

Future Communities Industry Forum
Hobart – 21st August 2008
Session 1

In light of the integrated implementation plan are there any activities that are missing from the implementation plan? If so, what are they?

- Process for designing a performance framework (and potentially IM framework) informed by principles articulated in the plans (integrated, holistic, person-centred, etc.).
- Suggest robust process that incorporates genuine client/sector input into design and testing of measures / IM.
- Who is going to determine unit pricing?
- Not sure we understand governance. What will be ongoing role?
- How is proportional representation going to play out? - Tensions around.
- How large will the Regional network be?
- Role of state-wide organisations – are they state or local?
- Spell out Regional level – (more detail).
- Governance (e.g. where works).
- Resourcing – to enable participation.
- How is the “who” going to be determined?
- What are we doing with the new money now?
- Peak bodies – who / how / when?
- Question of timing.
- Pain will be necessary.
- Consumer voice, modify voice.
- Lack of documentation within plan to support NGOs to develop lead agency.
- Whose role is it to develop lead agency?
- Shared understanding of who clients are, i.e. based on level of need, whilst ensuring people with disabilities who have / require lesser support needs are considered within service planning.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- 3.1 / 2.10 – Include mechanisms to address workforce role / responsibility devolution to non-government sector.
- Incorporate strategies to ensure affected staff are involved with career planning pathways and other work options / choices.
- Mapping client demographics and client needs to inform reform planning and funding.
- Objective assessment / review of clients' needs, including current clients and referred clients.
- What happens if there is a change of government?
- If the Lead Agency is also a service provider, is there the potential for conflict of interest?
- A strong focus on “client focus” and empowerment, and the need for client advocacy – but no reflection of resources to be directed to advocacy services.
- The need for strong governance arrangements to ensure client focus not compromised.
- Risk that same service providers will “talk the talk” not “walk the walk”, re client focus to ensure they get their slice of the pie. Quality Assurance and assessment needs to ensure that this issue is addressed.
- Identifying positive elements or good practices in the current system that we don't want to lose (don't throw the baby out with the bathwater).
- Has the Boards of NGOs provided their endorsement or their organisations participation in process of change / reform? CEO must be clearly communicating back to the Board.
- Ensuring that the outcomes for clients are the most important thing.
- Clients must have real contribution to Quality Assurance and assessment of services.
- Must have an independent body to conduct Quality Assurance.
- Board orientation to the new framework – presenting options to them such as alliances, to enable them to have a hard look at themselves.
- There needs to be greater opportunities for client choice from a range of quality service providers.
- Consider Commonwealth Disability Services Act and CSTDA when rewriting State Act and when working out service delivery.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- If there is an increase in people accessing services, need clarity about assessment and service delivery. Clarity about process used to establish need – transparency and consistency in allocating services.
- Need very clear guidelines to enable easy understanding of eligibility (i.e. what is a substantial limitation – comprehension versus verbal, etc). The more clarity, the fewer decisions that need to be made by the “lead consortium”. How do you work out the need? Currently no clear assessment tool for support that can be used by anyone.
- **Urgent** - Impact assessment (social, economic, organisational capacity) of the changes. Office of Community Services to start impact assessments as changes being rolled out / proposed.
- When services devolved from government, funds allocated to provide services are significantly less with higher compliance. Very concerned that service delivery will be reduced.
- NGO Boards, volunteers and staff need to be clearly communicated with, to ensure they all understand the changes, responsibilities, legal requirements and the commitment by DHS.
- **Urgent** - Need clear and succinct communication directed to all NGOs, staff, Boards, volunteers, clients and families that can be disseminated easily, to clarify the changes, etc.
- Who will do the reassessment of all clients in DHHS including self – managed clients to find out what support they are receiving and what they need?
- Information sharing protocols and tool sets needed. Need framework for sharing information and tools to do it. Consider Privacy Act, client consent. Simplify sharing of client information, but still need to be able to ask for additional information to provide suitable services, and need to know why information is required – i.e. Housing don't need to access same information as Children's Services, etc.
