
Attachment A: Transcription of Session Feedback

Part A: Phases of Planning and Case Management Consultations: People with a disability and their families and Community Members

Eastern Metropolitan Region

1.

Question One

Will this make getting disability services easier?

Yes! Easier (in theory a clear step process)

Issues:

1. Communication with correct department necessary
2. Must start early in life and continue – not stop and start in different ages
3. How to know / understand how to use services / how to access it
4. Different regions, different systems

Question Two

Is it clear what you will receive from each service?

Planner, Facilitation, Support Coordination, Case Management

1. Continuity of planner / facilitator / coordinator
 - Handover
 - Change of Staff
 - Case Notes
2. The Roles process is clear in theory but no confidence in practice

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3. Who will provide the above roles, who will pay for these roles? (Separate choice?) (Self appointed facilitation funding extra)
 4. Choice of planner

Question Three

What do you think needs to be in place to make this work?

1. Central register of people with disability – Central information source NOT DOCTOR
2. Family Support
 - Education (Grievance)
 - Choices
 - How to use funding
3. Education
 - School / early childhood
 - Doctor
 - Interface with DHS
4. Forms
 - Arduous
 - Inaccurate (not the true picture)
 - Bad advice e.g. GP
 - Ask for best scenario but you have to give worst get money
5. REAL CHOICES
 - Networking
 - References
 - Good / Bad service
 - Client / family
 - What is available?

Other Comments

Draft plan on website?

Not acceptable for time poor families

Not everyone has access (can't read it)

Priority of needs

Effect on application

Where am I in the heap?

Why does a crisis have to happen to get help?

Key priority issues:

- Understanding of process for families
 - Rest is easier
- Continuity
 - Staff
 - Regions
 - Rules
- Choice
 - For families
 - Of providers

2.

Question One

Will this make getting disability services easier?

1. Not in the system, how? Where do you access it?
2. Need to know process checklist to follow process rather than triangle
If you're in the system it makes it easier
3. Support self advocacy
4. Quality of your service provider
5. Share the information – don't own it

Question Two

Is it clear what you will receive from each service?

1. No – just titles that mean nothing to new people accessing the system and families already in the system
2. Some service providers limit family choices and access to other services

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3. How extreme does the disability have to be to get funding? What is of importance to one family is not necessarily seen as important to others
 4. What are the boundaries of funding packages (how much goes on salaries of Case Managing)?
 5. Too much delay in process

Question Three

What do you think needs to be in place to make this work?

1. Transparency multi lingual understandable information / people
2. Publicity in the community so you know about it – TV / Newspaper
3. Independent public advocate for individuals / families – Independent information Resources
4. a. Need a real Person in the DHS System rather than being passed on to everyone
b. Systematic Advocacy
5. Remove the judgement on the disability, so all have access

Other Comments

- Solve our issues before they become crisis'
- Get rid of discrimination between disabilities
- Simplify the system – less managers
- Are concerned if in the system, the individual becomes "labelled"
- Independent advocacy for people and families

3.

Question One

Will this make getting disability services easier?

- Fix intake system so doesn't take so long to get on the books
- Confusing for everybody
- Who do you go to start the process?
- Difficult if having to do anything yourself
- Long waiting time to get anything (why does it take so long?)
- Someone in the system had to go back to the beginning

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- Sometimes confusing – hard to understand where it all fits in
 - Issue for people without family or other support
 - Lag time a real problem (on DSR for 6 years before got ISP)
 - Supports to maintain person whilst on wait list
 - Without funding will make no difference
 - No regular feedback whilst on waiting list (closed waiting lists)

Top 5 Issues

1. Lag time
2. Confusion around what's available / how to access
3. Lack of funding / availability
4. Lack of feedback progress application
5. If in the system, harder to go back to the beginning

Question Two

Is it clear what you will receive from each service?

1. No
2. Use in depth works – need to use plain English / alternative methods of presenting information
3. Skills vary so much between different workers; service providers impacted by this
Developed by bureaucrats who don't have any understanding
4. How can you comment unless you've already experienced it?
5. If support staff don't understand, how can people with disability understand?
My daughter feels intimidated by this process

Question Three

What do you think needs to be in place to make this work?

1. Independent point of information – poor linking of information services (currently rely on Chinese Whispers)
2. DSR very negative approach (make things as bad as possible to get funding) – compared with changing to a positive approach in implementing ISP.

DSR doesn't fit with philosophies of Self Management (Look at chronic condition Self Management theories for example)
3. Streamlined process / simplicity
4. Work with one person / agency through the whole process.

Be able to employ my own staff so don't have to use an agency – better value for my money – spend on direct care.

Less paperwork
5. Regular contract processes with people on waiting list / more openness from the department/ transparency

Other Comments

Simplify the process!

1. Better information at all stages
2. Better entry point (no DSR)
3. Reduce wait times
4. Venue was not disabled friendly
5. Not big enough
6. The room was condescending

4.

Question One

Will this make getting disability services easier?

