"The Self Managed Model allows me to make decisions and be more in control of my own life. I've loved being able to do many different things like volunteering, swimming, going to the gym, studying... and mentoring someone with a mental illness. It's my goal in life to use my skills, wherever I can, to make a positive difference for others."

MEL, PARTICIPANT IN THE SELF MANAGED MODEL
IN THE COMMUNITY PARTICIPATION PROGRAM

Ageing, Disability and Home Care

CHIEF EXECUTIVE'S FOREWORD

As Chief Executive of Ageing, Disability and Home Care (ADHC), I am pleased to present the division's contribution to the FACS Annual Report 2010–11. Our contribution to the report highlights the positive impact we have on the lives of 300,000 vulnerable people throughout NSW, made possible through the significant contributions of our 13,600 staff and our 900 community partners in the non-government sector.

This year we have expanded our services to reach an additional 40,000 frail older people, people with a disability and their families and carers through significant funding growth in disability and community care programs. We have also progressed reforms in programs that will improve the lives of people with a disability and their families, and will support more frail older people to remain living at home in their own communities for longer.

ADHC successfully completed the implementation of Stronger Together 1, in many instances delivering more than originally planned. An estimated 20,000 additional people with a disability and their families throughout NSW have been supported through the creation of 33,000 specialist service places, exceeding the initial target by around 15,000 places.

In 2010–11, the Home and Community Care (HACC) Program grew by over $38 million, bringing the total budget for the HACC Program to over $629 million. This funding has gone a long way to improving support for frail older people, younger people with a disability and their carers

to remain in their own homes, enhance their independence, and prevent premature admission into residential care.

The state's largest provider of HACC services is the Home Care Service of NSW. In any given month 42,500 people have a Home Care worker go into their homes to assist them. Home Care delivered 3.9 million hours of service to 55,000 people, across all local government areas in NSW in 2010–11.

Negotiations with the Commonwealth about the future of the HACC Program as a result of the Council of Australian Governments (COAG) decision to split responsibilities for aged care and disability programs also began this year. From 1 July 2011, the Commonwealth Government will provide funding for services for people aged 65 and over (50 and over for Aboriginal people) and NSW will provide funds for HACC services to meet the community care needs of people under 65 (under 50 for Aboriginal people). ADHC has worked intensively with service providers to ensure the best possible outcomes for clients in the future. This work will continue in the new financial year.

ADHC continues to play a leading role in implementing priority reforms under the National Disability Agreement, which aim to place people with a disability, their families and carers at the centre of service provision.

We are providing leadership at a national level in response to the Productivity Commission Report on its Inquiry into Disability Care and Support. ADHC welcomes the step towards a National Disability Insurance Scheme and is demonstrating

its commitment by implementing system reforms to ensure a more person centred approach throughout NSW. We are also assisting with critical work on the key national foundation reforms necessary for the implementation of the scheme, and are currently providing secretariat services to the Disability Policy and Research Working Group.

A new government has committed to record funding of $2.02 billion in growth under the second phase of Stronger Together beginning in 2011–12. By 2013–14, anyone receiving disability services will have the option of using an individualised and portable funding arrangement. Key reforms will be implemented to shape the disability services system into a truly person centred system that takes account of people's life stages and their circumstances. Extensive consultation will ensure that the voices of people with a disability and their families and carers are the ones who shape the new system.

Our community partners are, of course, integral to our ability to meet the needs of the vulnerable people of NSW, and we will continue to work closely and invest wisely to build the capability of the whole sector.

Finally, I would like to personally acknowledge all of the people directly and indirectly involved in delivering services to frail older people, people with a disability and their families and carers.

Jim Moore
Chief Executive
Ageing, Disability and Home Care

Overview

WHO WE ARE

Ageing, Disability and Home Care (ADHC) is committed to providing the best possible outcomes for older people, people with a disability and their families and carers.

We work in partnership with non-government and local government service providers, peak bodies, advocacy and industry groups, community organisations and regulatory bodies to deliver flexible, person centred and sustainable support to more than one million people.

Services are delivered to the community through six regions (Metro North, Metro South, Hunter, Northern, Southern and Western) which support local service delivery and enable older people and people with a disability to continue to interact with, and be valued members of their local communities.

Our central office, located in Sydney, provides the management support, policy base, and strategic guidance for the six regions, which deliver and administer these programs and services.

All of our business, decisions and actions are based on five core values:

- client focus – the needs of our service users are the rationale for our activities

- equity – equal and accessible services within available resources

- integrity – honesty, openness and accountability in dealing with others

- performance – striving for excellence and continuous improvement

- valuing people – recognising the efforts, abilities and skills of our people working within the disability and community care service system.

WHAT WE DO

In 2010–11, we spent $2.5 billion delivering a wide range of community support and specialist services to older people, people with a disability and carers throughout NSW.

This was achieved directly through ADHC-operated services or via the 900 non-government organisations and local governments that are funded to provide services, such as early intervention, therapy, respite, supported accommodation, case management and post-school programs.

We also worked closely with other government departments such as Transport NSW, NSW Health and other FACS divisions to provide the Home and Community Care (HACC) Program to frail older people, younger people with a disability and their carers to support them to remain in their own homes, enhance their independence, and prevent their premature admission into residential care.

Our success in responding effectively to individual needs and circumstances is measured against two key areas:

- community support – focusing on building skills and strengthening family and carer relationships so that older people and people with a disability are able to live in their own home as independently as possible

- specialist support – providing services to ensure that people with ongoing intensive support needs are living in suitable accommodation and participating in their local community.

OUR STAKEHOLDERS

Our primary focus is the people we support – older people, people with a disability and their families and carers. We work in partnership with many other organisations to ensure that policies, programs and services are well informed, planned and adaptable. Our stakeholders include:

- 900 non-government and local government service providers that we fund to deliver services on our behalf

- local, state and Commonwealth government departments and agencies

- peak bodies, industry groups and advocacy agencies representing older people, people with a disability and carers

- community agencies and organisations

- regulatory bodies.

Strategic directions

LEGISLATION AND FUNDING AGREEMENTS

Legislation and funding agreements are key to shaping our service system and planning processes for increasing programs and services for older people, people with a disability and carers. Information about legislation can be found in the appendices section of this report.

We receive funding under the following two agreements with the Commonwealth Government which, combined with the NSW Government's Stronger Together 10-year plan, underpin the majority of our budget:

- the National Disability Agreement (NDA), which is part of the Council of Australian Governments' Intergovernmental Agreement (IGA) on Federal Financial Relations – NSW anticipates receiving approximately $1.7 billion in total funding over the first five years of the IGA through the Disability Services Specific Purpose Payment

- the Home and Community Care (HACC) Agreement, which is a jointly funded NSW and Commonwealth Government initiative that provides vital support to frail older people, people with a disability and carers to assist them to remain in their own homes for as long as possible – the NSW Government contributes slightly more than 40 percent of total funding under the HACC Program.

Under the National Health Reform Agreement, there will be split responsibilities for HACC aged care and disability services at age 65 (or at age 50 for Aboriginal people), with the Commonwealth Government to assume full responsibility for aged care services from 1 July 2012.

STRATEGIC OBJECTIVES

We are committed to ensuring that people with a disability and older people have choice and control over their lives and are valued and active members of the community. We work closely with families and carers to assist them with their caring and support role.

Our objectives reflect our commitment to ensuring that the right mix of formal and informal support is available to people at each stage of their lives and that the support is person centred, flexible and sustainable. Equally, we aim to provide effective support for families and carers to boost the resilience of these natural networks.

Our business activities are directed towards achieving outcomes in the following areas:

- improved access to information and support

- a person centred approach in all service delivery and planning

- an inclusive and supportive community

- a unified, regulated sector which has the capacity to respond effectively

- a division which leads with integrity.

Our activities also support national reforms and whole-of-government priorities.

These priorities are mirrored in our strategic directions, which are influenced by the:

- National Disability Agreement

- National Health Reform Agreement

- NSW whole-of-government Ageing Strategy

- National Disability Strategy

- Productivity Commission's Inquiry into Disability Care and Support

- United Nations Convention on the Rights of Persons with Disabilities.

In line with our strategic directions, which are currently being revised for 2011–16, our objectives will have a greater emphasis on incorporating person centred and lifespan approaches into our service delivery and business planning, as well as:

- increasing the capacity of our service system

- improving and increasing a range of qualitative accommodation models

- driving national reform priorities such as the National Disability Insurance Scheme and National Disability Strategy initiatives.

STATE PLAN

Across the NSW Government, we had lead responsibility for:

- increasing the percentage of people with a disability who are using individualised funding arrangements

- improving employment opportunities for people with a disability, halving the gap in their unemployment rate by 2016

- increasing the out-of-home participation rate of people with a severe or profound disability to at least 85 percent by 2016.

This will be replaced by new goals in the new State Plan.

STRONGER TOGETHER: A NEW DIRECTION FOR DISABILITY SERVICES IN NSW 2006–16

Stronger Together: A new direction for disability services in NSW 2006–16 is a 10-year plan to provide greater assistance and long-term practical solutions for people with a disability and their families. It involves major reforms, funding and service expansions.

The first five years of Stronger Together set out plans to increase the specialist disability service system's capacity by 40 percent. New places created during this phase exceeded projections – 33,000 places were created compared to the target of 18,100. These new places increased supports available to people with a disability and their families throughout NSW, including therapy, case management and behaviour support, early intervention, family support, respite and post-school and day programs.

The first five years of Stronger Together included a capital program roll-out of property and building works to achieve new accommodation places, as well as the redevelopment of the Lachlan Centre and the closure of Peat Island.

The NSW Government is investing a further $2.02 billion in growth funding for disability services through Stronger Together 2, which is a 33 percent increase in funding for the first five years. Stronger Together 2 will provide approximately 47,200 additional places.

Stronger Together 2 also featured an unprecedented expansion of funding and significant reforms to the specialist disability service system. By 2016, we will have a disability service system that provides 70,000 more services, in more flexible ways, to better support people with a disability, their families and carers.

NSW AGEING STRATEGY

The NSW whole-of-government ageing strategy aims to create a more age friendly society that is able to respond effectively to the opportunities and challenges of an ageing population. Our Office for Ageing leads implementation of this strategy in partnership with the Department of Premier and Cabinet and NSW Government departments.

The strategy addresses issues such as social isolation, planning for later life, building community and individual resilience, workforce participation, health issues, technology and social supports. All are designed with the aim of enabling older people to participate independently and as fully as they can in community life as they age.

Key policy areas for us aligned with the Ageing Strategy include the ageing grants program, research into population ageing and dementia research and policy.