- IT needs to be sufficiently resourced to handle data and data sharing, privacy, etc. Need systems to support data, privacy, file sharing, etc.
- 2.2 State-wide organisations NGO – where do they fit within a regional funding allocation?
- They operational funding and local arrangements are centrally organised , especially smaller organisations.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- 2.9 – Quality Assurance Systems.
 - How Disability Services monitor outcomes. Is this about implementing a common Q & S framework and measures, with the Department or developing a new Q & S?
- 2.8 – Develop an understanding of the aspirations of people with a disability. This is a motherhood statement. Reframe in a consumer, family and carer participation framework. See MHS document.
- 2.7 – ‘Go live’ is aspirational.
- Common Assessment Framework – Children and Family Services discussions not currently involving Disability Services. Clarity around these moving forward as an integrated approach.
- Outcomes
 - Importance of effective data collection and evaluation of interpretation.
- Workforce
 - No reference to carers.
- Evaluation process – no overarching framework for evaluation of implementation elements.
- Impact Assessment of changes.
- 2.1 – Rigor around definition of governance – who will be responsible for defining the roles and responsibilities of government, CSOs and users?
- Initiative from community to influence process and vehicle for this to occur.
- What is the definition of Government?
- Clarity around roles and responsibilities – who? – e.g. schedule of implementation not clear on who is delivering elements.
- Purchasing outcomes – definition of what is to be achieved.
- Effectiveness of data collection and evaluation important for outcomes determination.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- Sharing of data and information to inform decision-making and input. At the moment only DHHS as data.
- Communication framework and reference missing from implementation schedule (e.g. no reference in change management strategy). Communication strategy should be overarching this process.
- Need consistency.
- Who will be the watchdog to ensure that the implementation and transfers continue to plan?
- Is there planning for industry-wide assurance for entry-level competencies. Need to develop a curriculum and skill set.
- Acknowledgement of differences between Regional and Local. Some things expected to be done at a regional level may be to be done at local level, because regions are very large and disparate, e.g. page 17 Action 4.
- Who monitors that it is on track? There is no evaluation of the step-by-step process. Who evaluates each region? (e.g. NW may not be working, SW may be fine). Need something embedded in the infrastructure for evaluation. Victoria did an independent evaluation. Will we have this? How do we know that family wellbeing is increased? Statistics around Child Protection are not enough. What about measuring issues for Disability services?
- What are the processes to ensure “transitioning” to new services is a voluntary process, not an involuntary one. It must be one with choice and consultation. Is there advocacy available for clients? There needs to be an independent advocate outside the system with appropriate dispute resolution processes.
- Enough mechanisms to ensure plan is implemented to outcomes.
- Recruitment mechanisms to help change the culture.
- Mechanisms to ensure state-wide consistency as well as regional activities.
- Mechanisms to address gaps if carers do not wish to shift into new system.
- Strong consultation processes with carers, to get ownership. Many consultations and down to LGA (some people have been carers for 30 years but never done any training, so this is scary. May help if focus is about sharing knowledge and experience, rather than teaching people to do what they have been doing for 30 years).
- Communication may be under-estimated and under-represented in the plan.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- Implications of DHHS restructure on timelines.
- Process for mapping area services and making them available to the community networks, to aid them.
- ? Transitioning between CFS and Disability Services, i.e. gap for teenagers and their families.
- Pathway Planning – not happening early enough and need for interface with education.
- One stop shop – good idea.
- Education Department key player to early identification for support needs.
- Who comes to the regional “table” is crucial.
- Good directory of DS & CF services is crucial. On-line, discernable database with resources to keep it up to date.
- Good database – to enable good co-ordination of plans and services, but first point of contact re client giving permission to access their information, very important (i.e. consent form).
- Crucial professional development for workers to know sector and what is available for people to access.
- Too many NGOs to cope under new system.
- Important to develop true partnership to meet/address clients needs.
- Wide governance arrangements with 4 areas, but within that small local affiliation, how will that work?
- Good assessment tool essential to ID all issues, needs and goals.
- Very skilled workers, administering assessment. Risks need to be identified to be managed (i.e. move from reactive to proactive).