- The approach is clear, is easy to understand but need more detail on practical application
- Will help families to move out of their comfort zone and explore other ideas and options

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- More flexible
 - Less funding waste by having one contact point
 - Will sufficient funding and services be available?

Question Two

Is it clear what you will receive from each service?

Not really, need more detail about how it would actually work in practice.

Quality of service at each point could be variable e.g. Does the person involved in planning have the knowledge and information to support the process. Are there sufficient resources and time available for each stage?

Yes but the "system" relies too much on the knowledge / experience of the individual Planner, Facilitator, Co-ordinator and Case Manager. "Spider web"

Question Three

What do you think needs to be in place to make this work?

- Proper funding
- Training for all involved
 - Planners
 - Facilitators, etc.
- Lots of information about how funding can be used and transparency of information
- Proper choice of service providers and ability to change if not satisfied
- Flexibility of options, no boundaries
- Everyone working together
- Less red tape and waste of resources in levels of compliance
- Reduce the number of different criteria and processes
- Abolish waiting lists or provide supports during the time lag between needing help and getting ongoing support
- Services need to be able to provide supports during the time lag between needing help and getting ongoing support
- Services need to be able to reach families before they reach crisis point. It's no good to get a crisis before you can access services

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- Educate medical / education and other “mainstream” community to know how the system can be accessed / navigated
 - Trust people with disability and their families to know what they need most and not tell them what they should do

Other Comments

(General Only) Each planner, facilitator, coordinator, case manager should spend at least 20 hours per annum with a family who has a member with a disability as training. Even better if they had an individual for a 24 hour period. “Practical” experience is used in teaching, nursing, etc. Why not(?) in disabilities services area.

Priorities:

- Funding to meet needs
- Quality of services (High quality!)
- Flexibility and real choice
- Central database / information
- Getting what you want and need
- Less red tape
- Avoiding crisis driven priorities

5.

Question One

Will this make getting disability services easier?

Yes. For some families this provides a starting point

No. It is not clear that the various steps (stages) are short term and not a mandatory.

1. No reference to family / individual direction. Should be individual and family advocacy

No guarantee that or when funding will be available

Top heavy – wasting more resources

Question Two

Is it clear what you will receive from each service?

No, it is not clear. After 7 years of Bureaucratic management.

Question Three

What do you think needs to be in place to make this work?

- Higher standard of case managers. To be educated by families and individuals with disabilities
- More efficient data base that can be accessed by everyone
 - Support
 - Agencies
 - Outside
- Families need to have the choice to appoint their own planners and facilitators (to be paid by DHS)
 - The established family directed model where families direct how to funding is used needs to be supported and increased
- A well established plan that has been approved for funding by DHS should be funded fully. Not to wait until funding *may* be available. The left hand of DHS should work with the right hand to:
 - Make it work
 - Get the funding
- Too much money going into the process to build up a monster. The individual who needs the support is missing out totally.

Other Comments

Most Important Point of the Day

That the established family directed model, where families direct how the funding is used, and pay a minimum fee for administration to a financial intermediary needs to be properly supported, promoted (to families) and increased by DHS and families should have the choice to appoint their own individual advocates, facilitators / planners of their choice, not appointed by DHS, but paid for by DHS and the various departments of DHS should work together with families – including planning and finance departments of DHS.

6.

Question One

Will this make getting disability services easier?

- Not clear where we go
- Plan seems good on paper
- Concern about time lag – planning to funding
- Providers get the information, what about families?
- Eligibility to be included
- What about the uses of funding?
 - Some providers are very restrictive on usage
 - Very important to be able to have REAL CHOICE on what the money is spent on
- Individuals and care givers need family advocacy support
- Social support – activities that promote personal and social wellbeing are equally, if not more important than Medical Support and should be funded

Question Two

Is it clear what you will receive from each service?

No. Not clear at all. There seems a lot of confusion – once again, where?

- Make the system flexible (circular)
 - Being able to jump in and out where we need it (i.e. skip planning)
- Communication should be improved between DHS and providers / services. State and Federal Services not communicating together
- Counsellors / therapy – initial contact to advocate for further help
 - Relationship established so why do we have to explain it all again to DHS / provider
- The system seems very rigid – we need more choice of who / where we go for help

Question Three

What do you think needs to be in place to make this work?

- More people – make more use of related services i.e. counselling services

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- More flexibility on use of funding – social and recreational as well as medical
 - MORE MONEY – ability to get what you need, not what the services think you need
 - Very clear and simple information kits that are widely distributed
 - Adding independent counselling option to the framework so that people can jump in and out of system
 - Counsellors / Therapists also teach the client skills for self advocacy

Other Comments

Understanding the system and how to “work it” to the best so that we can make the most of the small “buckets” available

Understanding how it all works so that self-management doesn't seem too hard

It is impossible for any agency to be “everything to everyone”. That is why flexible approaches need to be implemented into the framework by networking with other agencies, government departments (federal and state), counsellors as an additional initial contact, recognising and taking families seriously, ?? advocacy

7.

Question One

Will this make getting disability services easier?