70,000

more services delivered in more flexible ways, to better support people with a disability, their families and carers by 2016

Our highlights

PERFORMANCE OVERVIEW OF OUR RESULTS AND SERVICES

RESULT AREA	KEY SERVICE PROVISION DATA	HIGHLIGHTS
Improving our service system	Our expenditure budget for 2010–11 was $2.5 billion, an increase of $209 million over the previous year $146.4 million in disability funding for new services, an increase of 8.5 percent on last year $38.9 million in HACC funding for new services, an increase of 6.6 percent on last year $1.5 billion (including capital) was allocated through Stronger Together 1; this resulted in an additional 33,000 disability places being created, exceeding the target by around 15,000 The announcement of Stronger Together 2 ensures continued growth and reform for disability services; it is supported by an additional $2.02 billion and will provide an additional 47,200 places in disability services	Trialled a number of programs featuring person centred services to increase opportunities for people to exercise more choice and control over their support and funding arrangements Individualised funding arrangements will become available from 2011–12, and by the end of 2013–14 anyone receiving disability services will have the option of using an individualised and portable funding arrangement Coordinated the NSW Government submission to the Productivity Commission's Inquiry into disability long-term care and support; also actively supported the national Every Australian Counts campaign to have the proposed National Disability Insurance Scheme introduced Completed 12 new or refurbished HACC dementia day care centres, with the remaining four to be completed by the end of 2011 Led NSW negotiations with the Commonwealth Government and other jurisdictions in relation to the National Partnership Agreement that will govern the transition of the HACC program Supported efficiencies in NGO service delivery, improving NGO contract management with the development of a Sector Planning Framework and the implementation of the Quality Framework and Funding Management System Implemented the NSW Dementia Services Framework 2010–15 to assist with planning and development of dementia services and programs by reviewing service needs and making recommendations along a service pathway of dementia care Rolled out statewide Aboriginal Home Care traineeship program and development of the Aboriginal Employment Strategy, Let's See It Through

RESULT AREA	KEY SERVICE PROVISION DATA	HIGHLIGHTS
Community Support	Allocated more than $23 million in HACC Program growth funding to service providers Approximately 10,300 children accessed Early Childhood Intervention services More than 26,000 therapy and fixed-term intervention services delivered through ADHC-operated and funded service providers 6,800 individuals enrolled in post-school programs and 8,000 people participated in ADHC-funded community engagement programs 165 in-reach packages, 45 alternative accommodation placements, 53 in-home support services and 43 day programs have been implemented to address the needs of young people in Residential Aged Care	Piloted new case management and brokerage services for people with an Acquired Brain Injury, people with muscular dystrophy and people with motor neurone disease to assist them in receiving more tailored supports Improved our response to meet the needs of people from culturally and linguistically diverse (CALD) backgrounds through the launch of Valuing and Managing Diversity: A Strategic Framework for Cultural Diversity 2010–13 Incorporated the Self Managed Model (SMM) option into day program and post-school services so that people with a disability experience greater flexibility, choice and control over services Delivered 900 events across NSW during 2011 NSW Seniors Week – 200 more events than the previous year Organised participation of 2,000 school students in activities for the 2010 Don't Dis my ABILITY campaign

"Day programs play a crucial role in supporting people with a disability to develop life skills, pursue goals, maintain independence and participate in community life. It's an exciting place to work because the programs are truly person centred and constantly evolving." – Noreen, Ageing, Disability and Home Care Manager Day Programs

Our highlights

PERFORMANCE OVERVIEW OF OUR RESULTS AND SERVICES

RESULT AREA	KEY SERVICE PROVISION DATA	HIGHLIGHTS
Specialist support	ADHC-operated services: – 1,700 individuals in 345 group homes and in-home support – 1,000 clients in eight large residential centres ADHC-funded services: – 6,100 clients in group homes or in other community living accommodation models – 440 clients in 26 large residential centres	Rolled out a large capital program under the first five years of Stronger Together, including 530 new accommodation places, the closure of Peat Island and redevelopment of the Lachlan Centre 370 places were allocated to four individualised support models being piloted and evaluated through a participatory action research project Construction of 35 custom-built homes under the Younger People in Residential Aged Care (YPIRAC) Program began during the first phase of Stronger Together Diverted 113 younger people from entering residential aged care through the YPIRAC Program under the first phase of Stronger Together, exceeding the program target by 88 percent Implemented the Lifestyle Planning Policy and Practice Guide for use in ADHC-operated accommodation support services which better incorporates person centred practices into planning services, and measures quality based upon the achievement of goals
Home Care Service of NSW	Home Care has 43 branches and a presence in over 110 locations throughout the state, including eight Aboriginal Home Care branches	Increased Home Care Service funding by $13.4 million, which enabled 3.9 million hours of service, a 6.5 percent increase on last year Increased the number of relief care worker positions to provide better contingency planning and improved service quality and support to enable people to live independently in their own homes through the revised Care Worker Award program Implemented the service improvement project to increase efficiencies by establishing a new computerised service allocation system

Results and services

Our results and services focus on overall improvements to the service system and service expansions that enable a more effective response to individual needs and circumstances. We have two main areas of effort:

- community support – focusing on building skills and strengthening family and carer relationships so that older people and people with a disability are able to live in their own home as independently as possible

- specialist support – providing services to ensure that people with ongoing intensive support needs are living in suitable accommodation and participating in their local community.

Home and Community Care – Recurrent planned growth 2010–11

ADHC REGION	ALLIED HEALTH CARE $	CASE MANAGEMENT $	CENTRE-BASED DAY CARE $	COUNSELLING $	DOMESTIC ASSISTANCE $	FORMAL LINEN SERVICE $	GOODS AND EQUIPMENT $	HOME MAINTENANCE $	HOME MODIFICATION $	MEALS (CENTRE) $	MEALS (HOME) $	NURSING CARE (HOME) $	OTHER FOOD SERVICES $	PERSONAL CARE $	RESPITE CARE $	SOCIAL SUPPORT $	TRAINING $	TRANSPORT $	STATE-WIDE $	TOTAL FUNDING $
Metro South	268,000	793,634	1,760,000	668,000	770,000	-	-	1,236,727	596,325	-	20,000	120,000	-	639,343	623,000	1,124,340	1,421,055	1,346,819	-	11,387,243
Metro North	650,427	460,000	1,200,000	162,129	355,000	-	-	665,992	497,250	-	645,000	-	-	295,000	570,000	1,090,390	882,500	805,000	-	8,278,688
Hunter	229,000	367,500	585,000	153,000	138,954	-	-	325,000	295,000	-	270,000	320,000	-	367,811	548,244	144,035	215,000	720,000	-	4,678,544
Northern	20,000	700,000	481,718	50,000	350,000	-	-	-	119,897	-	30,000	-	60,000	300,000	220,000	954,172	162,457	305,000	-	3,753,244
Southern	100,000	650,000	170,000	201,525	147,176	-	-	150,000	318,906	-	-	-	-	60,000	570,000	140,000	166,993	180,000	-	2,854,600
Western	-	120,000	208,076	-	-	-	-	95,000	109,277	-	131,000	56,000	-	-	203,651	220,168	203,000	959,554	-	2,305,726
Statewide	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,211,955	5,211,955
Grand Total	**1,267,427**	**3,091,134**	**4,404,794**	**1,234,654**	**1,761,130**	**-**	**-**	**2,472,719**	**1,936,655**	**-**	**1,096,000**	**496,000**	**60,000**	**1,662,154**	**2,734,895**	**3,673,105**	**3,051,005**	**4,316,373**	**5,211,955**	**38,470,000**

Home and Community Care – Recurrent planned growth (outputs) 2010–11

ADHC REGION	ALLIED HEALTH CARE HOURS	CASE MANAGEMENT HOURS	CENTRE-BASED DAY CARE HOURS	COUNSELLING HOURS	DOMESTIC ASSISTANCE HOURS	FORMAL LINEN SERVICE DELIVERIES	GOODS AND EQUIPMENT DOLLARS	HOME MAINTENANCE HOURS	HOME MODIFICATION DOLLARS	MEALS (CENTRE) MEALS	MEALS (HOME) MEALS	NURSING CARE (HOME) HOURS	OTHER FOOD SERVICES HOURS	PERSONAL CARE HOURS	RESPITE CARE HOURS	SOCIAL SUPPORT HOURS	TRAINING DOLLARS	TRANSPORT ONE-WAY TRIPS	STATE-WIDE OUTPUTS	TOTAL OUTPUTS
Metro South	5,007	20,815	148,697	14,588	21,326	-	-	29,977	596,325	-	1,556	1,789	-	15,572	14,818	38,384	15,407	221,853	-	1,146,114
Metro North	8,805	14,271	124,652	3,574	9,925	-	-	22,399	497,250	-	97,563	-	-	7,439	15,577	48,050	3,113	94,453	-	947,071
Hunter	3,358	7,310	60,136	3,249	3,879	-	-	12,469	295,000	-	41,519	5,366	-	9,270	13,642	7,749	1,168	68,631	-	532,746
Northern	-	12,850	34,078	1,062	10,542	-	-	-	119,897	-	4,757	-	4,664	8,001	5,152	51,947	2,345	18,123	-	273,418
Southern	1,555	18,891	16,456	3,701	4,718	-	-	7,396	318,906	-	-	-	-	1,362	13,534	7,071	-	17,906	-	411,496
Western	-	2,201	16,178	-	-	-	-	2,905	109,277	-	20,762	787	-	-	4,767	11,844	3,567	106,921	-	279,209
Grand Total	**18,725**	**76,338**	**400,197**	**26,174**	**50,390**	**-**	**-**	**75,146**	**1,936,655**	**-**	**166,157**	**7,942**	**4,664**	**41,644**	**67,490**	**165,045**	**25,600**	**527,887**	**-**	**3,590,054**

Results and services
CONTINUED

Stronger Together Summary of new places and expenditure allocated in first five years

	THERAPY, CASE MANAGEMENT, BEHAVIOUR SUPPORT	EARLY INTERVENTION, FAMILY SUPPORT	RESPITE[1]	POST SCHOOL AND DAY PROGRAMS[2]	SPECIALIST ACCOMM. SUPPORT / IN-HOME SUPPORT[4]	YPIRAC[5]	TOTAL SERVICES
Metro South	2,453	3,905	1,088	1,455	310	125	**9,336**
Metro North	1,829	3,182	1,007	1,325	233	128	**7,704**
Hunter	845	2,099	688	1,030	178	110	**4,950**
Northern	900	1,657	622	916	311	66	**4,472**
Southern	735	1,263	621	654	113	56	**3,442**
Western	865	1,401	548	611	121	73	**3,619**
Other[3]	97	13	-	-	27	45	**182**
TOTAL	**7,724**	**13,520**	**4,574**	**5,991**	**1,293**	**603**	33,705
Stronger Together Commitment	7,150	3,040	1,420	3,280	1,350	300	**16,540**

1 The respite category includes 1,029 places from the Older Parent Carer initiative, which is jointly funded by the NSW and Australian Governments

2 This figure is new places only. The original published commitment included all continuing Community Participation clients who would receive increased days as a result of Stronger Together funding

3 service not assigned to a specific region

4 Includes Leaving Care, Community Justice Program, Other Specialist Support, Attendant Care Program and Disability Housing and Support Initiative places

5 Jointly funded by the NSW and Australian Governments – this is not a unique client count

Specialist support (including accommodation and in-home support)