- Partnerships need to be developing first, before client issues presented, so know which services will work together.
- Competitive tendering needs to go but need good accountability around contracts.
- Fear of people falling through cracks as Disability Services no longer available, so services of last resort.
- After hours response to crisis? One stop help line.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- In emergency response, state-wide options need to be considered (e.g. respite).
- Consortiums for after-hours response of NGOs, to client calls / emergencies.
- People can go to intake and assessment or services direct, how do they connect?
- Need to move from single issue focus to more holistic focus to be more proactive (e.g. look at whole family issues).
- Links to specialist teams, if required, for consultations and assessment officers.
- Tracking of client assessment and planning, services, etc.
- Essential to know what's happening, when and by whom, etc.
- How to “merge” and manage current clients in system while bringing in new clients.
- Person first emphasis as, for example, in education Inclusion policy but after 18 year-old into self regulated Disability sector.
- Identify all participating organisations and existing networks. Support local community forums.
- Define local areas within regions.
- Appropriate representation from areas.
- In / Out scope boundaries (e.g. Hall).
- Jurisdictional overlaps.
- Role of networks re allocation of services.
- Alignment / amalgamation re allocation of services.
- Augment / amalgamation of processes.
- Risks associated with single entry points to eligibility criteria. (e.g. mental health triage system has had significant negative feedback).
- Who will capture the ‘infrastructure’ to capacity data?
- How are the resourcing issues associated with implementation activities going to be addressed? (particularly for smaller organisations.)
- Ensure quality at the table between players.
- Resource information bank.
- Information sharing – clients.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- Confidentiality issues.
- Currency and credentiality for staff – minimum standards.
- Training and development of staff.
- Training partnerships.
- Concern about importance of forum – some organisations not informed of process.
- Consultation should be a priority. All service providers should be informed of outcomes – timely information distribution.
- More consumer consultations.
- Many reference to change in the culture.
- Concerns about Board / staff involvement in process, i.e. cost, resources, time.
- Cost-benefit analysis on implementation strategies.
- Cost-benefit modelling on individual consumers. Is there a cap?
- Individual support packages (Disabilities) – look at more cost effective approaches “over servicing” of clients.
- Key vision – one succinct vision, focus on clients.
- Organisations shift from “round hole to square”.
- How everyone can work together – collective visions.
- Organisations need to be flexible to meet the needs of clients.
- Stronger agreement and clarification on what we are doing, so as to achieve “buy-in”. In three years from now, what will be different for our clients?
- Client involvement – There is involvement mentioned for clients in developing the “framework” but also need for:
 - Baseline satisfaction survey now;
 - Follow up surveys (ongoing);
 - Quality framework – consumer groups;
 - Assistance for people with Disability (and families who do not easily engage) to provide meaningful input / feedback.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- Change management – no mention of active cross-pollination via:
 - Secondments across sectors;
 - Actively working together into multi-disciplinary teams.
- Workforce – industrial agreements across sectors are different and hamper career pathways, and ease of movement across the sector.
- Governance – best possible service system needs the best possible governance. The “new system governance” is mentioned but “building better governance Boards” needs to be discussed. Moving from old-fashioned Board / management frustrations to a new world “community business model”; helping the “formerly fully DS funded” organisations to move into the new way of thinking.
- Provision of infrastructure support – some smaller bodies do not know how to write reports / applications for grants, etc. Need support, but also adequate lead-time.
- Federal / State disconnect:
 - Need clear explanation about funding and expectations.
 - Need work to align Federal expectations with State capacity.
 - Where is the flexibility?
- Communication strategy:
 - Web page (portal) and other media.
 - Insert into *New Idea*, etc. Reform Mondays. Insert in every regional newspaper.
- Local Government:
 - Must hook into the local partnership projects and whatever councils are doing.
 - Need for ongoing communication strategy.
 - Note 3.1 – communication is post-decision.
 - Should be constant theme throughout.
 - Open communications across all levels – SVC providers; end users; NGO; governmental.
 - Need to differentiate between communication and consultation.
 - What is being done (communication)
 - How they want it to be done (consultation)

