

GENERAL PURPOSE STANDING COMMITTEE No. 2

Monday 22 October 2007

Examination of proposed expenditure for the portfolio area

AGEING, DISABILITY SERVICES

The Committee met at 9.00 a.m.

MEMBERS

The Hon. R. M. Parker (Chair)

The Hon. J. G. Ajaka
The Hon. A. Catanzariti
The Hon. G. J. Donnelly

Ms L. Rhiannon
The Hon. C. M. Robertson

PRESENT

The Hon. K. K. Keneally, *Minister for Ageing, and Minister for Disability Services*

Department of Ageing, Disability and Home Care

Mr B. O'Reilly, *Director General*

Ms E. McAlpine, *Deputy Director General*

Ms C. Mills, *Deputy Director General*

Mr S. Mudge, *Chief Financial Officer*

CORRECTIONS TO TRANSCRIPT OF COMMITTEE PROCEEDINGS

Corrections should be marked on a photocopy of the proof and forwarded to:

**Budget Estimates secretariat
Room 812
Parliament House
Macquarie Street
SYDNEY NSW 2000**

CAROL MILLS, Deputy Director General, Department of Ageing, Disability and Home Care, affirmed and examined, and

ETHEL McALPINE, Deputy Director General, Department of Ageing, Disability and Home Care,

BRENDAN O'REILLY, Director General, Department of Ageing, Disability and Home Care, and

STEPHEN MUDGE, Chief Financial Officer, Department of Ageing, Disability and Home Care, sworn and examined:

CHAIR: I declare this hearing on the 2007-08 budget estimates in the portfolios of Ageing and Disability Services open to the public. Before we commence I need to make some procedural comments. In terms of broadcasting, the media needs to know that they are only able to film witnesses and Committee members; people in the public gallery should not be the focus of filming or photographs. The media needs to take responsibility for what it publishes and what interpretation it places on anything that is said before the Committee. The broadcasting guidelines are available from the table by the door.

Any messages may be delivered through the Chamber support staff. The Minister is allowed to have messages passed to and from her staff. I ask everyone to turn off their mobile phones. The Committee has resolved to ask questions on all portfolios simultaneously. It has also resolved to request that answers to questions on notice be provided within 21 calendar days of the due date on which they are sent to the Minister's office. Do you think you will have any problems with that?

Ms KRISTINA KENEALLY: No.

CHAIR: Would you like to make an opening statement?

Ms KRISTINA KENEALLY: I have been Minister for Ageing, and Minister for Disability Services since April this year, and I am pleased to say that the New South Wales Government is continuing its commitment to people with a disability, their families and their carers. This financial year the Department of Ageing, Disability and Home Care will receive funding of \$1.894 billion. This is an increase of \$136 million or almost 7.7 percent from last year's budget. In fact, I am advised that the department's budget has more than doubled since 1997, with a 263 per cent increase. The release in May 2006 of the New South Wales government's 10-year plan Stronger Together further confirmed this Government's commitment to improving services for people with a disability, their families and their carers. The New South Wales Government will deliver an extra \$1.3 billion in funding over the first five years of Stronger Together. The 2007-08 budget represents the second year of Stronger Together.

Stronger Together will provide more assistance for people with disabilities to live in their own home. The plan will also increase the range of specialist accommodation services for those people who are unable to live at home. This change will be achieved through three key areas of effort: strengthening families, promoting community inclusion and supporting adults with a disability to live in and be part of the community, and improving our service system. In 2007-08 total funding of \$64.2 million will be provided to the department's capital works program. This includes funding of \$6.8 million which has been allocated to reconfigure Grosvenor and Lachlan centres, to provide specialist statewide accommodation services for people with complex health care needs and challenging behaviours respectively.

Funding of \$8.8 million has been allocated for the redevelopment of the Peat Island facility. This is to provide a 100-bed aged care facility and 20-bed cluster accommodation nearby. Our home care service, which is the largest provider of home and community care services to frail older people and younger people with a disability and their carers, plans to deliver approximately four million hours of service to approximately 56,000 people this financial year. The Attendant Care Program and the high needs pool provide up to 35 hours per week of personal support to assist people with a physical disability to live as independently as possible in the community. The attendant care program targets people aged 16 to 65 years who can manage and direct their own care, and the high needs pool targets frail aged people and younger people with a disability and their carers.

There is an increased capacity in the Attendant Care Program this year as a result of 20 places made available in 2007-08 and a total of 320 new places in the years 2006 to 2011 as part of Stronger Together. Finally, turning to ageing, the New South Wales Government has maintained a strong commitment to support the wellbeing of older people and to help them enjoy good health, security and meaningful and productive lives. The Office of Ageing is implementing cross-agency initiatives on important issues such as a mature workforce, older people in disadvantaged communities, responding to the abuse of older people and supporting people with dementia and their carers.

The Ageing Grants Program currently supports a range of services and projects meeting the needs of older people in New South Wales. These include peak bodies in the ageing field and early intervention and referral services, and particularly the seniors information service. Some \$5.5 million was allocated to the ageing program for 2007-08. The ageing program again includes funding for core elements of the State's dementia program. The third New South Wales dementia action plan 2007-09 will be released shortly. Some \$2.6 million is allocated for the dementia strategy in 2007-08. People living with dementia, their families and their carers need access to a range of services and supports, and we intend to do that through this funding.

Major dementia initiatives funded through this program are: 12 dementia advisory services across New South Wales, at almost \$1 million in 2007-08; and 10 dementia clinical nurse consultants in area health services across New South Wales, at approximately \$0.8 million in 2007-08. The key focus of dementia planning has been on building a coordinated service system for people living with dementia, bringing improved access to early intervention, assessment and ongoing support. The ageing program has been progressively focused on funding innovated approaches that can achieve improved outcomes for older people and are in line with key priorities in ageing. Community capacity building initiatives and selected local government areas are trialling local solutions to assist older people to age positively within their own homes and communities. Later this month the New South Wales Government will convene Ageing 2030, a future-focused roundtable bringing together up to 120 eminent decision makers and experts in the field who will inform the Government's ageing strategy.

I will make one final point before moving on to questions from Committee members. I am quite prepared to provide a private briefing on any matters concerning individuals out of session to any member of the Committee who would like such a briefing. However, the department will not provide information about individuals and their personal circumstances in a public forum such as this. It is unhelpful and inappropriate for private information to be shared in this context. However, I am more than happy to assist the Committee and its members in any way possible with whatever relevant details they may require by way of a private briefing.

The Hon. JOHN AJAKA: Minister, the questions I ask will be of a general nature, so I will not ask you to identify a person by name or otherwise, but simply from a general nature of your knowledge of the matter. Are you aware of an Department of Ageing, Disability and Home Care client who has been in a respite bed for nine years?

Ms KRISTINA KENEALLY: Do you have any further information, or are you asking whether I am aware of a certain blocked bed situation?

The Hon. JOHN AJAKA: I ask you where is the facility and the reason why a respite patient would be in a respite bed for nine years? Could we start with those questions first?

Ms KRISTINA KENEALLY: I would be more than happy to address the question of respite and the challenges that are sometimes faced with blocked bed situations. If there is a particular matter you would like to discuss with me, as I indicated in my opening statement I am more than happy to do that on a one-on-one basis about any particular client. The Government understands the importance of respite care for people who care for a person with a disability and we are working to expand on those services. That is why the Stronger Together strategy, our comprehensive 10-year plan, provides an additional \$62 million for respite places over the next five years.

The New South Wales Government has substantially increased funds for respite services for older people, people with a disability and their carers. The department funds or operates a range of

respite services and these include our in-home support, our flexible respite packages, host families, peer support and centre-based respite. Respite, of course, is also provided through our home and community care, disability, and older parent carers' respite. As well as directly providing services we fund more than \$66 million to non-government organisations to deliver disability respite services. Of those community-based services, 17 organisations are funded under the Stronger Together plan to provide additional centre-based and flexible respite places in 2006-07. Those were part of a competitive tender process.

The department operates 50 centre-based respite services, 238 respite beds in centres operated by the department and 920 funded centre-based respite services. From time to time due to a crisis or unexpected breakdown in support arrangements, centre-based respite beds become temporarily unavailable. When that occurs the department works with families to find alternative arrangements for the person with a disability. I can advise that at the end of July there were 42 people temporarily occupying a bed within the department's centre-based respite services.

The Hon. JOHN AJAKA: Minister, I appreciate that information, but my question is whether you are aware of a person being in a respite bed for nine years. If you are not, I am happy for you to take the question on notice.

Ms KRISTINA KENEALLY: Ms McAlpine will speak on that.

Ms McALPINE: Yes, we have one or two clients who have been in respite for extended periods. Clearly we are very keen to move them out of respite for their own benefit as well as for the families that would use the respite service.

The Hon. JOHN AJAKA: So there is one person who has been there for nine years?

Ms McALPINE: A person who has had extended stay in respite.

The Hon. JOHN AJAKA: Minister, when you talked about people being there on a temporary basis, longer than respite, do you take nine years as on a temporary basis? Is that part of your definition of "temporary"?

Ms McALPINE: May I respond?

The Hon. JOHN AJAKA: My question is to the Minister first. If the Minister cannot answer the question she can tell me so.

Ms KRISTINA KENEALLY: The department has committed to transition 26 individuals temporarily occupying a bed in our department to respite into permanent accommodation. This is one of the great strengths of our Stronger Together plan. This increase in funding, \$1.3 billion in funding, is making it possible for us to create supported accommodation places for people who need them, and some of those people will transition into long-term placement in a respite facility.

The Hon. JOHN AJAKA: So "temporary" and "nine years" seems to be the same thing to you, according to your answer. Is that what you are saying?

Ms KRISTINA KENEALLY: I did not hear myself say that to you.

The Hon. JOHN AJAKA: It is a simple question. You indicated that on occasions respite beds are used on a temporary basis until someone is relocated. Do you consider nine years to be temporary?

Ms KRISTINA KENEALLY: I consider that to be unfortunate, but what I consider to be most fortunate is that we now have the Stronger Together plan of \$1.3 billion. We are able to create—

The Hon. JOHN AJAKA: You are still not answering my question.

Ms KRISTINA KENEALLY: —additional supported accommodation places, and 1,400 new supported accommodation and in-home support places will be rolled out through Stronger

Together. That will enable us to significantly reduce the number of people who are blocking beds in respite. It is important to recognise that the Government has a plan for disability services, a plan for enhancing support services through supported accommodation and respite services. These are essential services that families rely on. In our Stronger Together plan, our component for strengthening families and supporting adults with disabilities to live in the community, we will be able to deliver on that.

We would be able to deliver even more supported accommodation and respite if the Federal Government was willing to take up our offer of \$428 million for a matching dollar-for-dollar agreement, a bilateral agreement for supported accommodation and respite. For Committee members who may not be aware, Minister Mal Brough put an offer on the table, matching dollar-for-dollar supported accommodation and respite-only bilaterals. It was not a time-limited offer, but he did rule out forward estimates. This meant that all of the money that the New South Wales Government committed—

CHAIR: Minister, I point out that we are here to examine that New South Wales budget. I know that there might be some points you wish to make otherwise, but please confine yourself to answers relating to the New South Wales budget at this time. Remember we are only just beginning questioning.

Ms KRISTINA KENEALLY: The question was about respite.

CHAIR: I ask you to answer the question, please.

Ms KRISTINA KENEALLY: I would like the opportunity to inject an additional \$428 million into the respite budget. That is entirely relevant to the question.

CHAIR: I ask you to keep your answers relevant to the question.

The Hon. JOHN AJAKA: My question was very specific. Minister, as of this moment you still have not answered the question. So I can assume you do not have an answer.

The Hon. GREG DONNELLY: Point of order: The Minister is entitled to answer the question in the way she sees fit. The Minister has provided an answer that may not be put in a way that the Hon. John Ajaka finds suitable, but badgering the Minister is out of order. As I said, she is entitled to answer the question as she sees fit.

The Hon. JOHN AJAKA: Madam Chair, I am not badgering the Minister. I have asked a specific question and I cannot get a specific answer.

The Hon. GREG DONNELLY: You are not getting the answer you want.

CHAIR: The Minister has not provided an answer that perhaps is suitable to the Hon. John Ajaka. The member should move on so we will not be in this situation.

Ms KRISTINA KENEALLY: As I indicated in my opening statement, if there are individual cases that members of the Committee would like to explore with me outside this hearing I am most happy to do it. I would like to obtain details of the individual referred to by the Hon. John Ajaka. I will find out the action taken by the department to resolve the issue, if he would provide me with the details outside this forum.

The Hon. JOHN AJAKA: What is the longest time someone has spent in respite that you are aware of?

Ms KRISTINA KENEALLY: That would be the longest that I am aware of.

The Hon. JOHN AJAKA: How many people have been in respite for over two years? Would you have a figure for that?

Ms KRISTINA KENEALLY: I will take that question on notice.

The Hon. JOHN AJAKA: How many people are waiting for respite beds? Do you have a list?

Ms McALPINE: Respite is a service that is booked for a period. About 1,700 families use DADAHC's direct respite services, and those bookings are taken for a three-month period. Most folks get respite. We would have to check to determine whether they get the exact amount that they want.

The Hon. JOHN AJAKA: Having beds blocked for extended periods, such as nine years, would have a grave impact on the availability of respite beds for those on the waiting list.

Ms McALPINE: We are aware that any blocked bed has an impact on families that want to use respite. We go to every effort we can to find alternative options to support families. People move out of blocked respite and a significant number will move out over the course of the next few months through the additional funding provided in Stronger Together.

The Hon. JOHN AJAKA: Minister, are you aware of how many DADAHC clients were taken to hospital, having been injured or physically harmed in DADAHC-managed supported accommodation and respite in the last 12 months?

Ms KRISTINA KENEALLY: I will take that question on notice.

The Hon. JOHN AJAKA: Given that 200 staff were investigated last year for abusing people with disabilities, are you aware of how many allegations of abuse were made over the past 12 months in accommodation support services, including supported accommodation, youth homes, large residential services and respite services?

Ms KRISTINA KENEALLY: The Department of Ageing, Disability and Home Care is committed to the delivery of quality services to the residents of its accommodation and respite services. Following the appointment of a new executive to the department in 2004, before I became Minister, a decision was made to conduct a review of the quality of client support and the serious incidents in departmental-operated accommodation and respite services. The purpose of the review was to establish baseline data and to identify any trends in the number of serious incidents involving staff and clients in accommodation services. It was also to identify environments that may pose the greatest risk to the department in the management and delivery of accommodation services and to identify any staffing and training gaps.

To achieve this, the department reviewed serious incidents reported to and investigated by its Ethics and Professional Standards Unit between May 2005 and February 2006; analysed serious incidents recorded on its client information system in 2004-05; and undertook a systematic review of 24 accommodation units using a modified form of the McKinsey 7S model business review framework. At the time of the review, approximately 2,600 clients were living in DADAHC group homes and large residential centres in New South Wales. These clients resided in 299 group homes at 10 sites with a total of 78 units classified as large residential centres. DADAHC also operated 42 centre-based respite services supporting more than 1,700 clients per annum. At the time of the review, approximately 3,600 full-time equivalent positions and up to 5,000 staff were employed against these positions within the department's accommodation and respite services. A total of 69—

The Hon. JOHN AJAKA: Point of order: Minister, my question was: How many allegations of abuse were made? I am just looking for a number, Minister.

Ms KRISTINA KENEALLY: It is important that any number I give is put into context against the total number of staff, the total number of clients and the period in which that number is derived. If you do not think that is information is important that is a really poor question.

The Hon. JOHN AJAKA: Minister, would you allow me to ask the questions as I understand that is my job and your job is to answer them?

Ms KRISTINA KENEALLY: I was attempting to do so when you interrupted me.

The Hon. JOHN AJAKA: My question was simple. How many allegations of abuse were made? If you do not have a number I am happy for you to take that question on notice.

Ms KRISTINA KENEALLY: I do have a number. I am attempting to put that number into context.

The Hon. GREG DONNELLY: Point of order: I return to the point I made earlier. The Hon. John Ajaka thinks it is appropriate to badger the Minister to get the answer that he wants. In reality he is entitled to ask a question but the Minister is entitled to in answer it in the way in which she sees fit.

The Hon. JOHN AJAKA: To the point of order. All members are aware that we have a limited time. This is an opportunity for us to ask the Minister questions and to obtain specific answers to those questions. This process is not designed simply to allow the Minister to take a pro forma answer that has been prepared and simply dance around the question—and I use that term with all due respect. It is a specific yes or no question or a number question. I am happy for the Minister to take that question on notice if she does not have a figure. I do not understand why that figure cannot be given. I do not believe it is for the Minister, in effect, to take over questioning simply by answering in the way in which she wants to, otherwise no purpose is served by us being here.

CHAIR: Order! I will rule on the point of order.

The Hon. GREG DONNELLY: Madam Chair, before you rule on the matter I would like to speak further to the point of order. The Hon. John Ajaka asserted that the Minister is dancing around the question. If I heard correctly, I clearly recall the Minister saying only moments ago that she had a specific number but, before providing that number, she wished to give some context to the matter, which I think is entirely appropriate. The issue is complex by its very nature, and I do not think that the giving of a bold figure is satisfactory. If the Minister wishes to give some context to the matter she is entitled to do so.

CHAIR: The Minister is here to answer questions. This is a good opportunity for the Minister to provide answers to specific questions that have been asked. In responding to those questions the Minister may answer them in the way in which she sees fit. However, the Hon. John Ajaka asked a succinct question which requires a succinct answer. I urge the Minister to respond by giving short and succinct answers. Members will therefore not be frustrated and proceedings will not become unpleasant. Succinct questions and answers will make for a better committee process.

The Hon. JOHN AJAKA: I am happy to repeat my question. Minister, would you please tell me in a number form how many allegations of abuse were made over the past 12 months?