	SPECIALIST SUPPORTED ACCOM	INNOVATIVE TARGETED SUPPORT	LEAVING CARE	COMMUNITY JUSTICE PROGRAM	DHASI2	ATTENDANT CARE	TOTAL PLACES	TOTAL ALLOCATION
Metro South	98	20	53	37	15	87	310	85.3
Metro North	40	-	51	38	5	99	233	64.7
Hunter	43	-	66	29	5	35	178	51.2
Northern	127	20	78	23	15	48	311	75.3
Southern	21	-	44	15	5	28	113	34.1
Western	41	-	21	31	5	23	121	31.7
Other Places	-	-	-	27	-	-	27	
Other recurrent	-	-	-	-	-	-	-	8.4
Total recurrent costs	-	-	-	-	-	-	-	350.7
Establishment Costs[1]	-	-	-	-	-	-	-	134.0
Total	370	40	313	200	50	320	1,293	484.7

1 Includes capital expenditure and other set up costs.

2 Includes five additional places for clients with an Acquired Brain Injury who are receiving Drop-in support services

Respite

	FLEXIBLE	CENTRE-BASED	GROSVENOR	LEISURE LINK	TEEN TIME	OLDER PARENT CARERS	TOTAL PLACES	TOTAL ALLOCATION
Metro South	276	293	70	133	44	272	1088	45.8
Metro North	378	155	-	120	116	238	1007	33.3
Hunter	272	73	-	86	111	146	688	20.7
Northern	147	215	-	57	48	155	622	26.5
Southern	280	150	-	34	54	103	621	17.9
Western	115	219	-	39	60	115	548	27.8
Other recurrent	-	-	-	-	-	-	-	6.2
Establishment Cost	-	-	-	-	-	-	-	2.0
Total	1468	1105	70	469	433	1029	4574	180.2

AGEING, DISABILITY AND HOME CARE

Results and services

Early Intervention and Family Support

	ECII	SUPPORT NETWORK PROGRAM	AUTISM INITIATIVES	FAMILY CHOICES	INTENSIVE FAMILY SUPPORT	EXTENDED FAMILY SUPPORT	FAMILY ASSISTANCE FUND	TOTAL PLACES	TOTAL ALLOCATION
Metro South	974	18	225	-	176	14	2,498	**3,905**	**32.0**
Metro North	651	285	206	-	72	28	1,940	**3,182**	**26.1**
Hunter	691	240	-	-	210	13	945	**2,099**	**12.5**
Northern	492	40	-	20	68	31	1006	**1,657**	**16.2**
Southern	356	-	-	20	70	20	797	**1,263**	**12.6**
Western	349	20	125	-	120	9	778	**1,401**	**10.6**
Statewide	13	-	-	-	-	-	-	**-**	**-**
Total Places/ Recurrent Cost	3,526	603	556	40	716	115	7,964	**-**	**110.0**
Other recurrent	-	-	-	-	-	-	-	**-**	**0.1**
Establishment Cost	-	-	-	-	-	-	-	**-**	**0.4**
Total								**13,520**	**110.5**

Putting people's choices first

Young people and their families should be the drivers of their individual plans, having control over important decisions that affect their lives.

Karim is a good example of how the ADHC Community Participation Program is helping people with moderate to very high support needs achieve their goals, increase their independence and participate as valued and active members of the community.

In opting for a Self Managed Model, Karim can pursue a wide range of activities such as martial arts classes, and isn't constrained by having to fit into prescribed services or programs.

His martial arts class every Saturday gives him confidence, a sense of achievement and an opportunity to spend time with friends. He has also discovered new and creative interests such as drumming and movement classes.

Under the Self Managed Model, the program fits around Karim's way of life, rather than expecting Karim to fit into pre-determined programs and services.

Karim's mother Sylvana said the Self Managed Model has meant Karim is happy.

"He has a say in what he does every day. He has greater control over his life. If he enjoys it, we carry on, if he doesn't, we will make changes. He is trying

new things and gaining confidence in learning from these experiences.

"He is communicating more and is happy about his choices. His program starts each day when he is ready, as we are not running to someone else's timetable. He is more relaxed, and so are we," Sylvana said.

ADHC provided more than $98 million in funding for more than 3,800 Community Participation Program places.

He has a say in what he does every day. He has greater control over his life."

Results and services

IMPROVING OUR SERVICE OUTCOMES

We aim to increase awareness and promote inclusion for older people and people with a disability, with a key priority being flexible services and supports that build individual skills and independence, and provide greater certainty for people to plan their lives and achieve their expectations.

Person centred approaches provide individuals and their families with a greater say in the services and support they require to live independently in their community. We have made significant investment in the capacity of our staff and funded service providers to deliver person centred support, with an extensive person centred consultation process in 2011.

Stronger Together 1 delivered extra support services to an additional 20,000 people. Stronger Together 2 will expand person centred approaches and inidividualised funding models to ensure that people with a disability are at the forefront of decision-making and choices that affect their lives. Stronger Together 2 will increase the capacity of the sector by approximately 47,200 places.

In 2010–11, more than 370 places were allocated to four individualised support models being piloted and evaluated through a participatory action research project. These pilots test new models of support across a range of target groups and generate evidence of the requirements, impact, and outcomes of individualised support. This will be used to build capacity within ADHC

human resource and quality management systems.

We are providing individualised support in the Attendant Care Program, where people with a disability can choose from a variety of service models, including directly purchasing the support they need.

ADHC is committed to strengthening families and carer relationships, and maximising the independence and skills of older people and people with a disability through the use of informal care networks. There has been an increase in community support and an increased focus on early intervention and prevention.

We are working to improve service delivery and have developed specifically designed programs for young people with a disability:

- leaving care of the Minister for Family and Community Services

- in contact with the criminal justice system

- who are in, or at risk of entry to, residential aged care

- to support their ageing carers.

20,000

support services delivered to an additional 20,000 people under Stronger Together 1

INNOVATIONS

ADHC is working to give older people, people with a disability, their families and carers greater confidence and certainty regarding the levels of support they can expect, when services will be available, and how to access them.

We are committed to person centred approaches in all service delivery and planning, to allow people to make informed decisions about their lives, and to achieve and accomplish more on their own terms. Already many of our programs offer substantial choice and flexibility to clients and their carers, and enable people to actively participate in decision-making around planning, implementation and review of services and supports they receive. We are also exploring the best ways to improve personalised support options through both service design and individualised funding options.

We continue to improve accommodation models to ensure that people live in safe, secure and appropriate housing. In order to achieve this, we have partnered with the sector to expand the range, availability, quality and flexibility of accommodation options. We are also redeveloping all large residential centres and have strengthened regulation of the boarding house sector.

In response to the need for more effective outcomes for people with dementia, the HACC Capital Strategy delivered the construction of dementia-specific day care centres and upgraded existing facilities.

This provides improved access to and use of day centres, resources and supports by people with dementia. Of the 16 planned centres, 12 new or refurbished centres have been completed to date, with the remaining four to be completed soon.

Recognising the importance of social and community inclusion to a person's health and wellbeing, in collaboration with the Department of Education and Communities, we provided sporting and recreational activities to more than 7,000 people with disabilities of all levels. Training and education was also provided to more than 1,500 volunteers to improve opportunities for people with a disability to participate in sport and physical activity.

In January 2011, the new person centred Lifestyle Planning Policy and Practice Guide was rolled out in ADHC-operated accommodation support services. It incorporates person centred approaches to planning services, and measures quality based upon the achievement of goals. The implementation of the policy includes training and workshops across the state.

The new Community Living Award was also implemented in the Accommodation and Respite business area to improve the coordination of an individual's services and staff support at a local level.

IMPROVED SECTOR PARTNERSHIPS

ADHC is working in partnership with community care and disability service providers to ensure that the service system is integrated and sustainable, and that it has the capacity to deliver improved flexible services which respond to a broader range of individual choices.

We are working to support development of the governance and management capacity of NGOs by reducing bureaucracy through the reduction of red tape. Red tape reforms are improving business practice by reducing administrative burdens, increasing service appropriateness, efficiency and responsiveness, and enhancing coordination and cooperation. Some of these reforms include:

- a new Sector Planning Framework to be implemented over two years to enable us to implement a planning approach that will devolve decision-making to local communities and place people with a disability at the centre of the planning process

- the *Youth and Community Services Regulation 2010* ensures that staff of licensed residential centres (LRCs)[1] are trained in first aid, and that these premises have safe medication practices

- the implementation of the Funding Management System, which provides an integrated and streamlined solution to funding management and regulation, and improves information to the NGO service providers

Results and services

- the development of a governance structure, under the Industry Development Fund, to direct expenditure of funds to initiatives that will build the capacity and capability of the disability service system.

Other red tape reduction strategies include a new acquittals process, which reduces the information required in tender and purchasing processes, and standard insurance, financial returns and audit requirements.

The National Quality Reporting Framework for HACC services increases consistency in quality reporting across the sector and reduces complexity and duplication for those service providers receiving funding from more than one community care program. In March 2011, common standards were introduced to simplify and streamline reporting requirements on service providers that receive funding for community care programs from both state and Commonwealth governments. The common standards replace the National HACC Standards.

COMMUNITY SUPPORT

The majority of older people and people with a disability are cared for at home with the support of their family and friends. The ADHC community support services help older people and people with a disability to continue living at home and participate in their community. These services complement the existing support networks and recognise the importance of the carer and the care-giving relationship.

Community support services are categorised in the following service groups:

- skill development and day programs
- respite
- personal assistance
- intensive personal care
- therapy and fixed-term intervention
- advocacy, information and linkage
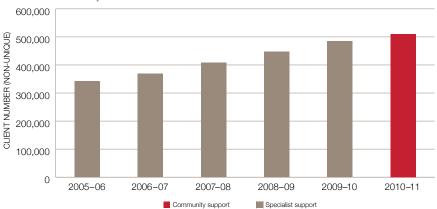- support for families and children
- support for the well aged.

Overall expenditure on community support

Clients receiving community support services

Note: This refers to non-unique client count.
Data source: Disability Services MDS statistical database.

Skill development and day programs

- 6,800 people enrolled in ADHC-funded post-school programs including:
  - 3,800 people in Community Participation (CP)
  - 1,800 people in Transition to Work (TTW)
- 8,000* people participated in ADHC-funded Community Engagement Programs.

We fund day and post-school programs as part of continued supports for people with a disability so that they can pursue their goals and aspirations with greater confidence.
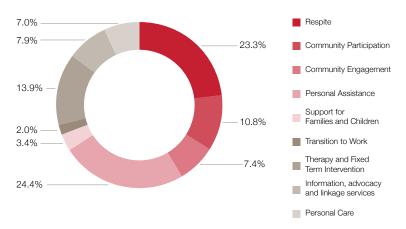
The TTW and CP programs focus on building skills, employment preparation and greater participation in their community. Many of the participants of these programs are able to achieve greater economic independence and social inclusion.

Every year more than half of TTW participants successfully transition to employment, compared with less than five percent prior to 2006.
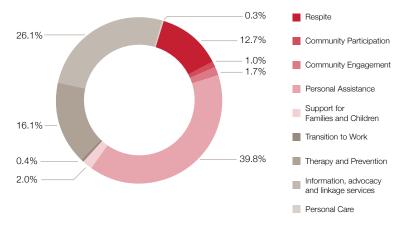
In 2010, the Self Managed Model (SMM) option was incorporated into day and post-school programs. The SMM enables individuals to experience greater flexibility, choice and control over the services they receive.