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any activities that are missing from the implementation plan? If so, what are they?

- Resource allocation.
 - Need for independent appeal process, independent of resource allocation process.
 - What level of capital resource allocation to respond to changes.
- Greater role of advocacy in relation to enhanced planning and resource allocation, and outcome planning.
- Clear absence of role of Guardianship in this process.
- Is there an advisory group for Children and Family Services? Should there be a key advisory group?
- How do we influence governance relationships with Commonwealth Government?
- The review of peaks and their roles is essential to ensure appropriate representation.
- Where does the business sector fit in the model? Should we consider, for example, involvement of TICI?
- How do we accommodate the introduction of new players to the sector?
- How do we retain the corporate knowledge and capacity of DHHS, given the significant restructure?
- Capacity within Community sector and DHHS to advance the reforms while still maintaining current activities. DHHS has established reform unit – what is available for the sector?
- Action 2 – cross government arrangements – how do whole of government decisions filter down to direct service delivery?
- What is the role of Regional Officer and how will decisions be influenced?
- How should the sector place itself in relation to regions:
 - Location of organisation;
 - Service;
 - Client.
- Organisations provide services across regions. Can we develop to ensure portability within the sector and across regions?
- Building flexibility into governance arrangements and support, to allow change.
- How do we ensure sustainability of the engagement?

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

- **Are there any activities that are missing from the implementation plan? If so, what are they?**

- How do we ensure partnerships when philosophies / management approaches differ?
- Capacity of smaller organisations to engage in partnership whilst retaining care functions.
- Development of communication strategy to ensure all sector participants are aware and engaged.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

- **Is the sequencing of key activities feasible? If not, what needs to change?**
- Generally accept that sequencing will be iterative as project develops.
- Stress importance of workforce development in terms of maintaining pace of change.
- Yes / No, but need to push on.
- ESP – tender – clarified – expectation. Is the situation of competition so bad?
- Service co-ordination – how do we achieve flexibility within ourselves?
- ESP – is a potential model of how pockets of innovation.
- How do we develop partnerships, opportunities?
- Timelines need to be achieved.
- Process for unit pricing – how / who. This is a major reality.
- Does unit pricing actually deliver? (i.e. take into account what is capability).
- Business case / unit policy, are they the same?
- Will unit pricing include accommodation costs incurred by Agencies who own their purpose-built resources?
- Contingency planning incorporated into current implementation framework?
- 3.1 – key activities need to be incorporated into Year 1.
 - Clear understanding of current clients (and potential other clients) coming through regions / lead agency to be considered prior to implementation of activities.
 - How realistic are timeframes, given current levels of activity?
- 2.7 – ensure “regional discussion” is a replication of this forum at the regional level, and including clients, service providers, families, key others, etc.
 - Ensuring all key stakeholders are aware of the reform and change process commencing from this forum.
 - Timeframes for new service development and initiatives. Board orientation needs to be brought forward before current service devolution.
 - Innovation grants should be brought forward. New models should be developed before devolution of services to existing providers in Disability Services (3.1 should come after 3.2 / 4.3).
 - Look at implementation process, particularly for workforce and revise. How do we know that type of workforce training and education to provide if we don’t know of services are required.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

