



SOUTHERN SERVICES
reform GROUP

SSRG Workgroup Meeting
Workgroup: In Home Services
Date: 25 July 2012

Present: Jacqui Bowden, Patricia Field, Franca Antonello, Theresa Howard-Jones, Fiona Paterson, Helen Baxter, Sally Warnes (SSRG Project Officer), Bev Bannister (minutes)

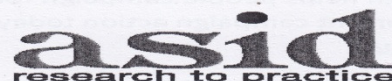
Apologies: Melissa Evans, Anna Howard, Sue Johinke, Leanne Taylor, Melinda Olsson, Frances Rennell, Brenda Johnson, Keith Bettany, Russell Humphrey

Agenda Items	Discussion	Actions
Welcome & Apologies	Welcomes and apologies	
Previous minutes	Minutes approved	
Business arising from minutes	<ul style="list-style-type: none">No business arising	
Discussion Topic	It was decided that it would be useful to have a regular agenda item titled 'discussion topic' at each meeting. If there is still more information required after the initial discussion, a speaker could be invited to give further information. (To have a speaker at each meeting takes up too much of our meeting time.)	

	<p>Consumer Directed Care</p> <ul style="list-style-type: none"> • Sally attended a workshop on consumer directed care in the disability sector and handed out information related to individualised/self-managed funding (see attached below). • All new packages will be 'consumer directed care' • Sally and Jacqui will be attending the National Aged Care Conference on 6 and 7 August. The group would like them to report back about the conference and bring any printed information that was made available. The conference will include a Keynote Address outlining the <i>Living Longer Living Better</i> aged care reform package, a panel discussion on key themes of the aged care reform package including <i>Access, Choice, Quality, Wellness and Reablement</i>, the National Aged Care Assessment Framework and current research and advances in the area of dementia. • Self-managed funds will be the way of the future. • There are levels of consumer directed care – from a coordinator managing funds and services to the consumer being given total control of the funding and managing how it is spent. • There may be insurance issues if friends/family carry out the service. • If the consumer miss-manages their funds and spend it all but still need services....what happens then? • Some qualifications are required for certain services to be performed, what if you have family/friends for this service and they do not have that qualification? • Evaluations done by 'Purple Orange' showed that those consumers accessing consumer directed care funding were buying non-traditional respite services. • What are we going to teach the general public about this? - How are we going to educate them about the possibilities? Some consumers will be competent to manage, but others may not be. • Eventually all existing packages will be converted to consumer directed care. 	
Project Planning	<ul style="list-style-type: none"> • The position description for the Project Officer for 'Health and Community Informed Choices' is being developed. • Funding is for one year – level 5 – 0.6 FT employee • Hoping to get advertisement in next week's Messenger Press and on seek.com • Would like interviews and position finalised before the end of August • The continuing role of the group with the project will be: <ul style="list-style-type: none"> • PO to report to group at each meeting • Group to provide support and feedback to PO 	

	<ul style="list-style-type: none"> • Smaller working group consisting of Jacqui, Sally and Fiona, to write up points/guidelines on what they think the PO position will entail then present to the larger group at the next meeting • Small work group open to all if they wish to attend 	<p>Sally, Jacqui and Fiona to meet and discuss project.</p> <p>Sally to write up outcome of meeting.</p>
SSRG Project Officer report	<p>Dementia –</p> <ul style="list-style-type: none"> • All training sessions on Challenging Behaviours are now finished • Waiting on formal evaluation report, however feedback has been very positive • Dementia Training and Study Centre will probably be offering free training sessions on ‘younger onset dementia’ in the future <p>Southern Regional Alliance Conference –</p> <ul style="list-style-type: none"> • Scheduled for 20-21 September ‘Connecting in the urban Village’. • The Carer Issues Workgroup will be presenting the Working Carers Project with the Equal Opportunity Commission at the conference. <p>Needs and Gaps Survey –</p> <p>Highest reported gaps are:</p> <ul style="list-style-type: none"> • Transport for social • Male specific services <p>An evaluation will be carried out of the results from all metro regions.</p>	
Information Sharing	<p>Russell (ACH)–</p> <ul style="list-style-type: none"> • Maintenance services, security services and modifications are available - there is only a small wait for these services. • Garden services are still on hold so requests are not encouraged until after Mid-August. • Domestic cleaning, green light with A2HC. For those people who contact the service, they are put on an expression of interest and a ‘one off ‘service is given while they wait for longer term support. <p>Helen (Stanhope)–</p> <ul style="list-style-type: none"> • Stanhope have in home respite available <p>Fiona (MRU)</p> <ul style="list-style-type: none"> • Anyone in the community (once released from hospital) can access free services 	

	from MRU with a GP referral or palliative care referral.	
Next Meeting	Wednesday 22 August 2012 2.30 – 4.30 pm Springbank House, 1020 South Road, Edwardstown	



Helpful Information related to Individualised/Self-Managed Funding

1 In Control Australia

<http://www.in-control.org.au>

In Control Australia is a foundation member of In Control International with close links to In Control UK. Through our partnership with In Control UK and other In Control groups around the world we can share information, research, stories, and develop tools to use for self-directed funding.

The web site has links to resources and tools.

2 National Disability Insurance Campaign *Every Australian Counts*

<http://everyaustraliancounts.com.au/>

Every Australian Counts is a people's campaign sweeping across the country, demanding the introduction of a National Disability Insurance Scheme (NDIS), as recommended by the Productivity Commission. The NDIS will revolutionise the way people with a disability, their families and carers are supported in Australia. It will replace all the current state and territory disability systems, because they don't work.

The NDIS will be a modern, person-centred support system, helping hundreds of thousands of Australians with disability and their families to have the opportunity to participate actively in their communities by providing targeted supports aligned to need. The NDIS will be portable – your entitlement to support will be the same wherever you live in Australia.

The NDIS was devised and recommended by the Productivity Commission in July 2011, following an intensive 18-month investigation of the unmet needs of people with disability and their families and carers across Australia, and analysis of high-functioning disability support systems overseas.

The Productivity Commission's recommendations for the NDIS have been welcomed by people with disability and their families, carers and support organisations across the country.

The Federal Government has begun the first stages of implementing the NDIS, but the scheme is not guaranteed, by any political party.

To **Make the NDIS Real** for every Australian, your support counts.

If you want a disability system that works for you – not a bureaucracy – you must make your voice heard to your MP and to the Australian public.

The Every Australian Counts campaign helps people campaign for the NDIS in many different ways. Find out how you can support our current campaign action today by logging on to the web site: <http://everyaustraliancounts.com.au/>

3 Victorian Government & Individualised Funding

<http://www.dhs.vic.gov.au/for-individuals/disability/self-directed-support>

All disability services in Victoria are based on a self-directed approach, which aims to make sure that the services focus on people's needs, aspirations and the choices they make about their lives.

This approach has three components:

- Self-directed planning – Planning that is directed by the person (or is family-centred for children)
- Self-directed funding – Funding that is tied to the person and portable
- Self-directed support – Supports that are flexible and tailored to individual needs.

Self-directed support is the primary means to achieve the goals identified in a person's plan. They can be a combination of informal support, supports provided through generic or community services access by the whole community or funded disability supports.

Self-directed support gives individuals and their families a greater voice and recognises that individuals and their families know what will best meet their support needs.

4 Cara/ACH Group Individualised Funding Pilot Project Evaluation

http://www.cara.org.au/news_and_info/latest_news

This HACC funded project was a collaboration between a disability service provider, Cara and an ageing service provider ACH Group. An independent report was commissioned and undertaken by Purple Orange and can be found on the Cara web site.