Evaluation of the SMM began to provide a better understanding of the benefits and challenges of the SMM from both a service user and a service provider perspective, including identifying unique needs and trends of participants. ADHC worked in close partnership with National Disability Services and other stakeholders to develop the project specifications, and we will continue to work together to ensure greater benefits and efficiencies for a client-focused service system.

Community support service group share of expenditure 2010–11

23.3%	Respite
10.8%	Community Participation
7.4%	Community Engagement
24.4%	Personal Assistance
3.4%	Support for Families and Children
2.0%	Transition to Work
13.9%	Therapy and Fixed Term Intervention
7.9%	Information, advocacy and linkage services
7.0%	Personal Care

Community support service group share of clients 2010–11

0.3%	Respite
12.7%	Community Participation
1.0%	Community Engagement
1.7%	Personal Assistance
39.8%	Support for Families and Children
2.0%	Transition to Work
0.4%	Therapy and Prevention
16.1%	Information, advocacy and linkage services
26.1%	Personal Care

Data source: Disability Services MDS statistical database.
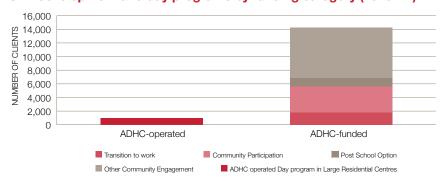
* Adjusted for under reporting

Results and services

Respite

In 2010–11:

- 4,100 people accessed respite in 108 ADHC-operated and funded respite centres

- 6,900 people accessed flexible and in-home respite

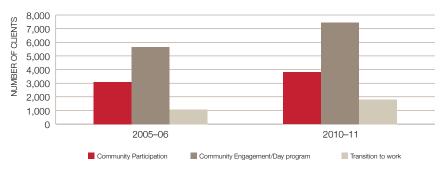- 60,000 older people accessed HACC-funded respite services and services with a 'respite effect'.

Carers play a vital role in supporting people with a disability and frail older people to continue living in their own homes and communities. Respite services help to support and maintain the primary care-giving relationship by providing time-limited breaks for families and other unpaid carers of children and adults with a disability and older people. Respite also provides a positive experience for people with a disability through social, recreational and developmental opportunities and community connections.

Skill development and day programs by funding category (2010–11)

Transition to work · Community Participation · Post School Option · Other Community Engagement · ADHC operated Day program in Large Residential Centres

Data source: Disability Services MDS/ADHC Client Information System (CIS) statistical databases.

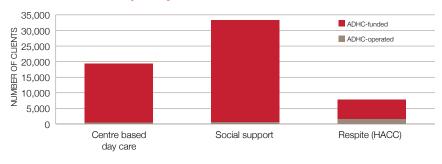## Stronger Together growth in skill development and day programs 2005–06 compared to 2010–11

Community Participation · Community Engagement/Day program · Transition to work

Data source: Disability Services MDS/ADHC Client Information System (CIS) statistical databases.

Disability clients in respite by sector

ADHC-funded · ADHC-operated

Data source: Disability Services MDS/ADHC Client Information System.

HACC clients in respite by sector

ADHC-funded · ADHC-operated

Carers

The *NSW Carers (Recognition) Act 2010* was introduced in May 2010 to provide legal recognition for carers. In July 2010, lead responsibility for carer policy in NSW was transferred from NSW Health to ADHC. We have lead responsibility for implementation of the Act and are developing an implementation plan to promote and enact the legislation across NSW Government departments.

The Act:

- establishes the NSW Carers Charter to recognise carers' contribution to their community and the person they care for, and to increase the community's awareness of their valuable contribution

- places obligations on the NSW public sector to be aware of the charter (including the development and implementation of human resources policies), and to consult with carer representatives in policy development

- establishes a NSW Carers Advisory Council, chaired by the Minister for Disability Services and Minister for Ageing, to advance the interests of carers and to review and make recommendations to the Minister on issues relating to carers.

NSW human service agencies have additional responsibilities under the legislation to reflect the principles of the charter and to report on compliance with the Act.

Individuals or organisations that make an outstanding contribution to caring for a person in the community were recognised through the introduction of the Local Carer Awards in 2010, a joint initiative of Carers NSW and the NSW Government. One hundred and thirteen Local Carer Awards were given across the state.
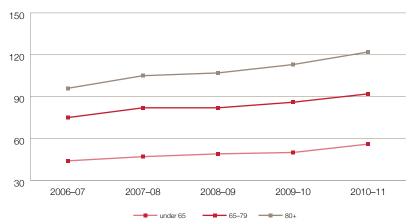
Personal assistance

Personal assistance services funded through the HACC Program in 2010–11 include:

- 59,000 people accessed 2.1 million domestic assistance service hours

- 15,200 people accessed 1.4 million personal care service hours

- 24,000 people accessed 440,000 home maintenance service hours

- 5,200 people accessed 89,000 food services hours

- 880 people accessed 32,000 home linen services

- 3.5 million meals were provided to 36,000 individuals

- 2.3 million trips were made by 67,000 individuals and carers.

In-home support provides a range of services to help people maintain their health, safety and independence in their home environment. Support is provided to older people, people with a disability, their families and carers in the form of domestic assistance, personal care, social support, home nursing care, meals and community transport. Intensive personal care services (through the Attendant Care Program and the High Need Pool) provide assistance for people who require 15–35 hours of support a week with daily living activities and community participation.

HACC clients by age group

Results and services

Intensive Personal Care

Intensive personal care through the Attendant Care Program/High Need Pool:

- 890 places in Attendant Care Program (ACP)

- 530 people in the High Need Pool accessed 553,000 hours of service, as follows:

  - 500 people accessed 58,000 personal care service hours

  - 350 people accessed 473,000 domestic assistance service hours

  - 60 people accessed 21,000 respite care service hours
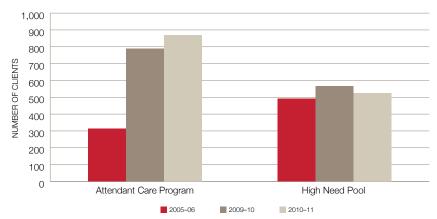
  - 30 people accessed 440 home maintenance service hours.

An additional 498 ACP places have been allocated from Stronger Together growth funds and other reform initiatives since 2006. As well as a substantial expansion in the number of places, the program has been improved to provide places for people with a disability who have older carers.

Exploring new approaches to better respond to the needs of people with degenerative conditions and Acquired Brain Injury (ABI) is a priority for Stronger Together. A new guide called the Care and Support Pathways for People with an Acquired Brain Injury – Referral and Service Options in NSW has been developed to increase flexibility and types of service interventions required.
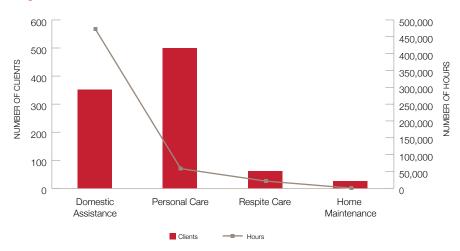
Other initiatives, including a protocol to facilitate early access to the ACP and the development of a time-limited case management and brokerage model, have also been developed to assist people with rapid degenerative neurological conditions to access flexible services in a timely manner.

New case management and brokerage services for people with an ABI, people with muscular dystrophy and people with motor neurone disease were piloted to tailor individual solutions and identify essential elements required to service this target group.

Stronger Together and HACC growth in intensive personal care services

High Need Pool clients and hours

Therapy and fixed-term intervention

In 2010–11:

- 36,300 services were provided to 14,000 individuals by ADHC-operated Community Support teams

- 11,500 people accessed services from 89 NGO therapy providers

- $28 million worth of HACC home modification services were provided to 15,000 individuals.

Therapy services aim to maintain and improve the abilities of an individual and their opportunities for future independence. In October 2010, a Therapy Services Memorandum of Understanding (MOU) between the Department of Education and Communities, NSW Health and FACS was created outlining the roles and responsibilities of all agencies to coordinate access to therapy services for people with a disability, their families and carers.
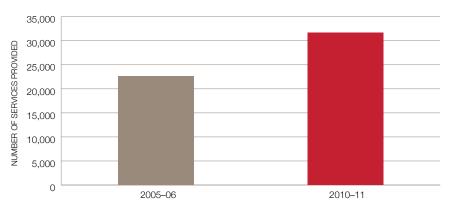
Three projects due for completion next year have been funded to support therapy services:

- an Aboriginal outreach program that engages local community members, trained as community facilitators, to deliver services with a therapist's guidance; this will support and enhance prevention and early intervention approaches and build community capacity

- an early intervention project to assist children with a disability to access technology in preschool

- an adult transition project to improve access to therapy services at critical life stages.

In collaboration with other government agencies and NGOs, we trialled the use of video technology for case conferences in rural and remote areas where distance from service providers posed a challenge for people with a disability, their families and carers.
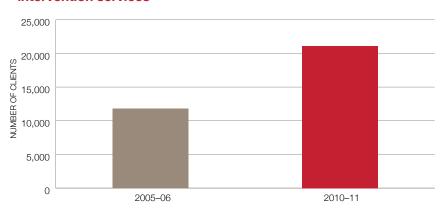
We coordinate the Therapy Taskforce, comprising representatives from NGOs, professional associations and government partners. It has initiated a range of projects to improve sector capacity and innovation through enhanced recruitment, training, professional practice and service delivery.

ADHC-operated community support teams number of services provided

Data source: ADHC Client Information System

Stronger Together growth in therapy and fixed term intervention services

Data source: Disability Services MDS

Results and services

Improving specialist services

Our Office of the Senior Practitioner provides practice leadership for therapy, nursing and behaviour support services, and delivers specialist services and practice improvement for individuals with complex needs and challenging behaviour.

During the year, an MOU was signed between ADHC and NSW Health for the provision of services to people with an intellectual disability and mental illness, representing a significant milestone in interagency collaboration. This MOU enables a more coordinated system of care by ensuring that both parties have a responsibility to manage situations cooperatively, with an emphasis on the provision of preventative services, assessment, treatment and follow-up.

We also developed Dialectical Behaviour Therapy[1] for Women with Borderline Personality Disorder and the First Nursing Model for Individuals with Challenging and Complex Needs under the Community Justice Program (CJP). These are therapeutic models aimed at reducing the risk of anti-social behaviour and facilitating appropriate reintegration into the community.

A range of accommodation options is being developed as part of the CJP. Two projects are being led by Housing NSW, the Intensive Residential Service and an on-site supported living facility. In 2010–11, five properties were purchased to expand the drop-in support model. This model provides affordable rental housing with drop-in support to people with an intellectual disability exiting a correctional facility.

Support for families and children

We work to keep families and children with a disability together by providing early intervention services that increase family wellbeing and strengthen family capacity and resilience. These services include early intervention, therapy, respite and intensive family support.

We also play a key role in the protection of children and young people with a disability. In 2010–11, we continued implementation of Keep Them Safe, the NSW Government's five-year action plan in response to the Special Commission of Inquiry into Child Protection Services in NSW. This included providing training to all of our staff that may have direct contact with children and young people and implementing new measures to safeguard the interests of children and young people in voluntary out-of-home care, many of whom have a disability.

In 2010–11:

- 12,000 families accessed early childhood intervention services, including services targeting children with autism
- more than $3 million were allocated through the Family Assistance Fund
- 1,500 families accessed funding through the Family Assistance Fund.

