

PAGE 1 – SUMMER HILL GROUP HOME

The Hon. COURTNEY HOUSSOS: I refer to the Summerhill Group Home which we covered extensively during the budget estimates hearing. What is the department doing to oversee the current level of service at the Summerhill centre following its transition to a private provider to ensure that the current level of service is maintained?

Mr COUTTS-TROTTER: The information I have on that is that the National Disability Insurance Agency [NDIA] has confirmed the plans for the residents of Summerhill which contain all of the services that are currently being provided and received by them.

The Hon. COURTNEY HOUSSOS: The National Disability Insurance Scheme [NDIS] Quality and Safeguards Commission clearly stated that it is not responsible for monitoring the transition to the private sector and, therefore, it is not responsible for ensuring the levels of service are maintained through the transition process.

Mr COUTTS-TROTTER: Sorry, yes, explicitly you are talking about the transition, indeed. We have done two things in recent days to try to assure people of a successful transition. One is we funded the Ombudsman to provide critique and challenge us to make sure that we were seeing and responding to issues that a genuinely independent perspective brings to it.

The Hon. COURTNEY HOUSSOS: Will you repeat that? Funded the Ombudsman to critique and challenge?

Mr COUTTS-TROTTER: Yes, critique and challenge us. I think we have been doing that, from memory, for about 24 months. Then we have a process of planning for transition based on the experience, successful and unsuccessful, of the previous few years underpinned by a so-called quality improvement reporting tool which is a way to look at, from the evidence, the kind of things within the operations of supported accommodation settings that indicate good quality in a range of dimensions—from healthcare planning, swallowing management, wellbeing, supervision of staff and the like. We have that process independently audited and assured to try to ensure that people's wellbeing and safety is top of mind while staff are going through a period of transition.

The Hon. COURTNEY HOUSSOS: To ensure the same thing that happened to the Stockton residents does not happen again?

Mr COUTTS-TROTTER: That is right.

The Hon. COURTNEY HOUSSOS: The Minister said that arrangements are in place to ensure continuity of service. What are those arrangements? How long will they remain in place.

Mr COUTTS-TROTTER: I will have to take that on notice.

ANSWER:

I am advised that the National Disability Insurance Agency (NDIA) has confirmed that all National Disability Insurance Scheme (NDIS) plans and quotes of Summer Hill residents were approved for all supports and services they are currently receiving before the centre transferred to Achieve Australia on 1 November 2018. Appropriate arrangements are in place with Achieve Australia to ensure continuity of service.

All service transfers have included contractual arrangements such as:

- Accommodation Agreements covering rent to be paid, termination processes and tenants' rights
- Service Agreements specifying services to be provided and dispute resolution processes
- Employment guarantees for staff who transfer to provide continuity of staff for residents
- Interim funding arrangements whilst NDIS plans are finalised.

Summer Hill residents have had active NDIS plans for the past 12 months. The services and supports required have been subject to a detailed review process on a regular basis and aligned with the transfer timeline. Over the next three months, Summer Hill plans will be reviewed to ensure all appropriate supports are in place, either funded directly under the NDIA or under various state and commonwealth programs. Summer Hill residents are entitled to access those programs and they will access those programs for the right level of support.

PAGES 2-3 – PROVIDER OF LAST RESORT

The Hon. COURTNEY HOUSSOS: I do not think it is the case that they do not want to continue in the market; it is the case that they were reassessing their ability to operate in the current market. This reinforces the testimony that we have received from many providers, particularly smaller providers, who talked about their inability to continue to operate. You said that some work was being done to be a provider of last resort, but I think you were cut short in the provision of that information. Has any more work been done on that?

Mr COUTTS-TROTTER: In terms of sector development, nationally there is a \$110 million sector development fund to prepare citizens and providers to transition. This is Commonwealth money, with \$64 million to support growth of the NDIS market and workforce through the NDIS Jobs and Market Fund and \$33 million to build capacity of existing providers and new providers. The Commonwealth and the NDIA understand how critical that work is. They have put together a graduated response including contracting a number of specialised disability support providers who are available should a person's package not be able to be delivered by their existing provider or something else happens that creates a crisis that needs to be responded to. Since we last spoke, I understand that that mechanism has been activated on the advice of two local health districts on two occasions. It is in place and it has been used twice in New South Wales.

