



ADACAS

A D V O C A C Y

Submission to the ACT Government 2020-2021 Budget

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Table of Contents

1.	Introduction and About ADACAS.....	3
2.	Priorities and Recommendations.....	4
3.	Conclusion.....	Error! Bookmark not defined.

1. Introduction and About ADACAS

ADACAS appreciates the opportunity to provide comment on budgetary priorities for the ACT Government 2020-2021 budget. As always, we welcome the participatory approach which the ACT Government takes to budget processes.

The ACT Disability Aged and Carer Advocacy Service (ADACAS) has been delivering advocacy for and with people with disability, people experiencing mental ill health (or psychosocial disability), older people, and carers in Canberra and the ACT for 28 years. ADACAS also provides free (advocacy and information to people with disability in parts of NSW: specifically, in set areas of Shoalhaven, the Eurobodalla Hinterland, Batemans Bay, Broulee – Tomakin, Moruya – Tuross Head.

As an advocacy service, ADACAS is frequently working with people who are “falling through the cracks” in current service systems. We advocate on many issues including access to and quality of service in housing, justice, health, education, employment, NDIS and child protection matters.

ADACAS additionally offer NDIS support coordination to a small number of NDIS participants, and have a Projects/research team currently exploring practical responses to issues arising through advocacy and Supported Decision Making. We have also recently commenced delivering support to individuals accessing the Redress scheme for people who are survivors of institutional child sexual abuse, individuals making submissions to the Royal Commission into Aged Care Quality and Safety, and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability.

ADACAS acknowledges the traditional owners of the lands on which we work, and pay our respects to their Elders, and to all Aboriginal and Torres Strait Islanders in our communities.

2. Priorities and Recommendations

With this ACT Budget submission, ADACAS has chosen a focus on justice and equitable outcomes for our client groups (people with disability, people who experience mental ill health, older people and carers).

We accordingly request consideration of the following priorities:

- **In Mental Health:**

ADACAS draws attention to the serious gaps continuing to emerge in the available community-based clinical and non-clinical services to support people experiencing mental ill health.

Whilst previously people with severe or persisting mental ill health may have been able to access Commonwealth Funded programs such as Support for Day 2 Day Living (D2DL), Personal Helpers and Mentors (PHaMS) and Partners in Recovery (PIR) with the closure of these programs, and the underfunding of block funded ongoing supports via NDIS Information, Linkages and Capacity programs, there are significant numbers of people now without adequate support. Whilst a small proportion of this group have been found eligible for an individual package of support from the NDIS, many are ineligible for NDIS entry.

The National Psychosocial Support Measure (NPS-M) programs that were funded for NPS-M in the ACT are short term (at most up to 1 year of support, usually max 1-1.5 hours a week) and are unable to cater for anywhere near the numbers that were accessing the earlier programs.

People with co-occurring mental ill health and complex health issues and/or disability) are experiencing very profound and significant gaps in available services.

Whilst the CASP service is able to assist to a small degree (up to 5 hours a week) that program has a different focus, and there remains a number of people who do not have access to psychosocial and other support sufficient to meet their basic needs.

We note also that there are ever widening gaps in terms of community based clinical and non-clinical support services to intervene earlier to prevent acute hospital admissions. ADACAS offers some support to people with mental ill health including through support at PTO and through non-ongoing funding in projects.

Given the prolonged over-subscription of acute mental health services in the ACT over recent months and years, it is imperative that adequate and early community based clinical and non-clinical support be made available to seek to reduce the degree to which people need acute services.

ADACAS thus highlights the urgent need for additional options for support for people who experience mental ill health, and calls upon the ACT government to provide additional funding to services providing early intervention supports in this area.

