The Hon Kate Washington MP

Minister for Families and Communities Minister for Disability Inclusion



Ref: BE2024/03

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The Hon Robert Borsak MLC Chair Portfolio Committee No. 5 – Justice and Communities Parliament of NSW

Via: budgetestimates@parliament.nsw.gov.au

Re: Clarification of evidence for Budget Estimates hearing

Dear Chair,

I write to advise of clarifications of evidence at the Budget Estimates hearing for Legislative Council Portfolio Committee No. 5 – Justice and Communities, on Monday, 4 March 2024

I would be grateful if you could publish my clarification below. If you require further information, please contact my Deputy Chief of Staff, Daniel Barakate,

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Sincerely,

Kate Washington MP Minister for Families and Communities Minister for Disability Inclusion

04 / 04 / 2024

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Page	Transcript	Clarification
26	 The Hon. TANIA MIHAILUK: Minister, just back on alternative care arrangements, how many providers are there in New South Wales? Ms KATE WASHINGTON: Ms Mihailuk, I might have to come back to you on that. But I can say that of those providers — I think the figure I saw was 89 per cent of them are for-profit providers. The Hon. TANIA MIHAILUK: For profit? Ms KATE WASHINGTON: Correct. The Hon. TANIA MIHAILUK: So a very small percentage are then run by the department as well, is that right? Ms KATE WASHINGTON: No. There are others being provided by non-government providers who aren't for profit. The Hon. TANIA MIHAILUK: Does the department provide any other alternative care arrangements? Ms KATE WASHINGTON: No. 	I am advised: The Department of Communities and Justice provides one Alternative Care Arrangement in the Hunter and Central Coast District to a sibling group that entered the arrangement on 5 February 2024. Work is underway to exit these children as a matter of urgency.
27	Ms KATE WASHINGTON: I understand where you're coming from, Ms Mihailuk. There are a number of pressures across the system. To your point particularly, there is an intensive therapeutic care model, which a lot of providers have, where it's more or less a house and there are contracted arrangements. This is a preferred model for children to be going into a high-cost emergency arrangement. What I found coming into this role was that the vacancy rates on some of those intensive therapeutic care models were sitting around 30 per cent, some maybe 40 per cent. When they are vacant, it then means that a child is going into a high-cost emergency arrangement instead of a more appropriate setting.	This statement should be amended as follows: I understand where you're coming from, Ms Mihailuk. There are a number of pressures across the system. To your point particularly, there is an intensive therapeutic care model, which a lot of providers have, where it's more or less a house and there are contracted arrangements. This is a preferred model for children to be going into rather than a high- cost emergency arrangement. What I found coming into this role was that the vacancy rates on some of those intensive therapeutic care models were sitting around 30 per cent, some maybe 40 per cent. When they are vacant, it then means that a child is going into a high-cost emergency arrangement instead of a more appropriate setting.

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46	Ms SIMONE CZECH: I've got a 30 November number, which is 45.2. I'll see if we can find a more recent number. If we can't find it, we can get it during the afternoon.	This statement should be amended as follows: I've got a 30 November number, which is 45.2 per cent. I'll see if we can find a more recent number. If we can't find it, we can get it during the afternoon.
54	Ms ANNE CAMPBELL: Obviously if the envelope for the funding for that particular program stays as it is, we would have to look at all of those issues. If we are trying to move from where we've got 7 per cent of the funding going to non-ACCOs to move to 30 per cent of people recommissioned through the TEI, that would obviously signal some quite significant changes.	This statement should be amended as follows: Obviously if the envelope for the funding for that particular program stays as it is, we would have to look at all of those issues. If we are trying to move from where we've got 7 per cent of the funding going to non-ACCOs to move to 30 per cent of people recommissioned through the TEI, that would obviously signal some quite significant changes.