



The Hon. Andrew Constance MP
Minister for Ageing
Minister for Disability Services

Wednesday, 16 November 2011

Ms Beverly Duffy
Director – Committees
Budget Estimates Secretariat
Parliament House
Macquarie St, Sydney NSW 2000

Dear Ms Duffy

Re: General Purpose Standing Committee No. 2 – Ageing and Disability Services

I write to you in response to the questions put on notice during the committee hearing on Monday 24th October 2011 for Budget Estimates 2011-2012.

Please see attached responses to questions on notice during transcript numbers 1 to 13 and responses to questions on notice received after the hearing questions numbers 1 to 205.

I would also like to advise there are no corrections necessary for the transcript received.

Regards

Andrew Constance

MINISTER FOR AGEING, MINISTER FOR DISABILITY SERVICES
BUDGET ESTIMATES 2011
QUESTIONS TAKEN DURING THE HEARING

Question 1 – pages 2 and 3

The Hon. HELEN WESTWOOD: Minister, how many new supported accommodation places or specialised accommodation for people with a disability who are ageing does the 2011 budget provide for? I am asking about the number on top of last year's budget.

Mr ANDREW CONSTANCE: First of all, thank you for the question. In 2010-11 financial year 7,900 places will be funded or provided. That is some \$690 million. Of those, 6,300 will be in the non-government sector, including in-home support in 470 accommodation services. Ageing, Disability and Home Care itself will be providing 1,600 places which also include in-home support and 325 accommodation places. The breakdown in the cohort to which you are referring is basically 588 new places coming on-line at the cost of \$34 million.

The Hon. MICK VEITCH: Is that in this financial year?

Mr ANDREW CONSTANCE: Yes. That is in 2011-12.

The Hon. HELEN WESTWOOD: That is for the group we would describe as ageing, over 55?

Mr ANDREW CONSTANCE: Over 65.

The Hon. HELEN WESTWOOD: The number of placements that you have referred to in your answer to my original question: could you give me a breakdown for each region where those places would be?

Mr MOORE: I can assist you by giving an indication of the places by subgroups of our regions in terms of the particular places that were filled last year. Alternatively, I can get you a tabulisation that shows it by region and take the question on notice.

The Hon. HELEN WESTWOOD: If you have some information now that would be good and then if you can forward further information that would be well received.

Answer:

Response to this question is provided in QONs 69 and 70.

Question 2 – pages 5 and 6

The Hon. JAN BARHAM: Minister, can you advise what achievements were made in moving young people out of residential care facilities in the 2010-11 financial year? How many young people were placed into aged care facilities in that time and was there a net gain or a net loss?

Mr ANDREW CONSTANCE: First of all, I will just give some context to this. In 2007 a joint commonwealth and State program commenced in response to concerns about younger people being at risk of entering residential aged care. It was an \$81.2 million program targeting the under-50 cohort. In 2011-12, under the National Disability Agreement there is ongoing expenditure in the order of \$25.3 million, but there is no growth funding component associated with that. Three objectives of the program are to provide more appropriate accommodation care options, to prevent people from entering residential aged care and to improve the lives of those who choose to remain. The typical service response includes supported accommodation, individually planned support packages, equipment, home modifications and case management. Up until 26 August 2011, 52 people entered supported accommodation from residential aged care and over the 12 months until the end of the financial year 2011-12, 121 people will be provided with supported accommodation. Up until 26 August 2011, 113 people were diverted away entering residential aged care. In enhancement services, which include the in-reach packages of individually planned recreation therapy, rehabilitation community access equipment, home modifications to facilitate family and community access and ~case management, there have been some 614 services to date.

The Hon. JAN BARHAM: Are we talking of a net gain or a net loss in those numbers? In saying "people" you are referring to young people under what age?

Mr MOORE: The numbers the Minister quoted are the numbers of people going into programs. So it is an increase in the number of people participating in the programs. The diversions that we are referring to are people who would otherwise have ended up or are likely to have ended up in a residential aged care bed but have been able to be accommodated elsewhere.

The Hon. JAN BARHAM: Young people?

Mr MOORE: These are young people; they are typically under 50. That is the group that we target here.

Mr ANDREW CONSTANCE: But the specific nature of your question, could we take it on notice and come back to you with an exact figure?

The Hon. JAN BARHAM: Yes, that would be great. I know the Minister has a keen interest in this area.