In addition, ADACAS seeks additional advocacy funding to offer support to members of the ACT community who experience mental ill health particularly in access to housing, justice and health services, equivalent to FTE position, plus appropriate supervision and logistical support

- **Addressing abuses in relation to decision-making for older people**

The ALRC report into Elder Abuse identified abuse of formal and informal decision-making powers as a type of abuse occurring in residential aged care, and recommended the Commonwealth decision-making model be implemented¹. This involves a change from the substitute decision making models which are currently implemented in residential aged care to a supported decision making model, where a human rights approach which as a starting point focus on the values, will and preference of the older person, and the right to support².

In the ACT there is a finite number of residential aged care facilities, and most seek to have appointment of a substitute decision-maker (EPOA/guardian) for all prospective residents regardless of decision making ability status) as a condition of access.

ADACAS proposes a pilot that involves working with one residential aged care facility to focus on a transition to a mapped supported decision making (SDM) network and supporters approach for all residents. ADACAS seeks 0.6 FTE project officer (plus supervisory and logistical support) to deliver this project utilising the strength of knowledge and expertise in SDM:

- Estimated cost \$69,000 per annum

- **Advocacy to assist people with disability interacting with Justice systems**

As highlighted in the Disability Justice Strategy, the ACT Government has committed to improving and continuing to expand supports for people with disability interacting with justice systems.

ADACAS has demonstrated expertise in independent advocacy with people with disability in the justice (and other systems). ADACAS advocates also take supported decision making approaches as part of this advocacy when it is required. We seek continued and increased funding to continue and expand advocacy in this area.

¹ Australian Law Reform Commission (2017), Elder Abuse (DP 83) accessed via <https://www.alrc.gov.au/publication/elder-abuse-dp-83/11-aged-care/decision-making/> in October 2019.

² Australian Law Reform Commission (2017), Elder Abuse (DP 83) accessed via <https://www.alrc.gov.au/publication/elder-abuse-dp-83/11-aged-care/decision-making/> in October 2019.

- **Reducing risks of abuse/neglect via improved training and support:**

- *Address workforce challenges:*

Participants in both NDIS and Aged Care service recipients report it is very difficult to access staff with sufficient qualifications, training and support able to meet their needs in an ongoing way. A qualified and experienced workforce can be an important safeguard against abuse.

We propose a process of co-design with a consortium involving people with disability, older people, CIT and other registration providers, disability advocacy organisations and other relevant stakeholders. ADACAS seeks funding to facilitate and co-ordinate this process as contribution to improved capacity in our community.

- **Integrated Service Response Program**

ADACAS notes the vital role (at times that of provider of last resort) being played by the Integrated Service Response Program (ACT Office for Disability) which can step in when people with disability with intensive support needs who are NDIS participants (or very likely to shortly eligible for the NDIS) need short-term coordination support in crisis situations. We urge that its funding be continued, that its terms of support expanded to include people with disability regardless of their likely NDIS status (and that the brokerage funds available to that service be urgently increased).

Additionally – ADACAS recommends that there be further investment in providing continuity for NDIS participants in situations where there is a dispute between an ACT NDIA participant and the NDIA about whether a plan should be continued. This approach should ensure that people with disability receive continued disability support and advocacy during plan review and include mechanisms to improve information flow about inactive plans and gap supports to advocacy agencies (and provide the resources for adequate responses).

- **Crisis case management and brokerage support:**

ADACAS also urges broad-based crisis case management support (and brokerage funding) be also made available for people in a crisis situation that cuts across a large number of service sectors (e.g. homelessness/ mental ill health/ disability and family violence; or substance use/ chronic complex ill health and justice etc), to work with that person or family until such a point that the person or family can again be supported via regular service systems structures. We would encourage any such model to be set up flexibly, such that funding or support can be delivered by a person in either community organisations or government (whomever has both the skill and trust of the person or family concerned).

- **People with Disability escaping violence**

ADACAS highlights the urgent need for re-invigoration of a scheme to better support women (and people) with disability escaping violence. There was much important work already conducted in this arena (by Women With

Disabilities ACT in partnership with organisations such as Canberra Rape Crisis Centre and Domestic Violence Crisis Service and an array of other interested parties) a few years back.