- **Is the sequencing of key activities feasible? If not, what needs to change?**
- ? RT role in assisting workforce development. Support co-skilling 08/09 in addition to continued core business.
- Reviewing the needs of government clients should be happening first, then building the capacity in the sector, then transitioning into those new services.
- Sceptical about a ability to do this in 3 years. Likely to take longer to establish partnerships with NGOs.
- Need a “who” for implementation strategy and additional resources needed to ensure that “Business as Usual” does not have additional tasks from this implementation that will impact on current service delivery.
- **Urgent** – Communication to all levels of community and families, elderly carers, NGOs, staff, Boards, etc, ASAP before anything else is done.
- Needs to be immediate and to be very clear. Need designated people as contacts. Need script for employees in DHHS and NGOs to answer questions from clients, families, staff, etc.
 - What does it mean to me?
 - How much extra will I have to pay?
 - What do I have to do?
 - How will my job change?
 - Where to go for additional information.
- When doing hand-over (development) need to ensure that there are still people / contacts for questions / problems / gaps that may occur.
- 2.10 – Implement a short-medium term strategy.
 - Implement long-term strategy. Should be included in year 08/09, not year 2.
- 2.10 – Establish education and training.
 - Very broad requirements. Consistent standard across the industry.
 - Training needs analysis.
 - Career structure problem (in page 13).
- Quality Systems – Action research timeframes can’t be retrospective (i.e. timeframe next year?), needs to be brought forward.
- 2.1 – inclusion of piloting.
 - Inclusion of evaluation process.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Is the sequencing of key activities feasible? If not, what needs to change?

- Action 3 and Action 4.
 - Sequencing of formation of the state-wide body and regional bodies – perhaps regional first?
 - Timeframe for establishment of state-wide governance.
- Action 5.
 - What is link of DHHS interface group with regional governance bodies for complex case management?
 - Change Management. – Commence collaboration training immediately (e.g. develop complaint procedures).
 - Training in giving and receiving feedback and conflict resolution and negotiation.
- Timeframe – is this realistic for complete MSN framework – Vic model sophisticated.
- Pricing – transparent, consistent language.
- Language- what is level of disadvantage and level of need.
- Planning – who is responsible for determining this?
- Obviously not, seeing that some things are already supposed to have been done in the first 3 months of 08/09.
- Most activities are feasible within the timeline, once started.
- 4.1 (page 68) – needs to be brought forward, as does 4.2 which needs to be done first. Can't evaluate without data collection tools.
- It is believed that some Disability NGOs are to let go of ownership and self-interest. Many have been in existence for a long time and will need to be client focussed.
- Tendering for all aspects needs standards ready, prior to development of specifications. Not sure that this has been considered within timelines (standards need to be in the public domain).
- Too much in Year 1 given already, 2 months into the year and HS restructuring.
- Need a more robust sequencing chart (e.g. Gantt) to show 'x' has to happen before 'y'. Pages 64 – 69 not clear enough to provide informed advice.
- Sequencing needs to be determined by those driving this and, in fact, sequencing is high-risk if not done well.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Is the sequencing of key activities feasible? If not, what needs to change?

- Ambitions schedule for Year 1 – what are the resourcing arrangements?
- How will program slippage be addressed?
- Mapping the workforce needs to occur in first year.
- 2.8 – include children, young people, carers and families.
- Outsourcing – should be 2.1, not 2.8. Outcomes based planning needs to have agreed outcomes right up front.
- Existing demand – is not covered in the sequencing. How will “transitioning” take place.
- Use of words like “develop”, “launch” and “clarify” do not explain how. These things will happen (lack of detail – significant lack of detail).
- Implementing unit pricing, sooner not later. Must be properly sequenced because we can not change service agreement until we know pricing.
- Must do an audit of families and children, and people with Disabilities, to commence with.
- How to standard assessment uniform across State.
- Question: Resources – workforce. If short-medium term strategy for workforce development is Year 2, assumption is made that a certificate IV/III training is provided, the commitment for training can be as long as 12 months. Would this not impact on service provision – devaluation of service provision?
- Strong support that timetable needs to be followed, but some concern that with speed we may miss the detail.
- What are the incentives for delivering outcomes and innovation? Can we build them into the system?

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any other matters that need to be flagged?