The Hon. COURTNEY HOUSSOS: On those two occasions effectively what happened was that the Government became the provider of last resort.

Mr COUTTS-TROTTER: No. The NDIA performed its function as a provider of last resort through the contracting and deployment of specialist non-government disability service providers.

The Hon. COURTNEY HOUSSOS: Can you tell me which local health districts [LHDs] they were in?

Mr COUTTS-TROTTER: I can take that on notice.

The Hon. COURTNEY HOUSSOS: Obviously, I would not want you to give identifying information, but I would appreciate some idea of where those incidents occurred and whether they were in some kind of State institution such as a hospital or a jail.

Mr COUTTS-TROTTER: Yes, I can see what information we can provide. The challenge we have is that this information is private information about participants in the scheme and it is held by the NDIA. We would know about which local health district triggered the mechanism, but the details of what then happened may not be available to us.

ANSWER:

I am advised the National Disability Insurance Agency's crisis arrangements have been activated on two occasions: one in the Western Sydney Local Health District and one in the Northern NSW Local Health District.

PAGE 4 – NGO FUNDING

The Hon. PAUL GREEN: How many non-government service providers do you fund to deliver services on our behalf? How much funding has been allocated in this budget for non-government organisations to deliver services?

Mr COUTTS-TROTTER: I will need to check to get you the exact number but, from memory, we fund at least 1,100 or 1,200 non-government organisations and we would spend roughly 54 per cent or 55 per cent of our total budget through non-government organisations. So a very significant part of what we do.

ANSWER:

For the 2017-18 financial year, I am advised the Department of Family and Community Services (FACS) funded 2,587 non-government service providers. This refers to all non-government organisations (excluding government bodies (Commonwealth, state and local) that FACS provides funding to.

PAGE 5 – QUALITY AND SAFEGUARDS

The Hon. PAUL GREEN: Given that more than 4.3 million Australians have a disability and the violence against people receiving support from institutions is a significant policy issue, can you comment on the prevalence of violence in the disability sector and how the Government is doing something to either promote awareness or education to have increased reporting on the violence?

Mr COUTTS-TROTTER: Within the supported accommodation service system, New South Wales, since 2014 of course, has had the reportable incidents scheme that gave the Ombudsman, and now the NDIS commission, a very clear oversight role. And what we have seen over time is certainly an increase in the prevalence of reporting, a much greater transparency and a greater accountability to both prevent, respond to, investigate abuse and ill-treatment of people with disability. Within that sector a lot of very positive things have changed. Of course, the Ombudsman's recent report identified the problems of abuse and exploitation among vulnerable people, people with disability in community settings. There have been recommendations from the Parliament's elder abuse inquiry, there have been recommendations from the NSW Law Reform Commission that I know the Government is considering at present, that grapple with some responses to precisely those sorts of issues.

The Hon. PAUL GREEN: The royal commission into elder abuse should be slash disability, violence, as well, because a lot of those people are in institutions or aged care facilities, as you know. What programs and funding is directed towards equality safeguarding and oversight mechanisms for the types of things you just referred to about the reportable schemes?

Mr COUTTS-TROTTER: I am happy to provide some information about investments we make through FACS, through the things the Deputy Chair would know, the Elder Abuse Helpline and the frameworks around the work that we do with other agencies on a response there, but really you would be looking across government at both Justice and Health, and now increasingly of course the NDIS commission itself. I could seek to try to get information about the level of investment that is made there if you like.

ANSWER:

With the full implementation of the National Disability Insurance Scheme (NDIS) in NSW, responsibility for protecting people with disability will be shared between the Commonwealth and NSW governments.

I am advised that on 1 July 2018, the NDIS Quality and Safeguards Commission (the Commission) commenced operations in NSW and South Australia. The Commission has taken on responsibility for:

- registration and compliance monitoring of NDIS service providers
- responding to complaints about providers
- overseeing reportable incidents.

NDIS registered providers are required to meet the new Quality and Safeguards registration requirements effective from 1 July 2018.