As part of Stronger Together, we have invested more than $21.9 million to support children and young people with autism and their families through targeted service projects and activities including:

- $3.2 million in 2011 to establish an autism-specific childcare centre in Western Sydney and $1.2 million to operate the centre and outreach service in subsequent years
- $6 million over four years for the Helping Troubled Kids Initiative to support young people with autism and challenging behaviour at risk of suspension from school
- $6.5 million to Autism Spectrum Australia (Aspect) for early childhood intervention services, provision of support networks for young people and their families, provision of a diagnostic service in regional and rural NSW, establishing an early detection and screening service in the Macarthur, Albury and Wagga Wagga areas
- $142,500 to sponsor conferences and workshops
- $4.8 million over four years for an early childhood intervention package, supporting families and staff in a range of preschool settings.

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1 Dialectical Behaviour Therapy is a form of psychological therapy which was developed for the treatment of Borderline Personality Disorder (BPD), particularly those individuals with self harm and/or suicidal urges.

Advocacy information and linkage

In 2010–11:

- 21,000 people accessed counselling, support and advocacy services under the HACC Program

- 32,000 people accessed client care coordination services

- 13,300 people accessed case management

- 100,000 people accessed assessment services

- $93 million in total funds were spent.

Advocacy, information and linkage services play an important role in helping people with a disability and older people to make informed choices whilst improving the communication between themselves and other members of the community.

In 2010–11, we introduced the Disability Advocacy and Information Guidelines across NSW to provide greater clarity in the delivery of advocacy services for individuals and groups of people with a disability, their families and carers. The guidelines provide advice on services and clarify the aims and objectives of information and advocacy services across NSW so that people with a disability, their families and carers have a clear understanding of what they can expect from these services.
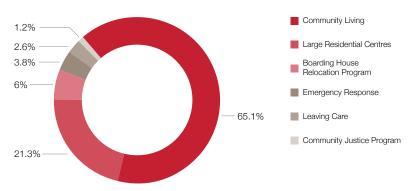
SPECIALIST SUPPORT

Specialist support services are designed to help people with a disability who may need additional support due to the complex or medical nature of assistance required.

Services include supported accommodation located in community settings and community living. Supported accommodation includes 24-hour support and drop-in arrangements, while community living services support people living in the community or with their families. We also fund and operate a small number of large residential centres involving 24-hour support for groups of 20 or more people.
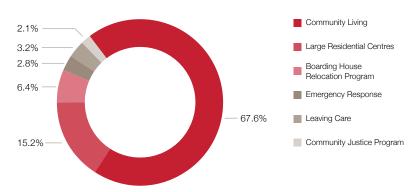
Under Stronger Together 1, more than 1,000 people have moved into permanent specialist community living places. We are committed to investing in service model development and research initiatives to best guide our service expansion.

Under Stronger Together, an innovative accommodation framework is being implemented which will expand accommodation types and support models. By increasing the range and type of accommodation models, we are supporting increased accessibility, flexibility and choice. The new models will also enable individual support needs to be better matched with service types.

Specialist support service groups share of expenditure 2010–11

- 1.2%
- 2.6%
- 3.8%
- 6%
- 21.3%
- 65.1%

- Community Living
- Large Residential Centres
- Boarding House Relocation Program
- Emergency Response
- Leaving Care
- Community Justice Program

Specialist support service groups share of clients 2010–11

- 2.1%
- 3.2%
- 2.8%
- 6.4%
- 15.2%
- 67.6%

- Community Living
- Large Residential Centres
- Boarding House Relocation Program
- Emergency Response
- Leaving Care
- Community Justice Program

Results and services

Community living

An estimated 7,800 people accessed community living support in 2010–11 from government-provided and funded organisations at a total cost of $733 million. These services include supported accommodation in community settings.

In 2010–11 there were:

- 1,700 people living in 345 ADHC-operated community living arrangements
- 6,100 people living in more than 1,100* ADHC-funded community living arrangements.

The Lifestyle Planning Policy and Practice Guide was rolled out in ADHC-operated accommodation support services. It incorporates person centred practices in planning services, and measures quality based upon the achievement of goals. The implementation of the policy includes training in person centred thinking, as well as statewide and regional learning workshops.

Thirty-two young people relocated from residential aged care into more appropriate accommodation as part of the Younger People in Residential Aged Care (YPIRAC) Program. Eight of these people have been helped to relocate to other forms of accommodation not funded by ADHC, including two service users who have transferred to South Australia and Queensland to be closer to family and friends. In addition, more than 40 people are currently transitioning out of an aged care facility.

Construction is underway to provide 35 custom-built homes under the YPIRAC Program. Also under YPIRAC, 210 people were referred for aids and equipment, and eight people received home modifications supporting them to remain in the family home.
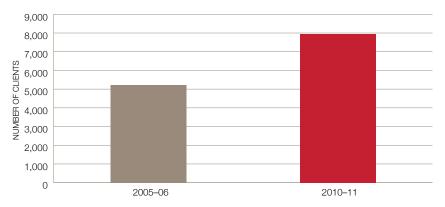
A $6 million capital allocation has been made to the Boarding House Relocation Program to provide alternative accommodation for residents of licensed residential centres. Services provided under this program focus on quality, flexibility, appropriateness and convenience in locality to best meet the needs of individuals.

Pilot programs providing drop-in support services to culturally and linguistically diverse (CALD) and Aboriginal communities were conducted. So far, 29 people have received a drop-in service from the pilot programs, with a further eight identified for assessment and possible placement. An independent evaluation of the CALD drop-in support program has found it to be overwhelmingly positive in increasing an individual's independence and participation in the community.

An additional 113 clients accessed drop-in support services assisting them to live in closer contact with the community and enabling them to achieve independence with appropriate support. Forty-six of these people came from group homes.

A new Community Living Award and associated staffing and management structure for ADHC-operated accommodation and respite centres was agreed, in consultation with the Public Service Association, and implemented in October 2010. The new structure aims to improve the quality of support for people accessing our services. A review of the structure is underway to ensure that the objectives of the changes have been met.

Stronger Together growth in community living

* Non-unique count.

Emergency response

In 2010–11:

- 369 clients accessed emergency response services

- $33.4 million were allocated for emergency response services

- 169 clients entered and 150 exited the program

- Emergency response services had 132 clients as at 30 June 2011.

Emergency response services are designed to provide short-term support to people with a disability who are homeless or at risk of being homeless. Under Stronger Together, we are able to support more people with a disability, their families and carers in a wider variety of circumstances, which has led to reduced reliance on emergency response funding and fewer relinquishments and long-term occupancy of respite beds.

To provide more targeted and sustainable services for people receiving emergency response funding, a pilot Emergency Response Transition Unit Pilot has 64 places across the state, and provides intensive accommodation support services over a short period, to assist people to transition to sustainable long-term accommodation.

Large residential centres

We retain a number of large residential centres which provide supported accommodation and other services for people with a moderate to severe disability in settings of 20 residents and more. The non-government sector also operates a number of large residential centres, and some small residential centres, which provide supported accommodation for people with a disability in settings of seven to 20 residents. Currently, large residential centres accommodate 1,500 people. In 2010–11, over $5.2 million was spent on redevelopment.

As part of Stronger Together 2, $255.4 million is committed in capital and recurrent funding to redevelop all remaining residential centres operated by ADHC and the non-government sector.

Progress made towards providing new accommodation for all residents of large residential centres under Stronger Together includes:

- Peat Island Centre closed in November 2010, following the relocation of residents to the Fig Close Group Homes at Wadalba and the specialist aged care village, Casuarina Grove, at Hamlyn Terrace

- St Michael's Hostel, an NGO service in Bathurst, was redeveloped, and new onsite accommodation opened in November 2010

- the Lachlan Centre in North Ryde was replaced by the Norton Road Specialist Supported Living Homes in December 2010

- Ferguson Lodge, an NGO service, is funded for an on-site redevelopment, with new accommodation due to be completed later this year

- planning for the redevelopment of the Riverside Centre in Orange began, with residents expected to relocate to their new homes in 2013.

$33.4 million

allocated for emergency response services

Results and services

CONTINUED

HOME CARE

In 2010–11:

- 49,200 clients accessed 1.82 million domestic assistance service hours

- 11,000 clients accessed 1.60 million personal care service hours

- 2,500 clients accessed 311,000 respite care service hours.

Home Care is the largest provider of Home and Community Care (HACC) services in NSW, employing more than 4,500 staff and providing over 3.9 million service hours to 52,000 clients. Home Care has 43 branches delivering services to people across the state, including eight Aboriginal Home Care branches. The majority of services provided by Home Care fall within three categories – domestic assistance, personal care and respite care.

The Referral and Assessment Centre received 67,280 inquiries and 24,741 referrals this year, averaging 267 inquiries and 99 referrals each day.

Home Care is also funded to provide services for a range of other programs including Veterans' Home Care, Attendant Care and Community Aged Care Packages.

This year Home Care made further progress on its program of reform. The Care Worker Award continued to deliver key efficiencies including:

- improved allocation of work to field staff to reduce field costs and improve service quality

- reduced care worker turnover and desired levels of work for staff

- increased the number of dedicated relief care worker positions, providing better contingency planning and improved service quality and support.

As part of our move towards person centred approaches, Home Care finalised preparations this year to undertake two projects to provide individuals with gr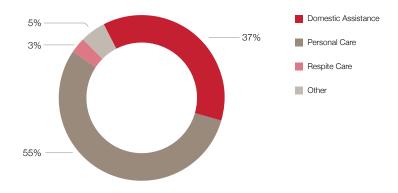eater choice and control over their service delivery. One project will be carried out in northern NSW for people with low support needs, and the other will be carried out in a number of metropolitan and rural locations for people with high support needs.
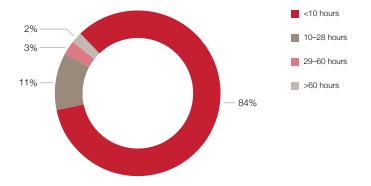
A review of personal care services began to better define the boundary between tasks that can be delivered by care workers and those that are required to be provided by a nurse.

Home Care continues to identify requirements for a learning and development system capable of ensuring the currency of the staff skill base and reflecting the needs of the community within a person centred service delivery model.

Number of Home Care service visits 2010–11

- 5%
- 3%
- 37% Domestic Assistance
- 55% Personal Care
- Respite Care
- Other

Percentage of clients by monthly sevice hours in 2010–11

- 2%
- 3%
- 11%
- 84%
- <10 hours
- 10–28 hours
- 29–60 hours
- >60 hours

Data source: Home Care Service of NSW

ABORIGINAL SERVICE DEVELOPMENT

We are committed to making access to disability services more equitable and improving outcomes for Aboriginal people. Progress to improve Aboriginal service delivery in 2010–11 included the launch of the Aboriginal Policy Statement, which provides the foundation to strengthen services for older Aboriginal people, Aboriginal people with a disability, their families and carers. The statement builds on our previous Aboriginal policy initiatives and is aligned with the recommendations of the NSW Ombudsman's review on improving service delivery to Aboriginal people with a disability, which was released in September 2010.