ADACAS notes the strong need for a focus on this topic to re-emerge and coordinated work to continue on this topic, and urges the relevant organisations to be funded accordingly.

- **People who use violence:**

ADACAS similarly highlights the need for additional funding to be provided to the relevant services (e.g. DVCS, Relationships Australia) for expert and evidence based programs to help people who use violence to cease doing so.

- **Funding for DPOs, Family Organisations, and Aboriginal and Torres Strait Islander organisations to allow them to also support People with Disability to make submissions to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability**

Whilst both ADACAS and Advocacy for Inclusion have received Commonwealth funding to support people with disability to provide submissions to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and both organisations will seek to support as many people as we can to lodge submissions, given the sensitive nature of the topics being covered, and that there are many people with disability who have trusted and pre-existing relationships with Disabled People's Organisations and Family Advocacy organisations, we would ask that there be additionally ACT Government funding provided to these organisations to assist any of their clients who want assistance from staff they already know, to lodge a Royal Commission submission.

Additionally – given the importance that the voices of Aboriginal and Torres Strait Islander people with disability are heard in the Royal Commission process, we would also ask that Aboriginal and Torres Strait Islander organisations additionally receive ACT Government funding to allow them to assist any Aboriginal and Torres Strait Islander people with disability with whom there is already a trusted relationship, and/or those who would prefer assistance from an Aboriginal lead organisation to lodge a Royal Commission submission.

- **Parents with Disability or Mental Ill Health interacting with Child and Youth Protection Services**

Please refer to the joint submission from ADACAS and Advocacy for Inclusion in relation to the urgent need for improved support for parents with disability or mental ill health who are interacting with CYPS.

- **Reduce abuse in relation to decision making powers of older people living in residential aged care.**

The ALRC report into Elder Abuse identified abuse of formal and informal decision-making powers as a type of abuse occurring in residential aged care, and recommended the Commonwealth decision-making model be implemented³. This involves a change from the substitute decision making models which are currently implemented in residential aged care to a supported decision making model, where a human rights approach which as a starting point focus on the values, will and preference of the older person, and the right to support⁴.

In the ACT there is a finite number of residential aged care facilities, the greater majority of which require a substitute decision-maker (EPOA/guardian) to be arranged for all prospective residents (regardless of whether the resident has any cognitive impairment) as a condition of entry/moving in.

ADACAS proposes a pilot that involves working with one residential aged care facility to focus on a transition to a mapped supported decision making network and supporters approach for all residents (including that for people with dementia). **To achieve this, ADACAS would require project funds of around \$40,000 to enable a project worker to work over a period of up to 6 months within the facility and write up a report.**

- **Funding for the ACT Carer Strategy**

ADACAS endorses and supports calls by Carers ACT for the ACT Carer strategy to be adequately funded, such that the ACT can indeed be “a community that cares for carers and the people they care for”. Informal family carers provide vital support to people with disability and people with mental ill health – it is imperative that they be supported in this role.

- **Supported Decision Making Centre for Excellence**

Our previous budget submission (2018 for the 2019-2020 financial year) proposed the provision an annual grant of \$300,000 to ADACAS to develop a Centre of Excellence for Supported Decision Making (SDM) that would have the capacity to respond to areas of SDM need anywhere within the ACT as required, and would primarily focus on further developing the capacity of SDM as an enabler for equitable access to services.

We acknowledge this is a significant ask, and have amended this request to invite the ACT Government to provide seed funding to enable the function of researching and applying SDM across the ACT to remain within ADACAS, with a view to ADACAS looking for additional partners to maintain this capacity and to also continue to seek project and grant funding that addresses specific areas of need where SDM might be applied. **To this end we are seeking a commitment of \$50,000 to enable the continuation of SDM project capacity within ADACAS.**

³ Australian Law Reform Commission (2017), Elder Abuse (DP 83) accessed via <https://www.alrc.gov.au/publication/elder-abuse-dp-83/11-aged-care/decision-making/> in October 2019.

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