Member's question is as follows:–

In 2006-07 Therapy ACT ran 1573 groups/education sessions and 5,362 people attended the group sessions. Group programs are offered for clients whose needs are able to be met by this type of intervention and may also involve an element of parent education.

420 Disability and Community Services Burke

QTON - Therapy Services - need increase

MRS BURKE : To ask the Minister for Disability and Community Services.

In relation to : Therapy Services

How are we going to meet the need of increased number of children coming through Therapy Services?

MINISTER GALLAGHER : The answer to the Member's question is as follows:–

Therapy ACT services are provided in an equitable way and new referrals are prioritised according to the identified need of the client and their family/carer, risk factors and the expected outcomes of an intervention. Prioritisation for services is also reviewed as the client's needs change.

In addition, training, education and consultation enables many intervention approaches to be incorporated into the daily routines and programs for a child. This intervention approach is more effective and has better outcomes. New service delivery models such as group programs allow for an increased number of clients to be serviced.

424 Disability and Community Services Dunne

QTON - Therapy Services - waiting times

MRS DUNNE: To ask the Minister for Disability and Community Services.

In relation to: Therapy Services

(1) What are the current waiting times for each of the services of Therapy ACT?
(2) What are the gross waiting times for an autism assessment, including pre-assessments?
(3) What are the costs for the pre-assessment process?

MINISTER GALLAGHER: The answer to the Member's question is as follows:–

(1) Referrals to Therapy ACT are received from parents, or by doctors, teachers and childcare workers (with parental permission). Clients on the waiting list are prioritised according to identified needs, risk factors and expected outcomes of therapy.

The time a client waits for a service is dependent on their prioritisation rating. Waiting time for each priority rating is not readily available. This information is not electronically available and would need to be collected manually.

(2) A client is able to complete a medical, hearing and developmental /cognitive assessment within six months. The individual service time frames are identified below noting that all pre assessments are able to be completed concurrently:

- Child Health Medical Officer (CMHO) - 1 month;
- Community Paediatrician (ACT Health) - 1 - 2 months;
- Paediatrician - 3 - 4 months;
- Nurse Audiometry:
  - under 3 years of age - 5 months;
  - over 3 years of age - 2 months;
- CHMO Developmental Assessments – 1 month; and
- Cognitive Assessments with School Counsellor – 3 to 4 months.

(3) Clients are able to access all the required pre assessments free of charge. Some families may wish to access a private paediatrician for their medical assessment.