- Entry point issues – clarify
- Assess to planners (increase staff levels at DHS?) – will there be waiting times
- Model looks reasonable but what's the reality?
- Families will be disempowered if can't get an immediate service
- Response time needs to be tightened
- Resources need to be in place for planning success
- Greater flexibility in funding
- People's needs change over time – need to be reassured that planner can become involved again
- What does time limited mean?

Question Two

Is it clear what you will receive from each service?

1. Consistency in skills of Quality of planners, Facilitations and Case Manager
Complaints procedure – accountability of workers to families
2. Need to develop better support network and other ways of providing access to this information
Need to simplify and streamline information about accessing services at all stages of person's life
Possibly provide specialists in certain areas such as Autism specific information, or CP specific, etc.
Better communication with families
3. Services need to be provided in a timely way
4. Who / how decides whether need Planning or Case Management on initial request

Question Three

What do you think needs to be in place to make this work?

- Change of culture and attitudes toward disability in service system
- Want a genuine attempt to listen to families and people with disabilities and finally provide a system that works
- Needs focus on flexibility of funding
- Improve quality of planners, facilitators and case managers
- Better communication with families – more readily available information – through forums, email / website – feedback channels / opportunities to be heard

Other Comments

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8.

Butchers Paper

Question One

Will this make getting disability services easier?

- If not in system, how to access?
- Need a process / pathway checklist
- Support for self-advocacy and families (include in documentation)
- Quality of service providers (prices high)
- Share, not own information
- Plain English
 - MP3 Versions
- Central information point
- Time lag plan → Fund
- Real choice needed
- Social life and recreation support
- No independent source for information facilitators / planners
- DHS forgiving to families

Question Two

Is it clear what you will receive from each service?

- Not clear? After 7 years
- Plain English
- Alternative formats – “Spider Web”
- Variable skills in DSR writers
- Too early to comment / not in the system yet
- Support staff and families unclear
- Not pigeon-hole
- Continuity of care
- Clear in theory

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- No confidence in theory
 - Crisis Management
 - Entry point on strengths not weakness
 - Priority of needs explained = inclusion of families in process

Question Three

What do you think needs to be in place to make this work?

- Central register
- Education – Family Support (DHS and Education Department)
- Grievance process
- Forms – not a true picture
- Simpler
- CALD
- Real Choices
 - Availability
 - Network
 - Service Quality
- Communication systems with family
- 2 Way
- Be heard
- Change in service culture and attitudes
- Improving quality of service management
- “Dumb down” the person for money
- Case manager education
- Efficient database system
- Family choice of planners and facilitators
- Full funding for plans

Other Comments

Group Priorities

- Understand the process
- Continuity
- Choice for families
- Flexibility in system
 - Local governments and Council
- Families taken seriously – work with
- Independent advocacy
- Time lag removed
- Proper funding
- Quality services
- Avoid crisis-driven
- Solve issues before crisis
- Avoid difference in disabilities
- Simplify the system
- Reduce wait times
- Carer wellbeing support
- Own planners NOT just DHS

North Western Metropolitan Region

1.

Question One

Does this make the pathways into disability services easier to understand?

- Pathway clear
 - Blocked when ringing DHS (at intake) – need case manager before get onto service
 - Difficult to get case manager / need to get on DSR
- Difficult to access help outside school
 - Need to know what and how to access services
 - Diagram looks good
 - Need to ask for assistance with planning at DHS
- Case Management not easy to get
 - Staff turn over – makes it difficult
 - Planner good
- Large organisation
- Persistence
 - Accommodation
 - Parents need support from parents
- Useful conceptual plan to follow
 - Need a print out to help us with this plan
- Bottom line is \$'s
 - Cost of support workers
 - Where you find support workers
- Staff turnover need to get a relationship with DHS
- Ask for a manager to help if staff leave
- Who to next for Direct Funding will need supports

Question Two

Is it clear what you will receive from each service?

- As a process it seems clear
- Transparent
- More accessible
- Will the services help me to get employment so I can move out of parents' home and be independent?
- How does funding assist me in my independent living?

Question Three

What do you think needs to be in place to make this work?

- I.S.P.
- Intake workers need to respond correctly to new process
- DHS needs to value service
- Shouldn't be crisis management
 - This is a flexible life plan not just the now on the individual goals of client coordination between schools and DHS
 - To get planning underway before they leave school

Other Comments

- Accessibility to break into Service
 - Case Managers
- Needs change
- No waiting lists
 - But there is waiting!

2.

Question One

Does this make the pathways into disability services easier to understand?

- Yes
 - But need someone to “pick up the phone”
 - Will be need for ongoing support
 - DSR application – difficult
 - Too difficult to complete
 - Needed to make contact as not on DSR
 - EACH (Ringwood)
 - Service Provider
 - (Link with CRS)
1. Confusing
 - Access to
 - Don't understand DSR Pathways / Process
 - Lack of information
 2. Need clear information
 - What it is
 - What I can get
 - How will it change things
 - How flexible
 - Support coordination
 - 30 years – (shared money)
 - FFYA Package
 - Too rigid

Question Two

How clear is what you will receive from each service?