Mr ANDREW CONSTANCE: It is such an important area.

Answer:

Response to this question is provided in QONs 1(a), (b), 2, and 96 to 102.

Question 3 – pages 7 and 8 (not marked up by Committee)

The Hon. JAN BARHAM: In the budget \$20.4 million is allocated for large residential centres. There is also \$2.8 million allocated to improved accommodation for people with a disability who live in those centres operated by non-government agencies. That seems to go against the move for the closure of large residential centres, so can you detail how that money will be spent and whether it increases the number of beds at those centres?

Mr ANDREW CONSTANCE: Can I just say in response to this that my first and foremost concern round devolution has been the consultation and the engagement not only with the residents but also their families. We have seen in many instances a lot of concerns raised. In particular, the three large residential centres that are of concern to me at the moment are Stockton, Rydalmere and Westmead. We are working through a process at the moment where at an individual level there is consultation happening around the aspirations and desires of people with disabilities in terms of their future accommodation needs and, of course, also consultation with their families. Having walked into a couple of these facilities as the new Minister, I was shocked at the state of play. These facilities are old, run-down and restricting the capacity and the ability to improve the quality of life for those residents. We are working through a process to try to not only engage and consult but also to try to come up with an outcome which delivers a far superior quality of accommodation. We also, of course, have the staff ~, working in these facilities and they too are being restricted in their ability to provide the supports to people.

So options are being presented to people as we work through this process. I know that when the Stronger Together 2 plan was announced it did cause a lot of concern, particularly amongst the metro residents and friends groups because there had not been that healthy discussion around what options exist for people. That is the process through which we are working at the moment. I might hand over to the Chief Executive Officer in terms of the specifics around the funding, but I again just want to make clear that the degree of uncertainty and strain that it did cause on residents and families is something which we have taken very seriously and addressed.

Mr MOORE: I do not recognise the specific numbers that you read out.

The Hon. JAN BARHAM: The \$14.7 million for Riverside, \$4.1 million for Westmead and then \$1.6 million for Stockton.

Mr MOORE: The Riverside proposal is already fully mapped out and involves the closure of the existing facility where there are about 70 beds associated with it. It is one of the ones that the Minister described accurately in terms of its state of repair and its desirability for twenty-first century living. It will be replaced by a series of facilities that are spread throughout the western region of New South Wales. I am happy to get you the details of what beds go where, but we will be retaining I think 30 beds on a different part of the site. These beds will interface with the forensic mental health facilities at Bloomfield.

We recognise that while group homes are commonly a fairly desirable accommodation option, they are not the only options that are available and can be made to work for people. There is a need for some beds to be available-particularly in the case of Bloomfield-that will help address people

with pressing mental health and overlapping disability issues, and provide for a safe environment for the residents and staff. They provide a base on which we can build a life for a person and get as good community engagement as possible.

However, people should not be under any illusion that the process that has been gone through in New South Wales is the formulaic one-size-fits all model that was originally described back in 1998 where the only thing that was possible was group homes. Group homes produce bad outcomes for some people and we need alternative models. We are in the courts around this process and we are not backing off because we need to recognise that not everybody is able to suitably be accommodated in a group home.

"Suitably" also includes safely.

Mr ANDREW CONSTANCE: Our approach is not dissimilar to that of the policy of the former Government of no new residents being admitted to large residential centres unless there is an exceptional circumstance. That decision and approval rests in the hands of the Chief Executive Officer. We have allocated \$255 million under the Stronger Together 2 program in capital and recurrent funding to provide new and more home-like accommodation for all residents currently living in large and small residential centres. We are talking about 1,350 people, of whom 950 are in six Ageing, Disability and Home Care facilities and 400 are in non-government agencies.

The Hon. JAN BARHAM: Was \$2.8 million allocated to the non-government facilities?

Answer:

Response to this question is provided in QON 8.

Question 4 – page 8

The Hon. JAN BARHAM: On page 4-8 of Budget Paper No.3, which relates to specialist disability accommodation support, the forecast figure is 8,990, which was a decrease on the actual figure the year before. The actual came in at 9,600. Can you explain the difference? Can we be sure of what the forecasts will be for next year?

Mr MOORE: I will take that on notice and give you a detailed breakdown.

Answer:

Response to this question is provided in QON 12.