Ms KRISTINA KENEALLY: In the context of approximately 2,600 clients and against the backdrop of approximately 3,600 full-time equivalent positions, in the last 12 months 81 new matters were reported to the Ethics and Professional Standards Unit and they were formally investigated and finalised. I stress that one incident of harm is one incident too many. The review which I was attempting to explain—and I would be happy to talk further about the critical incident review—provided the department with a great deal of information about how we could work harder to drive down these numbers. We have taken up a number of the recommendations made by that review. Unfortunately, the Hon. John Ajaka does not seem to be interested in the review, so I will stop my answer there and not outline the positive steps that the department has taken.

The Hon. JOHN AJAKA: Thank you, Minister. I am more interested in receiving answers to my questions. You can appreciate that we have many questions. If you would simply allow me that indulgence I would be grateful. Minister, in investigating complaints or matters have independent consultants been utilised outside the New South Wales Police Force?

Ms KRISTINA KENEALLY: Yes.

The Hon. JOHN AJAKA: Do you know how many consultants have been utilised?

Ms KRISTINA KENEALLY: No, I would have to take that question on notice.

The Hon. JOHN AJAKA: How much has been paid to these consultants? I am happy for you to take that question on notice.

Ms KRISTINA KENEALLY: I can provide that information to you on notice.

The Hon. JOHN AJAKA: Would one of those consultants be David Madden, a former Assistant Commissioner?

Ms KRISTINA KENEALLY: Yes.

The Hon. JOHN AJAKA: Is there a reason to involve someone such as a former Assistant Commissioner of Police as opposed simply to utilising all the resources of the New South Wales Police Force?

Ms McALPINE: When an allegation of a criminal nature is made to us it is referred to the police. Other allegations are made that are not of a criminal nature and we would use a range of investigators to investigate them. He is used in that context.

The Hon. JOHN AJAKA: David Madden was never used in relation to any complaints about criminal matters?

Ms McALPINE: No, not to my knowledge.

CHAIR: On what basis do you hire consultants to deal with complaints of abuse? What sorts of incidents are you talking about?

Ms McALPINE: There are a range of issues. They might constitute neglect, failure of duty of care, lack of supervision, on occasions physical assault. There is a range of things that might be involved.

CHAIR: Some of those are criminal matters. Why do you not refer those matters to the New South Wales police?

Ms McALPINE: Where are they of a criminal nature they are referred to the police. For example, a duty of care issue might be around a medication error. So, giving their medication at the wrong time, that would not be referred to the police.

CHAIR: But what about assault?

Ms McALPINE: The issue with assault, if it is a forceful or real assault on a client, then yes, that would be investigated. If it is trying to restrain someone who is about to hurt themselves or others, then there is a fine line there of what is actually assault but what is in the interest of the client and other clients to prevent injury.

CHAIR: Minister, former Deputy Police Commissioner Dave Madden is a pretty experienced former policeman; that is pretty high-powered consultancy I would have thought for non-criminal matters. Why have you sought to use him as a consultant if there is no problem with these issues?

Ms McALPINE: He is one of a range of consultants that are used.

The Hon. JOHN AJAKA: But what area is he actually dealing with, if not in relation to police matters?

The Hon. GREG DONNELLY: Madam Chair, is it not time that we move on?

CHAIR: Perhaps if the Minister answers that question and we will adjust the time.

Ms McALPINE: If I can answer that. I would have to get back for you on notice with the nature of the particular investigations he has done.

Ms LEE RHIANNON: Minister, do you have an involvement in the disability access audit of Parliament House?

Ms KRISTINA KENEALLY: I am not aware that the Department of Ageing and Disability and Home Care has had any involvement with that audit.

Ms LEE RHIANNON: So is that a definite no or do you need to take it on notice because I actually have a number of questions about it as it has been going on for a long time?

Ms KRISTINA KENEALLY: I would need to take that on notice. I am not aware that we have had any involvement in that audit.

Ms LEE RHIANNON: So you will take that on notice?

Ms KRISTINA KENEALLY: Yes.

Ms LEE RHIANNON: Why has the Government not released the program of appliances for disabled people review considering it was finalised, I think, in March 2006?

Ms KRISTINA KENEALLY: That question would be better directed to the Minister for Health as the program for assistance for people with disabilities falls under her portfolio.

Ms LEE RHIANNON: I want to ask some questions about carers. We are all aware of the enormous contribution that carers make, and you and the Premier have made some fine statements many times about their contribution. Will the Government commit to investigating adequate remuneration for carers similar to a basic wage, including the possibility of superannuation after the age of 65?

Ms KRISTINA KENEALLY: I am sorry, could you repeat that question? I apologise.

Ms LEE RHIANNON: Will the Government investigate adequate remuneration for carers similar to a basic wage, including the possibility of superannuation after the age of 65?

Ms KRISTINA KENEALLY: The members of the Committee most likely would be aware that the issue of payments to carers in the forms of pension or otherwise are the responsibility of the Commonwealth Government.

Ms LEE RHIANNON: I am aware of that, but I am actually trying to find out the Government's attitude on this issue, considering we hear talk from yourself and the Premier about the enormous services to our community by the 750,000 carers who do the work day in and day out and we need a vision for how we can maintain assistance for these people. Do you have a view on the need for improved remuneration for carers?

Ms KRISTINA KENEALLY: I have a view on what my department, I and this Government can deliver to support carers, and what is within the range of the State Government's ability to support carers. What we do is provide respite. We have a carers' action plan, which is administered through Health. We have through our Stronger Together plan put in place many supports—family support, family services, increased respite places, increased respite places to the older parent carers program—that will support carers. We also are working hard to incorporate carers' views into public policy development and I have met with peak carers' organisations. I must say that in those meetings though those peak groups, those carers, have not raised the question that you are raising with me, and I would suggest that it is most likely because it is a Commonwealth responsibility.

Ms LEE RHIANNON: I am interested about targeted interventions. Why has the Department of Ageing Disability and Home Care implemented a regressive policy of short-term referrals or targeted interventions for early intervention and school-age children who clearly have ongoing high needs?

Ms MILLS: If I could answer that, Ms Rhiannon. The department has a significant growing investment in early intervention with a particular focus on assistance for young children. We have a range of different services that we provide directly to the children and also the family and carers' support about which the Minister just spoke. They are not time-limited in the sense of an automatic ending. We have a number of ways in which we assist people. Some of our programs are deliberately time limited, such as the intensive family support program, because the nature of the program is best served by a short, sharp intervention that develops sustainable outcomes for families that is then acted upon through different programs. I think the critical issue is that we have a continuity for services but they may move through different programs depending on the needs of the client or their aims.

Ms LEE RHIANNON: You talk about continuity of services, but would you not agree that families no longer have certainty about current and future service delivery; that there has been a shift there? Are you not finding that there is criticism coming forward because of that?

Ms MILLS: Well, actually I would probably say to the contrary. We have established in the past 12 months a children's and family expert advisory group, which contains both academic, peak body and carer representatives with expertise in this area who are overseeing the implementation of our new early intervention children's programs. We have actually had a very positive response from a range of different organisations to the new initiatives. That includes organisations like the Association of Child Welfare Agencies, Autism Spectrum Australia—Aspect—and others. So, we have significant new investment going in. I think one of the biggest shifts we have achieved is that our focus is on family support and family strengthening as well as just for an individual child with a disability. I would actually question the view that we are actually shortening those services.

Ms LEE RHIANNON: You say that it has been welcomed, but I am just wondering if it has been welcomed from all groupings that need to access these services. I understand that you have replaced ongoing early intervention and school-age services with short-term fragmented services for children and they are all together now. So, there are some people who have children at school and requiring a range of services who are not so happy about the new framework. Do you agree with that?

Ms MILLS: I do not think it is a product of the new framework, perhaps. One of the issues for us is in differentiating the services that the Department of Ageing and Disability and Home Care directly provides versus those that we fund through non-government organisations and that we also work with Health and Education on. When children reach school age, in terms of receiving direct department services, it has been a long-standing policy that if those children do not have an intellectual disability, they do not receive direct departmental services but receive them from our funded organisations or the education department. But that is not a new policy.

Ms LEE RHIANNON: I refer now to respite packages funded by non-government organisations. I am referring particularly to what are called the flexible packages. It seems as though flexibility has largely disappeared from many of these packages, and that there are certain requirements on how they work and what they provide whereas we know for carers in these situations that flexibility often is what allows them to be able to cope. I am interested in your view on that. Do you think that it is misleading to allow those non-government organisations to present these packages as flexible when in fact they are quite rigid?

Mr MILLS: Again, if I might perhaps question some of that. Certainly, there are respite packages provided under flexible respite through both the Home and Community Care Program and the Disability Services Program. We conducted a review around about 15 months ago of Home and Community Care Program respite services. At that time a very preliminary draft policy was circulated for feedback where a number of stakeholders provided advice that the impact restricted the flexibility of the packages more than was presently available. We took that advice on board and changed the respite packages under the Home and Community Care Program to increase their flexibility. We also have a number of new programs rolling out during 2006-2007/08 under the disability program, under Stronger Together, which we believe actually will strengthen the flexibility and rights of individual carers to make determinations on the best use of the service.

Ms LEE RHIANNON: I am still with the so-called flexible respite program. Could you explain how you monitor the non-government organisations to ensure that they are delivered in a way that you argue is flexible?

Ms MILLS: We have, I guess, two streams of monitoring for non-government organisations. One is generic to the range of services that they provide. We have a standard monitoring system called the integrated monitoring framework, which was introduced two years ago. Within that we also have a second tier which is a specific set of outputs and conditions that are attached to each individual program and they are monitored at a program level as well as at an individual service provider level.

Ms LEE RHIANNON: I hear what you are saying and it sounds as though it is all working okay, but when you read a lot of the material, it seems to be not as flexible. They use terms such as regular and planned. I still think that there is a contradiction there. But do you agree that some of these non-government organisations are not allowing families and carers to use the agency or carer of their choice?

Ms MILLS: I cannot comment on that specifically other than to say we are working very hard on each of the program areas, particularly the new programs that have been initiated in the last two years under the Children and Family Funding Program, to strengthen our monitoring systems and to have a much greater focus on client input. We are now introducing things such as client satisfaction surveys and feedback on a regular basis so that we can determine, I suppose, the truth in those sorts of suggestions and the extent to which they may be accurate as opposed to isolated cases that could be dealt with through individual discussion around a client.

Ms LEE RHIANNON: How does that impact when these non-government organisations come around for funding again? Have you in fact found that they have been inflexible and that the carers have been limited or stopped in accessing programs from other agencies? How would that impact on their funding?

Ms MILLS: We have a number of steps in place through our monitoring framework that formalises the contractual obligations of the service providers and the way in which we take into account their performance in the allocation of future contracts. There are two steps, I suppose, in the cases that you are speaking about. One is a continuation of an existing contract where we obviously, close to the termination period, make a joint decision about the appropriateness of extending their contract, based on a range of factors including performance, price, and the ability of the organisation to continue delivery. For new contracts we have introduced in the last 18 months a fairly robust tendering process. Included as part of that process is the evidence drawn from the integrated monitoring framework against their performance for other program areas as well as any that relate directly to the new initiative. Also we take on board regional reports which provide detailed advice to the tender panels about performance of organisations.

Ms LEE RHIANNON: Minister, you are satisfied that the Department of Ageing, Disability and Home Care has sufficient funding for the early intervention and school-age therapists?

Ms KRISTINA KENEALLY: Through our Stronger Together Program, we are increasing funding to that office. We are rolling out new therapy places which are essential to families to support children in particular. I think we all recognise—

Ms LEE RHIANNON: Minister, can you answer the question in the context of the waiting lists because I understand the waiting lists, particularly in regional areas, are extremely long.

Ms KRISTINA KENEALLY: What I can advise to you is that in 2006-07 the initial allocation of growth funds for therapy in Stronger Together was released. Last year new funding was provided to the non-government sector for an additional 600 new therapy places over 18 months for both children and adults with a disability. Over the year this will result in over 400 additional therapy places in the service system. Just over half these funds were allocated to the Spastic Centre, with smaller amounts being allocated to Northcott and other local community-based services. In addition to investing in the non-government organisation sector, the department has also funded nine new senior psychologists as well as additional therapists on its community support team.

Ms LEE RHIANNON: Do you have any information about the waiting lists—what size they are, if they are coming down, and the impact on them, please?

Ms KRISTINA KENEALLY: We will take that on notice.

Ms LEE RHIANNON: The Ombudsman report of 2004 covers much of your work.

Ms KRISTINA KENEALLY: Yes.

Ms LEE RHIANNON: Why have not all the recommendations being implemented?

Ms KRISTINA KENEALLY: Ms Rhiannon, if you could clarify which report?

Ms LEE RHIANNON: I understand there was only one out in 2004. I did not think there was another one.

Ms KRISTINA KENEALLY: Are you referring to the children's report?

Ms LEE RHIANNON: Yes.

Ms KRISTINA KENEALLY: Okay.

Ms LEE RHIANNON: My question is just about the recommendations. We are three years away from that now. Why have not all of them been implemented?

Ms KRISTINA KENEALLY: The Department of Ageing, Disability and Home Care did respond to the report and completed several significant projects, including developing new policies and procedures and training for staff working with children and with young people. Two years after reviewing that, the progress on an action plan for improving services for children and young people, the Ombudsman stated in 2006 that systems to support quality service provision are now in place and the department has made a commitment to continue its improvement.

Ms LEE RHIANNON: Do I conclude from that statement that you believe the department has implemented all recommendations?

Ms KRISTINA KENEALLY: I believe we have met many of the Ombudsman's concerns. If there are some of the recommendations—which recommendations in particular are you concerned about?

Ms LEE RHIANNON: I was looking for that information from you. Obviously I do not have the resources that a Minister can draw on. I am trying to find out what recommendations have not been responded to and what your plans are about those.

Ms MILLS: I will have to take the specifics on notice, but I can say that we developed a very comprehensive action plan against each of the recommendations that was submitted to the Ombudsman in November 2005 and was endorsed by the Ombudsman as an appropriate response to the report. It is against that that we have since been monitored and that relates to the comments that the Minister cited a few minutes ago.

Ms LEE RHIANNON: If you could take that on notice in areas where you see that you have not fulfilled what the Ombudsman said. I notice, Minister, that you gave a positive quote from the Ombudsman, but I did also notice that the Ombudsman stated that "families should have certainty about current and future service delivery", which suggests that there has not been. That is why I am just trying to get an assessment of the recommendations.

Ms KRISTINA KENEALLY: On that very point, I can advise you that I often say that the third plank of Stronger Together—there are three planks for brief review: strengthening families, community inclusions for adults with a disability, and strengthening our service system—is the less sexy part of the plan. It is the one that most people do not read in full. I advise Committee members to have a good look at that section of the plan because I think that part of the Stronger Together plan

goes a long way towards addressing the concern of the Ombudsman. It is about providing a fairer, more accessible service system with clear entry and exit points to provide the sort of predictability and clear understanding of the service system to families. I refer you to that section of the Stronger Together plan.

Ms LEE RHIANNON: During the State election campaign I understand that the Government promised 450 new respite places and 960 new therapy places for children and young people with disabilities. How is this progressing? I am particularly interested in the location of these new services, whether they have been delivered or what your timeline for delivery is.

Ms KRISTINA KENEALLY: In terms of respite, we would have exceeded that commitment. We have delivered more than 1,000 new respite places since the introduction of Stronger Together. That does not include the 790 respite places that we have delivered under the Older Parent Carer Program, which is funded jointly by the State Government and the Commonwealth. In addition, we are meeting all our commitments to therapy places under Stronger Together. I refer you to Stronger Together for the details of the number of places. In terms of the rollout—the location—of those places, that information was announced when those places were awarded through competitive tendering. However, I am happy to take that question on notice and provide that information to you directly.

Ms LEE RHIANNON: Thank you, Minister.

The Hon. CHRISTINE ROBERTSON: Minister, could you please tell us what the Government is doing to improve access to culturally sensitive services for Aboriginal and Torres Strait Islander persons?

Ms KRISTINA KENEALLY: The Iemma Government recognises that Aboriginal people have historically faced barriers in accessing services, and therefore we have prioritised the needs of these communities in our New South Wales State Plan as well as in our Two Ways Together plan. In 2006-07 the Department of Ageing, Disability and Home Care continued to incorporate the needs of Aboriginal people in planning processes and to develop both general and targeted programs to respond to these needs. As Minister, I have taken the time to meet in my office as well as to visit Aboriginal disability peak groups and services.

In Disability Services, the department has strengthened purchasing processes, particularly in family and children's services, to require that tenderers for new services demonstrate their capacity to meet the needs of Aboriginal clients as part of a mainstream provision. The needs of Aboriginal people are addressed in Stronger Together as well as in Better Together, which is the whole-of-government plan on disability. Stronger Together focuses on improving Aboriginal access to mainstream community support and accommodation services as well as enhancing our specialist services. I can advise you that a number of Aboriginal specialist services have been established in a range of new program areas. One of the most exciting I believe is the Aboriginal Intensive Family Support Program that will provide a short, intensive and flexible in-home service. By working in an intensive way with families at a risk of breakdown the goal is to reduce the need to remove children from their home environment, to coordinate ongoing supports and to provide positive experiences for the child. The Aboriginal Intensive Family Support Program is currently being delivered in Dubbo and in the Kempsey and Taree area. A third service will open in Moree later this year.

The Leaving Care Program is also helping young people aged 18 and over with a disability to make the transition from the care of the Minister for Community Services and to avoid the potential for them to end up on the streets or to get in trouble with the law. Again, a number of services have been identified to provide Aboriginal-specific services that will ensure that the most culturally appropriate assistance is provided to young people and their families during what can be a difficult period of adjustment. Aboriginal people are also a priority group with the Home and Community Care Program. The number of Aboriginal people receiving home and community care services increased by 30 per cent in 2006-07. The largest provider of home and community care services to Aboriginal people is the Department of Ageing, Disability and Home Care, and this year I was quite proud as Minister to help Aboriginal Home Care celebrate its twenty-fifth year of operation. Aboriginal Home Care branches and outlets are located across New South Wales, with many in rural and regional areas. They provide a range of flexible and responsive programs to local communities.