→ ABI → 2004 → EACH

Melbourne City Mission – (Self Employment)

Case management for another agency (DSC)

Clear about receiving support

What does "assistance with planning" mean?

- Paid service coordination
- Worried about an external planner
 - Why not use current "service coordination"
- Continuity issues
- Clarity around who can do a plan
- Clarity around "service coordination" and "Case Management"
- Need to ensure that "service coordination" is not lost

Question Three

What do you think needs to be in place to make this work?

- Clarification / acknowledgement of "service coordination" money in ISPS (by carer)
- Too rigid – needs flexibility with money to allow inclusion in community
- Guidelines need to be clear about what the funding covers
- Funding needs to be more flexible
- Accountability concerns
 - Receipts
 - Upfront clarity around what's included and what's not
 - Too rigid
 - Feel guilty
 - "Lunch / Coffee" activities / travel expenses
 - Unused dollars → would be better utilised flexibility
- Flexibility in use of funds

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- Information clarity
 - Identify different roles
 - Recognition of service coordination costs for the carer (fallen on the role of coordination but no \$ for it)

Other Comments

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3.

Question One

Does this make the pathways into disability services easier to understand?

- Like having friends – likes group and support
- Previous experience with region was not explained well
- Variation in experience of staff delivery service
- Understanding around person centred interpretation
- Pathways needs to be responsive to all who contact
- Better understanding between families and DHS

Question Two

How clear is what you will receive from each service?

- It is clear but will it happen
- Will there be communication?
- Better for families to have long term relationships with services to develop their own plans and support. This is what self direction is about
- Depends upon worker
- How does your personal story get heard and not just be a statistic
- What pathways into DCS if no c/m

Question Three

What do you think needs to be in place to make this work?

- Choice of option and direct funding for those who want it

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- Easier access to funding
 - Support has to be more timely
 - Flexibility around support needs to be based on people's individual needs
 - This is still about availability of service support
 - More accommodation
 - Different kinds
 - More relationships
 - More friends – to feel special
 - I want a job – doesn't like to live on DSP
 - Planning needs to be a Lifelong Service

Other Comments

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4.

Question One

Does this make the pathways into disability services easier to understand?

- Is a person with Aspergers / Autism Spectrum Disorder / Down's Syndrome / Intellectual Disability going to know or understand the plan that is put in place for them and understand the complexity of DHS and the planning pathways set out aside specifically for them?
- Do they understand their support packages or support needs put in place for them?
- Have parents been educated on their adult / teen / child's disability?

Question Two

How clear is what you will receive from each service?

- Not clear at all
- Too many unanswered questions
- There has to be an enormous amount of education / consultation from here (DHS Meeting)
- Lack of clarity where families are concerned
- Golden Nugget:
 - Lack of educational clarity / apprehension where families are concerned

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- Time frame

Question Three

What do you think needs to be in place to make this work?

- Education on disabilities for families / carers / support workers
- User handbook (e.g. Centrelink)
- When is this going to happen?
- Families are needed to be educated – pros / cons
- Community programs
 - Old / new anything to help make decisions for their child / teen / adult with disability
- Parents need assistance in managing funded money

Other Comments

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5.

Question One

Does this make the pathways into disability services easier to understand?

- Formalised (booklet directory) in writing – Simple guide – directory, ways
- Plan worries – contact numbers
 - Different areas of contact can be difficult
- Take through process = facilitated
- Facilitation / support coordination / different roles → Who does it?
- What happens in between waiting for package?
- Point of contact – to remain involved
 - All stages – re-establishes
 - Repeating of same story (people give up at this)
- Choose own service / no experience
- Support finding out

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- Choices clear – available
 - What is on offer
 - Key contact person – right through process – pole
 - Directory

Question Two

How clear is what you will receive from each service?

- Assistance with Planning
- Facilitation
- Support coordination / case management – This model
- Breakdown about each area
 - Case Management
 - Guidelines below each area
 - Need to feel safe in process / supported
- Quality or changes / worker involved
 - Education
- Describing each point where you are in the process
- Description
 - Who might be provided
 - Disability services
 - Example: Am I making the right decision
- Options available
 - Flexible
 - Assistance
 - Accountability of service
- Circumstances change
- Opportunity for review at any time

Question Three

What do you think needs to be in place to make this work?

- Key person involved
- Review process needs to be clear
- Clear pathway in if required
- Resources
 - System doesn't allow
 - Not enough
- Offering interim supports
- Not having to justify resources
- Package use
 - Not taken away
 - Accounting decision
 - 12 months – threat to be taken ongoing
 - End dollar value
- Key point of contact needs to be clear
 - All information given
- Review process to be clear
- Resources – system doesn't allow enough

Other Comments

- Across State needs to be
 - Report procedure
 - Other consultation processes

6.

Butchers Paper

Question One

Does this make the pathways into disability services easier to understand?

