

QUESTION ON NOTICE – LEGISLATIVE COUNCIL
ESTIMATES COMMITTEE No. 2

MINISTER FOR COMMUNITY SERVICES
MINISTER FOR AGEING
MINISTER FOR DISABILITY SERVICES
MINISTER FOR WOMEN

QUESTION No: 59

Dr Wong asked:

Last year, this Committee was informed that new software was in the process of being installed to allow casework to be retrieved with ease and to allow cross referencing and data collection. Now that the software has been installed, what data retrieval and research of statistics etc by cross referencing is being performed?

ANSWER:

DoCS has recently upgraded its statistical infrastructure and software to incorporate a statistical file server and data warehouse. This has improved the speed and ease with which cross-tabulations of data are performed.

The first priority for data retrieval and delivery of statistics is client and service based information. However, financial and other information is also expected to be held in the data warehouse in the future.

DoCS is progressively implementing enhancements to its IT infrastructure and client systems, at this time.

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QUESTION No: 60

Dr Wong asked:

At 5-3 in the Budget papers there is a reference to the increased numbers and improved clinical training of frontline staff. Page 5-5 notes that the increase will be 60 child protection caseworkers.

- (1) What is the proportion of frontline staff compared to managerial staff?
- (2) What is the average length of stay within the Department of Community Services for frontline staff?
- (3) What was the average caseload of frontline staff in the years 1999-2000 and in 2000-2001?
- (4) With the extra staff, what will be the estimated caseload of frontline staff for the coming year?

ANSWER:

- (1) With the split in DoCS and the Department of Ageing, Disability and Home Care (DADHC), some of the management staff also provide a service to frontline staff from DADHC. Therefore it not possible to provide the information. However, the span of supervision for caseworkers is 1 to 6.
- (2) The average length of stay within the Department of Community Services for frontline staff is 6.1 years.
- (3)-(4)
Individual cases vary considerably in their complexity. Simply counting caseloads is not seen as a useful workload measure. This information is not available.

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QUESTION No: 61

Dr Wong asked:

- (1) With regards to out-of-school hours care:
- (a) What standards are being applied to out of school hours care?
 - (b) Do these standards require compliance or is compliance voluntary?
 - (c) What agency oversees compliance?

ANSWER:

- (1) (a) NSW endorsed the National Standards for Outside School Hours Care in 1995.
- (b) These standards are voluntary.
- (c) As these Standards are voluntary, there is no agency in NSW that oversees compliance.

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QUESTION No: 62

Dr Wong asked:

In regard to Asset Acquisitions for DOCS, 2% (\$12.6 million) of the total departmental budget is to be spent on system design, specification and implementation of a Financial Management System (p5-6).

- (1) Please detail what specific objectives, in terms of performance criteria changes etc, are expected from this new System, and the shortcomings of the previous system.
- (2) What research and analysis on such systems availability has preceded this budget?
- (3) What are the tender specifications for the System?
- (4) How much is allocated for hardware, for software and for training of future users on the system?
- (5) What is the payback period and budget projection for this system?

ANSWER:

- (1) The new financial system is called SAP (System Application Project). The key objectives of the project are:
 - A financial management system that will provide a foundation for improved financial management and accountability at all levels of the organisation.
 - Corporate financial sustainability through access to more timely and reliable financial information for analysis and modelling.
 - Improved predictability of Budget outcomes.
 - An Integrated Management System to determine the costs of providing client services and improved resource allocation which is integrated with

other demand drivers, ie. client numbers, client contacts, accommodation support.

- A system that will enable DoCS to respond quickly and effectively to financial reporting needs.
- Introduction of best practice business processes, where possible, to reduce the cost of corporate services.
- Improved planning and funds allocation processes across DoCS.
- A flexible system that meets current and future organisational requirements.

(2)& (3)

DoCS' objective is the successful implementation of a new financial management system by July 2002. To achieve this timeframe, it is essential that implementation is commenced in September 2001. Experience indicates that an RFP process involving the documentation of Functional Requirement, the evaluation and selection of a system and contract negotiation, even when limited to GSAS products, can take up to 6 months.