During the last financial year 2,448 people in Aboriginal communities received assistance from home care, consisting of 236,000 service hours, 759 trips and 7,631 meals. The home care Aboriginal assessment framework was also developed and implemented in the last financial year. That is part of our ongoing improvements to make support services more accessible for the frail aged and young people with a disability in indigenous communities. The framework creates a centralised intake and assessment team to conduct culturally responsive, high-quality and consistent assessments. The new team covers the whole of New South Wales and the staff are based in metropolitan areas as well as Nowra, Tamworth, Dubbo, Orange, Condobolin and Wagga Wagga. This means that assessment for Aboriginal people can be undertaken face-to-face in their own home by trained Aboriginal assessors.

Better Together, which we have not spoken about very much yet, emphasises the fundamental principle of working with Aboriginal communities in interagency partnerships to strengthen the services we provide. The Aboriginal policy framework and the Aboriginal consultation strategy—that is, consulting effectively with Aboriginal people and communities—have been implemented to improve the capacity of the department to consult. The department has also maintained and strengthened the representation of Aboriginal people on key advisory bodies, including the Ministerial Advisory Committee on Ageing and the new Home and Community Care Advisory Committee.

Finally, the capacity of the funded disability support sector to work with Aboriginal communities and to promote their services in a way that builds trust with Aboriginal people is an ongoing challenge. The department has contacted National Disability Services to develop practical resources to assist the disability sector to provide access to services to people from Aboriginal backgrounds through engagement with these Aboriginal communities and families. Funding of more than \$200,000 has been provided for a two-year pilot project. National Disability Services will form a consultative committee of key Aboriginal disability non-government organisations, non-Aboriginal non-government organisations and the department to support the project. The department consults regularly with the New South Wales Aboriginal Community Care Gathering Committee following its successful conference, *Leading Our Way in Community Care*, which was held in Dubbo in June 2006 with the department's support.

The department has also provided \$150,000 to People With Disability New South Wales to auspice the New South Wales Aboriginal Disability Network to assist in identifying the key issues and challenges facing Aboriginal people with a disability. The project has been extended for a period of six months to ensure that consultation and report outcomes can be addressed sufficiently. Recurrent funding of more than \$100,000 is provided to the New South Wales Aboriginal Legal Service for the auspice of the Indigenous Disability Advocacy Service, and a one-off grant of \$150,000 was also provided to the Indigenous Disability Advocacy Service to develop a range of information resources and fact sheets specifically for Aboriginal communities.

In addition to home and community care services, the department continues to focus on the needs of older Aboriginal people through innovative projects undertaken by the Office for Ageing. In 2006-07 the department allocated \$97,000 from the Home and Community Care Program for a project on planning for later life for Aboriginal and Torres Strait Islander people. The project included a research component on the needs of Aboriginal communities and service providers regarding planning ahead, a literature review, and consultation with peak Aboriginal organisations and those involved in aged care and legal services.

The project produced *Taking Care of Business: Planning Ahead in Aboriginal and Torres Strait Islander Communities*, a community resource booklet, a booklet for service providers and an accompanying DVD. In 2006-07 the department also provided funding to Campbelltown City Council of \$170,000 for an intergenerational project with older Aboriginal men and women in Campbelltown. The first part of this project was the production of life stories of Aboriginal women—it was an incredibly moving project and I encourage Committee members to read the publication—which was launched in August 2007. The New South Wales Government is demonstrating its commitment to meeting the needs of Aboriginal and Torres Strait Islander people with a disability, and their families and carers, through all these initiatives as well as through the Stronger Together Program.

The Hon. TONY CATANZARITI: What is the Government doing to address the issues facing the current and future needs of an ageing population?

Ms KRISTINA KENEALLY: It is good to get a question on ageing. The Iemma Government recognises the valuable contribution that older people make to their communities and older people currently make up over 13 per cent of the New South Wales population. The Government does provide support to our seniors in a number of ways, including at home with personal care, domestic support, meals and home maintenance; through respite services, community transport, community nursing and allied health services; concessions on many services for older people living on the aged pension, including concessions for rates, water, gas, electricity, telephone and mobility concessions such as free vehicle registration and driver's licence fees. We promote active ageing through Seniors Week and the Seniors Card. We raise community awareness about issues that affect older people. In providing this support, the Iemma Government maintains a strong commitment to the wellbeing of older people and helping them to enjoy good health, security, meaningful and productive lives.

The New South Wales government agencies are actively responding to the ageing of our population and the specific needs of older people with ageing related strategies and initiatives having been integrated into plans and programs across 22 government departments. The Office for Ageing, which is in the Department of Ageing, Disability and Home Care, is implementing cross-agency initiatives on important issues, such as the mature workforce, older people in disadvantaged communities, responding to the abuse of older people and supporting people with dementia and their carers.

The ageing grants program currently supports a range of services and projects meeting the needs of older people in New South Wales and these include peak bodies in the ageing field and early intervention referral services. Peak bodies receiving funding include the Council on the Ageing (New South Wales) and the Combined Pensioners and Superannuants Association of New South Wales. Over \$5.5 million was allocated to the ageing program in this financial year and that ageing program again includes core elements of the State's dementia program. As I said in my opening statement, the third New South Wales dementia action plan will be released shortly and over \$2.6 million is allocated for the dementia strategy in this financial year.

The Government is keen to build on its commitment to long-term strategic planning in New South Wales, not only by looking to address issues facing older people today, but by taking a forward approach and preparing for the impacts of population ageing into the future. We are expecting a dramatic change in New South Wales in the coming decades with the number of people over 65 to more than double by 2031. At the end of this month the Iemma Government will be convening Ageing 2030 and that will be, as I said in my opening statement, future-focused roundtable and will bring up eminent decision-makers and experts to look at the impacts of population ageing on New South Wales. Ageing 2030 will also inform the Government's whole of government ageing strategy, which is currently under development, and it will help us respond to the challenges and opportunities associated with an ageing population.

It is important to recognise that population ageing is not just an issue for the Government; it is an issue that affects all sectors of society, the community sector and the business sector in particular. There will be future implications on our infrastructure, on our services including transport, health, community care and housing, all of which will need to be responsive and to adapt to the needs of a large and growing group of older people. Consumers and members of the public will also be represented at Ageing 2030 by a range of peak organisations and key decision-makers, and experts from government, community, business and academia will come together to determine the longer-term policy and service issues.

Some of the topics we will discuss at Ageing 2030 include the future impact of population ageing on social and economic engagement, technological change into the future and how technology will change the way we live, and the changing labour market and what the population ageing means for the workplace. In the lead up to Ageing 2030 a number of public consultations were held around the State. This was to ensure that all members of the community had the opportunity to put their views forward.

It was also important to go to regional and rural parts of New South Wales as population ageing will be a particularly acute issue outside of metropolitan Sydney and the consultations were hosted by the Ministerial Advisory Council on Ageing and they were held in Queanbeyan, Coffs Harbour, Central Coast and Parramatta. I did attend all of these consultations. There was also a consultation held here in Parliament for members of Parliament specifically and I would like to take the opportunity to thank everyone who participated in those consultations. Ageing 2030 demonstrates that the Iemma Government is committed to working hard now and into the future to improve services that support older people.

The Hon. GREG DONNELLY: Minister, can you please advise what measures the Government will undertake to address the needs of families with children diagnosed with autism spectrum disorder?

Ms KRISTINA KENEALLY: The Iemma Government is committed to improving services to children with disability, including those with autism, and their families. We know that families with children with behaviour disorders and autism want and need more long-term health and practical solutions. The number of children diagnosed with autism does continue to rise and we now face the challenge of how to best support these children and their families. Through Stronger Together extra funding over the first five years to improve services for people with a disability and their families, we are committed to providing a comprehensive range of services for children with a disability.

This financial year the department will provide more than \$3 million to Aspect, a non-government organisation that provides a wide range of services specifically for people with autism, including information and advice for families on all aspects of autism spectrum disorder. The Government has also provided an additional \$2 million to Aspect for a pilot project entitled Coordinated Access to Services and Support to be used for case management and brokerage services for adolescents aged 12 to 18 years with a diagnosis of autism spectrum disorder or autism-related behaviours and who are at high risk of early exit from school. In March 2007 the Government approved allocation of a further \$45,000 to Aspect for 20 additional places in the Building Blocks Early Intervention Program. In August 2007 the Premier announced a grant of \$300,000 to Aspect to expand its early identification and assessment program for young children with autism spectrum disorder. This program will benefit more than 270 families in rural and regional New South Wales.

As part of supporting families to care for a child with autism, an innovative information kit is being prepared. In 2006-07 Aspect received additional funding totalling \$185,000 to develop an information kit specifically targeted at supporting families with a child with autism. It will include information to assist families to access early intervention options, support services and management techniques immediately following diagnosis. It will also provide an overview of autism spectrum disorders, early indicators and a diagnostic process in response to questions typically asked by parents. The kit will consist of a DVD and a manual and is expected to be completed and launched by the end of 2007. The DVD will be translated into seven community languages. We are also producing information kits for Aboriginal and culturally linguistically diverse families who have a child with a disability, including autism, as well as information for families around key transition points for a child or a young person with a disability.

The Iemma Government is determined that children with autism and their families do not fall through the cracks. We know that without access to new and expanded services these children could experience significant social and economic problems in the future. While I do welcome recent announcements by the Federal Government and the Federal Opposition, I must continue to encourage the Howard Government to take up the States' and Territories' offer for additional funding under the Commonwealth State Territory Disability Agreement. I am concerned that what the Prime Minister has offered in terms of autism will set up a duplicate service system that will waste resources and will only provide confusion to families and to service providers.

The Iemma Government through Stronger Together will provide more long-term help and practical solutions to children with autism and their families, but we would like to take all levels of government with us and we would like especially to encourage the Commonwealth to take up our offer of \$3.4 billion for the next round of the Commonwealth State Territory Disability Agreement thereby ensuring that services to children with autism and their families is delivered through the Commonwealth State Territory Disability Agreement and not through a duplicate service system.

The Hon. CHRISTINE ROBERTSON: What is the Government doing to improve services and support for carers and people with a disability?

Ms KRISTINA KENEALLY: Last week was Carers Week, and we heard many stories about the difficulties faced by carers. No doubt caring for a family member is immensely rewarding but also immensely challenging. That is why the New South Wales Government funds a range of services to support carers. The services we provide include respite, domestic assistance, personal care, case management, therapy, post-school programs, counselling and information services. These services are relied upon by carers to support them in their caring role and to support their wellbeing and the independence of the older person and the person with a disability for whom they are caring.

Briefly, the New South Wales carers action plan was announced in February 2007, along with the release of Better Together, the Government's plan to make government services work better for people with a disability and their families. Since its release, the Department of Ageing, Disability and Home Care has commenced the development of its own carers action plan which is due to be completed in December 2007. Carers in New South Wales will be better supported in their caring role through expanded services for families with a child with a disability, particularly through respite, therapy and parenting support services, and a more diverse range of supports for adults with a disability, in particular expanded post-school programs, day programs, respite, therapy and behaviour support services. These services have already been rolling out this year.

The New South Wales carers program provides additional services for carers. With an investment of more than \$5 million a year, the program strengthens existing measures to support carers and promotes broader community support for carers. These projects have included community awareness activities and support for annual Carers Week, research into carers and employment, a training strategy for community care service providers working effectively with carers and ongoing funding for the innovative New South Wales young carers project. Finally, in May 2006 the New South Wales and Australian governments signed a bilateral agreement for the provision of additional respite services for ageing parent carers of sons and daughters with a disability. The respite provides a real support to older parent carers. This is a joint initiative that will see more than \$48 million being made available over three years for additional services.

The Hon. JOHN AJAKA: Earlier it was indicated that 200 staff had been investigated last year, and you indicated that there were 81 new allegations. What was the general nature of those allegations?

Ms KRISTINA KENEALLY: I can advise you that 22 were for a breach of a policy and procedure; 11 were client mistreatment, that is, inappropriate physical contact; one was client mistreatment and neglect of care; nine were client mistreatment and neglect, supervision; one was unauthorised restricted practice; two were verbal and emotional; two were of fraud using a credit card; one was information technology, excessive personal use of an information technology; and two were to obtain a financial benefit from a client.

The Hon. JOHN AJAKA: In relation to the 200 staff investigated, can you indicate the cost of backfilling the staff due to investigations?

Ms KRISTINA KENEALLY: The costs of backfilling permanent staff the subject of complaints who were either suspended or redirected to alternate duties in 2006-07 was approximately \$354,766; and since July 2007, approximately \$66,400. These figures do not include the costs for backfilling casual or temporary staff or home care staff.

The Hon. JOHN AJAKA: Back to the issue of respite, can you indicate how many people applied for respite accommodation and how many missed out?

Ms KRISTINA KENEALLY: No. We need to take that question on notice.

CHAIR: We are all aware that Weemala has been in the media extensively over the past few months. Can you tell us what you are doing to provide a funding package for Braden Moore, who is dependent on rehabilitation at Weemala?

Ms KRISTINA KENEALLY: I indicated at the beginning that I was not willing to discuss individual cases. However, I am aware that Mr Moore's case has been canvassed widely on the radio, and I am happy to advise this Committee of his particular circumstance. I shall give a little context. There are 10 clients at Weemala who are funded by the Department of Ageing, Disability and Home Care; the remainder of the clients are funded by New South Wales Health. Some of those parents had come to me earlier this year—from memory, in June—to express their concerns about the Royal Rehabilitation Centre's redevelopment process. I took up those concerns directly with the chief executive officer. I also had discussions with the Minister for Planning and the Minister for Health, and I am pleased that we have reached a stage where the Royal Rehabilitation Centre is consulting with families and is working better with those families to ensure appropriate outcomes for the current clients at Weemala.

I am advised that Mr Moore is a client in a unique position in that he is the only client who is partially funded by both the Department of Ageing, Disability and Home Care and New South Wales Health. I am advised that we have reached a resolution to Mr Moore's ongoing care. However, the funding arrangements would be a question for New South Wales Health as I understand the concerns that his parents had were that he have the ability to stay on in a rehabilitation program at the Royal Rehabilitation Centre. That would need to be provided through New South Wales Health. My understanding as of Friday is that that had been resolved, that that was moving forward. Questions on the actual details of the funding and future care would need to be put to the health Minister.

CHAIR: Have you had discussions with the health Minister about that? When you talk about a resolution, is Mr Moore's family happy with that resolution?

Ms KRISTINA KENEALLY: I received an email from Mr Moore's father as recently as last night and he was responding quite positively to my most recent letter to him. I understand that officials from Health and the Department of Ageing, Disability and Home Care, the Royal Rehabilitation Centre and the Moore family have been in discussions about how to progress his future care.

CHAIR: You said that you had discussions with the Minister for Planning, Frank Sartor, and the Minister for Health in relation to Weemala. What was stated at those meetings, and what was your position and their position in relation to Weemala?

Ms KRISTINA KENEALLY: There was general concern that the Royal Rehabilitation Centre had not consulted fully enough with families. It is a concern that has been canvassed widely in public media and statements that I have made. I am happy that it seems to be moving forward. I can advise you that all 10 Department of Ageing, Disability and Home Care clients have been assessed and the department continues to monitor the progress of their future placement.

CHAIR: In terms of the Royal Rehabilitation Centre at Ryde, are you prepared to fund the Slow to Recover Program and unit as part of that redevelopment?

Ms KRISTINA KENEALLY: A Slow to Recover Program would come under New South Wales Health.

CHAIR: That is for those with an acquired brain injury?

Ms KRISTINA KENEALLY: That is correct.

CHAIR: Have you had discussions with the Minister for Health about funding such a program?

Ms KRISTINA KENEALLY: To date I have had discussions about the particular case of Grayden Moore. I believe Ms Mills would like to add something to that.

Ms MILLS: There is a joint working party involving NSW Health, the Department of Ageing, Disability and Home Care and some individual experts, including representatives from the acquired brain injury peak body and others, who are working on a number of projects for people with acquired brain injury, that have either joint responsibility or have potential for new responsibilities,

and that includes looking at options for longer-term and slow-to-recover programs. It is not yet at a position of reporting, but it is a work plan and these sorts of issues have been canvassed under that work plan.

CHAIR: When do you expect an outcome from those discussions?

Ms MILLS: The first stage of the work plan is exploring potential models and that will report to the working group before the end of the year. Out of that range of options further work will be conducted in 2008.

CHAIR: What is your plan for an outcome?

Ms MILLS: It very much depends on what models come forward. The issue around the Slow to Recover plan is quite complex, it is a very new medically understood model. One of the cases discussed by an expert in the field at the first meeting with a working group talked about an individual who was under assistance for 10 years. The majority of services took around a two-year timeframe so we are exploring, firstly, the quantum of support that might be required by getting a very detailed analysis from the various hospitals and acquired brain injury units and the peak bodies on what kind of clients we are talking about, what their service needs and the type of interventions that would be most suitable. As the Minister indicated, the principal responsibility for any sort of recuperative or rehabilitation program rests with the Health portfolio.

The Hon. JOHN AJAKA: What are your plans regarding devolution? Is the Government caving in on devolution?

Ms KRISTINA KENEALLY: What a cheeky question!

The Hon. JOHN AJAKA: I am new at this.

Ms KRISTINA KENEALLY: Mr Ajaka has just advised us that he is new at this, so I can advise him that the closure of Ryde Residential Centre was programmed and commenced in 2000 and resulted in 313 people moving into community-based accommodation options. This led to the closure of 11 large residences, eight of which were operated by the department and the remainder were operated by the non-government sector. Stronger Together does contain a number of models and initiatives, supported by significant investment, to provide more appropriate care for residents living in large residential centres.

The centres include two specially designed 10-bed houses for adults with complex health-care needs and two five-bed homes for respite for people with complex health-care needs, of which one would be specifically for children. These will be built at the Grosvenor Centre site at Summer Hill. The development is a village-style accommodation, specialising in aged care for 100 older people with an intellectual disability on the Central Coast. That new accommodation will replace the current Peat Island facility. There is also the redevelopment of the Lachlan Centre in North Ryde into small village accommodation to provide specialist services to people with significant challenging behaviours.