- Waiting is a problem, because insufficient and inflexible services available
- Will people with Aspergers, downs syndrome ... be able to understand the system
- Needs to be a key of contact
- Clarify of information on role definitions
- How does someone with a disability find out about services
- Better understanding between families and DHS
- Model clarifies pathways, but need a key contact through process
- Are parents being educated
- Families' personal stories need to be heard
- Parents need to be more effectively informed and engaged by DHS
- Need formalised directory of contacts
- Cost to carer re: service coordination
- Proactive early intervention is needed to prevent crisis situations developing
- Reviews within transition points
- Flexibility and trust is needed regarding money management
- More flexible and heightened availability of services

Question Two

How clear is what you will receive from each service?

- Most important factor: **Key Relationship** (*resonates across all 3 questions*)
- Information and education to parents / carers
 - Lack of clarity and apprehension
- What each service provider offers
- Who can do a plan?
- Diagram is clear – how do we access

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- Do different people have to provide each role?
 - Plan needs to continue in place even when parent / carer is no longer there?
 - What does assistance with planning mean?
 - Why the need for an external planner to be involved – why can't an existing service provider do the planning
 - Transport to planning sessions – Funding implications
 - Accommodation close to services
 - Time frames – how long will it take for things to happen as you work through the pathway?

Question Three

What do you think needs to be in place to make this work?

- A carer's / families handbook
- Individual personal like plan start early and continue
- More flexible funding
- Education on disabilities in the community and families
- Key contact point who retains the history and people do not have to re-tell their stories
 - Continuity of information
 - Not having to repeat / prove
- Clarification of what can be incorporated into a plan
- Integrity
- Pro-activity
- Well co-ordinated and aware intake point

Direct access to case management

Barwon South West Region and Grampians Region

1.

Question One

Does this make the pathways into disability services easier to understand?

1. If never had contact then perhaps yes
But if you have history the definitions are already "history loaded"
2. Need day and DHS is doing different
Need to emphasise that this is a new chapter
Especially rural and remote there are lots of people who don't have services
Still not clear how you "access" services in Rural and Regional (RAR) areas
People don't often think that disability services are relevant to them
Define complex needs
Could be dependant upon people with a disability and their families needs e.g. deaf community

Question Two

Is it clear what you will receive from each service?

See Question One

Question Three

What do you think needs to be in place to make this work?

1. DHS – rural / remote
Doctors who need to know everything
Information and access to it
Divisions of General Practice
PCP's
Engage and use on a tool
2. Use the stories (e.g. Brendan) and it helps the process forward

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- Diverse situation – show how rhetoric can be applicable
- Not just intellectual disability focus
- Australia reinforcing the social model of disability to break the culture
3. Language around community engagement which allows you to be an individual
 4. Some people don't want that formal arrangement
 5. Staff education

2.

Question One

Does this make the pathways into disability services easier to understand?

- No – 3 parents / 2 service on table
- The diagram is full of jargon including things that are not explained e.g. disability service provider, ISP, DSR, episodic → explanation also was full of jargon
- Diagram:
- Confusing
- Blockage at service provider box
- Almost should have the AWP before the service box
- Is conflict of interest to approach your own service e.g. to move to another if you are unhappy
- Where does the self-direction come in?
- Most of our friends (other parents) would have no clue what this means
- How does case management relate to planning?
- Huge duplication potentially
- How does it work for former Making A Difference packages that have case management as part?
- Where does FFYA fit into it all when coming from school
- Consistent person to assist with whole process not a whole crowd of different people
- Don't want to go to DHS! – need independent people to take through process
- Not clear who to approach in first place

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- Ps: Absolutely naïve of man at start to say we'd all be familiar with these things

Question Two

Is it clear what you will receive from each service?

- Not clear at all – all on table
- All about planning so why is it different people
- What is difference between ISP and Flexible support packages?

Question Three

What do you think needs to be in place to make this work?

- More information that is in ordinary language – too complex
- Concrete e.g. naming type of service who would take on role
- Information on how transitions occur from previous packages e.g. Make A Difference (My Service rang and asked if I wanted to do away with our Case Manager – said yes as it was 9th one!)
- Specific information for parents and people with disability on particular areas e.g. what to do if transitioning from school to adult programs or to change services
- Education for everyone (families, people with disabilities and services)
- One independent point of contact to get information and support i.e. no one with bias or government constraints or waiting lists
- Real choice of Independent Planners / Facilitators
- A “pathway” that is simple as this one is very complex
- Need “planners” with knowledge, relevant experience and understanding of supports people with disability and families needed – not ones who insult families and treat people with disability as children when we are adults

3.

Question One

Does this make the pathways into disability services easier to understand?

- Yes BUT...
- The community, health sector, etc need information and education that a DSP is the starting point and that they are the access point

-
- Regional DHS needs to be accountable for following the DSR guidelines

Question Two

Is it clear what you will receive from each service?

- Yes BUT...
- Missing an activity which is the on-going walk beside service model

Question Three

What do you think needs to be in place to make this work?