An Aboriginal Advisory Committee has been established to inform a strategic and coordinated approach to culturally inclusive service delivery. The committee brings together our Chief Executive, the three Deputy Directors General and up to 10 Aboriginal community members.

The Aboriginal Service Delivery Model was implemented this year to improve access to disability services. The first trial was conducted in the Southern region. The model is a flexible targeted service to support the needs identified by an Aboriginal person with a disability and their family, ensuring that informal supports are improved and sustained in the future. This model is designed to respond to the issues that Aboriginal communities have told us about in consultations and reports.

These initiatives will enable us to better deliver services in a way that is more accessible, flexible and tailored to meet the needs of Aboriginal families and communities.

The growth and expansion of Aboriginal Home Care, including establishing the Aboriginal Access and Assessment Team, has seen client numbers increase by over 50 percent in the last five years. In 2010–11, the Aboriginal Access and Assessment Team conducted more than 950 new assessments to assist people into services. The team also conducted more than 250 re-assessments to ensure that services continued to meet clients' changing needs.
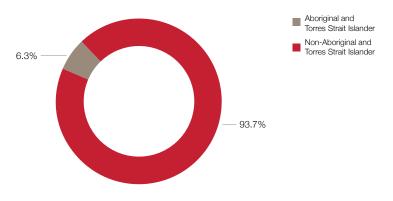
In June 2011, we achieved more than six percent Aboriginal representation across our workforce through the Aboriginal Employment Strategy, Let's See It Through. The strategy commits ADHC to achieving 10 percent Aboriginal employment by 2015 and establishing ADHC as an employer of choice for Aboriginal people. During 2010–11, over 130 Aboriginal trainees were employed as part of the strategy, including

19 Assistants in Nursing and 39 Disability Support Workers. Each received 12 months paid employment, on-the-job training and formal studies in disability, aged care and health support services.
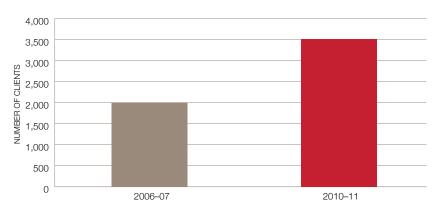
SERVICES FOR CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

We recognise the value of cultural diversity and aim to deliver programs and services that are responsive and respectful. Valuing and Managing Diversity: A Strategic Framework for Cultural Diversity 2010–13 was launched last year and sets out our priorities for improving service access to people from culturally and linguistically diverse (CALD) backgrounds. Further details can be found in the appendices of this report.

Breakdown of HACC Home Care clients by Aboriginal status 2010–11

Aboriginal and Torres Strait Islander

Non-Aboriginal and Torres Strait Islander

6.3%

93.7%

Aboriginal Home Care clients

NUMBER OF CLIENTS

4,000
3,500
3,000
2,500
2,000
1,500
1,000
500
0

2006–07   2010–11

Results and services

SUPPORT FOR WELL AGED

By 2025, there will be more people aged 65 years and older than people under 15 years for the first time in NSW history. People aged 85 years and older are also projected to increase as a proportion of the NSW population from approximately 1.3 percent in 2024 to 3.9 percent in 2036[1].

ADHC is helping older people access a range of services and programs that will enable them to remain healthy, independent and connected to their communities. Through the Office for Ageing (OFA), we provide strategic advice to the NSW Government on the implications of population ageing. The NSW whole-of-government ageing strategy aims to put in place key initiatives to manage this demographic change.

The OFA provides strategic advice and secretariat support to the NSW Ministerial Advisory Council on Ageing. The council provides advice on matters to meet the needs and interests of older people and to improve their wellbeing. It also aims to maximise opportunities for the ageing population in NSW.

In September 2010 the council published a report – Employment and Retention Strategies for Older Workers. It also undertook research on social inclusion and older people, which found that all older people are at risk of social exclusion and that there are many forms of disadvantage and multiple drivers of social exclusion of older people. To further support this research, a series of community consultations were held in Auburn, Broken Hill and Liverpool Plains in January and February 2011. The consultations and findings will be published in a report for the Minister for Ageing, and will help us to develop appropriate policies, practices and services for older people.

In 2010–11 the Ageing Grants Program awarded $300,000 in one-off grants to 51 local government and not-for-profit organisations to implement positive ageing projects across NSW.

We worked closely with the Department of Premier and Cabinet, the Local Government and Shires Associations, peak bodies and local councils to develop resources and a web page to help local councils plan for the implications of population ageing.

We are working closely with NSW Health and Alzheimer's Australia to implement the NSW Dementia Services Framework 2010–15. The framework unites health, community and residential services in the planning and development of dementia services and programs. It reviews service needs and recommends service pathways for providing dementia care and support, from awareness through to diagnosis, assessment, community, hospital and residential care.

As part of the Dementia Learning Resource for Aboriginal Communities, we worked in partnership with the NSW Aboriginal Health College and the Aboriginal Health and Medical Research Council to develop and revise competency-based training in dementia care for Aboriginal people. To date, four training sessions have been held throughout the state, with further sessions planned during the year.

We also worked with the University of Western Sydney to develop a website that will assist people to plan for later life. The website, jointly funded by us and the NSW Trustee and Guardian, is scheduled to be launched in late 2011.

$300,000

awarded in one-off grants to 51 local government and not-for-profit organisations to implement positive ageing projects across NSW

1 NSW Department of Planning, NSW Statistical Local Area population projections, 2006–2036.

Regions

REGIONS

Having a local presence within local communities is essential in meeting client, family and carer needs. Services to the community are delivered across six regions: Metro North, Metro South, Hunter, Northern, Southern and Western.

Our regions – comparative population, geographical area, staffing

REGION	AREA (KM[2])	TOTAL POPULATION[1]	POPULATION AGED 65+[1]	CALD POPULATION[1]	ABORIGINAL POPULATION[1]	ESTIMATED NUMBER OF PEOPLE WITH A DISABILITY[2]	TOTAL STAFF[5]
Metro North	6,288	1,807,144	211,764	405,798	17,895	259,008	3,300
			11.7%	24%[4]	1.0%[4]	14.3%	
Metro South	6,861	2,056,357	247,493	567,212	19,694	314,365	2,400
			12.0%	30.4%[4]	1.0%[4]	15.3%	
Hunter	26,302	849,638	138,103	37,814	20,623	154,948	2,500
			16.3%	4.7%[4]	2.5%[4]	18.2%	
Northern	140,353	713,619	132,110	22,955	34,147	142,581	1,500
			18.5%	3.4%[4]	5.0%[4]	20.0%	
Southern	59,116	549,897	89,578	47,223	13,105	98,878	1,300
			16.3%	9.2%[4]	2.5%[4]	18.0%	
Western	564,243	562,344	85,925	18,568	32,623	98,339	1,700
			15.3%	3.5%[4]	6.1%[4]	17.5%	
NSW	803,163	6,538,999[3]	904,973	1,099,568	138,087	1,068,173	12,700
			13.8%	18.1%[4]	2.2%[4]	16.3%	

Notes:
1 Total population, population aged 65+, CALD and Aboriginal population are based on ABS Census 2006 data pack release 2.1.
2 The number of people with a disability is based on ABS Small Area Estimates of People with a Disability 2003.
3 The NSW total excludes those people without a usual address.
4 The percentages calculated for both CALD and Aboriginal populations exclude 'not stated' records from total population.
5 Total staff data source: ADHC Workforce Profile.

Regional achievements include:

- employed person centred approaches in service planning and delivery
- expanded types and numbers of services available and tailored them to individual support needs
- strengthened the workforce through learning, development and related initiatives
- improved early intervention, therapy and behaviour support functions
- enhanced quality assurance systems in accommodation services to ensure best practice in responding to the needs of individuals
- individual and community support during the redevelopment of large residential centres
- development of action plans to improve access for culturally and linguistically diverse people
- improved access to services and participation in the workforce for Aboriginal communities through implementation of improved strategic frameworks
- implemented new Community Living Award in the Accommodation and Respite business areas to improve the coordination of individual services and staff support at a local level
- improved business planning and governance through the implementation of red tape reduction strategies.

Regions

METRO NORTH

Metro North region is very diverse in terms of demography, culture, language, urban density and economic resources. It supports more than 27 percent of the NSW population.

Approximately 14 percent of the Metro North population has a disability and 12 percent are aged 65 years and older. Nearly a quarter of the region's population is from a CALD background and one percent are from an Aboriginal or Torres Strait Islander background. However, it is important to note that cultural and population trends within the region may vary.

Stronger Together investment ($218.8 million service expansion from 2006–11) in disability services enabled further developments to the disability service system to cater for the region's growing and varied needs for disability services.

Achievements include:

- established a dementia monitoring service and a new carer support service in the Nepean

- established a new dementia café service in the Nepean Local Planning Area (LPA) and provided continuing funding to the dementia café pilot project in the Cumberland Prospect LPA

- built eight houses and villas for supported accommodation and funded 16 new supported accommodation places for people with a disability

- funded 18 new support options including drop-in support and care with an 'alternate family' for young people accessing the Leaving Care Program

- implemented the Enable Me Pilot Project in the Northern Beaches – a community care project to increase capacity so that individuals are able to live as independently as possible

- funded CALD background-specific counseling, information, support and advocacy services in the Nepean and Northern Sydney LPAs

- funded a DVD information project about HACC services for Arabic speaking people and established a pilot online shopping project for frail older people in Auburn

- established home support, community housing and group home placements to support 23 people with a range of disabilities who needed crisis accommodation.

Objectives for 2011–12 include:

- support planning for the redevelopment of the 10 funded non-government large residential centres in the region, for completion by 2018

- play a lead role in two place-based service projects, including the Inclusive Community Project in Auburn and the FACS One Place One Plan Reform Project in Mt Druitt

- support HACC service providers through the 2011–12 transition period, especially the new Aboriginal services established during the past two years

- roll out training for service providers working with people with dementia and a physical disability.

Metro North ADHC-operated services

SERVICES		CLIENTS
110	Group home	490
0	Large residential centres	380
0	In-home support	10
15	Respite centres	680
30	Community support teams	3,500
349,000	Personal care hours	1,800
222,000	Domestice assistance hours	6,700
36,000	HACC respite hours	280

Metro North ADHC-funded services

ORGANISATIONS		CLIENTS
10	Large residential centres	370
40	Community living (group homes)	770
40	Community living (other)	600
20	Respite organisations	2,100
40	Community engagement programs	1,700
30	Therapy and Fixed Term intervention including Support for Families and Children	4,200
128,000	Personal care hours	1,600
174,000	Domestice assistance hours	4,900
158,000	HACC respite hours	1,600

METRO SOUTH

Metro South has a population of more than two million people, 15.3 percent of whom have a disability and 12 percent of whom are aged 65 years and over. The region has the highest proportion (30.4 percent) of its population made up of people from CALD backgrounds and communities. The region plays a lead role in shaping the future direction of our policy and service delivery processes for people from a CALD background.

The region's large, diverse service system is expanding through Stronger Together investment ($271.7 million service expansion from 2006–11). In response to the region's diverse profile, a significant proportion of this investment and new services target people from CALD backgrounds.