- Process to ensure efficient reporting to address concerns re double/triple reporting across programs and regions.
- Logical / consistency in approach. Page 27, last dot point refers to assessment of eligibility for specific programs. Group views this as being in conflict with notion of addressing need from individual perspective / runs risk of program-driven service delivery.
- Functions of existing Resource Team seen as importance part of service system, into the future. Would like clarity re location of this function into the future.
- Clarification of appeal / grievance mechanism for clients / providers as part of broader quality system.
- Seek ways to address significant concerns arising from co-locating disability and children's services. "People with disability have fought so long to be seen as full adult citizens." Mechanisms to retain philosophical base, knowledge and evidence base of disability practice.
- Where does advocacy sit?
 - Individual;
 - Systematic.
- Clarification of what integrated training means requested.
- Disability services – probity issues on how decisions are made.
- Feeds into poor partnerships. How do you build trust, when purchasing rules?
- Communication strategy:
 - Communicate – need resources and to get message out.
- Conduct audit of who? (characteristics of who we are working with?).
- More information on Action 5.
- Agreement on key actions that can be progressed from the forum.
- Informing relevant sectors of key activities, e.g. framework (operating) that impact upon their area of work.
- Identifying lead position / unit that have responsibility for implementation activities.
- Ensuring sectors are aware of current strategic planning and options of choice for people with disabilities, and that the services are aware of same.

Future Communities Industry Forum
Hobart – 21st August 2008
Session 1

Are there any other matters that need to be flagged?

- Acknowledgement that disability non-government sector has not historically been funded to meet government and community expectations.
- Ensuring people with disabilities and key stakeholders (i.e. family, supporting networks) are aware that the reform will not meet all of their expectations in regards to service provision (including funding options).
- Ensuring processes are embedded and managed effectively and consistently to support clients who have high levels / intensive and complex needs, and ensure they are supported in current structures and funding models.
- Key issue – what happens to clients who are not able to be supported within above key point?
- Consideration of different organisations / service providers to undertake lead agency role in 4 regions.
- Identification of agreement assessment tool that can be generically used across human services sector, that aligns to other health / human services.
- Unit pricing – needs to consider supporting networks (i.e. family / community) or lack of, and approved upper limits. How will unit costs account for time variable for “like” activities?
- Development of “literature” that de-jargonises current terminology, e.g. complex intensive, specialist disability services.
- Review and consider other supported accommodation models to meet client and / or family needs in consideration of community expectations in a financially sustainable framework (i.e. Accommodation Options Model).
- Development of “literature” that details supports and funding available / accessible for community and service providers, etc.
- Can we please have a presentation kit for CEOs to use with Boards?
- Unit pricing forces prices down. Processes still mention open competitive tendering, which will encourage organisations to tender lower unit prices to obtain the funding.
- Reassured that Office for Community Services and Implementation team have overlap to ensure that processes are implemented properly. Good that changes are being made by a “top-heavy” few, rather than having to go through traditional government processes. Positive – good that government is committed.
- Focus a lot on children with disabilities but not enough on adults. Not enough focus on access for them. Need to take into account all of need when Regional areas looking at need, rather than main need. Don't “drop people off” because they are in the minority in a region, but still have needs to be met.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any other matters that need to be flagged?

- Ensure that family members are involved and communicated to clearly as they are often the voice for their family members with a disability; even though there are peaks and individual clients who can and will be involved.
- Have clear communication for community now.
- One-off equipment funding (Community Equipment Scheme) needs to be adequately resourced to ensure adequate service provision and support for clients.
- Time taken away from clients is a big concern during the reform process. Streamlined administration is necessary.
- Electronic recording – data collection payments.
- 2.2 – The effects on each individual organisation.
 - Workforce morale (in Disability Services) re insecurity of positions. Relationships with clients and NGOs.
 - Mental Health needs to be involved with the process and the sector.
 - Where will the resource teams in Disability go?
- Agree with Action 2 but we have to be realistic about effectiveness of Committees / Governance.
- Need ability to share information through dedicated website.
- Government playing lead role in ICT to enable effective sharing of information.
- Cultural problem about relationship and views of the Department about CSOs (e.g. DHHS looking down nose at NGOs).
- Framework to support transition, e.g. supportive framework to be able to learn from mistakes and for DHHS and CSOs to support each other. Open and honest communication.
- Privacy – ethical practices. Confidence of clients to trust providers and how information will be used.
- Not reinvent the wheel – be practical about using words and practice models from Victoria to progress and provide detail around Actions.
- Clarity around Victorian model – what elements will we copy and what elements will be different from Tasmania.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any other matters that need to be flagged?