- A one-stop phone number in each region that gives access to the range of disability services (like options) e.g. Child First in Barwon
- Clear delineation between case management and support coordination
- Support coordinators are taking on case management (or not) and they don't have the skills
- Some families need support coordination and case management
- Case management needs more focus on being proactive and preventative rather than reactive and crisis driven
- Support and training for case managers and definition of this role
- Better data base of Personal Support Workers
- Better local choice at all levels
- Real Choice – families being able to contract people privately if they choose

Other Comments

- People need to really know the individual and family and this gets lost in the episodes
- Keep families together by effective case management

Critical, Caring

Advocate

Supportive

Empathetic, Energising

Management Preventing Crisis

Assertive

Nurturing

Accountability

Generous
Empowering
Mentoring
Enabling
Non-Judgemental
Team Player

4.

Question One

Does this make the pathways into disability services easier to understand?

- Not easier, more questions
- What if complex – can they access ISP?
- We live it and don't understand it – what service(s) out there are able to understand process
- Care Link: Direct 2 Care – one stop shop
- Once in a disability service there is the threat that the package will be closed, there is no internal referral from Early Choices to making a different – futures
- Still concerned about the Planner and the planning – who / for how long / can it be revisited – when / how often
- The pathway needs to consider all services requirements
- Greater access to Case Worker
- Better understanding of individual needs
- Why do we have to cry, scream and generally melt down before DHS sends out a support worker
- Information sharing, Read the files, respect that we have been doing this all our lives
- More consultation with support workers and client community
- Case worker who will manage all aspects of the process – so you don't have to do it by yourself

Question Two

Is it clear what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

-

Other Comments

5.

Question One

Does this make the pathways into disability services easier to understand?

- No
- Greater clarification around what Planning is?
- If the CSO provides assistance with Planning is it funded – why who?
- Gap between DSR application and planning
- State-wide consistency needs to be implemented
- Case management should be pro-active not reactive
- Flow diagram has gaps – what is someone falls through
- Community would engage CSO's first
- Perception of DHS and types of complexities will guide peoples request for service
- CSO is limited in service that they can provide
- Flexibility is costly – loading adds 20% to unit cost
- Intake and Response – perception that gate leaping so not able to obtain planning
- Costs of Case Management / support coordination – how will this be funded
- Who determines what is required
- Who is responsible for engaging Planner

Question Two

Is it clear what you will receive from each service?

- Not clear
- Time added to achieving this
- System is difficult to Navigate

Question Three

What do you think needs to be in place to make this work?

- Clearer definitions
- Consistency
- Needs to be supported by the Region
- Resources need to be reflected to support the model
- Needs to be some sort of review and accountability for when it does not work
- Review contented independently of funding or provider
- Supports are crisis driven – priority status DSR especially if requiring accommodation
- Transparency with the parents for allocation
- Greater awareness of general community about planning
- CSO's and community need to be in agreement of the model
- Determining the needs of people with a disability and their families is by DHS overrides CSO's assessment – no way to negotiate
- Families and individuals also find same when timing to navigate the system
- Feedback as to why applications are knocked back
- Staff and industry awards will still be an issue
- Disability Expo for parents and CSO's
- What and who provides what?

Other Comments

-

6.

Question One

Does this make the pathways into disability services easier to understand?

- Problems for CSO in referring through Intake
- Families don't know about what is available in Disability Services
- Families need all the appropriate information for the model to work
- Information needs to be in plain English
- Issue of making sure elderly parents have the appropriate information to understand the system
- Clear and plain information is available for families
- Entry point is too late
- More information needs to be available prior to intake

Question Two

Is it clear what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Good intake system
- DHS needs to produce a Publication like "Through the Maze"
- Ongoing review and consultation with people with a disability and their families
- Model needs to be appropriately marketed
- Information about disability services needs to be in the broader community
- One entry point to the system
- Need to shift the mind set to a more positive view of DHS
- Problem of Policy not matching resources
- Model needs to be flexible to meet varied needs
- The workforce needs to relinquish power in how they engage with people with a disability and their families

Other Comments

7.

Butchers Paper

Question One

- Not easy to understand even though we live it
- The plan and the planner – how long? For what period?
- Does make sense, but required all service and community to know access point
 - Required education and promotion
 - DHS is key as one-stop shop
 - Choices across services
- Definitions are clear
- Missing link is service along-side family
- Gaps in model – who picks up?
- Language is confusing – change from current model
- Requires strong promotion of changes – particularly to those “referring” to access points
- Clear plain information when “entering” the system – intake point is critical
- Planning and support in lead up to the self-directed planning process – i.e. pre the contact with disability provider
- Will this have multiple role and people in our lives? E.g. Facilitator, Planner, Case Manager, etc

Question Two

- Clearer definitions
- Consistency across regions (DHS)
 - Resources to do so
- Review process for model
 - Consultation with people with a disability and their families
- Reinforcement of social model of disability (for all involved)
 - Cultural change issues for organisations and staff

-
- Power of personal stories
 - Support shift in the workforce
 - Power shift to people with disabilities
 - Make it simpler
 - Real choice of planners / facilitators
 - Education for all
 - Departments, families, community
 - One stop access point (phone number)
 - Collaboration with all providers
 - Ability to contact privately
 - Further consultation between and with client, carer, community

Hume Region and Loddon Mallee Region

1.

Question One

Does this make the pathways into disability services easier to understand?