The Stronger Together strategy contains also a commitment to the closure of large residential centres. Over time some residences may need to be redeveloped to provide specialist support to people with complex needs. The department is developing two tender specifications that plan for the redevelopment of department-operated and non-government-operated residential centres. These specifications will be put out to tender in late 2007.

The Hon. JOHN AJAKA: Minister, you indicated that you are working on the closure of the larger institutions. I understand that in 1998 the Government promised to close all institutions by 2008. How many have actually closed and when will the balance be closed?

Ms KRISTINA KENEALLY: At the beginning of my answer I did indicate how many had closed.

The Hon. JOHN AJAKA: And the balance?

Ms KRISTINA KENEALLY: Stronger Together does maintain the Government's commitment to the closure of large residential centres over time. We currently support nearly 1,200 people in 10 large residential centres and a further 520 people are accommodated in 23 non-government large residential centres across New South Wales. We have been quite concerned to ensure that the process of devolution does not cause unnecessary stress or concern to clients or to their families. Yes, the commitment to devolution remains a key feature of Stronger Together. If you look at the balance of the supported accommodation tenders and projects that are initiated under Stronger Together, it is abundantly plain that our commitment to innovative support models and community living remains in place.

The Hon. JOHN AJAKA: Thank you Minister. You had a 10-year plan from 1998 to 2008. Are you indicating that all of the institutions will not be closed by 2008? Do you need additional time?

Ms KRISTINA KENEALLY: When I speak to peak bodies, such as Family Advocacy, the Stockton Welfare Association or People with a Disability Inc., we all recognise the complexity of closing large residential institutions. Even those peak organisations and advocacy groups have a very strong view that institutional or large residential centres are not appropriate for people with a disability. They recognise the complexity of the devolution process. It is unlikely that we will have all of our large residential centres devolved by 2008.

The Hon. JOHN AJAKA: Can you give an indication of when the balance will close?

Ms KRISTINA KENEALLY: As I have just indicated, we are tendering now to start planning for the closure of our own residential centres in the non-government sector centres. I am not going to pre-empt that planning process.

The Hon. JOHN AJAKA: It could be two, five or 10 years?

Ms KRISTINA KENEALLY: I am not going to pre-empt that planning process.

The Hon. JOHN AJAKA: Minister, you mentioned advocacy. What is the status of the advocacy information services review that commenced in 2003, some four years ago? When will the review be completed?

Ms KRISTINA KENEALLY: Again, to put it into context, in the last financial year more than \$7.5 million was allocated to disability peak bodies advocacy and information services. In this financial year the Government will spend more than \$8.3 million for our 73 disability peak body advocacy and information services provided by 43 organisations. The Department of Ageing, Disability and Home Care is building on the reform work undertaken to date, including consideration of information provided by the consultation processes in 2003 and 2005, examination of the findings of advocacy and information service mapping and drafting of a new program framework. That work has been undertaken to ensure that we have the best range of support for people with disabilities and their families, including service types and geographical needs.

The Hon. JOHN AJAKA: Is that the review that I was asking about?

Ms KRISTINA KENEALLY: Yes, I believe it is.

The Hon. JOHN AJAKA: When will it be completed?

Ms KRISTINA KENEALLY: We have been delayed slightly because the Commonwealth announced its own review. We did not want to finalise our review without having a good idea about the direction in which it was moving. My understanding is the Commonwealth still has not indicated when it will complete its review. We are now progressing our own work. At the moment we are working with our peak bodies and then we will work with the advocacy groups.

The Hon. JOHN AJAKA: Have you received any reports on the review at this stage?

Ms KRISTINA KENEALLY: From the Commonwealth?

The Hon. JOHN AJAKA: No, in relation to the actual review? Are you sitting on any reports at this stage?

Ms KRISTINA KENEALLY: I have received advice from the department, but I am not sitting on anything. Ms Mills would like to add to that.

Ms MILLS: There is a longstanding report that was part of the initiation of the project. In recent times the only advice we have provided to the Minister in detail has been a summary of the consultation outcomes, which has been part of the process.

The Hon. JOHN AJAKA: How long has that report been out?

Ms MILLS: We issued that report about 12 months ago, so it was made to the previous Minister. That was a summary of the issues. Last year we also put out a discussion paper, which put forward three key strands for advocacy reform. We received submissions in response to that discussion paper and we used that as the basis for developing advice. The detail of that advice has not yet been provided to the Minister as it is still being developed, other than for the peak bodies that we anticipate will be completed before the end of this calendar year.

The Hon. JOHN AJAKA: Can that report be made available to Committee members?

Ms MILLS: Yes, certainly.

CHAIR: Minister, a matter of great concern to many people is that a number of young people with a disability are in aged care facilities. Could you tell us how many have made the transition into age-appropriate accommodation places since the department commenced its work on the relocations?

Ms KRISTINA KENEALLY: The Government acknowledges that there are legitimate concerns in the community about young people with a disability living in residential aged care. It is committed to assisting this group through the New South Wales Younger People in Residential Aged Care Program. Members of the Committee may be aware that the program, which is jointly funded by the State and Commonwealth, will provide \$81.2 million over a five-year period to assist the target group. I am advised that as at 12 October 2007, 368 people under the age of 50 were living permanently in residential aged care facilities in New South Wales. This is the target group for the Young People in Nursing Homes Program. The number of young people who are either in acute care hospital beds or in the community who are viewed as at risk of entering aged care facilities is not yet known, but the program seeks to target both those people who are currently inappropriately housed in residential aged care or who are at risk of entering residential aged care.

CHAIR: My question related to how many had made the transition. How many have you moved in to age-appropriate care services?

Ms MILLS: I can answer that question, although I will have to take the precise number on notice as I have just returned from leave. I probably need to explain the process. The funding and the priorities for the first year of the program were to develop the assessment and eligibility criteria for clients. That was part of the bilateral agreement with the Commonwealth. The intention was not so much about moving people out in the first year; in fact, funding was allocated principally to assessment and development during that year. We conducted a comprehensive assessment system, developed a process and allocated information to all existing residents who are eligible for the program in nursing homes, both directly and through their peak bodies.

We received a significant number of applications to be considered for the program, but it is important to state that around half those applications were from people who wished to remain in their nursing homes but who wanted to take advantage of other components of the program. The focus of the program is not just on moving people out; it is also for those people who wish or need to remain in a nursing home facility to provide services that make that experience more appropriate for them, including things like day programs, activities, therapy, rehabilitation, et cetera. At the moment, assessments are being conducted. They are detailed whole-of-life assessments, so they are quite

complex. We will shortly go to tender for a small number of accommodation places as the first tranche of accommodation to assist people to relocate.

One of the challenges of the program is the disparate nature of people's needs and also the diverse allocation of people across the State. As you would be aware, for people with nursing or medical support needs we need a significant number of people to make that possible. So the locations we are looking at initially for accommodation as an alternative service model have to be in urban areas where there are enough numbers. The model will be adjusted across the State to assist, in the best possible way, people currently resident in nursing homes, but also, as the Minister alluded to, to divert people from nursing homes. Presently, in consultation with an expert advisory group that was established to support us in the development of this program, we are finalising the criteria that would identify people in that category.

Ms KRISTINA KENEALLY: As at 21 August 2007, 229 applications had been received for the program. As at 25 September 2007, 86 applicants had undergone a comprehensive assessment. As Ms Mills stated, we are looking at alternative accommodation models, which includes the setting up of a group home in the Hunter region to provide supported accommodation for three persons from the target population. That building has undergone necessary modifications. Australian Home Care Services, a service provider, has been contracted to operate the home. The department is in the process of identifying appropriate applicants for those three places. We are rolling out six in-reach packages that will provide enhanced disability services to younger people remaining in residential aged care in the Hunter region. Lifestyle Solutions, a service provider, has been identified to deliver and operate those packages.

The recipients of these packages will be notified shortly. Briefly, one of the most interesting aspects of this program is how many people in nursing home care are choosing to stay there, but they are choosing different services that might make their lives in those facilities more enjoyable. The Department of Housing was also contracted to locate and purchase property in the Sydney metropolitan region in order to establish supported accommodation for at least 10 individuals from the target population. A site has been identified to construct suitable accommodation in Liverpool and is currently under consideration. As Ms Mills identified, an expert working group has been established to assist the department with program development and implementation.

Ms LEE RHIANNON: Minister, I understand that you have a copy of the PricewaterhouseCoopers review into program appliances for disabled people [PADP], which I think was conducted in 2005 and finished in 2006. Have you read that review?

Ms KRISTINA KENEALLY: I have read a brief of it. I am not aware whether I have a copy of it.

Ms LEE RHIANNON: I understand it is with you and the Minister for Health. Is that correct?

Ms MILLS: The department has access to that report. We provided advice to the previous Minister and summary advice to the current Minister, when she came into the portfolio, on the key recommendations of the report.

Ms LEE RHIANNON: When will it be released to the public?

Ms KRISTINA KENEALLY: That question should be directed to the Minister for Health.

Ms LEE RHIANNON: Are you saying that it is not a joint responsibility?

Ms KRISTINA KENEALLY: The Department of Ageing, Disability and Home Care allocates \$2 million in funding to the PADP program each year. Last year, in line with current funding, we also made an allocation of \$5 million to that program to provide support such as a baby crying alert system for severely and profoundly deaf mothers, and motor vehicle transfer equipment, such as hoists, special seats, and wheelchairs. But questions about that report and the program itself are best directed to the Minister for Health, as they fall under her portfolio responsibilities.

Ms LEE RHIANNON: Have you commented on the findings publicly?

Ms KRISTINA KENEALLY: No. It is the report of the Minister for Health.

Ms LEE RHIANNON: It is her report?

Ms KRISTINA KENEALLY: The program resides in NSW Health.

Ms LEE RHIANNON: Referring to the PADP program that you have just spoken about and given some figures on, do you acknowledge that there is a substantial waiting list? Would you agree with that?

Ms KRISTINA KENEALLY: Again, questions about the PADP program are best directed to the Minister for Health.

Ms LEE RHIANNON: Have you met with the Combined Pensioners and Superannuants Association of New South Wales since you have been in the job?

Ms KRISTINA KENEALLY: I have.

Ms LEE RHIANNON: I was interested in the active membership and the work that you are doing in this area for many retirees, in particular, low-income retirees. Programs like dental health and podiatry are vital to their wellbeing but there are long waiting lists in those two areas. What work have you undertaken to help reduce those waiting lists?

Ms KRISTINA KENEALLY: Over the past four years access to public dental services for older people has been a major focus of the New South Wales Ministerial Advisory Committee on Ageing. The committee made a significant contribution to the New South Wales Legislative Council Standing Committee on Social Issues and its recent inquiry into dental services in New South Wales. MACA developed its advice based on input from older people attending its community consultations and a seminar on the dental health of older people. It noted a demand for improved access to dental services and oral health information by older people to improve both the oral and general health of older people, and it identified some key barriers to older people when accessing oral health services. These included the cost of private dental services, the lack of private dental services in some areas of rural New South Wales, waiting times for public dental services, and transport to dental services also is a challenge for some older people. In 2006 the Government published its response to the New South Wales Legislative Council's Standing Committee on Social Issues inquiry.

The Government is committed to boosting spending on oral health program in New South Wales by over \$40 million over four years to 2009-10. Additional funding is being used to support prevention and early intervention initiatives, and to provide services for high priorities, including older people. A major challenge facing the Government is the critical shortage of dentists. The shortage is being experienced across Australia both in the public and private dental sectors. It is yet another illustration of the Commonwealth's failure to fund training places. To combat this significant challenge—

Ms LEE RHIANNON: But Minister, seriously on that point, you are talking about a shortage of dentists. You must acknowledge also that there is a shortage of funding here and in the meantime the number of people on these waiting lists is increasing. So what you have read out is very fine, but do we not have a problem that it is not translating into practice in reducing waiting times?

Ms KRISTINA KENEALLY: What would reduce waiting times is if we actually had enough dentists to treat people and it is the shortfall in the Commonwealth's funding for that program. In fact, one of the first things the Commonwealth did when I came into office was to cut funding for that program. We are undertaking an international recruitment campaign, which we anticipate will bring around 30 dentists from the United Kingdom, Ireland and New Zealand to areas of need in this State. One of the first acts of the Commonwealth was to axe the Commonwealth dental health program, which used to provide \$300 million to the States for public dental services. Despite this slash in funding, New South Wales has the most generous eligibility criteria for public dental services in

Australia with around 50 per cent of New South Wales residents being eligible. We are also one of the very few jurisdictions that does not require co-payments for public dental services.

Ms LEE RHIANNON: They may not be eligible, but it is these waiting lists. I also did want you to comment—

Ms KRISTINA KENEALLY: I might come back to the point that without dentists it is hard to cut waiting lists.

Ms LEE RHIANNON: Well, let us come back to podiatry because I understand there is also a waiting list for podiatry. Are you advocating a change in this area?

Ms KRISTINA KENEALLY: Podiatry services again would be best directed to the Minister for Health, but I can say again that with Commonwealth cuts to university places it is hard to cut waiting lists without the specialists to do it.

Ms LEE RHIANNON: Probably with the answer to the next question you will say speak to the Minister for Transport, but I am also after your advocacy because ageing, obviously, covers a whole lot of these areas. As the Minister for Ageing I would have thought that part of the brief would be advocating for people who are facing a difficult time at the end of their life. So, you would be aware that the transport department introduced booking fees, which have drastically increased the cost of tickets for many pensioners and this actually has a health component to it because, I imagine you are aware, that for many people that means they are not able then to afford to go to their specialist in Sydney. So, I am interested in what interaction you have had with the department and the Minister in advocating that this should not have occurred?

Ms KRISTINA KENEALLY: In fact I have done more than advocate. I have gone out and spoken to people in our public consultations around this State. I believe possibly while you were out of the room I detailed the consultation we have done for Ageing 2030, including consultations in four regional areas in New South Wales, all of which I attended, as a special consultation here in the Parliament for members of Parliament to raise issues of the half of their constituents in relation to ageing. The most consistent issue that came out of those consultations was people's need for transport. It is essential for overcoming social isolation, accessing involuntary and paid employment, and for accessing health services. I can give you advice about the Department of Ageing, Disability and Home Care's role in the provision of community transport, including our interaction with the Ministry of Transport.

Ms LEE RHIANNON: Could I just ask you this first, as I am conscious that I do not have much time remaining. Have you said publicly that the Government should not bring in the booking fee on pensioner travel vouchers, and have you said that to the Minister?

Ms KRISTINA KENEALLY: No, I have not.

Ms LEE RHIANNON: You do not see that that is a failure in advocating for elderly people in this State, considering, as you have just acknowledged, that it is difficult for them to travel when it is more costly, particularly to meet their health requirements?

Ms KRISTINA KENEALLY: From my memory, of the four consultation sessions I attended, I did not hear anyone suggest to me that we should remove that booking fee. It may well have been raised, but it was not raised directly with me. It should also be—

Ms LEE RHIANNON: So you are saying that when you asked representatives of the Combined Pensioners and Superannuants Association, that they did not raise that with you?

Ms KRISTINA KENEALLY: They raised a number of issues with me, as did many of the more than 50 groups I believe I have met with since I became Minister in April. They raised a range of issues with me. The Combined Pensioners and Superannuants Association raised a number of issues around transport and housing. But I think it should be noted also that the train trips remain free for pensioners. I acknowledge that there is a fee, but it is a relatively minor cost and the trip itself remains free.

Ms LEE RHIANNON: It actually is not a minor cost; it can be up to a 120 per cent increase on top of the actual cost of the ticket. So, it is substantial and it can result in people reducing or stopping their travel. So, to say that it is minor is just not fair to a lot of those people, Minister. I ask you some questions now about sport and disabilities. There is the national plan for disability support. I understand the Government supports this?

Ms KRISTINA KENEALLY: Yes.

Ms LEE RHIANNON: We are told that it is an inclusive plan, but why does it exclude such disabilities as psychiatric, psychological, infectious disease, neurological, learning difficulties or chronic health?

Ms KRISTINA KENEALLY: I need to take that on notice. I can advise you that earlier this year the Premier and I, and the Minister for Sport and Recreation announced an extra \$1 million for a disability in sport program here in New South Wales. But in terms of the program to which you are alluding, I will take that question on notice.

Ms LEE RHIANNON: I have just a couple of other questions to take with that one you are taking on notice. I am interested if the department is supporting the plan. I am interested in the context that because a whole number of those areas I just read out are excluded there are concerns of the ramifications of such a future plan for disability sports. So, I am interested in the input you have to the development of that plan?

Ms KRISTINA KENEALLY: We will take those questions on notice.

Ms LEE RHIANNON: Are you aware that all national sporting organisations for the disabled will be eliminated eventually under this Federal policy, if adopted, and that able-body sports in States will have to take on the responsibility of all disability sports under each of their umbrellas?

Ms KRISTINA KENEALLY: To clarify, you are discussing a Commonwealth plan.

Ms LEE RHIANNON: I am, but I understand that you are part of it. Are you saying you have no input?

Mr O'REILLY: If I can answer that. One of the things we are trying to do is work with the Department of the Arts, Sport and Recreation. There was a sporting group for disability sports in the department; it folded. We got behind the department to be able to provide \$1 million over four years using its grant system to be able to provide access for people with disabilities to be able to participate in sport. With regards to the issue about the national sporting arrangements, we would have to take that up with the sport department and through the Commonwealth.

Ms LEE RHIANNON: If you could do that. I am interested in your involvement as well as those other questions.

The Hon. TONY CATANZARITI: Minister, can you provide an update on the negotiations for the fourth Commonwealth State and Territory disability agreement and related matters?

Ms KRISTINA KENEALLY: I suspect there is probably no more pressing issue facing the disability services system in New South Wales and its budget than the Commonwealth, State and Territory Disability Agreement. On 8 February, the Federal Senate Standing Committee on Community Affairs released its report into the funding and operation of the Commonwealth, State and Territory Disability Agreement. The primary recommendation of the Senate committee is that Australian State and Territory governments jointly commit to substantial additional funding to address identified unmet need for specialist disability services. I can advise you that the New South Wales Government fully supports its recommendation.