Question 5 – pages 8 and 9 (not marked up by Committee)

The Hon. JAN BARHAM: I have a few questions like that that relate to the forecasts and the actuals being different, so I will put them together for you. Can you clarify whether the \$3.4 million allocated to attendant care for an extra 55 places means 55 new carers will be employed or is it a redeployment of current carers?

Mr MOORE: The Stronger Together 2 resources that I think you are referring to are for new places. They are for a person with a disability who meets the attendant care guidelines and they will be receiving typically up to 35 hours worth of support resources. Last time I checked these figures they were averaging somewhere in the high \$70,000s and that person is then in a position to use those resources to acquire the support services they need, either personal care services or other things. I envisage that there could potentially be a number of carers associated with each of those places.

The Hon. JAN BARHAM: Are they all new?

Mr MOORE: They are all new.

The Hon. JAN BARHAM: Is there a breakdown of whether they are going into rural and regional areas?

Mr MOORE: We operate attendant care on a statewide basis. We take each application on its merits and prioritise across the whole of the State. We do not try to have a balance between any locations. We make sure we are taking the people who need the assistance most. I can easily get you a breakdown that shows the spread across the State.

Answer:

The following table provides a breakdown of approved Attendant Care Program clients with a breakdown of the *Stronger Together Two* approvals up to 31 October 2011.

Spread of Approved Attendant Care Clients with a breakdown of new approvals under <i>Stronger Together 2</i> (as at 31 October 2011)			
ACP Clients by Region and Local Planning Area	ACP Clients (base) as at 30 Jun 11	New approvals under Stronger Together 2 (as at 31 Oct 11)	Total ACP Clients as at 31 Oct 11
Total Clients	812	42	854
Metro North	237	7	244
Northern Sydney	108	2	110
Cumberland/Prospect	90	4	94
Nepean	39	1	40
Metro South	237	13	250
South West Sydney	93	5	98
Inner West	43	3	46
South East Sydney	101	5	106
Northern	133	8	141
Mid North Coast	53	3	56
New England	20	2	22
Far North Coast	60	3	63
Hunter	80	5	85
Central Coast	36	2	38
Hunter	44	3	47
Southern	63	6	69
Illawarra	45	3	48
Southern Highlands	18	3	21
Western	62	3	65
Central West	28	0	28
Orana Far West	17	1	18
Riverina Murray	17	2	19

Forty two new places have been allocated at the end of October 2011 and a total of 55 new places will be allocated this financial year.

All places are allocated based on the need and priority of the individual rather than to a particular location

Question 6 – pages 12 and 13

The Hon. MICK VEITCH: Minister, earlier you spoke about advocacy and advocacy services. No-one would disagree that systemic advocacy and individualised advocacy will be essential during the process of moving the sector across to personalised individualised care. In the budget you allocated \$3.1 million for peak advocacy and information services. Could you advise the Committee of the breakdown of that \$3.1 million to see where the money actually IS going for those organisations.

Mr ANDREW CONSTANCE: Thank you for that question. Advocacy information services involves people with a disability and their families and carers having greater control over their lives by having access to timely information. In 2011-12 \$12.5 million will be distributed across 44 service providers for 84 disability advocacy and information services. These include 16 advocacy only services, \$2.4 million; 26 information only services, \$3.1 million; 25 combined advocacy/information services, \$3 million; and 17 other support services, \$4 million.

There has been reform in relation to New South Wales advocacy information services. Part of that is drawing the distinction between what would be systemic advocacy with peaks compared with individual advocacy. I am advised that in 2010 Ageing, Disability and Home Care released information advocacy program guidelines following consultation with the sector. The guidelines are aligned with proposed directions for a national disability advocacy framework being developed by first of all, outlining the objectives of the programs and providing a platform for improved quality accountability and reporting, and sharpening the focus on improving outcomes for people through the provision of flexible and responsive services.

I have to say we are dependent upon the advocates as we move into a person-centred world. They will be playing an important role in that process. We are determined to make sure that we work closely with those services. Do not quote me on the exact figure, but we did allocate around the \$130 million mark in relation to information support services as we move in to the person-centred approach. I think it is a little higher.

Mr MOORE: \$141 million.

Mr ANDREW CONSTANCE: We are determined as we move towards a person-centred approach to recognise that one of the key failings which have happened in some other jurisdictions is that there has not been that investment up front in terms of information support. We see the advocates as key as we move into this process. I know a lot of the advocates particularly the systemic advocates, have worked tirelessly over the year to move to an individualised funding arrangement

The Hon. MICK VEITCH: Could you provide the Committee, on notice, with a breakdown of the organisations and where they are with regard to all that money?