DoCS believed that it would be more time and cost effective to acquire and implement the SAP Financial Management System under the terms of the Government Selected Application Systems (GSAS) Contract without entering into a lengthy RFP process.

DoCS will leverage off the experience of the Department of Housing where SAP was successfully implemented in 1999 to meet similar financial management and reform objectives to DoCS. This will enable DoCS to meet its objectives of successfully implementing a Financial Management System by July 2002. This timeframe is essential if DoCS is to implement the financial reform processes required so that the terms of the Strategic Resource Allocation Agreement (SRAA) with Treasury can be met.

(4) The Business Case for the Financial Management System included the following cost estimates:

□ Hardware (central operations)	\$955,000
□ Hardware (network infrastructure)	\$857,000
□ Software	\$998,000
□ Documentation and Training	\$943,838

(5) The payback period for the system, based on expected benefits outlined in the Business Case, is 4 years with \$12.6 million allocated in capital for this financial year and recurrent funding to be funded internally.

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QUESTION No: 63

Dr Wong asked:

The budgeted increase for Out of Home Care is \$16 million, of which \$12.5 million is allocated for payment of foster care allowances

- 1) Can you provide a detailed breakdown of the use of the \$16 million, including allocations for staff Award provisions?
- 2) Will any of the increase be utilised in program funding for non-government services?

ANSWER:

- 1) A breakdown of the 2001/2002 budget increase for out-of-home care is as follows:
 - Foster care funding increase - \$12.518 million
 - Indexation provisions - \$1.328 million
 - Award increases - \$607,000
 - Accrual movements (employee related leave and salary accrual) - \$1.841 million
 - Depreciation charges - \$283,000.
 - GST savings within operational expenditure – (\$87,000)
- 2) Indexation provisions will be utilised in program funding for non-government services.

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QUESTION No: 64

Dr Wong asked:

The Treasurer has tabled figures in Parliament, indicating a rise in the number of children in care to over 10,000. To what degree will new services to provide support for these extra children be given financial support from this budget?

ANSWER:

The Government has maintained the protected status of the foster care allocation. In the event of any increase in the number of children in foster care, DoCS will automatically receive supplementary funding from Treasury to meet the increase in demand.

Additionally, to cope with the anticipated increases in demand, part of the \$1.846 million that was recently allocated to non-government agencies was for the purpose of foster care recruitment.

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QUESTION No: 65

Dr Wong asked:

Can the Minister provide details on:

- (1) The breakdown of component line items making up the Community Based Residential Care budget allocation of \$40.8m?
- (2) The actual anticipated expenditure on Community Based Residential Care in 2000-2001?
- (3) The amounts spent for each component listed in a) in the 2000-2001 year?

ANSWER:

- (1) to (3) The allocation components of the Community Based Residential Care (CBRC) line item, including actual expenditure for 2000/2001 are as follows:

	\$M
Payments to Non-Government Organisations for out-of-home care	\$21.465
Funds to assist transition of services	\$ 3.229
Devolved funding for high support adolescents	\$ 5.123
Leaving Care & After Care	\$ 0.329
Central Office admin. to run CBRC program	\$ 0.200
Family Group Home transfer of funds to CBRC	\$ 0.200
Reversal of GST savings	\$ 0.011
Fee for service client costs	\$ 0.850
Indexation to funded services	\$ 0.879
Enact	\$ 1.312
Projects: Service Enhancement (SIIF); Looking After Children; Permanency Services; Care 2000 initiatives; Individual Client Service Plans; Muslim Foster Care Project; Community Services Commission Inquiry Response; Intensive Services Model Implementation; Aboriginal Services Viability; temporary staff to implement new legislation.	\$ 9.464
TOTAL	\$ 43.062

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QUESTION No: 66

Dr Wong asked:

At 5-3 in the Budget papers there is a reference to the transformation of the Department into ‘a contemporary service, which is flexible and responsive to changing client needs, and which has improved levels of clinical and professional supervision’. How would you describe the Department before this transformation?