We have consistently increased our expenditure for specialist disability services to meet the high and ongoing needs of people with a disability. We are asking the Australian Government to match our investment in disability services in New South Wales. We believe that a joint, matched

funding strategy would make a real difference to the lives of people with a disability, their families and their carers. The third Commonwealth State and Territory Disability Agreement was due to expire on the 30 June 2007 but it has been extended until a new agreement is in place. In the current negotiations for the fourth Commonwealth State and Territory Disability Agreement, the Commonwealth has offered an increase of \$400 million for the whole country over five years over its total contributions under the third agreement. That is in contrast to the \$1.3 billion in new money that New South Wales has committed to disability services under Stronger Together.

The States and Territories have made a counter offer with additional growth funding of \$3.4 billion. New South Wales has also offered an additional \$428 million for unmet demand for accommodation and respite through a bilateral agreement. The Commonwealth has not even bothered to acknowledge these offers, much less respond. Instead, the Commonwealth has announced it will provide the \$1.8 billion under the disability assistance plan over five years largely targeted at older parents of adult children with a disability. In fact, of the \$1.8 billion, \$800 million largely goes to time-limited pension payments and business services which are a Commonwealth responsibility. The remainder of that money goes to a duplicate service system largely targeted at older parents of adult children with a disability. This duplicate parallel system will deliver services outside the framework of the Commonwealth, State and Territory Disability Agreement.

On 25 July 2007 I chaired the Disability Services Ministers meeting in Sydney. At this meeting the Commonwealth Minister stated that his Government would take jurisdictional responsibility for people with a disability over 40 years old with parents over 65 who had not previously received services from the State. The Minister claimed this would free up funding for the States and Territories. When asked about details of the jurisdictional takeover, the Minister was unable to answer basic questions about the Commonwealth Government's package. I have written to Minister Brough a number of times requesting specific information on his claims that the Commonwealth Government would take jurisdictional responsibility for people with a disability over the age of 40 living with ageing carers. I posed a range of questions and case studies that were developed in consultation with my State and Territory counterparts.

In a response on 24 September 2007, Minister Brough did not provide any specific information, but rather advised that the questions I had posed would be considered as part of the development, consultation and implementation processes currently being undertaken by the Commonwealth. From Minister Brough's correspondence it would appear that the Commonwealth has put the cart before the horse by announcing a plan and then announcing the consultation process to design the plan. Minister Brough's letter also confirms that the Commonwealth remains committed to a duplicate service system rather than a strong multilateral Commonwealth, State and Territory disability agreement. Again, that is contrary to his own Senate's finding.

The New South Wales Government has committed a record \$1.3 billion boost to disability services under Stronger Together. Over the five-year life of the third agreement, the third agreement being the most recent previous agreement, the Australian Government contributed approximately \$950 million while the New South Wales Government provided \$4.4 billion. In the final year of the previous agreement, New South Wales provided \$640 million. In 2006-07 the New South Wales Government contributed over \$1 billion. This represents an increase in the annual expenditure of the New South Wales Government of over 70 per cent, or around \$450 million over the third term of the agreement. By comparison, the Australian Government's contribution for 2006-07 was only \$209million. This means that the contribution of the Australian Government has reduced from 90 per cent in disability services funding in New South Wales to just 16 per cent over the life of the third agreement. Under what the Commonwealth is proposing, that would shrink even further by the end of the fourth agreement to about 13 per cent.

It is essential that a full Commonwealth, State and Territory Disability Agreement include a more strategic approach to investment to ensure that a full range of services that is demanded is available when and where they are needed. It is imperative that unmet demand for people of all ages with a disability is addressed and that there is a capacity for early intervention to respond to individuals and families early in their lives. I am concerned that the Commonwealth is holding up the finalisation of the Commonwealth, State and Territory Disability Agreement. I am concerned that the announcement of a disability assistance package will set up a more confusing service system, not just for people with a disability, their families and their carers, but also for service providers. It will set up

a duplicate reporting arrangement, duplicate funding arrangements and duplicate service systems. The services that are being proposed are not recognised service types under the agreement and cannot be considered as part of our Commonwealth, State and Territory Disability Agreement negotiations.

The States and Territories will obviously need to monitor the implementation of the disability assistance package with regard to the duplication of services. National work will also be required around policy issues such as eligibility and access, based on age and carer status. Finally I am quite concerned that the Commonwealth has put a bilateral offer out there for matched funding and supported accommodation in respite. We put forward a \$428 million offer. We have yet to have a response from the Commonwealth. It has been 100 days since we put that offer to the Commonwealth. Although I do not wish to impute any motives to Minister Brough, I am becoming more concerned that this could be a stunt in an election year. People with a disability in New South Wales deserve better than that. There is a genuine offer on the table that was invited there by Minister Brough and I really encourage him to respond.

The Hon. GREG DONNELLY: What is the New South Wales Government doing to assist families of people with a disability?

Ms KRISTINA KENEALLY: Many families throughout the State require additional services and support to assist them to care for the family members of the disability. This has been a priority area. I have spoken many times already this morning about our Stronger Together package and its goal to strengthen families, particularly so that children with a disability can grow up with their family. The Government is building a more flexible service system which aims to better respond to people's needs and improve the quality and range of services available to them. That is why we are implementing for new service types—to assist children and young people with a disability and their families.

First is the intensive family support service which provides short, intensive and flexible in-home service. The service assists families who are at risk of out-of-home placement or family breakdown. It addresses the immediate situation and develops sustainable routines and supports for the family. These 14 new intensive family support services include three cultural and linguistically diverse specific services and, as I mentioned earlier, two Aboriginal specific services are now operating across the State. We also have 20 new casework consultants employed across New South Wales. They will work with our front-line staff and non-government services to improve the quality of services for children and young people and their families.

The activities of the casework consultants have included coaching and mentoring community support-team staff working with children and young people, promoting best practice within the department in providing out-of-home care services with children and young people with a disability, assisting departmental case managers in the implementation of the Family Assistance Fund—which I will come to in a moment—and our Leaving Care Programs, and facilitating local inter-agency partnerships and links to promote effective communication, joint work for children and young people with a disability, and, finally, working with the Department of Community Services to create smooth transitions between child protection and out-of-home care systems in the disability system.

We have also introduced Family Choices—that is two new alternative family-based services—in rural New South Wales. One service will provide alternative family care in northern New South Wales while the second will support families living in western and southern New South Wales. Both services will provide voluntary family-based alternative care for children and young people with a disability who have moderate to very high support needs, who are unable to live permanently with their birth families and where there are no child protection grounds for child placement.

A new innovative support model we have introduced is the Family Assistance Fund. This fund provides small amounts of discretionary funding to assist families to buy services and equipment that cannot be met through the standard range of services or funding. The primary purpose of the fund is to support the work that case managers are doing to assist families. This financial year \$3.1 million will be allocated to the Family Assistance Fund. Information about this program has been translated into 12 community languages and is available on the department's website. I advise the Committee that as at 30 June 2007 652 families had received funding under the Family Assistance Fund.

In this financial year two more significant initiatives will be established to support families who care for a child with a disability. Some \$4 million will be allocated over four years under the Extending Early Childhood Intervention Initiative to increase the availability of quality early childhood intervention services for children with a disability and their families. An additional \$4 million will be allocated over four years to develop new, innovative models that expand the range of service options available to children with a disability and their families. The Government will also invest \$3.6 million over five years in trial programs to promote parent, sibling and peer support networks and to develop information kits with families who have a child with a disability. This includes information kits for Aboriginal families, families from Afghanistan, Iraq and the Sudan and families of a child with a disability regarding the transition from childhood to teenage years and from school to adulthood.

Research indicates that a combination of formal and informal support networks can help facilitate connections between people in similar situations and provide encouragement when it is most needed. Support networks can also provide emotional, practical and social support to people with a disability and their families. Peer support networks are important: they help people with a disability reduce social isolation and develop friendships. Parents can benefit from speaking with other parents in similar situations, and siblings of young people with a disability can share their feelings and experiences with others. Funding has been allocated this financial year to establish these demonstration support programs to provide parent, sibling and peer networks. Two of these demonstration projects will be autism specific. All these projects are an important step in the New South Wales Government's plan for improving the lives of children and young people with a disability by providing much-needed services that support the whole family. Through new programs and new approaches delivered under Stronger Together, the Government will continue to provide more long-term help and practical solutions for children and families throughout the State.

The Hon. CHRISTINE ROBERTSON: Minister, can you please outline what the Government has done to improve services and supports for people with a disability, their families and carers living in rural and regional New South Wales?

Ms KRISTINA KENEALLY: Yes, I can. Stronger Together forms the basis of our initiatives in rural and regional areas and provides significant investment. For example, in its first five years Stronger Together will deliver an estimated \$79 million to the western region. It is estimated that the northern region will receive more than \$93 million in additional funding. An estimated \$208 million will be provided to the Hunter region, which includes the Central Coast, and about \$89 million will be provided to the southern region. All services will benefit from an injection of funding through Stronger Together—accommodation, respite, therapy, family support, case management, the Attendant Care Program, day programs and post-school programs.

As well as Stronger Together, our Better Together framework includes a number of key projects that will include improving services for rural and isolated communities. Advocacy services are important to people with a disability in rural and regional communities and in this financial year funding of more than \$8.3 million will be provided for 73 disability peak body advocacy and information services provided by those 43 organisations. This includes services in rural and regional areas and specific services for people from special needs groups. In this financial year \$500,000 will be provided for advocacy services in areas where there previously had been none. We are embracing new technologies, working with other agencies and non-government organisations to improve access in rural and remote areas and rationalising our processes.

We have also looked at how more effective use of tools such as HSNNet can improve the way we do business. HSNNet is an online portal established by the New South Wales Government to make it easier for government and non-government organisations in human services to have rapid access to information on policies, planning, service networks and agency contacts as well as the Family Assistance Fund. In the last financial year the Home Care Service initiated efficiency strategies including the establishment of a centralised intake point for rural regions to help streamline the intake, assessment and referral process and ensure that there are clear entry and exit points based on client needs.

The recruitment and retention of skilled staff pose challenges for rural and regional disability services throughout Australia. The recruitment of indigenous people in a direct care role has

historically proven even more difficult and has been seen as one of the barriers to access to service by Aboriginal people. To address this the southern region has commenced a pilot traineeship to allow for the recruitment and retention of skilled staff. The traineeships also provide a framework for developing the skills and knowledge of departmental staff regarding working effectively with Aboriginal people. This approach complements the cultural awareness training that has been undertaken in the region. A part-time indigenous mentor has been employed to assist and support the trainees. The mentor has helped trainees to develop confidence to seek help and raise issues for themselves. Trainees are midway through their 12-month traineeship and are on track to complete the certificate modules in the time frame.

In 2006-07 an expert Aboriginal advisory group and an Aboriginal consultation framework for the southern region were established. Their purpose was to strengthen relationships between the department and Aboriginal communities in the southern region and to improve service provision and access to services for Aboriginal clients. The region and representatives from Aboriginal communities have worked together to identify and prioritise locations for future consultation in relation to service development. Northern Illawarra, Shoalhaven and Goulburn have been identified and agreed as priority areas for consultation this financial year. In 2006-07 the mid North Coast Respite Coordination Project was implemented and the far North Coast and New England respite coordination projects were established. The models and approach used in the mid North Coast Respite Coordination Project will be considered for adoption in future regional projects.

The key achievement in 2006-07 was the transition of Aboriginal home care into the department's northern region structure. The benefits are local decision making, better support for Aboriginal home care staff, more timely responses to local Aboriginal communities, and better access to the department's services, including office accommodation, access to training, support and supervision. In the Hunter region priorities for 2006-07 include improving access to respite services across the region through the progression of recommendations from the region's respite review, assisting the Hunter regional coordination management group to implement the positive ageing strategy in the Hunter, continuing to encourage improvements in the region's Home and Community Care Program projects such as Future Food Stage 2, which will develop an action plan for the region's food services, and culturally and linguistically diverse and Aboriginal service system capacity reviews designed to shape future service delivery to indigenous and culturally and linguistically diverse clients in the Hunter and Central Coast areas.

In August 2007 \$300,000 was allocated to Aspect to expand its early identification and assessment program for young children with autism. I highlight this again although I spoke about it earlier because it will benefit particularly more than 270 families in rural and regional New South Wales. The department is aware that it is necessary to have a well-trained workforce to deliver services to people in rural and regional communities. Under Stronger Together the disability service system is expanding, necessitating a larger and more skilled workforce. Since 2004 the department has supported and implemented an innovative training program called inclusive communication and behaviour support, which is designed to improve communication between people with a disability and staff in accommodation and respite units. To support this initiative the department has invested \$500,000 to establish 20 regional communication resource libraries throughout the State. I have visited one of these libraries and they are truly innovative. I offer my congratulations to the staff on the work that has gone into developing them.

CHAIR: I am sorry to interrupt, but would you like to table the balance of your response to that question, if it is lengthy?

Ms KRISTINA KENEALLY: I am happy to table it, if I could finish on the libraries and then table the balance of the response. Each library will provide regions with easy access to communication materials and examples of communication aids, which will allow them to design and make individual communication aids that will improve communication with their clients. The 20 libraries include Nowra, Goulburn, Lismore, Port Macquarie, Armidale, Dubbo, Albury and Orange.

[Short adjournment]

The Hon. JOHN AJAKA: If I could just go to ageing, is it correct that the subsidies made available to undertake home modifications under the Home and Community Care Program are no longer available and will not be available until next year?

The Hon. CHRISTINE ROBERTSON: I do not think they understand your question.

Ms KRISTINA KENEALLY: Yes, could you expand on your question, please?

The Hon. JOHN AJAKA: Is funding available for the balance of this year under the subsidies for home renovations under the Home and Community Care Program?

Ms MILLS: The department makes an annual allocation under the Home and Community Care Program [HACC] for the home modification program and we have increased the funding each year under that program in line with the approximately 8 per cent growth that we have had annually for the Home and Community Care Program. I do not actually understand the question because we are early in the financial year and we have had no identification of issues regarding the spending at this point. We monitor the spending on a quarterly and half-yearly basis.

The Hon. JOHN AJAKA: So there are funds available for the balance of this year if one were to apply?

Ms MILLS: Correct.

The Hon. JOHN AJAKA: I understand that a question was asked by Ms Lee Rhiannon in relation to the pensioner booking fee on CountryLink services, but in relation to another aspect, have you expressed any concerns as the Minister for Ageing about the Roads and Traffic Authority's discussion paper on ageing drivers?

Ms KRISTINA KENEALLY: In fact I met with a group of older people on the Central Coast in the electorate of Wyong regarding their concerns about the Roads and Traffic Authority's discussion paper. I think it is fair to categorise that meeting as one where a great deal of misinformation had been circulated about what the Roads and Traffic Authority had put out in its discussion paper. That is not to say that at the end of the meeting everybody agreed with the proposal, and that is why it is a discussion paper out there for public comment, but certainly by the end of the meeting there were a number of people who were pleased that I had taken the time to speak to them about their concerns and understood better what the discussion paper proposed. I think that was the result and I suspect that there has been a bit of a misinformation campaign around the State looking into this. That meeting went quite well.

The Hon. JOHN AJAKA: Have you met with the Minister?

Ms KRISTINA KENEALLY: I have discussed it with the Minister particularly following that community meeting I attended.

The Hon. JOHN AJAKA: If I can go back to disabilities for a moment, can you indicate to me how much the department spends on air travel?

Ms KRISTINA KENEALLY: Yes, I can. I can advise you that in 2006-07, that is in the last financial year, \$12.88 million was allocated to travel expenses. Actual expenses totalled \$12.24 million. These travel expenses mainly relate to visits to and from regional offices, group homes and large residences, and mileage allowances payable to home care staff as per agreed award, so that includes both air and ground travel.

Two key officers from the Department of Ageing, Disability and Home Care who were involved in the redevelopment of the Lachlan Centre travelled to New Zealand in February 2007 to meet with the New Zealand Government office, which facilitated the successful closure of the Kimberley large residential centre, which is the last large residential centre in New Zealand. The officers also visited several accommodation services established for former residents of that centre to inform their planning for our large residential centre redevelopments, and the cost of this trip was \$3,187.

The Hon. JOHN AJAKA: How much payroll tax is paid by the department to Treasury?

Ms KRISTINA KENEALLY: I will take that question on notice.

The Hon. JOHN AJAKA: What was the cost of your trip to the United States?

Ms KRISTINA KENEALLY: That trip was privately funded by me to visit my grandparents.

The Hon. GREG DONNELLY: Did you enjoy your trip?

Ms KRISTINA KENEALLY: I did indeed. My grandparents are in their 80s and 90s, and it was lovely to spend time with them.

The Hon. GREG DONNELLY: Did you find them in good health when you got there?

Ms KRISTINA KENEALLY: I did find them in good health.

The Hon. JOHN AJAKA: How many of the staff earn more than \$100,000 a year? Are you able to give me that?

Mr O'REILLY: I will take that on notice because that would be grade 12 and above.

The Hon. JOHN AJAKA: How many staff were dismissed in the past 12 months?

Ms KRISTINA KENEALLY: We will take that question on notice.

The Hon. JOHN AJAKA: How many complaints were received by clients in licensed and unlicensed boarding houses?

Ms KRISTINA KENEALLY: To clarify your question, are you asking about complaints made by clients—

The Hon. JOHN AJAKA: Yes.

Ms KRISTINA KENEALLY: —or complaints made about accommodation services?

The Hon. JOHN AJAKA: Any complaints, total complaints received in relation to licensed and unlicensed boarding houses, whether by the persons there or their family members or anyone from the public.