Answer:

Stronger Together Two includes \$141 million over the next five years for additional decision support services to assist individuals, their families and carers identify their needs and goals, plan their service requirements and

access specialist disability and mainstream services. The allocation of this funding will be assisted by the outcomes of the statewide consultation process currently being implemented on the NSW Government's policy directions for person centred support and individualised funding in NSW.

The Government recognises that information and advocacy supports are important elements of a person centred system. The consultation process is exploring the range of information and planning supports people with a disability and their families and carers need to be able to make informed decisions about support options and how available resources are used.

The Government has made a commitment to continue funding existing advocacy and information services until 30 June 2012, while the consultation process is being implemented.

In 2011/12, \$12,439,932 will be distributed as per below.

Table 1: Advocacy and Information organisations

Organisation	Advocacy services	Information referral services	Combined Advocacy Information services	Print disability services
Ability Incorporated	\$146,400			
Action for People with Disability Inc			\$175,396	
Advocacy Law Alliance Incorporated	\$238,576		\$169,070	
Association of Blind Citizens of NSW Inc	\$32,312			
Australian Huntington's Disease Association (NSW) Inc		\$60,700		
Autism Spectrum Australia (ASPECT)		\$222,300		
Better Hearing Australia NSW State Council Inc			\$101,523	
Broken Hill & District Hearing Resource Centre		\$66,013		
Cancer Council NSW		\$56,300		
CanRevive Inc			\$63,600	
CatholicCare		\$50,000		
Central Coast Disability Network Inc			\$111,029	
Cerebral Palsy Alliance		\$111,100		
Citizen Advocacy Western Sydney Inc	\$175,685			
Disability Advocacy and Information Service - Albury			\$148,567	
Disability and Aged Information Service Inc		\$276,152		
Disability Information Advocacy Service Incorp	\$165,199			
Disability South West Incorporated		\$164,223		
Down Syndrome Association of NSW Inc		\$173,475		
Epilepsy Association		\$100,298		
Ethnic Child Care Family &			\$223,857	

Organisation	Advocacy services	Information referral services	Combined Advocacy Information services	Print disability services
Community Services Co-op Ltd				
Handital - NSW Inc			\$70,832	
Holroyd City Council		\$61,415		
IDEAS - Information on Disability Education and Awareness Services Inc	\$491,105	\$336,079		
Independent Living Centre NSW	\$147,695	\$680,698		
Institute for family Advocacy & leadership Development				
Intellectual Disability Rights Service Inc	\$622,859		\$288,054	
Italian Social Welfare Organisation			\$22,407	
Link-Up NSW Aboriginal Corporation		\$93,300		
Macarthur Disability Services Ltd		\$88,600		
Macedonian Australian Welfare Association of Sydney Inc			\$117,200	
Multicultural Disability Advocacy Association of NSW		\$87,153	\$693,188	
Multiple Sclerosis Limited (MSL)		\$33,400		
Muscular Dystrophy Association of NSW		\$86,500		
NADO Inc		\$31,830		
NSW Council for Intellectual Disability		\$98,000		
Parent Council for Deaf Education			\$84,092	
PATH Inc			\$70,826	
Penrith Disabilities Resource Centre Inc	\$100,000	\$6,061	\$81,797	
People with Disability Australia Incorporated	\$208,075			
Radio for the Print Handicapped of NSW Co-op Ltd				\$96,309
Royal Institute for Deaf & Blind Children				\$103,450
Spinal Cord Injuries Australia Limited		\$254,522	\$363,011	
Stroke Recovery Association Inc			\$54,634	
Sydney Regional Aboriginal Corporation Legal Service			\$117,405	
The Association of Genetic Support of Australasia (AGSA) Inc		\$111,100		
The Deaf Society of NSW		\$323,289	\$48,253	
The Disability Trust			\$204,918	
The Drug and Alcohol Multicultural Education Centre (DAMEC)			\$86,100	
The Paraplegic & Quadriplegic Association of NSW - T/A Paraquad-NSW		\$71,991		
Vision Australia Limited				\$180,631
Warringah Council		\$32,286		
Yarkuwa Indigenous Knowledge Centre Aboriginal Corporation		\$92,300		
Total	\$2,327,906	\$3,769,085	\$3,295,759	\$380,390
			Grand Total	\$9,773,140