ANSWER:

Prior to the Transformation, there was a need for improvements to professional supervision to improve the quality of service delivery across the two businesses.

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QUESTION No: 67

Dr Wong asked:

At 5-3 in the Budget papers it is estimated that there will be 14,700 children in substitute care in 2001-2002.

1. How many of these are in kinship care?
2. What mechanisms does the Department have to monitor kinship care?
3. Have individual case plans been done for every child in substitute care at the moment?
4. If not, why not?

ANSWER:

1. The figure of 14,700 refers to the number of children who it is estimated will receive a service during the period 2001/2002; it is a measure of the overall amount of service provision – the number of individual children who are expected to receive one or more substitute care services during the year. The number of children actually **in care** at any one time during the year will be substantially less.

In DoCS' 1999-2000 Annual Report, the number of children placed with "Other family/kinship (including Aboriginal kinship)" was reported to be 3,424 as at 30 June 2000 (40.2% of children in care). This includes children placed with a member of their extended family (not their parents), and Aboriginal clients in a kinship placement in accordance with the Aboriginal Child Placement Principle.

2. Where kinship care placements have been facilitated through a protective intervention, such placements are monitored in the same way as others within the out-of-home care program in accordance with the needs of the child and the level of need for support. Mechanisms include data monitoring, case plans and reviews, and the allocation of caseworkers in accordance with assessed support requirements.

The principles of the *Children and Young Persons (Care and Protection) Act 1998* stipulate that protective interventions be facilitated in the least intrusive manner possible. Kinship care is considered to be one of the least intrusive means of providing alternate care arrangements for children and young people who cannot live with their natural parents, for a range of reasons.

3. & 4. At the moment, responsibility for individual case plans rests at the local level. The monitoring of case plans will in future rest with the Children's Guardian.

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QUESTION No: 68

Dr Wong asked:

At page 6-5 in the Budget papers it is stated that \$46.2 million has been allocated for a “*wider range of placement and support options for students with disruptive behaviour. In 2001-2002 over \$42 million will be available for these programs*”.

1. Are State Wards and children in substitute care likely to be transferred to these schools because of their involvement with the substitute care system?
2. What role does the Minister for Community services play in the selection of children for attendance at these ‘special schools’?

ANSWER:

1. The Department of Education and Training maintains sole responsibility for the development of entry criteria to these facilities. The status of a child or young person within DoCS care system has no bearing whatsoever on their likelihood for referral to such a facility.
3. None. If a child or young person is under my guardianship, I would be represented through the District Placement Panel process, in the same manner as any parent or guardian would be involved.

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QUESTION No: 69

Dr Wong asked:

- (1) How many young people in juvenile detention centres or other forms of alternatives to custody are State Wards or in substitute care?
- (2) Please detail the numbers of wards in alternatives to custody, and what those alternatives are eg. Drug Court, Youth Conferencing.

ANSWER:

- (1) The last data match which examined the correlation between clients of DoCS and Juvenile Justice was undertaken in 1999. The data match found approximately 3.5% of wards were involved in the Juvenile Justice system
- (2) DoCS does not collect data centrally about the numbers of wards who are in alternatives to custody.

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QUESTION No: 70

Dr Wong asked:

At 5-4 in the Budget papers, there is a reference to the development of the new Client database. Can you please provide the fields contained in the Database?

ANSWER:

The recent realignment of my portfolio has necessitated a review of the requirements for the client system to reflect the separation of Disability services from the Department of Community Services.

This applies to the fields contained in the database.

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QUESTION No: 71

Dr Wong asked:

At 5-6 in the Budget papers there is a reference to \$1.1 million being allocated in this Budget for the Enterprise Information Infrastructure project, said '*to remediate the Department's core data for more efficient and effective usage*'. Is substitute care or wardship status (either current or former) included as a category for the EII project?

ANSWER:

The current legal status (including wardship information) of clients in out-of-home care is included in scope of the data remediation being carried out as part of the EII project. All client data has been identified as a priority for this project.