Ms KRISTINA KENEALLY: I can advise—again I need to put this in context—that the department only has responsibility for those boarding houses that have two or more people with a disability who require service support. We license those homes. We have detailed procedures for handling complaints with regard to licensed and unlicensed boarding houses. These procedures are currently being finalised to complement the general Department of Ageing, Disability and Home Care feedback and complaint handling principles and guidelines. I can also advise that complaints about an unlicensed boarding house will be investigated by the department if there are reasons to believe that the unlicensed boarding house has two or more people residing there and is in breach of the Youth and Community Services Act. While departmental officers seek first to investigate and resolve a complaint or concern in a conciliatory manner with the licensee, they would use their powers of entry to an unlicensed boarding house under warrant as per the Youth and Community Services Act or recommend a prosecution if it proves necessary to do so.

The Hon. JOHN AJAKA: How many inspections of boarding houses did the department undertake in the past 12 months?

Ms KRISTINA KENEALLY: I can provide you with that information. The department conducted 436 routine monitoring of inspections of licensed residential centres in 2006-07, which

exceeded the minimum requirement of 325 inspections. During the same period 41 full service reviews were also completed.

The Hon. JOHN AJAKA: Are you aware of concerns regarding corrective service clients living with people from a non-violent background in group homes?

Ms McALPINE: We have a program for people who have exited correctional centres. There are currently 41 people in that program. There are very few of them who have exited a correctional Centre to live with other people. Generally, they are in that specialist program. There may be people who have had lower level engagements with the criminal justice system that have not resulted in custodial sentences who may reside in group homes.

The Hon. JOHN AJAKA: Have any clients being endangered or abused as a result of a decision for such placements, as far as you are aware?

Ms McALPINE: I will have to take that question on notice.

CHAIR: Would it be fair to say that the department has a lot of involvement with volunteers providing care, whether they are carers, family members, meals on wheels, et cetera, across both disabilities and aged care? Is that correct?

Ms KRISTINA KENEALLY: There are volunteers involved in some of the programs you spoke about relating to meals on wheels, and of course we take the views of carers very seriously.

CHAIR: Have you ever costed how much volunteers contribute in terms of saving the government money with various services?

Ms MILLS: You are quite right in saying that volunteers are an important part of our service system, both in service delivery but also as board members of non-government organisation and in other capacities. Under the Home and Community Care Program we provide significant support to volunteers, not only through training but also through providing reimbursements for travel costs and other expenses associated with volunteering on a regular basis. That is administered through the peak bodies for those services including Meals on Wheels. There is a formal recognition of the contribution volunteers make. In terms of costs to the system, it is actually an integral part of the non-government sector. It is a large part of our service system. It is not costed in that sense because it is a fundamental part of the core service delivery model.

CHAIR: Minister, the proposed restrictions to the licences of older drivers will have a huge impact on your department in terms of volunteers not being able to travel great distances, and particularly on the carers. Have you made protestations and advocacy on behalf of your department? Have you costed what the effect of those changes might be?

Ms KRISTINA KENEALLY: It is important to recognise that the Roads and Traffic Authority discussion paper is exactly that, a discussion paper.

CHAIR: Have you spoken out strongly to the Minister about the effects the proposed restrictions might have on your department?

Ms KRISTINA KENEALLY: I will be making a submission to the discussion paper.

CHAIR: I think you better do so pretty quickly. That is your homework after today, I would imagine, because it will be a huge impact.

Ms KRISTINA KENEALLY: I would hope that members of Parliament who have strong views will make submissions to the discussion paper.

CHAIR: Does the department have long-terms plans to reform day programs in the way that sees those who turn 30 exit from community participation and other adult day programs?

Mr O'REILLY: I would like to answer that. There is a great deal of discussion with the non-government organisation sector and within the Department of Ageing, Disability and Home Care [regarding day program provision. Currently we are looking at two things; first, department-operated day programs. The idea is that over the next two years to consult with parents, clients and staff and move those programs out of the department into the non-government organisation [sector. Again, it is over two years, because it takes time for concerns to be heard and addressed.

Secondly, with regard to the post-school program there has been a request from the NGO sector and a number of peak bodies to look at the continuum of services between when a person first leaves school, called a post-school program. When does it come into something else, so we do not have a 45-year-old person with a disability saying that he is still attending a post-school program? They are asking us to work with over the next 12 to 15 months is to develop an arrangement under which a person who leaves school and attends a transition-to-work or a community participation as a post-school program. At what point will that morph into a day program or another type of activity that is not called, simply, post-school?

That will take a bit of work, because at the other end of the scale we have to look also at people who have been working in business services where they are becoming elderly and not as productive as they once were. What is their pre-retirement program? We start with post-school, but how long for a CP program? When does it come in as a day or another type of program? Also, when is the intake for a pre-retirement program?

CHAIR: Is it far to say that you have plans to reform those programs?

Mr O'REILLY: Yes, we do.

CHAIR: When do you expect to roll them out?

Mr O'REILLY: At least 18 months, given the numbers and the complexities associated with it.

CHAIR: How many have transitioned to work under the transition-to-work program?

Ms KRISTINA KENEALLY: Approximately two-thirds of the people who have undergone transition to work have transitioned to employment. Some are in open employment and some in business services.

CHAIR: Mr O'Reilly, do you have the numbers?

Mr O'REILLY: I am looking.

Ms KRISTINA KENEALLY: In 2006-07 post-school programs supported 4,838 people; 2,122 young people were supported in community participation; and 1,389 young people were supported in transition to work. A further 1,327 young people were supported in a post-school options program in 2006-07. It is estimated there will be more than 900 new school leavers entering the post-school program in 2008.

CHAIR: Do you have a break up of how many went into day programs?

Ms KRISTINA KENEALLY: From school?

CHAIR: Transition to work?

Ms KRISTINA KENEALLY: From transition to work they go either to paid employment or a community participation program.

CHAIR: Thank you. Do you have a break up of how many have gone into each program?

Mr O'REILLY: If I may just add to the Minister's response. From the transition-to-work numbers, roughly two-thirds moved into employment and one-third need to be looked at again,

whether they have the skill set to move to work. If they cannot, they will move into a community participation program and that is part of the reform for the day program arrangements further down the track.

CHAIR: Minister, is it possible that the department could provide funds for transition-to-work programs for people who are deceased?

Ms KRISTINA KENEALLY: I am not aware of any such circumstance.

Ms MILLS: The department's transition to work program has a block funding model under which the department provides a certain number of positions per year to a service provider, based on a contract. It has a responsibility to notify the department if someone leaves the program—either because they are deceased or move, or any other reason—and we rely on regular monitoring of that during the year. We also do a reconciliation at the end of each financial, but in this case the calendar year because of the nature of the program, to determine the number of allocations for places for the following year.

We have a model whereby we permit service providers to carry a number of vacancies because there are people moving in and out within a year, but we do not fund individual positions in transition to work. We would not be in a position to say that a certain person fitted any particular category of funding.

The Hon. JOHN AJAKA: Are you aware of any instances where, after your audit or reconciliation, you have discovered that payments have been made on behalf of persons who are deceased? If so, what action have you taken to recover those monies?

Ms MILLS: I do not have any specific cases, no. We do have quite robust processes in place for recovering the money, if it is required.

The Hon. JOHN AJAKA: Will you take it on notice to advise the amounts you have sought to recover and what you have been able to recover?

The Hon. CHRISTINE ROBERTSON: For what?

The Hon. JOHN AJAKA: For any amounts paid incorrectly, due to not receiving appropriate notice?

Ms MILLS: I can do that.

Ms LEE RHIANNON: How many people in the department are employed on 457 visas?

Ms KRISTINA KENEALLY: I will take that on notice.

Ms LEE RHIANNON: Do you not have that information? Other Ministers have that information to hand.

Ms KRISTINA KENEALLY: I will take that on notice.

Ms LEE RHIANNON: To access services for wheelchair users, often the only means available, as you would be aware, is wheelchair accessible taxis. I understand that under the current system there can be a subsidy or half the fare is paid. To enable people with disabilities to better access services, do you support an increase in the taxi transport subsidy? I am asking that would you consider that already people with disabilities rely on taxis because that is all they can do. They rely on taxis with accessibility services. They do not have the range of services for transport options that other people have.

There is a huge price differential. If you have a range of options you can often take a trip for between \$4 and \$8. For the many people who are reliant on these taxi services when there is a subsidy, the average cost is \$23, and when they do not get the subsidy is \$46. A long of money could be involved out of an already small income.

Ms KRISTINA KENEALLY: As you would appreciate, the Minister for Transport administers the taxi subsidy scheme about which you have spoken. I understand that the Minister for Transport convened a wheelchair accessible taxi task force. My department and the taxi industry have participated in that task force which is advising the Minister. I understand that the Minister has not yet finalised his decision relating to any recommendations that might be brought forward by that task force. I appreciate the concerns that people with a disability have relating to taxi travel. On several occasions I have met with the Physical Disability Council of New South Wales and I am keen to see this task force progress in order to make taxi travel for people in wheelchairs more accessible and more available.

Ms LEE RHIANNON: Has your recommendation been that there should be an increase in the subsidy?

Ms KRISTINA KENEALLY: The task force is looking at a number of issues relating to bookings and at how it might increase the number of taxis in the total taxi fleet that are wheelchair accessible. So the task force is considering a number of things. I do not want to pre-empt any findings of that task force or the Government's response.

Ms LEE RHIANNON: I am not asking you to pre-empt any findings; I am just trying to get a sense of how you work. When we have raised issues in the estimates committees to do with transport, taxis, health, and program appliances for disabled people [PADP] you have often said it is the responsibility of another Minister. I am trying to get a sense of what you are doing in this case for people with a disability. To me their transport needs appear to be a quite legitimate question.

Ms KRISTINA KENEALLY: I refer you to other Ministers because my understanding of this Committee hearing is that it is to inquire into the budget of the Department of Ageing, Disability and Home Care and the things this department does to advocate for people with a disability—things like supported accommodation, respite, therapy, family support and case management—specialist disability supports on which people rely. In the case of other things that you have raised, my department makes financial contributions as well as participates in ongoing cross-agency discussions. However, I will not pre-empt the decisions of Ministers in other portfolios about what they may or may not do in relation to specific areas. Community transport funding grew from \$24.3 million in 2003-04 to \$35.9 million in 2006-07, an increase of over 48 per cent in a three-year period. The New South Wales Home and Community Care State plan for 2006-07 received \$35.9 million for community transport and the amount of growth funding for HACC service expansion and community transport will be known once the 2007-08 HACC plan is finalised.

Ms LEE RHIANNON: Earlier, in response to another question, you referred to the financial contribution that you make. But when I asked you about the PADP budget you said that I needed to take that up with the Minister for Health. However, I understand that the overall budget for that program is \$23 million and that you are responsible for \$2 million of that. If you will be allocating \$2 million of that amount surely you would not just hand over that money without having an input? I am still trying to understand what input you have when you hand over that \$2 million. The impression I received from your earlier response was that it is all up to the Minister for Health.

Ms KRISTINA KENEALLY: In fact, to borrow your phrase, it is handed over in so far as it is directly allocated from Treasury out of our budget.

Ms LEE RHIANNON: As it is coming from your budget would you, as Minister, not have a responsibility to ensure that it is spent in the most effective way for your constituency and to follow it through?

Ms KRISTINA KENEALLY: Last year we allocated an additional \$5 million, non-recurrent, when we had money available to do so, to further enhance the PADP program.

Ms LEE RHIANNON: But you are not advocating how it should be used?

Ms KRISTINA KENEALLY: I have received advice from my department relating to the review of the PADP program and we are in conversations with NSW Health at a departmental level. I

come back to your question relating to a \$23 million program that is administered by another Minister. If you have questions about it, it is important that you take up those questions with that Minister.

Ms LEE RHIANNON: At 5 o'clock on Friday. Has a consultancy been engaged to advise the department on quality management and reporting with regard to disability issues?

Ms McALPINE: We are in the process of tendering for a quality unit that will look at a quality audit in our accommodation and respite services.

Ms LEE RHIANNON: So it has not yet commenced. Is that what I understand from your answer?

Ms McALPINE: We are in the tendering process right now, or we are about to commence the tendering process. I add that we run a quality and safety framework in all our accommodation and respite services that measures performance across 26 indicators every quarter. So we will be tendering for an enhancement of our quality mechanisms.

Ms LEE RHIANNON: I might be getting muddled up with another process as I thought this was supposed to have been concluded in August. Is that the case?

Ms MILLS: As there is another process neither of us is entirely sure which one you are referring to. A consultancy is also under way to examine the entire DADAHC funded and administered system—HACC and disability—and the appropriate method for quality assurance of that system.

Ms LEE RHIANNON: Is that going on at the moment?

Ms MILLS: That one is going on at the moment, yes.

Ms LEE RHIANNON: Thank you for clarifying that as it is the process I was after. Which consultant is undertaking that process?

Ms MILLS: ARTD Consultants.

Ms LEE RHIANNON: Was it supposed to have been completed in August? Did you have a timeline for which you had to get an extension?

Ms MILLS: There were a series of phases within the project. The first phase was to provide, by August, a preliminary report to the department on options. That was delivered on schedule. They are now developing, on the basis of those options, a further discussion paper that will be circulated amongst stakeholders in the latter part of this year.

Ms LEE RHIANNON: Have stakeholders had any prior involvement in this process?

Ms MILLS: Yes, they have. We identified, on a somewhat randomised basis, the number of providers with whom they could consult, as well as with the peak bodies. The processes also involved looking at systems interstate, both in a disability and a home and community care system, and also looking at similar systems within New South Wales such as in the Department of Community Services.

Ms LEE RHIANNON: My next question relates to Sydney Ferries. I think this issue comes under your department but, then again, it might not. I understand that some work has been done by Sydney Ferries to ensure that commuters have equal access to information. I am referring to announcements that are made and information that is handed out, and I am talking about people with a hearing loss or visual impairment.

Ms KRISTINA KENEALLY: I think it is important for all Committee members to understand that the Government provides support to people with a disability through specialised services as well as through our general public services. In fact, there is a key distinction between Stronger Together and Better Together. Stronger Together is a document that outlines what the

Department of Ageing, Disability and Home Care will do over 10 years to better support people who rely on specialist services. Better Together brings together 12 Government Ministers to work together on how we will improve our service system as a whole across housing, infrastructure, transport, planning, Attorney General and health to support people with a disability. So, there will be many programs throughout various government departments that better support people with a disability. Many of them will be located here in the Department of Ageing, Disability and Home Care for those who need specialist service support, but many of them will be located right across government. So, a program you speak about there, which I think sounds like a very good idea, would not be a program of the Department of Ageing, Disability and Home Care but, in fact, would be a question better directed to the Minister for the relevant departments.

Ms LEE RHIANNON: What is the financial cost to New South Wales when people are unable to be discharged from hospital due to a lack of or delay in providing home care or accessible housing or disability equipment or home modifications? We heard before about these problems; there must be a financial cost?

Ms KRISTINA KENEALLY: That is a very wide-ranging question. You have listed several reasons.

Ms LEE RHIANNON: We can take one at a time?

Ms KRISTINA KENEALLY: Your question in general, if I might take it, is what is the cost to government of people having to stay in hospital if there is not an appropriate age or disability specialist support service available to them?

Ms LEE RHIANNON: Yes?

Ms KRISTINA KENEALLY: We would need to take that on notice.

Ms MILLS: Could I add to that, however. There is a range of responsibilities for those programs that you identify and automatic release from hospital does not make people eligible for the home and community care program under the legislation. The primary assistance for home and community care is for people who have longer-term needs and the hospitalisation is not the cause of the need. So, in other words, if they have a need before they go into hospital because of frailty or ageing disability, then they can become eligible on the program. But the program is not targeted at discharge of clients from hospital.

Ms LEE RHIANNON: Do you have actual figures about the number of people who have to remain in hospital because of the problems we have just been discussing and the delay in them being released?

Ms MILLS: The figures about the hospital release dates obviously sit with the Minister for Health. I can, however, say under the young people in nursing homes program and under our studies for acquired brain injury we have been looking at the number of clients across the State who may be ready for release but still are waiting services. In the case, for example, of acquired brain injury, they are quite small. Nonetheless, we recognise that for each individual it is a significant issue.

Mr O'REILLY: If I could just add, the 43 home care branches are taking referrals. They are open to take referrals as and when they are required.

The Hon. TONY CATANZARITI: Minister, what is the Government doing to meet its priority outlined in the New South Wales State Plan to increase the participation of people with a disability in paid employment in the community?

Ms KRISTINA KENEALLY: The priority for the New South Wales Government through State Plan is to expand the engagement of people with disability in work, education and community life, and to address the underrepresentation of people with a disability in training and employment. For those people whose disability means they are not able to or choose not to work, our aim is to assist them to participate in and make contributions to the community and otherwise. To achieve these aims the Government's 10-year plan for improved disability services—Stronger Together—involves real

increases in funding over \$1.3 billion in the first five years. Of this funding, \$270 million is for expanding programs that specifically target improving opportunities for community participation and transition to work.

Other elements of Stronger Together will contribute also to improving community participation through more emphasis on helping people to remain in their own home environment, and innovative supportive accommodation models, which promote community engagement and services such as therapy and attendant care that enables some people with a disability to participate more fully in community life. In addition, Better Together, which was launched in February 2007, focuses on making general services across government work better for people with a disability. It aims to better utilise the \$2.5 billion a year that the New South Wales Government spends on services to assist people with a disability. The State Plan target is to close the gap in the unemployment rate between people with a disability and the overall community by 50 per cent by 2016. This is equivalent to around 6,000 jobs.

We are using a multipronged approach to create more employment opportunities for people with a disability. Many people with a disability need additional development to be work ready. The Government introduced the transition to work program in 2005 to assist school leavers to develop skills that will enable them to transition to employment or further education within two years. This investment will deliver substantial gains to the number of people with a disability being work ready and entering the workforce. In 2006-07 1,389 people were supported in this program. It is anticipated that at least 3,000 jobs will be provided through successful employment transitions through the transition to work program.