Achievements include:

- implemented 12 new accommodation models including group homes, villas and co-located models offering 62 places of supported accommodation to people with a disability, as well as 29 new drop-in support places under Stronger Together 1

- formed a cross-agency reference group to assist regional delivery of the Young People Leaving Care Program to ensure that young people receive appropriate support

- conducted the Valuing and Managing Diversity: Cultural Diversity Strategic Planning workshop on 20 May 2011, identifying local strategies and activities to build engagement with the region's CALD community; the workshop was attended by 110 participants from across the sector

- four Aboriginal Disability Support Workers (DSW) graduated with a Certificate IV in Disabilities, and a further four Aboriginal DSW trainees were recruited

- conducted a range of clinics to provide support for families and carers in communication and living skills

- held a Chinese Carers Forum for more than 30 Chinese carers of a child with a disability to facilitate improved access to services

- conducted a bi-monthly Korean Carers Support Group for Korean parents and carers caring for a child or adult with a disability to share ideas and receive information about available services.

Objectives for 2011–12 include:

- increase person centred approaches in service planning and delivery

- expand types and numbers of services available and tailor them to individual support needs

- strengthen the workforce through learning, development and related initiatives

- integrate cultural and linguistic diversity into planning, monitoring, reporting and evaluation

- build organisational capabilities to work with a culturally diverse community

- provide culturally and linguistically responsive services and programs.

Metro South ADHC-operated services

SERVICES		CLIENTS
80	Group home	360
0	Large residential centres	-
0	In-home support	-
10	Respite centres	560
25	Community support teams	3,000
426,000	Personal care hours	3,000
346,000	Domestice assistance hours	11,000
63,000	HACC respite hours	460

Metro South ADHC-funded services

ORGANISATIONS		CLIENTS
0	Large residential centres	-
30	Community living (group homes)	530
25	Community living (other)	430
30	Respite organisations	1,900
40	Community engagement programs	1,400
30	Therapy and Fixed Term Intervention including Support for Families and Children	3,800
98,000	Personal care hours	1,400
156,000	Domestice assistance hours	4,100
146,000	HACC respite hours	1,200

Regions
CONTINUED

HUNTER

Hunter region has a population of approximately 850,000 people, with 18.2 percent identifying as having a disability and 16.3 percent being 65 years and older.

With a mixture of urban and rural communities, Hunter is home to approximately 25 percent of NSW boarding house residents, as well as 638 people with a disability being accommodated in three large residential centres and one specialist support living facility.

Stronger Together investment in disability services enables further development and expansion of the disability service system across the region. We continue to participate in staff wellbeing initiatives and implement person centred approaches to improve quality and effectiveness of our services.

Achievements include:

- through Stronger Together, 170 new post-school program places were implemented

- an extra 85 respite places were established

- rolled out more than 35 extra therapy places for children and adults with a disability

- established eight new specialist accommodation facilities that deliver 41 places, and developed a new specialist support living facility, Casuarina Grove

- relocated 43 boarding house residents following the closure of Sandalwood Lodge Boarding House

- revised and improved the accommodation vacancy management process in the Hunter to ensure placements are offered with equity, transparency and timeliness

- implemented the 'Transforming Teams' training, with a focus on the leadership required to implement person centred approaches in the region

- implemented the Hunter Region Communication Improvement Project to improve the timeliness and quality of individual outcomes

- established an early intervention focus group to enhance service delivery to children aged 0–6 years

- delivered a regional Women's Leadership Program comprising two to 15 staff.

Objectives for 2011–12 include:

- address increased service demand by developing innovative approaches to training and workforce planning

- work effectively with people with complex and challenging behaviours by working collaboratively across all business streams and the non-government sector

- implement red tape reduction initiatives through improved regional planning and resourcing.

Hunter ADHC-operated services

SERVICES		CLIENTS
50	Group home	250
0	Large residential centres	600
0	In-home support	40
10	Respite centres	290
10	Community support teams	2,100
176,000	Personal care hours	1,100
191,000	Domestice assistance hours	5,300
20,000	HACC respite hours	160

Hunter ADHC-funded services

ORGANISATIONS		CLIENTS
0	Large residential centres	40
20	Community living (group homes)	380
30	Community living (other)	490
20	Respite organisations	930
30	Community engagement programs	1,000
20	Therapy and Fixed Term Intervention including Support for Families and Children	2,100
78,000	Personal care hours	1,200
130,000	Domestice assistance hours	4,000
141,000	HACC respite hours	1,200

NORTHERN

In Northern region, 20 percent of the population are people with a disability, approximately 18.5 percent are aged 65 years and over and five percent are of Aboriginal background. A small proportion of the population is from CALD backgrounds (3.4 percent).

Stronger Together investment has meant significant growth of the disability service system in the region.

Achievements include:

- purchased 102 additional accommodation support places, including 33 places for the Young People Leaving Care Program, 10 for the Young People in Residential Aged Care Program, and 14 Community Justice Program places; 28 of these additional places were new individual accommodation support packages which provided greater flexibility to the region in meeting the needs of individuals

- provided 22 new capital projects, including additional villa accommodation settings established in Ballina, Grafton and Kempsey, and co-located group home models in Port Macquarie and Tamworth

- purchased 34 additional day programs with priority for individuals entering specialist accommodation support

- established an Aboriginal women's co-located accommodation high support model in Kempsey and funded a complex health accommodation model to support younger people to leave residential aged care in Armidale

- allocated additional HACC non-recurrent funds to an organisation in each local planning area to provide training in person centred approaches

- expanded clinical and specialist support staff positions across the region, including: five new behavioural support positions; four new Northern Regional Behaviour Intervention team positions; clinical nurse consultants and registered nurse positions; a dietician position; and three Aboriginal cadetships in psychology, occupational therapy and speech pathology

- implemented the Northern Aboriginal Communication Web in targeted locations throughout the region to provide local communities with increased consultation and assistance

- integrated the Funding Management System to ensure greater funding accountability in the region.

Objectives for 2011–12 include:

- maintain and increase numbers of accredited trainers in person centred thinking across the region

- increase the knowledge and skills of staff in collaboration and engagement strategies

- work collaboratively with organisations to develop communities of practice in the area of person centred approaches and flexibility in support

- work with the disability sector to develop and implement project plans for the implementation of the enabling approach.

Northern ADHC-operated services

SERVICES		CLIENTS
30	Group home	140
0	Large residential centres	-
0	In-home support	30
0	Respite centres	230
10	Community support teams	2,300
210,000	Personal care hours	1,600
338,000	Domestice assistance hours	7,900
35,000	HACC respite hours	300

Northern ADHC-funded services

ORGANISATIONS		CLIENTS
0	Large residential centres	30
20	Community living (group homes)	290
50	Community living (other)	380
30	Respite organisations	1,300
40	Community engagement programs	800
20	Therapy and Fixed Term Intervention including Support for Families and Children	760
32,000	Personal care hours	1,100
56,000	Domestice assistance hours	2,200
117,000	HACC respite hours	1,000

Regions

SOUTHERN

Southern region has eight percent of the NSW population and is as diverse culturally as it is geographically.

The region has slightly higher proportions of people with a disability (18 percent), older people (16.3 percent) and Aboriginal people (2.5 percent) than the NSW averages, and a smaller proportion of people from CALD backgrounds (9.2 percent).

Southern region's diverse disability service system is undergoing expansion ($103.4 million service expansion over 2006–11 through Stronger Together).

Achievements include:

- more than 80 extra therapy places for children and adults with a disability were rolled out in 2010–11

- an extra 150 new post-school program places were introduced

- over 50 extra respite places established in 2010–11

- achieved a substantial reduction in wait times for therapy services in the Illawarra

- invested more than $3.4 million (recurrent) in expansion of specialist disability services under the Leaving Care Program, the Community Justice Program and other specialist support

- recruited five Aboriginal trainees for the Disability Support Worker (DSW) Program

- 11 graduates of the DSW Trainee Program participated in and gained Certificate III Disability Support Work

- the Regional Aboriginal Advisory Group provided a mechanism for networking, problem solving, information

sharing and planning to resolve issues of access to service delivery

- piloted and evaluated accredited peer training in accommodation and respite for roll out in 2011–12

- implemented the Person Centred Supervision Tool, enabling community support teams to better support people with a disability to increase their independence and participation as valued, active members of the community

- implemented a Case Management Quality Improvement Framework to guide allocation of support resources based on the complexity of need

- developed the Aboriginal Cultural Respect Guide to better implement culturally respectful engagement practices with Aboriginal service users, communities and practitioners.

Objectives for 2011–12 include:

- provide suitable accommodation options and develop service systems for people with a disability who are ageing

- develop and implement strategies to further improve access and equity to respite services

- introduce place-based planning to identify and address the disability sector's needs and priorities in the region, ensuring that the community is at the centre of these decision-making processes.

Southern ADHC-operated services

SERVICES		CLIENTS
40	Group home	220
-	Large residential centres	-
-	In-home support	10
5	Respite centres	160
10	Community support teams	1,500
115,000	Personal care hours	820
178,000	Domestice assistance hours	4,600
23,000	HACC respite hours	140

Southern ADHC-funded services

ORGANISATIONS		CLIENTS
-	Large residential centres	-
20	Community living (group homes)	230
20	Community living (other)	220
20	Respite organisations	1,000
20	Community engagement programs	760
10	Therapy and Fixed Term Intervention including Support for Families and Children	920
46,000	Personal care hours	620
45,000	Domestice assistance hours	1,400
98,000	HACC respite hours	770

WESTERN

Western region covers almost three quarters of NSW geographically but has only nine percent of the state's population.

The region has close to average proportions of people with a disability (17.5 percent) and older people (15.3 percent), the largest proportion of Aboriginal people in the state (6.1 percent) and a relatively small number of people from CALD backgrounds (3.5 percent).

Achievements include:

- provided more than 50 extra therapy places for children and adults with a disability through Stronger Together

- delivered more than 110 new post-school program places in 2010–11

- provided targeted behaviour support training to non-government sector workers to help them better manage individuals with challenging behaviour, and developed a fact sheet and guidelines for challenging behaviour services

- worked with Community Transport to increase access for our service users in isolated areas to allow them to attend medical and health services and community supports, as well as increasing the number of wheelchair accessible vehicles

- began a four-year joint research project with the University of Sydney to identify barriers and ways to improve the availability of therapy services within the region

- enhanced employment opportunities for Aboriginal people seeking a career in the public sector through a range of traineeships and cadetships.

Objectives for 2011–12 include:

- develop a capacity-building framework for direct and funded services to enhance service delivery within the Community Justice Program

- develop and implement an Aboriginal Cultural Inclusion Strategy to make services more culturally appropriate for Aboriginal communities

- review the region's vacancy management and emergency response procedures

- ensure our client information systems provide accurate and comprehensive data to better inform future service planning.

Western ADHC-operated services

SERVICES		CLIENTS
30	Group home	150
-	Large residential centres	60
-	In-home support	-
-	Respite centres	160
10	Community support teams	1,800
166,000	Personal care hours	1,500
300,000	Domestice assistance hours	7,400
15,000	HACC respite hours	180

Western ADHC-funded services

ORGANISATIONS		CLIENTS
-	Large residential centres	-
20	Community living (group homes)	350
20	Community living (other)	200
30	Respite organisations	960
40	Community engagement programs	560
10	Therapy and Fixed Term Intervention including Support for Families and Children	770
6,200	Personal care hours	200
10,000	Domestice assistance hours	420
54,000	HACC respite hours	580

Supporting our services

KEY DATA

ADHC employs more than 13,600 staff with over 10,800 working in direct client services.