NSW and the Commonwealth have also agreed for an interim extension of some of the NSW Ombudsman's disability functions for one year to support the transition to the new Quality and Safeguarding Framework, including:

- complaints, reportable incidents and reviewable deaths that were reported prior to 1 July 2018
- quality and safeguarding arrangements for residual NSW funded and/or delivered specialist disability services and NDIS in-kind services
- Section 11(1) (e) standing inquiry into the abuse and neglect of people with disability in home and community settings
- The Official Community Visitors Scheme.

Other initiatives to protect vulnerable people include:

- the Elder Abuse Helpline and Resource Unit
- the Carer's Strategy.

The NSW Government is currently also considering the recommendations of the NSW Law Reform Commission's review of Guardianship legislation.

PAGES 5-6 – DISABILITY ADVOCACY

The Hon. PAUL GREEN: Thank you. We have been advised by the New South Wales Government that they will continue to provide \$26 million in transitional advocacy funding supplements for existing disability advocacy.

Mr COUTTS-TROTTER: Yes.

The Hon. PAUL GREEN: How much of this funding goes towards regional disability advocacy providers, and how do you ensure that those areas get a fair slice of the pie?

Mr O'REILLY: There are 39 agencies funded under that fund. But I do not have a break up of regional and metro in my head. We will need to come back to you on notice with that.

The Hon. PAUL GREEN: You are not aware off the top of your head how we ensure that the further we go out from Sydney central advocacy groups are getting the funds that they need?

Mr O'REILLY: It is certainly a consideration, but I do not have the results of that in terms of how much is in metro and how much is in non-metro. The other factor there of course is that the administration of that funding was connected to the relevant round of the Commonwealth Information, Linkages and Capacity [ILC] building fund. Where an advocacy provider did not receive enough funding to provide its current service through ILC, this up to \$13 million per year fund was available to help make up the difference for that period. That is another factor that influenced the administration of that fund. We will bring the slick back to you.

ANSWER:

The NSW Government recognises the important role of advocacy organisations, and has committed to provide additional funding of up to \$26 million for advocacy services until 2020. The Transitional Advocacy Funding Supplement (TAFS) is focused on key activities that support inclusion of people with disability in their communities. In 2018-19, 31 of the 39 advocacy providers are delivering state-wide advocacy services, including services to regional areas. The TAFS funding addresses any potential shortfalls in the Commonwealth Government's Information, Linkages and Capacity building National Readiness and NSW Jurisdictional Grants rounds, which were announced in April 2018.

PAGE 6 - YOUNG PEOPLE IN NURSING HOMES

The Hon. PAUL GREEN: The specialist disability accommodation funding stream within the NDIS specifically targeted young disabled persons in nursing homes. Is this currently the case, and how many young persons with a disability remain in inappropriate nursing homes? How much funding has been allocated to the specialist accommodation through the NDIS system?

Mr COUTTS-TROTTER: I do not have it to hand. We did provide clarification on the numbers of young people in nursing homes because they were numbers offered in the inquiry and in estimates. We do know from the Summer Foundation, that tracks this very closely, there has been for the first time a reduction in the number of young people moving into those inappropriate settings, which is a good thing. We also know from our own experience in commissioning non-government organisations to build supported accommodation to enable people from large residential centres in the Hunter to move into the community, that it has taken some time for the market to understand, get confident with and be prepared to lend for or invest based on the supported disability accommodation framework the NDIS has set up. But that is beginning to happen now, so we would hope that there is such a net demand for appropriate supported disability accommodation for young people currently in aged care facilities that we would hope the non-government market would respond really quickly by creating those placements for people. I do think finally there is sufficient clarity and certainty in the supported disability accommodation pricing framework, the way it operates, for people to put their money into it.

The Hon. COURTNEY HOUSSOS: I will continue on the topic of young people in nursing homes. In budget estimates you said—or perhaps it was the Minister—that there were 2,220. Has that number reduced at all?

Mr COUTTS-TROTTER: I do not know, but I can find out whether there have been any young people who have managed to transition from nursing homes to more appropriate accommodation.

The Hon. COURTNEY HOUSSOS: You said that the rate was slowing. Could you provide us with the—

Mr COUTTS-TROTTER: That was the observation of the Summer Foundation, which is a Victorian-based non-government organisation that has long advocated to move young people out of nursing homes and to create far more individualised and innovative accommodation options, rather than just five-person congregate care.