The remainder of the target will be met through new strategies targeting the public and non-government sectors working in partnership with the private sector. As part of this, the department has invested \$180,000 in the Australian Employees Network on Disability to fund a coordinator to increase awareness and plan employment opportunities in the private sector. The State Plan target aims to increase the out-of-home participation rate of people with a severe or profound disability to at least 85 per cent by 2016. This is equivalent to an additional 8,900 people participating in the community. It is anticipated that this target will be wholly met or almost wholly met through the substantial investment in new and expanded programs under Stronger Together.

The community participation program focuses on building life skills to provide community participation for all people who leave school and are unable to transition to work or further education. In 2006-07 as part of Stronger Together new arrangements have been implemented to provide better value, accountability and quality of service to young people with a disability. There are approximately 2,000 people in this program and each year between 400 and 500 are expected to enter the program. Participants now are guaranteed at least four days of service per week and five days for people with very high support needs. In addition, we are expanding current day programs and respite services and developing new programs that target people particularly at risk of becoming isolated and having limited community participation.

Such initiatives are the ageing care respite program. So far we have funded 125 new flexible day options and 19 new support coordination services throughout New South Wales for people with a disability who are cared at home by older parent carers, and the development of supports for young people in or at risk of entering a nursing home. Other related initiatives undertaken in 2006-07 included a \$1 million boost in funding to the Department of the Arts, Sport and Recreation for the disability assistance program. This program focuses on creating regular and ongoing participation activities for people with a disability across New South Wales over the next four years. A grant of \$1 million was provided in 2006-07 to trial programming of innovative supports for people with acquired brain injury and motor neurone-related disabilities. A contribution of \$150,000 was made to the Best Buddies program, a not-for-profit group that facilitates one-to-one friendships between members of the community and people with an intellectual disability.

The New South Wales Government also has assisted people with a disability to participate in the upcoming Federal election through the production of a voter guide. I might add that at a time when the Commonwealth Government is winding back its funding for disability services in New South Wales, it is important that people with a disability, their families and their carers can have their say on election day. The guide outlines a range of supports available to people with a disability to access

voting. It outlines services such as postal voting, pre-poll voting, accessibility supports available at polling places and how to access them. I note too that John Howard has changed the Australian electoral laws to close the electoral roll when the election was called.

CHAIR: Minister, can you please just refine your responses to relate to the New South Wales budget. I think you are testing our patience a little bit.

Ms KRISTINA KENEALLY: I think it is very important that people with a disability have the opportunity to participate in elections at a time when we are trying to support people with a disability to participate more in the community.

CHAIR: Absolutely. If you could just move on to discuss the New South Wales budget, that would be great.

Ms KRISTINA KENEALLY: Part of our budget went towards the production of this voter's guide, which has encouraged people to ensure that they are correctly on the roll and advises them how they can access supports that enable them to vote.

The Hon. GREG DONNELLY: What new measures is the Government implementing to provide increased supported accommodation respite services for people with a disability, their families and carers?

Ms KRISTINA KENEALLY: In preparation for Stronger Together, in the consultation process that preceded it, we listened to people with a disability, their families and their carers as well as to representatives of the services that support people. Stronger Together details how we provide this greater assistance, beginning with an immediate \$154 million investment in 2006-07 and a further \$192 million this financial year. There are more than 8,500 supported accommodation and intensive in-home support packages provided across New South Wales for people with a disability. Since 1999 more than 1,600 people with a disability received new supported accommodation or intensive in-home support assistance.

Under the Government's Stronger Together plan, we will provide a further 1,400 new specialist accommodation and in-home support places over five years and 340 specialist support places are rolling out in the first two years. To date 72 young people leaving the care of the Department of Community Services have transitioned to disability support services. Some of these approvals are interim, pending placement in recurrently funded accommodation support services. Forty-one people who have demonstrated a high risk of reoffending have been supported under the criminal justice project and locations have been identified, and purchasing arrangements advanced, for 123 specialist accommodation support places. Of these 123 places, 73 were subject to open tender, and the successful providers were recently announced. A further 14 places have been directly allocated and direct allocations for the remaining 36 places are currently being finalised. In some places, property acquisition and modifications require lead time. Wherever possible, short-term rental options are being explored as interim solutions.

Our emphasis on Stronger Together is not just on group homes. Instead, the focus will be on providing new models of supported accommodation to people with a disability. There is no one size fits all when it comes to disability support services and accommodation. Just recently I announced that the Iemma Government will trial a new supported accommodation model aimed at encouraging more social interaction and greater flexibility for people with a disability. We will trial the intentional communities model for two years and will support this trial with \$760,000 a year which is part of a \$2.4 million package to trial premium innovative service models. An intentional community is one that allows people with a disability and their families and carers to be involved in everyday decision making, management, and operation of their accommodation and support services. The members of an intentional community usually have a common interest, such as social activity, cultural links or religious beliefs.

Intentional communities can also create a pathway for home ownership or long-term tenancy within a supported and sustainable community environment. The trial confirms the Iemma Government's commitment to providing flexible accommodation options and a wide range of community support services to people with a disability. As we know, carers play a significant role in

supporting people with a disability to live at home and to participate in the community. Carers are usually family members who provide care and assistance to others, including children and adults with a disability and frail older people. We know that caring for someone you love can be immensely challenging, but also immensely rewarding. We also know that carers need care too. They need to know that they are valued and that practical support is available to make their role little bit easier. The New South Wales Government understands the importance of respite for people who care for a person with a disability and is committed to expanding its services. That is why Stronger Together provides an additional \$62 million over five years for new respite places.

In the 2006-07 financial year the Department of Ageing, Disability and Home Care rolled out 1,062 new respite places including 879 places under Stronger Together. These were made up of 164 new flexible respite places and 715 centre-based respite places. Of these new respite places, 856 were the subject of a tender included in June 2007, 17 community-based organisations were funded to provide a mix of flexible and centre-based respite to people with a disability in diverse locations across New South Wales, and the remaining 206 places were directly allocated to service providers in February and March 2007. Of these, 165 are centre-based places, with 41 in metropolitan areas, 25 on the mid North Coast, 31 in the Illawarra and 68 in the Riverina. The other 41 flexible respite places have been allocated in the Hunter and on the Central Coast. A further 52 places in south-east Sydney will be the subject of tender by the end of the month.

This rollout of respite places is in addition to the 791 places which have already been rolled out for the older parent carer's respite. Under the 2007-08 State budget that was announced on 19 June, the second year of Stronger Together provides \$8.2 million this financial year. This will fund places established in 2006-07 as well as new respite projects that will trial innovative ways of providing flexible respite to support families with young children, assisting teenagers to develop links with recreational and social activities as well as projects to improve the way that flexible and centre-based respite services support children and adults with challenging behaviour. The Government has a commitment to improving the outcomes from respite services for both the carer and the person with the disability. In 2007-08 we will focus on the delivery of a greater range of options for better equity and outcomes.

That Stronger Together is making a real difference in New South Wales is demonstrated by the significant increase in respite places across the State. Respite places are giving carers a much-needed break from their important role, and provide family members with meaningful social, recreational and life skills opportunities.

The Hon. GREG DONNELLY: Thank you for your detailed answer, Minister.

The Hon. CHRISTINE ROBERTSON: Minister, my question is: What measures has the Government undertaken to protect older people from all manners of abuse?

Ms KRISTINA KENEALLY: The mark of a decent community is one that takes care of all its citizens. Any incident of harm to an elderly person in our community is of great concern. All serious crimes, whether committed in the community or in residential aged care, should be reported to the New South Wales Police Force for investigation and appropriate action. It is important that appropriate processes are in place to ensure a coordinated response to a report of abuse of an older person or older people. That is why earlier this year I launched the New South Wales Government's inter-agency protocol on responding to the abuse of older people.

This protocol reflects the Government's commitment to ensuring the safety of older people continues to be a priority. The most important principle underpinning this protocol is that older people are entitled to the same level of protection as are any other members of our community. Key to the protocol is this Government's position that abuse of older people is a criminal offence. We expect our agencies and funded services to respond to suspected cases promptly. Sadly, the abuse of older people can include neglect, physical abuse, sexual abuse, psychological abuse and financial abuse, and can constitute drastic violence. The protocol has been designed to provide workers, including volunteers and agencies working with older people, with a clear understanding of the various roles that the New South Wales Government agencies play in the process of responding to abuse of older people in the community. It offers a practical framework that Government and non-government

agencies working with older people can apply in their response to the abuse of older people living in community settings.

In preparing this document, the agencies involved have been mindful that responding to abuse of older people can be complex, particularly as it can include abuse by a friend, a relative, a carer or a paid or unpaid worker, partner abuse or abuse of parents by their adult children. It has been informed by national and international experience and best practice and service delivery practice, legislation and approaches to victims' rights. The protocol has been widely distributed across New South Wales to government agencies and funded services that provide support for older people. The New South Wales Government is committed to ensuring the safety of our most vulnerable community members. This protocol will ensure that older people's rights and dignity are protected if an incident of abuse is reported. We will continue to work hard to improve services that support older people to lead safe, enjoyable, healthy and productive lives in New South Wales.

The Hon. TONY CATANZARITI: What is the Government doing to address the issue of the social isolation of older people?

Ms KRISTINA KENEALLY: Older people make up the largest group of single-person households in New South Wales, with 27 per cent of older people living alone. Social isolation is a concern for the whole community and some older people are isolated from neighbours, families and friends. The Government provides or funds a range of services that assist in identifying and supporting older people who may be isolated. For example, a wide range of services are funded through the Home and Community Care Program, and these play an important role in helping to link isolated people with support in their own communities. This includes activities by the Home Care Service of New South Wales.

The Home Care Service is the largest provider of in-home services, with more than 50,000 people receiving support in the last financial year. Home Care Service staff assist people to develop plans that include contact names and phone numbers of individuals who can be contacted in the case of an emergency. They also encourage people to think about how they want to link with a trusted person or network of people who can look out for them. Some older people develop reciprocal arrangements with trusted neighbours based on leaving a signal that they are safe and well, such as opening a curtain on a certain window each morning. Other older people may be referred to a service such as Telecross, a volunteer-based service coordinated by the Australian Red Cross, where a phone call is made each morning to check on their safety and wellbeing. In 2006 a one-off \$1.5 million funding boost was provided so that Telecross could recruit and train more volunteers and spread the word not only about the service but about the valuable contribution that community members can make through volunteering a small amount of time each day.

Recognising the potential risk of social isolation for older people living in public housing, the Government is also establishing the Care Call Program to provide regular phone calls to frail older people living alone in public housing. The Government is also supporting innovative demonstration projects aimed at reducing social isolation and improving intergenerational relationships. For example, we are currently implementing the intergenerational Aboriginal project in partnership with Campbelltown City Council. The Ministerial Advisory Committee on Ageing is also undertaking a project on building good communities for older people and is working on strategies that will assist in reducing the social isolation of older people. As part of this project during Seniors Week 2007 the committee ran "Living Alone, Staying in Touch" seminars in Bankstown and Sydney, which provided practical advice and information to older people who were living alone or were at risk of living alone.

The Hon. JOHN AJAKA: Minister, did you receive a cheque for \$10,000 from the Transport Workers Union?

Ms KRISTINA KENEALLY: No.

The Hon. JOHN AJAKA: You or anyone on your behalf have never received a cheque—

Ms KRISTINA KENEALLY: Not for \$10,000.

The Hon. JOHN AJAKA: Have you received any cheque from the Transport Workers Union?

The Hon. GREG DONNELLY: Point of order: As the Hon. John Ajaka would know, the nature of questioning during an estimates hearing goes to addressing questions to the Minister that fall within the purview of the areas for which she has responsibility as a Minister of the Crown. That is the nature of the questions that should be directed to the Minister. The Hon. John Ajaka's question clearly does not relate to that area, and therefore I respectfully request that you rule it out of order.

The Hon. JOHN AJAKA: To the point of order: This question clearly falls within the area of ministerial probity and I am definitely entitled to ask it. The Hon. Greg Donnelly more than anyone else should know that.

CHAIR: I think the question is relevant if it concerns the Minister's role as a Minister and the budget estimates. We have allowed fairly broad latitude in questioning this morning—for example, we have discussed transport issues and we have discussed the Federal Government at length. We have had latitude regarding the Minister's roles and responsibilities. Perhaps the Hon. John Ajaka would like to rephrase the question so that it relates to the Minister's portfolio.

The Hon. JOHN AJAKA: The Minister has indicated that she did not receive a cheque for \$10,000 from the Transport Workers Union. Minister, did you receive any cheque from the Transport Workers Union? If so, how much and who handed you the cheque?

The Hon. GREG DONNELLY: Point of order: Questions directed to the Minister must relate to her ministerial responsibilities. This line of questioning is out of order and the question should be struck out.

The Hon. JOHN AJAKA: To the point of order: I maintain the same position as I outlined earlier. The question clearly goes to ministerial probity. It is a very simple question.

Ms KRISTINA KENEALLY: Madam Chair, I will resolve the situation for you. This matter has already been canvassed in the *Sydney Morning Herald* or the *Daily Telegraph*—some paper of record—so I suspect that Mr Ajaka could simply Google my name and find out about it if he really wanted an answer. But for the benefit of the Committee I confirm that I received a \$2,000 campaign donation from the Transport Workers Union for a function that I held in November 2006. I became aware quite recently that there were concerns about the legitimacy of that donation on the part of the Transport Workers Union and its membership. When I became aware of that the money was repaid.

The Hon. JOHN AJAKA: Was the money banked? When you say that it was repaid, it was not a matter of handing back the cheque. The money had been banked and you had to write out a new cheque.

Ms KRISTINA KENEALLY: Yes, the money was banked in November and, yes, a new cheque was written out.

The Hon. JOHN AJAKA: Minister, did you consider that even in November when the cheque was received that the donation was not appropriate.

The Hon. GREG DONNELLY: Point of order: The nature of this question is clearly outside the domain of the Minister's portfolio responsibilities.

CHAIR: Nevertheless the Minister has demonstrated her willingness to answer the question. I know that you are trying to help her but the Minister is in the middle of her response to the question. We will hear her answer.

Ms KRISTINA KENEALLY: It is disappointing that this line of questioning has been taken up. I would have thought the Opposition would like to explore other issues in the areas of Ageing and Disability. But in fact it would rather explore this matter. As I said, the matter has been canvassed publicly and I am happy to repeat here what I have said publicly—although I think it wastes your

time, Mr Ajaka. I was unaware in November that there were concerns. As soon as I became aware of concerns I made sure that the money was repaid.

The Hon. JOHN AJAKA: Who in the union paid the cheque?

Ms KRISTINA KENEALLY: I cannot remember who signed the cheque. Mr Ajaka, if you have any questions about therapy, respite, supported accommodation, older people and the impact of the ageing population I will be more than happy to answer them.

CHAIR: I am sure that the Hon. John Ajaka has a number of questions.

The Hon. JOHN AJAKA: Point of order: Minister, it is all very well to sit there and hand down pro forma, prepared answers but I simply ask you to listen to the questions and answer them. I have many questions.

The Hon. TONY CATANZARITI: What is the point of order?

The Hon. JOHN AJAKA: If the Minister did not continually deliver pro forma answers we would have more time for questions. Minister, you or one of your staff indicated—

The Hon. TONY CATANZARITI: To the point of order: Madam Chair, can you please rule on the Hon. John Ajaka's point of order?

The Hon. JOHN AJAKA: If you are asking what my point of order was, it was this—

The Hon. TONY CATANZARITI: I am asking the Chair to rule on the point of order.

CHAIR: I was unaware that there was a particular point of order before the Chair; I thought the Hon. John Ajaka was continuing his line of questioning.

The Hon. GREG DONNELLY: No, he was giving us a gratuitous lecture.

The Hon. TONY CATANZARITI: The Hon. John Ajaka took a point of order. What is your ruling on that point of order?

CHAIR: I will have to seek clarification on what the point of order was.

The Hon. JOHN AJAKA: My point of order was this: The Minister seems happy to lecture me about wasting time by asking particular questions. If she answered questions quickly and in accordance with how they are framed we would not waste time; we would have sufficient time. That is my point of order.

CHAIR: I do not think there is a particular point of order except that relevance is an issue. Time is ticking by. Perhaps the Hon. John Ajaka would like to ask some more questions.

The Hon. JOHN AJAKA: In light of the confirmation that there are available funds for home modifications under the Home and Community Care Program, are you aware of people who are applying and missing out on the actual grant due to last year's backlog?

Ms MILLS: As with all programs, there are significant demands on resources. As I said, there was a new allocation of funds this year. There may be individuals who have not yet been able to be assisted because there is a prioritisation system and there is obviously a fairly robust assessment system about the costs and the nature of the work, so it would not be surprising to say that at any one point in time there is somebody who has expressed an interest in the program and is awaiting a service. However, there are, as I said earlier, funds allocated each year to assist this program and it is a growth program.

The Hon. JOHN AJAKA: Has anyone been told that there is no money available this year, you are waiting for further funds to be allocated, due to last year's backlog?

Ms MILLS: I am not aware of that, but the program is highly decentralised and is not run directly through the department but through the home modification non-government organisations. What an individual organisation may correctly or incorrectly advise a client I cannot comment on in each case, but I can say that if there are issues of pressure on the budget they are normally brought forward through the home modification program peak body to us and we would make decisions about any additional allocation if we were aware of them.

The Hon. JOHN AJAKA: What is the current backlog or waiting list for home modifications?

Ms MILLS: It is not possible to answer that because it is a highly decentralised system and it works at a very local level.

The Hon. JOHN AJAKA: So you do not have a total figure of all of those waiting for their home renovation applications?

Ms MILLS: Not held centrally in the Department of Ageing, Disability and Home Care, no.

The Hon. JOHN AJAKA: Could you take that on notice?

Ms MILLS: I am willing to take it on notice to provide the best available advice.

The Hon. JOHN AJAKA: How many properties does the department own for supported accommodation group homes?

Ms KRISTINA KENEALLY: Is your question how many do we operate?

The Hon. JOHN AJAKA: How many do you actually own, and the second part of the question is how many do you operate that you do not own? If you are looking up the answers it may take some time.

Ms KRISTINA KENEALLY: The department operates or funds over 600 group homes and 33 large residential centres across New South Wales.