Table 2: Peak organisations providing systemic advocacy

Organisation	Peak activities 2011/12
Aboriginal Disability Network Incorporated	\$184,500
Brain Injury Association of NSW Inc	\$168,005
Council of Social Service of NSW	\$250,000
Early Childhood Intervention Australia (NSW Chapter) Inc	\$58,073
NSW Council for Intellectual Disability	\$306,148
National Disability Services Limited	\$1,074,962
People with Disability Australia Incorporated	\$394,870
Physical Disability Council of NSW Inc	\$230,234
Total	\$2,666,792

Question 7 – page 14

The Hon. MICK VEITCH: The budget also includes a significant amount of transitional adjustment due to the new national partnership agreement on transitioning responsibilities for d care and disability services. Just how much is that transitional adjustment?

Mr ANDREW CONSTANCE: I am not aware of that figure. More broadly, we are at the moment waiting on the Commonwealth to provide us greater advice around the transitional arrangements of this program. I do remain concerned there is a lot of uncertainty in the sector. The union has expressed concerns to me directly. We are waiting on the official end, being Canberra, for greater clarity and advice around how the transition will work. The Commonwealth did stipulate that there should be no loss of service through this process, no loss of funding through this process.

I would hate to see a situation arise where we lose the good will of all the volunteers out there who work tirelessly to support these services. I again reiterate the need for the Commonwealth to provide greater clarity. We have some 245,000 people in this State who receive services from this program. It is a very good program: there is a high satisfaction level with the program. With the ageing community there is an increasing demand as well. I am obviously very keen to work with the Commonwealth through this process in a very instructive way but at the moment we are operating in an information vacuum, which is causing a bit of angst across the sector

The Hon. MICK VEITCH: What is the dollar amount?

Mr MOORE: What I think you are referring to in terms of transition funding is that the hospital and health reform agreement includes a whole pile of moving moneys around as to what the Commonwealth pays and I think the net effect is \$130 million, but the figures that we were quoting for Home and Community Care do not cover that; they are left alone. We are presenting you with figures as though nothing had changed in terms of the financial arrangements so it is directly comparable with previous years. In reality the Home and Community Care Program has grown on exactly the same basis on which it has grown in previous years-with the Commonwealth setting its growth number and then we match that on a 60/40 arrangement.

The Hon. MICK VEITCH: What is the \$130 million that you just mentioned for and where is that going to go?

Mr MOORE: I think it will be easiest if I give you a table on notice to show you how the money moves around. At heart nothing new is coming out of the transition moneys. For example, \$58 million relates to the Commonwealth contribution for over-65s, that is in the Home and Community Care Program, and there is a \$55 million contribution for what is in the disability support program.

Answer:

The new National Partnership Agreement will be implemented in a budget neutral manner for NSW. As such, ADHC will receive \$131 million funding (including \$18 million in budget neutral adjustment) from the Commonwealth for people aged 65 and over accessing ADHC's Home and Community Care (HACC) and disability services. On the other hand, ADHC will have to pay the

Commonwealth \$131 million for people aged below 65 accessing the Commonwealth's aged care services.

There is no impact to the total funding paid by the Commonwealth and NSW from this arrangement, rather a change in the funding liability for each party.

Question 8 – page 15 (not marked up by Committee)

The Hon. HELEN WESTWOOD: Are consultations being conducted with the deaf community in Auslan?

MR LEACH: We have looked at different approaches for different communications groups. Members of the deaf community have attended consultations. I can get you numbers of attendances to consultations by members of the deaf community which have been provided in Auslan of the 100-odd consultations that have taken place.

The Hon. HELEN WESTWOOD: Have there been consultations with either Deaf Australia or the Deaf Society of New South Wales on the format?

Mr ANDREW CONSTANCE: Individual consultations with them directly?

The Hon. HELEN WESTWOOD: Yes.

Mr ANDREW CONSTANCE: I do not think there has been any individual consultation. If it is an issue we are happy to take it on board and go into it, if you like.

The Hon. HELEN WESTWOOD: Yes.

Mr ANDREW CONSTANCE: It is important, Helen. I can follow that through. Obviously, we are trying through this whole process to be able to handle the consultations in a way that is incredibly engaging for everybody. If it does require specific consultation we are happy to take it on board and do it.