The Hon. COURTNEY HOUSSOS: In the NDIS inquiry the Committee discovered that there were 312 young people in nursing homes in New South Wales who, it seemed, were not eligible for the NDIS. That was right at the end of your questioning on the very first day. Has anything been done to progress the access of those 312 people?

Mr COUTTS-TROTTER: Thank you. I will double check.

The Hon. COURTNEY HOUSSOS: The National Disability Insurance Agency [NDIA] seemed to say to us that they knew that they were there, they just could not get access to them. To be frank, that seems like a poor excuse. Is there anything that FACS can do to facilitate that access?

Mr COUTTS-TROTTER: I will check for you because we did come out of that hearing and people spoke to colleagues at the Commonwealth level, so let me come back to you.

ANSWER:

The Commonwealth Department of Social Services has confirmed that at 31 March 2018 there were 2,179 young people in residential aged care in NSW, and the 1,888 referred to in the NDIA submission referred to those people who had met the access requirements to the NDIS.

PAGES 8-9 - RESPITE

The Hon. COURTNEY HOUSSOS: I wanted to just finally ask you about respite care, and this is something that has been raised with us consistently, that there has been a decrease in the amount of respite care that is available under the NDIS. Can you briefly outline what were the respite care arrangements prior to the introduction of the NDIS in New South Wales?

Mr COUTTS-TROTTER: I would need to take that on notice. We all read submissions and listened to testimony before the inquiry suggesting that there were occasions where families were able to get more out of home support for their person with disability, or the support coordination function was not as it needed to be to enable them to step back a little bit as a carer. I can provide a response on notice about how it used to work and I can see what information we can gather at a high level from the NDIS about the features of some of the packages of support and the extent to which they plan for, fund and allow a period of so-called respite.

The Hon. COURTNEY HOUSSOS: This is a key issue and the change in the burden on carers is one identified consistently throughout the inquiry.

Mr COUTTS-TROTTER: Yes.

The Hon. COURTNEY HOUSSOS: The idea that parents were told that this is your child and you need to care for them and that is the expectation. It is inappropriate when these are parents who are caring for children with special needs who require a higher level of care, and the desperation they are driven to by that somewhat small level of respite being attacked even more.

Mr COUTTS-TROTTER: As you will recall the Government has invested to enable us to have the ability to work alongside the NDIA and help families receive and use more of their funded supports in their home and minimise the time they feel they need for their child to be out of the home; to work alongside and complement what is funded and provided for through NDIS packages. On occasions we have performed something of an advocacy role for a very small number of quite high needs kids and their families.

The Hon. COURTNEY HOUSSOS: It is welcoming to hear that someone is advocating on their behalf because we are hearing desperate stories about people in desperate situations who are told that their plan will not allow them to have care until the new year or it is running out. The small amount of respite they already had is running out. If you could provide that information that would be useful.

ANSWER:

Under the NDIS, supports are built around the needs of the person with disability to ensure that the sole reliance of support is not just on the carer. A participant's individualised plan includes reasonable and necessary supports tailored to their goals, personal circumstances and disability support needs.

In addition, the NDIS can provide supports that may sustain the carer in their caring role or strengthen the caring environment, this includes assistance in relation to:

- support worker / personal care workers to support a participant in their home or the community, without relying solely on the carer, including personal care, social and community interaction, daily living tasks
- carer training related to enhancing carer's ability to provide care. Supports that maintain a carer's health and wellbeing will also be considered, including participation in a support group or a special interest network
- support coordination to assist families.

The Commonwealth Government is investing \$85.6 million over four years to support carers through the Integrated Carer Support Service (ICSS). From October 2018, the Federal Department of Social Services (DSS) will roll out a range of services to benefit Australia's unpaid carers through the ICSS model.

The new services will focus on providing carers with access to early-intervention, preventative and skill building supports, to improve carers wellbeing and long-term outcomes.

I am advised that prior to the introduction of the National Disability Insurance Scheme (NDIS), the Department of Family and Community Services provided various respite services to support people with disability and assist families and carers maintain their caring role. This included:

- Capped block funding to NGOs, who would conduct their own assessments and determine which families could be allocated individual block respite funding.
- District Client Liaison officers would assist families in relation to accessing ADHC centre-based respite.