The Hon. JOHN AJAKA: How many are actually owned by the department?

Ms KRISTINA KENEALLY: So you are asking how many are owned and how many are leased? Is that the distinction you are looking for?

The Hon. JOHN AJAKA: You have told me now that you operate 600.

Ms KRISTINA KENEALLY: Right.

The Hon. JOHN AJAKA: I am asking how many do you actually own, and I will assume the difference would be the ones you do not own.

Ms KRISTINA KENEALLY: I am not certain if this is what you are looking for, but I can advise you that in 2006 there were 298 department-operated group homes and 303 non-government group homes. This is an increase of six department group homes and 91 non-government group homes.

The Hon. JOHN AJAKA: I am still looking for the figure of what the actual department owns.

Ms KRISTINA KENEALLY: Assets?

The Hon. JOHN AJAKA: Yes, as registered proprietor on the title deed.

Ms McALPINE: I am able to provide information that we have an asset portfolio of 458 group homes, 50 respite centres and 33 day programs. The department owns and operates 61 per cent

of them; we lease and operate 14 per cent; and we own and non-government organisations operate 25 per cent.

The Hon. JOHN AJAKA: Of those, how many are not being used for the provision of services by the department?

Ms McALPINE: There are currently 19 group homes or respite properties that are vacant pending sale and that represents 3.5 per cent of the asset portfolio. That is a vacancy rate of 3.5 and that is within normal limits for an asset portfolio.

The Hon. JOHN AJAKA: There is a waiting list for these properties, is there not?

Ms McALPINE: Can you give me some more information?

The Hon. JOHN AJAKA: Is there anyone on a waiting list that needs access to these services or these properties currently?

Ms McALPINE: We hold service registers for people who have expressed an interest in supported accommodation.

The Hon. JOHN AJAKA: And who are waiting?

Ms McALPINE: Yes.

The Hon. JOHN AJAKA: And there are 19 vacant homes?

Ms McALPINE: Those homes are generally pending sale because they are inappropriate; for example, bathrooms are no longer suitable, two-storey properties or where slopes in grounds are such that an ageing client population cannot use them any more.

The Hon. JOHN AJAKA: And when they are sold do the funds go into buying 19 replacement homes?

Mr MUDGE: The funds go back to Government in terms of receipt and then in the following year's capital program we make additional funding to replace with new homes.

The Hon. JOHN AJAKA: What is the current waiting list now—average time?

Ms KRISTINA KENEALLY: The department has had a policy in place since October 1996 to address issues relating to vacancy management for individuals. A key intention, as I said earlier, of Stronger Together is to develop fair and clear guidelines for eligibility and a priority of access for services. To facilitate that we are currently developing a new policy of covering the placement, the movement and the exit of people in supported accommodation services.

The Hon. JOHN AJAKA: My question was what is the waiting list? Please, we have a limited time.

Ms KRISTINA KENEALLY: Within the current approach to vacancy management the department does not maintain waiting lists for accommodation services. We do maintain regionally based service registers. This approach better suits the changing circumstances of people with a disability and the desire of people with a disability and their families to be located in a region where they grew up and with which they are familiar. Individuals requesting permanent accommodation are assessed and a resident profile is developed. When a vacancy occurs a profile of that—

The Hon. JOHN AJAKA: Minister, please, how long can someone be on the waiting list? That is all I am after.

Ms KRISTINA KENEALLY: That question is not quite a sensible question in that people's needs change and a person may not have a need for supported accommodation at all today but, due to say the unexpected death of their carer or some other unexpected event, may move quite quickly to a

position of needing accommodation. Therefore, it is not a case of maintaining a waiting list whereby people slot up every time a vacancy occurs. What I was attempting to explain before you interrupted me was that, when a vacancy occurs, a profile of that vacancy is created and it is matched against the available profiles of people in that region who are seeking supported accommodation.

The Hon. JOHN AJAKA: How many are on the waiting list in a particular region on average? I am just trying to get a number. I am trying to understand whether we are talking about two people or 200 people?

Ms KRISTINA KENEALLY: I can provide you with that information. The total number of individuals who have a request for accommodation, as at 30 June 2007, is 1,596.

The Hon. JOHN AJAKA: As I understand it, there are 19 vacant homes, which are up for sale and will take some time to sell. When they are finally sold the money will go back to Treasury, if I can put it that way, and you will then apply for replacement of those funds in the next budget to try to acquire replacement 19 homes and, while all of that is happening, we have 1,596 people on the waiting list. That just makes no sense to me, I am sorry.

Ms KRISTINA KENEALLY: In fact, Mr Ajaka, we will exceed those 19 homes through Stronger Together and I am not going to sit here and read out a document that you could read for yourself, but I would suggest that you pick up a copy of Stronger Together and turn to the back where the last two pages detail quite significantly the number of supported accommodation places that we will be rolling out under Stronger Together. If you were really concerned about this I would encourage you to pick up the phone to Mal Brough and get him to take up our \$428 million offer because if he put another \$428 million into this State for supported accommodation and respite we would be able to significantly enhance our services.

The Hon. JOHN AJAKA: Your Government has been in government for the last 11 years and your answer is that there are currently 1,596 people on the waiting list. That speaks for itself, does it not?

Ms KRISTINA KENEALLY: It is important to recognise that this is not a waiting list, it is a vacancy management request. We encourage people to let us know if they anticipate that they will have a need for supported accommodation in the future. It is important to recognise not all of these people are putting down a request for a supported accommodation place today. Some are letting us know that they anticipate a need in the future, and if you had not interrupted me several times I think you would have understood a bit better that it is not a case of people notching up a waiting list. It is a case of ensuring that—

The Hon. JOHN AJAKA: It is a waiting list with another name. That is all it is. It is a waiting list with another name.

Ms KRISTINA KENEALLY: It is a case of ensuring that—

[Interruption]

The Hon. TONY CATANZARITI: Let the Minister finish her answer.

The Hon. JOHN AJAKA: We have a limited amount of time and the Minister simply wants to continue with her pro forma answers.

The Hon. TONY CATANZARITI: Do not ask the question if you do not want the answer.

The Hon. JOHN AJAKA: It is not a matter of not wanting the answer. It is a matter of having an answer to the question asked. So it is simply a waiting list with another name. That is it.

Ms KRISTINA KENEALLY: It is not. It is a case of matching people with disabilities to the most appropriate type of accommodation with the most appropriate people they should be living with in a group home. You are simplifying it, and by simplifying it you are demonstrating a rather

pathetic sense of ignorance about the needs of people with a disability and how they need to be accommodated in supported accommodation.

The Hon. JOHN AJAKA: Minister, it is 1,596 people. I am not being pathetic when I say that I am concerned about the fact that we have 1,596 people waiting in this State.

Ms KRISTINA KENEALLY: And we have a plan under the Iemma Government called Stronger Together that is rolling out 1,400 new supported accommodation places and intensive in-home support places. It is fair to say that the Opposition has not produced one plan or one new promise. It went to the election treating some of the most vulnerable community members with such contempt that they did not bring a plan before the electorate. We brought a plan, a historic injection of funding—\$1.3 billion. Imagine what we could do if the Commonwealth matched our bilateral offer of \$428 million!

The Hon. JOHN AJAKA: How many case manager vacancies are there currently in the Department of Ageing, Disability and Home Care?

Ms KRISTINA KENEALLY: We will take that on notice.

The Hon. JOHN AJAKA: What is the average length of employment for a case manager?

Ms KRISTINA KENEALLY: We will take that on notice.

The Hon. JOHN AJAKA: How many people on the New South Wales disability service needs register have a carer? I am aware of the time; I am happy for you to take that on notice.

Ms KRISTINA KENEALLY: An analysis of the Commonwealth-State-Territory Disability Agreement minimum data set in 2005-06 estimated that in New South Wales approximately 520 users of disability services were co-resident with their ageing parent carers aged 65 and over. This data does not provide any information as to whether the ageing parent carers themselves were accessing services. The new home and community care minimum data set includes more detailed information about carers, including a linkage key that enables the identification of the relationship between carers receiving services and care recipients.

An analysis of the home and community care minimum data set in 2006-07 estimated that in New South Wales there were more than 6,500 carers aged 65 and over using home and community care services, and that approximately 240 of these carers were caring for their son or daughter. It is anticipated, however, that actual service levels were higher than stated as the proportion of home and community care agencies that submitted these new data elements was lower than expected. In 2006-07 the home and community care minimum data set showed that carers aged 65 and over caring for their son or daughter were using one or more of the range of home and community care services. In their roles as carers, approximately half of these service users were using home and community care respite services and carer counselling.

Approximately half of these service users also receive case management and client care coordination services. As home and community care clients, approximately 20 per cent of these service users receive social support, transport and domestic assistance services. A small number of these service users also receive meals, personal care, nursing care and home maintenance services. A number of programs are being rolled out by the department, jointly funded with the Commonwealth, that are targeted specifically at this population of ageing parent carers caring for sons and daughters with a disability. As I said, in 2005-06, 791 flexible respite packages have been rolled out, and this will increase to 903 packages in 2006-07 and 2007-08.

In addition, 125 flexible day option packages are being rolled out. Support coordination services are also being provided to ageing parent carers, with about 2,000 families expected to be serviced per year. The Australian Bureau of Statistics survey of ageing, disability and carers 2003 estimated that there are 149,700 primary carers in New South Wales. Nationally, the survey showed that about 59,000 primary carers are co-resident carers of sons and daughters. Ninety-five per cent of these carers were under the age of 65. Due to the size of the sample it is not possible to provide

accurate estimates of the number of co-resident primary carers in different age brackets caring for sons and daughters with a disability in New South Wales.

Ms LEE RHIANNON: I want to revisit an earlier question about people with disabilities in hospital who cannot leave hospital because of, say, a problem with home care. Just staying with home care specifically, have you considered working out a regime where the home care is not cancelled but simply postponed, so when people are ready to leave hospital they can do so? It would seem that this issue could be easily solved if we have a whole-of-government approach.

Ms McALPINE: Where we are holding hours for people who are in hospital, it means that they are undelivered hours, and we would then finish a financial year with a significant underspend.

Ms LEE RHIANNON: Could those hours not be delivered to somebody? Could that be managed so that they are delivered to someone?

Ms McALPINE: It is very difficult to start to deliver hours to someone and then take them away when the person whose hours they are exits hospital.

Ms LEE RHIANNON: Is it possible to have flexibility within the system to allow it? I am wondering whether it is ending up more expensive to keep people in hospital rather than having flexibility to allow a bit of give and take in how home care is delivered.

Ms McALPINE: Very few people approach us for occasional service through home care. Generally, they are people who need assistance regularly.

Ms MILLS: You referred specifically to people with disability as opposed to the majority of home care clients, who are frail aged people rather people with a disability. For people with a disability who are receiving higher levels of support, such as through the Attendant Care Program, there is a structure within there that allows the banking of hours, which recognises that their needs may include periodic hospitalisation. So for those clients for whom it is an appropriate model, it already exists.

Ms LEE RHIANNON: So you are saying that a banking of hours exists for people with disabilities who go into hospital but not for elderly people.

Ms McALPINE: Only the people who are using the Attendant Care Program.

Ms LEE RHIANNON: Is that something that you think needs to be looked at so we have some flexibility? It sounds as though it could easily be solved by getting some heads together to work out some flexibility.

Ms KRISTINA KENEALLY: The answers that Ms Mills and Ms McAlpine have given, in my judgment, suggest that it is not an easy solution in order to ensure that we do not have an underspend of hours but also that we deliver services to people who need them most.

Ms MILLS: I think that is right. In addition, there are quite close local relationships between discharge planners and community care service providers. Where relationships exist we use the community options service, which also does assessments. I think there is a difference between remembering a client, particularly for low-level home care services, does not always have a long wait for service. The vast majority—over 80 per cent of clients of the home and community care system—who receive domestic assistance or personal care receive quite low levels of weekly service, and that can be picked up relatively quickly. The clients for whom the issues you are raising are more significant are people who need very high levels of support and they tend to be people who are able to access the Attendant Care Program.

Ms LEE RHIANNON: Is the Department of Ageing, Disability and Home Care about to have another restructure?

Ms KRISTINA KENEALLY: No.

Ms LEE RHIANNON: A straight no—you do not need to take the question on notice and check?

The Hon. CHRISTINE ROBERTSON: How does Mr O'Reilly feel about that?

Ms LEE RHIANNON: How many children under the age of six have been assessed as eligible to receive services under the developmental delay criteria in the Intellectually Disabled Persons Service Act?

Ms KRISTINA KENEALLY: I will take that on notice, Ms Rhiannon.

Ms LEE RHIANNON: Could you give a figure for 31 December 2006?

Ms KRISTINA KENEALLY: Yes.

Ms LEE RHIANNON: I have quite a few issues related to that so I will give you questions on notice. How many of the children assessed as eligible receive those services? When you assess them do they all get the services, can you give the Committee an idea of that?

Ms MILLS: I believe we would need further clarification and would be happy to talk to you out of session to get more detail, because there are a number of different assessment processes. It depends on what sort of services you are talking about. In terms of diagnosis and assessment conducted by the Department of Health for developmental delay, there are linkages between the Department of Health and our local client service teams to provide services. I need to have a better understanding of the categories of client you are asking about.

Ms LEE RHIANNON: I have some of that with me. Of those eligible to receive services in each of the categories, what was the average amount of hours allocated to each child? What was the greatest number of hours allocated to each child for speech therapy, physiotherapy, behavioural intervention, case management, occupational therapy, autism and specific services? If you would take that on notice we can take it from there.

Ms KRISTINA KENEALLY: Yes, we can do that.

Ms LEE RHIANNON: I am trying to understand the Family Assistance Fund. I have been told that some families are told that they can apply for \$5,000 under that fund and other families with equally high needs have been told they can apply for only \$2,000. Can you explain what appears to be a discrepancy, or how the rules work?

Ms KRISTINA KENEALLY: The Family Assistance Fund is available for \$2,000 grants of a non-recurrent nature. For example, some families have used the money for home modifications. One family had a child with autism and used the money to take the first family holiday that they had had in six years. The fund is for grants up to \$2,000.

Ms LEE RHIANNON: So there was no grant for \$5,000; that was incorrect information?

Ms MILLS: There is another program that provides brokerage funds through a case manager. That is available for up to \$5,000, so there may be some confusion about the source of funding.

Ms LEE RHIANNON: I will check my notes. What is the current status of the new draft legislation of the Youth and Community Services Act 1973 that is much needed in improving the monitoring of the care in the standard of licensed residential centres, such as boarding houses? When will that be introduced into Parliament?

Ms KRISTINA KENEALLY: You are correct in saying that the Department of Ageing, Disability and Home Care is responsible for regulating and monitoring licensed boarding houses under the New South Wales Youth and Community Services Act. I am not certain how much time we have, but I will touch very briefly on this. We are responsible for administering the boarding house

reform program, which provides significant funding to the 850 people who are currently residing in the 50 licensed residential centres in New South Wales.

Currently the Government is considering options on how to progress legislative reform with regard to the Youth and Community Services Act. This is to ensure appropriate support and standards for people with a disability living in a boarding house and about maintaining viability in the industry. At both officer and ministerial level I am in conversation with the Minister for Fair Trading on how we might advance the review of the organisation Autism Spectrum Australia, known as Accept, and come to some conclusion in the near future. If there is scope for Fair Trading to have a greater role in licensing boarding houses in our responsibilities as monitors of licensed boarding houses, I would welcome that and am currently having those discussions.

The Hon. CHRISTINE ROBERTSON: Do you have any further information you wish to give the Committee to elucidate previous answers?

Ms LEE RHIANNON: I have never had any elucidation in a Committee before.

CHAIR: Are you seeking any specific elucidation?

The Hon. CHRISTINE ROBERTSON: No, the Minister has some information regarding previous questions that she would like to deliver to the Committee, please.

Ms KRISTINA KENEALLY: The Hon. John Ajaka raised the issue of a client who has had an extended stay in a respite facility and acknowledged that the length of stay is unacceptable. I advise that that client has been offered a number of permanent accommodation options during his stay but they were rejected by his father. The department has endeavoured to engage with the client's father on alternative accommodation options. However, the father resides overseas, making that engagement somewhat difficult. I am advised that a meeting is scheduled for this week, when the father is returning to Australia. That meeting has been scheduled for some time. The department did attempt to have a telephone discussion, but it was the father's request that this meeting be face to face.

Earlier, the Chair asked questions about a discussion paper concerning older drivers. I can confirm that my Ministerial Advisory Committee on Ageing has met with the Roads and Traffic Authority to raise a number of issues and has agreed that a formal submission to the Roads and Traffic Authority will be provided by tomorrow. The authority has agreed to accept the submission and is aware of the delay. The delay came about because the Ministerial Advisory Committee on Ageing has had extensive involvement in conducting four regional consultations for Ageing 2030, as well as the consultation here at Parliament House.

Ms Lee Rhiannon raised the Appliances for Disabled People scheme relating to the provision of appliances and aid for people with a disability. I have already informed the committee that the department makes an annual contribution of \$2 million, and last year it made a one-off contribution of \$5 million. I add that the reason the program was administered by the Department of Health is that it provides everything from incontinence pads, crutches, oxygen equipment and wheelchairs. It is important to note also that the Program for Appliances for Disabled People is not the only equipment fund of this kind.

The department has its own equipment fund for its own clients who reside in group homes on large residential centres, which is \$2.5 million per annum. For example, the Spastic Centre has an equipment fund for its clients to which the department contributed \$300,000 last year. Following my personal representations to the Premier I was able to make an additional \$220,000 contribution which comes to more than half a million dollars to the Spastic Centre for its equipment last year.

CHAIR: Minister that concludes the questions today. I remind you that answers to any questions taken on notice should be supplied within 21 days. Further questions on notice may be forwarded to you following the Committee's deliberative meeting. The Committee may decide to hold further hearings in the Ageing and Disability Services portfolio. Thank you for your presentation, and thanks to your staff for attending.

(The witnesses withdrew)

The Committee proceeded to deliberate.