In 2010–11:

- our staff were supported by more than 41,560 training attendances
- we created 27 new specialist behaviour support positions to enhance the Regional Behaviour Intervention teams
- there were almost one million members in the Seniors Card Program, with an average of 5,000 new members each month
- we endorsed 19 internal audits and performance reviews by the Audit and Risk Committee
- we completed the data linkage project linking HACC's Minimum Data Set (MDS) and 45 and Up data
- we had 73 research and evaluation projects, active or planned, including 43 research projects and 26 evaluation projects.

We are a large, complex organisation whose operations are devolved across the state. Our corporate governance approach supports executive decision-making and the management of our strategic goals and operational objectives. This year we continued to implement arrangements to ensure that advice, decision-making and implementation oversight reflects a cross-section of the views and responsibilities within ADHC. We continued to strengthen governance with a structured approach through:

- a divisional executive team to oversee committees, set directions and maintain a performance overview
- an Operational Performance Committee
- a Change Management Group
- standing committees.

The Chief Executive is responsible for overseeing our governance activities.

AUDIT AND RISK COMMITTEE OUTCOMES

The Audit and Risk Committee provides independent assessment of the risks facing the organisation and the appropriateness of its controls and mitigation strategies. It supports the Chief Executive in performing his duties in relation to our systems of internal control, risk management, internal and external audit functions and compliance with legislation.

During the past year, the committee monitored our implementation of the Internal Audit and Risk Management Policy for the NSW Public Sector. The committee met seven times in 2010–11 and endorsed the following 19 internal audits and performance reviews:

- accounts payable
- asset management
- business continuity management policy and plan
- children's legislation
- crisis management plan
- events and communication management usability assessment
- fleet management
- funding management system change management and training
- funding management system cutover readiness
- funding management system parallel run
- fraud and corruption prevention policy and plan
- John Williams Memorial Charitable Trust
- operational policy governance
- pandemic management plan
- privacy audit
- review of Businesslink/ ADHC Interface Phase 2
- risk management policy, procedures and reporting framework
- shared services fees
- support service governance plan.

EVENTS AND COMMUNICATION MANAGEMENT

Our Events and Communication Management team supports the division through communications, including the coordination of seven websites, an intranet and internal and external stakeholder communications including an e-newsletter.

Each year we have several event programs, public awareness campaigns and Ministerial and other events. Event highlights for 2010–11 included International Day of People with a Disability, the Premier's Christmas Gala Concert, NSW Seniors Week and the Stronger Together 2 community consultations.

The NSW Seniors Card is a statewide program which assists in encouraging retired and semi-retired seniors to enjoy an active and healthy lifestyle after finishing full-time employment. The card entitles members to NSW Government-funded travel concessions, discounts and special offers provided by more than 2,000 participating businesses across the state.

The Companion Card Program is a not-for-profit statewide program for people with a disability who require attendant care support and are otherwise required to pay two admission or booking fees, one for themselves and one for their companion. It is delivered by National Disability Services with contract support from ADHC.

The unit also continued to support Giving Pays – our workplace giving program – where staff support 10 partner charities through their pre-tax salary, with staff pledging $136,062 in 2010–11.

STRATEGIC HUMAN RESOURCES

More than 10,800 or 79 percent of our staff work in direct client services, including 5,781 (42 percent) in Accommodation and Respite, 1,143 (eight percent) in Community Access, and 3,876 (29 percent) in Home Care services.

A strong, well trained, committed and diverse workforce is essential to meet our aims and objectives. We have undertaken a number of initiatives to develop our capacity to meet the growing demands of the sector.

Highlights in strategic human resources over the past year include:

- 400 team leaders commenced the Certificate IV in Frontline Management and 22 new Practice Support Co-coordinators completed the Certificate IV in Training

- more than 360 new frontline management Team Leaders participated in a two-day induction program

- the Managing Employees with a Disability Guide was developed and a new performance management system, Striving for Excellence, was implemented

- more than 41,560 training attendances and over $15.4 million spent on learning and development

- a new staff structure for group homes, respite centres and in-home services was implemented to enhance frontline management and operational support

- more than 130 Aboriginal people were offered opportunities in a range of areas including Disability Support Workers, Assistants in Nursing and Home Care Trainees.

STRATEGIC BUSINESS ASSETS PROCUREMENT

Strategic Business Assets supports service delivery by ensuring that necessary business assets are efficiently provided to the required quality. The business assets include community living homes, office accommodation, transport, administration and vehicles. In 2010–11:

- expenditure and cash flow amounted to $84.8 million

- 324 community living supported accommodation beds were delivered

- large residential centre redevelopments were completed and residents relocated to new accommodation at Wadalba and Hamlyn Terrace and Lachlan, where a total of 170 beds are being delivered

- Peat Island was transferred to the State Property Authority for disposal

- upgrades were delivered to 220 group homes

- 140 office accommodation leases vested in the State Property Authority.

STRATEGIC FINANCE

Strategic Finance is responsible for the effective management of our statutory financial reporting and governance services, strategic budget development and financial performance management. With a budget of $2.5 billion of recurrent and capital funding, robust fiscal management is required to ensure effective delivery of financial resources for our services and NGO service providers. Strategic Finance achievements included:

- implementing the Funding Management System as an integrated solution for the management and payment of funding to the NGO sector service providers

- oversight of the Business Case and Gateway review process for Stronger Together 2, including the allocation of Stronger Together budgets and places to program areas and directorates

ADHC financial ratio analysis

	2007–08 $'000	2008–09 $'000	2009–10 $'000	2010–11 $'000
Net cost of services	1,836,144	2,052,009	2,209,664	2,402,220
Net assets	588,169	647,182	753,849	753,849
Cash balance	27,567	58,059	116,853	116,853
Current ratio	0.81	0.95	1.19	1.53

Supporting our services

- unmodified audit opinion for the financial statements for ADHC, Home Care Service of NSW, Home Care Service Division and John Williams Memorial Charitable Trust, with the Trust's accounts successfully transitioned to the corporate financial accounting system during the year
- implementing the financial policy project, which will be used as the template for a series of financial policies to be established during 2011–12.

INFORMATION, COMMUNICATIONS AND TECHNOLOGY

In 2010–11, work began on the Enhanced Client Management Program, which will provide improved use of the Client Information System and a new portal for service providers and people with a disability. The new portal will enable people with a disability to choose how and what services are accessed, as well as reducing the administrative burden of compliance for service providers.

A new Funding Management System was introduced in late 2010 to provide an integrated solution for the management of funding provided to the NGO sector, with documents now more accessible and in a user-friendly format.

Electronic records and document management programs were enhanced to improve archiving of service user records from direct care environments and security for high-risk business functions. The Records Management Action Plan implementation continued to improve compliance with critical aspects of the State Records Act 1998.

GOVERNANCE AND ASSURANCE

Governance and Assurance supports the delivery of high-quality, ethical services through independent assurance, governance and risk management programs.

An internal audit process provides objective independent assurance to our executive team and the Audit and Risk Committee about areas of highest business risk. It assists management to advocate for improvements to service delivery and business processes.

Our employees are responsible for ensuring that their conduct is professional at all times. All allegations about the conduct of employees are taken seriously, with standard procedures in place to respond to these.

The Ethics and Professional Standards Unit (EPSU) manages formal disciplinary responses. The EPSU coordinates our statutory reporting obligations to the Independent Commission Against Corruption (ICAC) and the NSW Ombudsman. It is responsible for the investigation of all allegations of reportable conduct (by an employee towards a child or young person).

This year, the EPSU received 351 reports about employee conduct. Thirty-seven employees were the subject of formal disciplinary investigation. As a result of these investigations, 12 cases resulted in disciplinary or remedial action, one employee was dismissed, one was directed to resign, one was allowed to resign, one received a fine and one received both a fine and a demotion.

Seven matters were referred to ICAC concerning allegations involving possible corrupt conduct, mainly involving misuse of service user or ADHC finances.

Ten employees were the subject of allegations of reportable conduct notified to the NSW Ombudsman, including three that involved reportable allegations involving children outside the workplace. The EPSU works closely with the NSW Ombudsman's Child Protection Team to ensure that reportable allegations are managed to a high standard.

Risk management is a fundamental element of good governance and management practice. Key initiatives during the year included:

- implementation of a new Risk Reporting Framework to monitor identified key risk areas and emerging systemic issues, with a dashboard report provided to the ADHC executive on a monthly basis on 13 key risk categories such as critical service user incidents, risk of significant harm to children, occupational health and safety and fraud matters

- updating the Legislative Compliance Register, which now contains 81 legislative instruments that ADHC must either administer or comply with; a review is currently underway to consider the effectiveness of our legislative compliance monitoring framework and will also assess compliance levels in occupational health and safety and the purchasing of goods and services

- reinforcing and testing of compliance with key elements of ADHC corporate policies across our business units through the Support Services Governance Program, with an overall compliance rate of 92 percent

- establishment of the FairCall whistleblower fraud and corruption reporting hotline for ADHC staff to report fraud and corruption anonymously 24 hours, seven days a week.

A forensic Continuous Auditing and Monitoring Program (CAMP) tool was also established to provide exception reporting of potential fraud and corruption in key risk areas in finance, human resources and procurement. A Fraud and Corruption Control Plan and Support Tools for NGOs were also developed. The plan and tools are currently being incorporated into the NGO best practice manual, It's Your Business. These resources will assist the NGO sector to develop its own policies and practices for managing fraud and corruption within its organisations.

LAW AND JUSTICE

The Law and Justice directorate provides input and advice on strategic research and planning as part of ADHC responsibilities to develop a robust service system and to ensure services are developed in line with whole-of-government policies and legislation. These responsibilities include compliance with the principles and application of the *Disability Services Act 1993* and with the NSW Government's commitment to provide services that are consistent with the United Nations Convention on the Rights of Persons with Disabilities.

During 2010–11, the team played an active role in law reform and legal policy research, suggesting amendments, and advising or commenting on amendments to legislation and regulations, inquiries and review.

EVIDENCE-BASED DEVELOPMENT

We recognise the importance of research and evaluation in providing an evidence-based foundation for informed decision-making, policy development and continuous improvement in program design and delivery. Improving and consolidating the evidence base has been an integral part of the planning and implementation of Stronger Together. Funding for research, data improvements and evaluation has been increased under Stronger Together 2, as this plays an integral role in effective service delivery.

In 2010–11 research projects focused on:

- evidence-based practices for speech pathologists

- policy change impact on the nature of care in government and non-government disability agencies

- demographic implications of the ageing on local government

- factors for maintaining independence at an older age.

Support was also provided for a number of post-graduate students who were undertaking disability related research.

In 2010–11, we completed the HACC Minimum Data Set and 45 and Up data linkage project. We also continued to provide ongoing funding support for the 45 and Up longitudinal study carried out by the Sax Institute. In 2010–11, there were 73 research and evaluation projects, active or planned, including 43 research projects and 26 evaluation projects. Further detail can be found in the appendices.