Answer:

Between 1 August and 19 September 2011 there were 154 consultations held across NSW. These consultations were open to anyone with a disability, their family or carers or people interested in attending. A total of 2,406 people attended. 1,329 people attended the 118 focus groups for people with a disability and their family and carers and 1,077 people attended the 36 workshops for service providers.

A range of disability and peak organisations were consulted on accessibility issues as part of planning for the *Living Life My Way* Summit held on 7 and 8 July 2011. No specific consultations with the Deaf Society of NSW or Deaf Australia have occurred in relation to planning for the person centred consultations. However, six of the person centred consultation sessions were attended by 11 representatives of the Deaf Society who participated with support provided by Auslan Interpreters. The registration process provided an opportunity for participants to register their need for additional supports such as Auslan Interpreters, hearing loop, support with personal care and transport. Where Auslan Interpreters were not available to support people with a hearing impairment, ADHC supported these people to attend other consultation sessions where interpreters were available.

ADHC has received further information and feedback from members of the community on supporting people with a variety of disabilities to participate in the consultation sessions including people with hearing impairments and deafness. This information will be used to assist with planning for Stage 3 of the consultation process.

Question 9 – page 16

The Hon. J BARHAM: I refer to the question asked previously about aboriginal clients. The budget refers to 2,200 Aboriginal clients and the delivery of 3,000 and 21,000 hours. How much of that service is travelling time? Also, is it possible to give a breakdown of whether the services given in home care were provided to Aboriginal people as an older person or as someone with a disability?

Mr ANDREW CONSTANCE: I will take that on notice in terms of the breakdown. I note that aboriginal home care is based within a lot of these communities. Two weeks ago I visited the service in Wilcannia. There are things we can do to improve these programs with the local Aboriginal communities. For instance, we announced funding for bush tucker programs which enable the local community to work alongside the service to grow vegetables and some of those more traditional Aboriginal food types. We are trying to be as culturally sensitive as we can. In many cases these services are based within communities but we have to recognise, particularly in the Far West, there is a lot of travel between communities. A lot of it does centre around access to medical services as well.

Mr MOORE: Can I add one piece of clarity? I will get you a breakdown in terms of the numbers you are asking for, as the Minister offered. We do not typically count travel time in service hours. It is literally the face-to-face service hours that are counted.

The Hon. JAN BARHAM: That it is not clear. It is one of those points that could be clarified.

Mr ANDREW CONSTANCE: I get feedback all the time about factoring in locations.

The Hon. J BARHAM: When you are in the regions you always think about that.

Answer:

Response to this question is provided in QONs 14 and 16.

Question 10 – page 17

Ms McALPINE: We have run a trainee program-it began in the Hunter region-where I think we started with 12 and 10 graduated. They had a Certificate III in Aged Care. We also got them drivers licences because that can be quite a barrier to employment, and then they moved into a range of employment. Some of them stayed with us in home care and some went to Stockton and became an assistant in nursing in our large residential centres and that, they believe, has given them a career pathway in nursing; one of them is looking now at doing an enrolled nurse's course. The pilot project that was run in the Hunter was so successful that we are now rolling it out throughout all our branches to encourage more workers into the Home Care Service of New South Wales, and they are both in our Aboriginal branches and in our regular Home Care branches.

The Hon. JAN BARHAM: Was that the 20 Aboriginal trainees that are referred to in the budget papers?

Ms McALPINE: I would need to check. Some of them were in homes; some of them were in home care.

Answer:

Response to this question is provided in QON 19.

Question 11 – pages 17 and 18

The Hon. JAN BARHAM: Are you also able to provide the numbers of specific client abuse by Ageing, Disability and Home Care workers that were reported to the police? The other disturbing issue is where there is client to client abuse.

Mr MOORE: Any form of physical abuse that we would become aware of let us say of a staff member on a client, would be automatically reported to the police; it is the standing protocol that we have. I need to check the detail of exactly how we express it, but there would be a similar setting in terms of client-on-client abuse. We do not put ourselves in the position of attempting to judge whether criminality has taken place; that is a matter for the police. But, at the same time, we make our own series of judgements about the appropriateness of behaviour and the safety and ongoing welfare of clients and staff, and those matters that are considered serious get escalated through very detailed investigations and staff are stood aside sometimes for very long periods of time because you have either got a situation where the allegation is sustained, in which case it is a risk for the staff member to be there, or the allegation is not sustained, in which case it is a risk for them to be there because what was the source of the allegation? You are putting them back in harm's way for the compounding of their own reputation. It is a very vexed matter sometimes trying to establish exactly what has taken place, particularly when a person with a disability has been involved. So our investigations tend to be quite long and they are not necessarily great things for the staff to have to go through but, for us, we want to make sure that we are clearly seen as doing whatever it takes to ensure that there is safety and that clients are not subject to maltreatment. But we do have a very large workforce.