- Pathways are fine for someone starting off
- Waiting time for package: turmoil, uncertainty, relationship stressors
- Planning builds expectations – have to then maintain
- Followed process for one family
- Transition points (e.g. leaving school)
- Parents not heard / informed about services
- Planning needs to be face to face
- Process would be an improvement on what one family experienced
- Changes in needs – need timely response
- Should be more planners and facilitators on the ground – not wasting case managers time
- Don't get anything if you don't have a case manager

-
- Families experience not always heard in planning process
 - Need stronger links between families and agencies
 - Pathways as described are helpful
 - Communication between agencies / families should be more open – informed about options – responsive to families needs and wishes

Question Two

How clear is what you will receive from each service?

- “Extremely difficult to get strategies to work with a person-centred plan”
- Lip service given to partnership by agencies / DHS
- Walk the walk, talk the talk, then they do their own thing
- “It’s messy out there, they don’t know how to put it in place”

Question Three

What do you think needs to be in place to make this work?

- Someone who really understands how to connect all the elements, informal, community funded services – drivers to make it happen
- Information forms for parents and families and good outcome stories – positive examples
- Information about access
- Streamlined and efficient process – reduce delays
- Earlier planning in secondary schooling
- Stable workforce – (e.g. multiple case managers)
- Recruit volunteers to support community inclusion – mentors etc
- Families need to understand what a person centred plan is
- Too many families still don’t understand the importance of the PCP and their rights to information
- Families need to know what opportunities / services are there
- Early planning – crisis prevention not reactive planning
- What assistance will you receive from each service?
- “Mismatch between individual approach and systems”
- Facilitation:

-
- To be listened to
 - Coordinate agencies and families around PCP
 - Support Coordination:
 - Common sense – follow through
 - Revisit PCP and adjust expectations and respond to changes
 - Case Management Service:
 - Someone to do the leg work

Other Comments:

-

2.

Question One

Does this make the pathways into disability services easier to understand?

- Case Managers:
 - Skill levels vary – not up to speed with information
 - How they link in – often doesn't happen
- Access to resources in country areas limited – not trained adequately
- Planning and practices don't meet
- Support needed while families on waiting list
- Lack of follow up on reviews and planning (no accountability)
- No continuity of planning
- Ensuring all parts of model work together and communicate effectively – sharing information up and skilled workers – complex needs

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Effective review process across all areas
 - Accountability for all objectives, services, outcomes
 - Funding and resources (quality) unless happens no model will work
- DHS as last point of call – needs to be highlighted
- Culture Change
- Government needs to undertake effective planning and look to future needs

Other Comments

-

3.

Question One

Does this make the pathways into disability services easier to understand?

- Identified the understanding of pathway to centre around Case Management
- Point of entry is through family or service providers
- Not clear of planning

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Talk to Case Manager at work
 - This would be our planner at Day Service
- Have good people around us

Other Comments

-

4.

Question One

Does this make the pathways into disability services easier to understand?

- Still not clear
- Looks like any service provider can provide Case Management
- Looks too easy – doesn't identify the issues that lead to entry and next step
- Different service providers doing different things
- Not listening – not following through
- Poor / not enough communication
- Decisions made without consultation
- Lack of common sense approach
- Encourage useful pursuits, not just recreational
- Coordination and cooperation between agencies is crucial
- Case managers should have training and live with families
- Complex needs in one category
- Less complex separate

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Good framework
- Detailed plan for person
- Agencies to listen to families and communicate with each other
- Information and resources to be widely available – Case Management and families
- Training for direct providers – lots of practice
- Accountable / transparent
- Rename to the Department of Common Sense

-
- Transition process at year 10
 - Department of EET to take with DHS

Other Comments

-

5.

Question One

Does this make the pathways into disability services easier to understand?

- Sees DHS as more controlling
- DSR name needs to change, to be clearer
- Can't get past Access and Response – brick walls
- Pilot Program – contacted AGR and manager had no idea what it was
 - Maybe central?
- Is pathway going to be friendly to people without supports / family violence feel not recognised by DHS
- Are service providers going to be of assistance or refer back to DHS
- Don't understand 2 Points of Contact
 - Complex Needs
 - Crisis
 - Both are different, different meanings to different people

Summary

- Point of entry is stumbling block
- Criteria for referral / discussion needs to change feelings decisions made depending on Case Managers mood for the day

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Needs to be clarified – terminology
- Needs variety of systems
- Choice of models
- Choice of access
- Autism cut off 13 year olds can't register
- No case manager or key worker at service providers
- Barriers at every section – variety of reasons

6.

Butchers Paper

Question One

What do you expect from each service?

