

# MINISTER FOR AGEING, MINISTER FOR DISABILITY SERVICES

## BUDGET ESTIMATES 2012

### QUESTIONS TAKEN DURING THE HEARING

#### Question 1 (pages 8-9)

**The Hon. JAN BARHAM:** My next question relates to the Attendant Care Program and the high needs pool. How do you determine which program people are directed to? What fee is associated with that and what criteria are used to determine which of the two services people are put into, considering there is only one application?

**Mr ANDREW CONSTANCE:** The Attendant Care Program and the high needs pool are critical in supporting people to stay at home and not move into residential aged care prematurely or other inappropriate settings. The program provides an average of 32 hours a week of personal care and related support for people with physical disabilities to assist them to live as independently as possible in the community. An attendant care pilot has been run specifically around individualised funding which has been incredibly successful. In 2011-12 the budget for the program was \$91 million. There are 1,278 available places with 1,395 client accessing services within the financial year. The Attendant Care Program funded 868 places, including 320 Stronger Together and 56 Stronger Together Two places, with 932 clients accessing our services.

The high needs pool funded 410 places, with 463 clients accessing services. Stronger Together Two includes 300 new Attendant Care Program places—\$60 million over five years in new money—including 113 new places to be allocated by the end of 2012-13. As we move to the individualised funding environment, in particular for people with physical disabilities—I imagine they will be the ones who will take up the new individualised funding regime—we are dealing with a system where the growth in demand is expected to be around 9 per cent per annum. We are investing \$2 million in growth money and we will provide an extra 47,000 places. We are under enormous strain as it is which emphasises why we need a National Disability Insurance Scheme.

**The Hon. JAN BARHAM:** Will you take on notice my question as to how that is determined?

**Mr ANDREW CONSTANCE:** Yes, sure.

#### Answer

Program allocation is determined after the completion of an independent assessment of an applicant's essential personal care and support needs.

In determining program allocation, ADHC considers:

- the suitability of one program over another in relation to the total hours of care required,
- the type and length of services required, the need for specialist disability support and the presence of an existing service relationship with Home Care;
- the budget capacity of each program at the time of approval; and
- the preference of the applicant, where possible.

It is the right of any service provider, including ACP service providers, to consider client contribution. Consideration is provided for clients who cannot afford a fee.

The Home Care Service of NSW (HCS) has always charged a contribution for services delivered under the HACCC Program, including the High Needs Pool (HNP). In 2007, the HCS introduced a statewide standard contribution charge. This is to ensure equity in the charging of contributions and consistency with the fee principles in the national program guidelines for the HACCC Program.

Clients of the HCS, including those receiving services under the HNP, can apply for a review of the standard contribution.

The level of contribution is not intended to recover the full cost of service; rather, clients pay a standard contribution towards the cost of the service. The HCS does not deny services to people who are unable to afford to pay for services.

## Question 2 (page 9)

**The Hon. PAUL GREEN:** My question relates to dementia. The number of people with dementia is expected to triple by 2050. Given that around 70 per cent of people with dementia live in the community as opposed to being in nursing homes, and given the important role that professional carers play in the community, what incentives is the Government providing to encourage more people to become professional carers and to retain those already in the industry?

**The Hon. PAUL GREEN:** Someone else may want to provide some further comment. In light of the expected tripling of people with dementia in the next couple of decades and after seeing the significant reduction of capital expenditure for rehabilitation extended care services from about \$103 million in the 2011-12 budget down to about \$31 million in the 2012-13 budget, can you explain that disparity?

**Mr ANDREW CONSTANCE:** Is that within Home and Community Care?

**The Hon. PAUL GREEN:** Rehabilitation and extended care services are being reduced.

**Mr ANDREW CONSTANCE:** Unless it is under the HACC program—

**The Hon. PAUL GREEN:** I am quite happy for you to take the question on notice.

**Mr ANDREW CONSTANCE:** More broadly, we had worked with the Commonwealth in building specific dementia day care services and a number of programs are run through the Home and Community Care Program. Of course, on 1 July that became the sole responsibility of the Commonwealth. I will take those questions on notice and come back to you on it. We just want to make sure we get you the right information.

## Answer

NSW Ministry of Health funds rehabilitation and extended care services. This question is best answered by The Hon. Jillian Skinner MP, Minister for Health, Minister for Medical Research.

### Question 3 (page 14-15)

**The Hon. AMANDA FAZIO:** Minister, I was asking you about your Government's commitment to accountability and transparency, and whether there was consultation with the sector before you transferred that \$7.2 million from Stronger Together 2 into those other two funding areas?

**Mr ANDREW CONSTANCE:** We are acting in a responsive way to the callings of the sector. As I said, the establishment of the—

**The Hon. AMANDA FAZIO:** In that case, Minister, can you do two things for me? Can you undertake, on notice, to give us information about each of the early intervention services that were funded and the amount of funding each one got?

**Mr ANDREW CONSTANCE:** Sure.

### Answer

#### Early Childhood Intervention Australia (NSW Chapter) (ECIA)

A total investment of \$8 million (\$2M in 2011/12) in early childhood intervention will enable:

- The development of a *Transition to school* package and consultancy approach over three years, to provide 100 places for children with a disability and their families.
- Provision of professional leadership through the *Early Childhood Inclusion Project* to support the development of system capacity to provide supports for children with a disability aged 0 – 8 years.

The Royal Institute for Deaf and Blind Children (RIDBC) and The Shepherd Centre (TSC),  
\$1 million to provide 125 places for children with sensory impairment in 2012/13

#### Pathways Early Childhood Intervention Inc

\$1.5 million capital funding to Pathways Early Childhood Intervention to support land purchase, design, renovation of an existing building, and construction of an extension to a council owned premise in 2012/13

In addition a total of \$5 million has been allocated to the Consumer Development Fund to prepare for the expansion of individualised funding arrangements from 1 July 2014.

**Question 4 (page 16)**

**The Hon. HELEN WESTWOOD:** Are Kanangra and Riverview hostels within that Hunter catchment for the NDIS?

**Mr ANDREW CONSTANCE:** I need to check on that one. Can I come back to you on that one?

**The Hon. HELEN WESTWOOD:** If you could take that question on notice and come back to us.

**Answer**

Yes both are located in the Lake Macquarie LGA of the Hunter region.

## Question 5 (page17)

**The Hon. JAN BARHAM:** On the issue of ageing and information that was revealed in the 2000 report Access to Justice and the need for additional funding for legal services for older people, can you advise what funding there is and what action will be taken for services, particularly in rural and regional areas?

**Mr ANDREW CONSTANCE:** First of all, thank you for the question. I will get some specifics as it relates to legal services. One of the reasons we developed the whole-of-government strategy around ageing was to try to minimise any duplication that might go across government as it relates to some of these programs, particularly in the area of Attorney-General's and work that might be done through the ageing grants program run under the Office of Ageing. There is no doubt that if you take an issue, for instance, elder abuse, that there have been countless examples of separate programs having been run across various agencies in that regard. I can take that question on notice and come back to you.

**The Hon. JAN BARHAM:** I was going to ask whether you have numbers on complaints about elder abuse and whether there has been an increase.

**Mr ANDREW CONSTANCE:** The latest figure that I saw was one from the Australian Institute of Criminology, which had this extraordinary figure of 50,000 people over the age of 65 being subjected to elder abuse annually in New South Wales. This is unacceptable. The community needs to look at and reflect very hard

## Answer

Response to this question is provided in QON 1 asked by Ms Barham.