Answer:

Response to this question is provided in QON's 23, 24, 25.

Question 12 – page 18

The Hon. JAN BARHAM: Unfortunately, Minister, these are the sorts of things that get media attention, so it is important for the confidence of the community to know that the reporting is there so we can see when things are working. I appreciate your concern for the area. Similarly you raised a point about discrimination in the area of ageing, and it is sad that it is true, but was the Attorney General's Department not there at that roundtable meeting?

Mr ANDREW CONSTANCE: Again, do not quote me-I can go back and check the attendance list-but I think organisations such as the Aged Rights Service were there. We are keen to be working with the Attorney General's Department on the best approaches possible to deal with cross-agencies in terms of tackling this issue, because not only does it involve the Attorney General's Department but it also involves the police. The police were there. I can check whether the Attorney General's Department was present.

The Hon. JAN BARHAM: The Attorney General's Department has been very good at releasing plain-speaking information about people's rights. They have done it with youth rights and I think I have seen one on disability rights. The more information that can be given directly to people is fantastic.

Mr ANDREW CONSTANCE: I absolutely agree with you. That is why we are trying to work with the Aged Rights Service and why we are working closely with the Council on the Ageing on some of these programs.

Answer:

Yes. The Attorney-General's Department was represented at the Ageing Roundtable.

Question 13 – pages 18 and 19

The Hon. JAN BARHAM: Turning to dementia, could you outline where there is money directly targeted to specific dementia programs?

Mr ANDREW CONSTANCE: I will get you an exact answer on this. I will say we have a wonderful working relationship with Alzheimer's Australia and appreciate the work that has been done by John Watkins and his team there. As part of this, through the Home and Community Care program, we have also run some capital works programs around dementia and centre-based day care as well. Just more broadly, by 2050 there is estimated to be over 341,000 people with dementia in New South Wales. We have a Dementia Services Framework 2010-15 which is a commitment between Ageing, Disability and Home Care and NSW Health. It is designed to set out the direction for the provision of quality dementia care. We also offer a range of direct support services and, as I said before, dementia is considered a special needs group within the Home and Community Care program, hence the focus that we have had in relation to some 16 day centres that have been built or are in the process of being completed.

There is also a Koori dementia care project in place. This is a three-year project which will work with five regional and rural Aboriginal communities to develop community readiness to existing Aboriginal-specific dementia resources. Mentoring and coaching will be provided by established community partners and leaders to build capacity within individual communities and to identify and address their specific dementia-related needs. The investment in this project is some \$330,000. Alzheimer's Australia has been funded to provide a statewide Aboriginal project officer. The role again is to promote awareness of dementia within Aboriginal communities. There is a \$320,000 allocation for that.

We also have in place the Dementia Learning Resource for Aboriginal and Torres Strait Islander communities. The Dementia Learning Resource for Aboriginal and Torres Strait Islander communities is a competency-based learning and assessment tool. It has been updated to meet the national competencies regarding dementia care from the new community services training package. Again, a range of stakeholders have worked with the agency on this project, including NSW Health, the Aboriginal Health and Medical Research Council and Alzheimer's Australia. The budget for this resource was \$119,529. So we have a focus in terms of Aboriginal communities as well as the wider community in that regard.

Answer:

The Home and Community Care (HACC) Program funds a range of dementia specific services, such as social support (dementia monitoring), centre based day care, dementia advisory services and dementia specific counselling, support, information and advocacy.

In 2010/11, funding to dementia services was increased by \$5,677,809, which was 17.1% of total HACC growth funding for that year. Expansion for 2011/12 has not yet been confirmed.

Funding of \$1 million a year is provided to Alzheimer's Australia NSW to conduct dementia awareness, support and information activities.

Alzheimer's Australia has also been funded \$250,000 to conduct research into Younger Onset Dementia. This includes a literature and service review which is shortly to be released.