- The Commissioner for Children needs to be involved. He is very concerned that there seems to be no role for him and that there appears to be no role included for independent monitoring. The Commissioner has statutory responsibilities to vulnerable children and should be involved in all levels of policy and programme development.
- Is there indigenous involvement and consultation?
- During this process, there does not seem to be any provision for the release of funds to existing services to immediately improve service gaps. Need to focus now, not wait for another year.
- Clarification of the implication that only clients of lower socio-economic status receive assistance. A family may have a high income but not all members of that family may have access to it. We need assistance according to need.
- Will the regions advance at the same time; will regions be held back if they want to go ahead and will the lack of services in some regions be a hindrance.
- How do we make sure this fits into Federal legislation?
- Conveying and understanding of the new role of Child Protection Workers, e.g. family support versus focus on child's needs.
- Implementation plan doesn't support the work happening to put the health of vulnerable children in the spotlight, e.g. child health service not named in the Glossary and health rarely named as an issue.
- Use of titles Child and Family Services implies a particular service name, which must be confusing for people from Disability sector.
- May need a phone line or other myth-busting process where rumours can be taken and addressed.
- Accountability mechanisms for 'Lead Agencies' must be developed.
- Standards must be developed.
- What is the cost of more extensive compliance, QA and reporting requirements?
- More consumer consultations.
- Need to ensure IT is all inclusive of service providers, consumers.
- Interface across the whole system, e.g. aged care, HACC, mental health, education. How is it going to work?
- Interfacing with Commonwealth Services and funding bodies.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any other matters that need to be flagged?

- Workforce – disability services; people continue to receive services for 3 years but staff are “on the move”, going to new careers. How do we retain staff?
- How will “Business as usual” be maintained?
- \$\$\$ - must spend money this financial year (need strategies to free up money), or Treasury could assume that diminished outcomes are a sign of poor management, or that they “over-funded” the Reforms. Must spend money effectively but we must not muck around and not get things going. The infrastructures can hamper spending.
- Perhaps free up money now to create “innovative pilots”.
- Stop doing on-year funding agreements because they hamper good business functions.
- Change management – “Change Champions” need to be found in every region at every level:
 - Too few celebrities;
 - Too few bureaucrats;
 - Too few businesses;
 - Too few NGOs;
 - Too few clients;
 - A community “Good Ideas” program via a web portal.
- For communication capacity building – use the asset-based Community Development Model. Focus on assets first (then deficits).
- More emphasis on outcomes-based measurement.
- Timeline of implementation from 2.2 – 2.8 Quality systems. Needs for review and consultation with service providers to establish:
 - Review of pilot;
 - Possible required resources / resource allocation;
 - Consultation with agencies / service providers; timeline for implementation with concerns for resources.

**Future Communities Industry Forum
Hobart – 21st August 2008
Session 1**

Are there any other matters that need to be flagged?

- Complaints handling.
 - External complaints handling role should be strengthened, in the capacity of an oversight role and this mechanism beyond that of current practice.
 - Responses to complaints should be handled in a more timely fashion, with greater speed compared to what is current.
 - Possibility of having a Reform Commissioner during this process to “keep the bastards honest”.
- What is the mechanism for determining population needs?
- Consult – what does this mean?
- Communication process.
- Pilot – where / who / when?
- Unit pricing – concerns over what “service type” will mean? Should be individualised on the needs of the client:
 - Disability;
 - Equipment needs;
 - Personal Care;
 - Support;
 - Communication;
 - Behaviour, etc.
- Needs to be a distinction between “perceived” needs and actual needs. Large inequalities of funding for support needs.
- Table 1 – page 37 – This is the ideal. Stick to that and we can’t go wrong. Just need to add responding to rather than reflective.