- The criteria asked about at point of entry is a potential stumbling block
 - Need to contact intake / assessment (Access and Response)
- Still needs further clarity about "Complex Needs"
 - Good for someone starting out now – for those down the path less clear
- Stronger voice for families – equal to DHS and CSO
- Moving beyond Case Management for planning
- Getting the parts work together, especially when planning is done by external agencies
- Department has to listen to families about their capabilities to do their own planning – including:
 - Working in Partnership
 - Department
 - Families
 - Providers
 - A workable relationship

-
- All parties are equal
 - Facilitation:
 - Could pull recent supports together for a plan
 - A first point of contact
 - Know what's available, where to go
 - Less workload than a Case Manager
 - Support Coordination:
 - Would revisit and adjust plan and support as person at centre of plan grows and changes
 - A written support coordination map (copy for family, copy for DHS) and review against IT
 - Case Management:
 - Someone to do the leg work, contact the right people to help realise plan and troubleshoot

Question Two

What do you think needs to be in place to make this work?

- Direct care staff need good training in disability planning (and knowledge of services)
- Effective review process – clear accountability
- Good people around and good conversations about planning
- Families need to be supported to understand planning
- Early (by approximately Year 10) transition process to increase awareness of options
- Greater definition of terms
- Choice of a pathway

Southern Metropolitan and Gippsland Region

1.

Question One

Does this make the pathways into disability services easier to understand?

- FFYA – also a good pathway but need to start addressing issues at 16 – 17 years of age as “everything is happening” at 18
 - Changes to respite
 - Applying for pension
- Pathway – only works if people contact DHS
- DSH could be more proactive in contacting schools / parents when students are 16 – 17 years of age
- Terms such as “facilitator”, “case manager” not always understood by “lay” person
- Proactive parents often do a lot of the “planning” themselves
- Database of social activities / services available

Question Two

-

Question Three

What do you think needs to be in place to make this work?

- Awareness of intake and pathway needs to be more widely known
- And earlier in schools than last year of school
- DHS
 - Proactive
 - Awareness
 - Promotion of Intake Phone Numbers
 - Information at place of Diagnoses
 - Social Workers
- “Get it Out There”

-
- Shire Information of Display Folder
 - Can be updated
 - Services available

Other Comments

-

2.

Question One

Does this make the pathways into disability services easier to understand?

- Yes, but there needs to be reality about each area
- People need to be skilled up and educated to do their jobs
- People need to know their roles and responsibilities clearly
- The every day realities are slow to change – speed up / deliveries
- Transition points and education needs to be better
- Can't have planning without funding
- Disconnect between the planning and funding of DHS
- Doesn't seem to be a process between the two
 - People waiting for funding
 - Clarity about priority criteria

Question Two

How clear is what you will receive from each service?

- All clear
- Links aren't clear currently
- People have to ask the right questions to get all the right answers
 - Ask about how to access
- Good on paper
- Needs to be partnership between DHS and families more
- Case managers hands are tied
 - "Lack of authority"

-
- Need better education
 - People saying “not within their power”
 - Need clear roles and responsibilities
 - Funding gets taken up with HSN
 - Interactive feedback is good
 - People treated as a “case” not an individual
 - Staff turn around is very difficult
 - Communication is the system
 - Clearly explained acronyms and jargon
 - The Department needs to be proactive in helping
 - Key Points:
 - Disconnect between the planning process and the administration and reception of funding (Section of DHS)
 - Need better quality of people in the roles – Data Base to share / educate everyone – “partnership”

Question Three

What do you think needs to be in place to make this work?

- Funding
- Database
- Pro-activity
- Better communication process:
 - With families
 - With other Departments
- Education of doctors, schools
- Information by chance too much
- Commitment to provide funding for their plan to work

Other Comments

-

3.

Question One

Does this make the pathways into disability services easier to understand?

- Sounds good
- Intake:
 - Tanya makes a decision
 - Parent impact
 - Listening
 - Sympathy
- Cannot help with public wording
- Tell parent what to do
- All sounds good / until reality hits
- Good on paper
- Compassion
- Yes, easy to understand and quite self-explanatory
- Experience needs to reflect the promise in the model
- Need it broken / steps are good

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- More funding
- Addressing housing with supports
- More supervision?
- Vexed question between independence and protecting
- Different models / different solutions / different needs
- DHS Housing

-
- Local council
 - Start early
 - Early intervention
 - Data Base
 - Carers Group

Other Comments

-

4.

Question One

Does this make the pathways into disability services easier to understand?

- If you have a good case manager it makes it easier
- Must be a good listener
- Good to get support, difficult when it stops but knows contact to department is still open / available
- Very good to sit down and work through "my" plan
- Easier when a case manager is available to help
- Easier to be linked with services who can help, not always the Department, may be an organisation that "I" used to attend
- Website is a good access "advertised really well"
- Key Points:
 - Good listener
 - Consistent worker
 - Talk about options

To Make Things Better

- Have more people to help
- Volunteer
- Support from family, friends and organisations
- Being given options of what is available when I don't know what is around

-
- Having a consistent support worker / case manager means I don't have to tell my "story" over again and who don't waste time getting to know each other when we could be working towards helping me get to where I want to be
 - Networking between organisations
 - More help in our home
 - When planning: need more time to talk about what's important to me
 - It's easier to talk about what's important to me when people understand me and support my goals and can give me other options when I don't know what's available
 - Sometimes it can take a while to be listened to
 - More options / information which could help me achieve my goal
 - Key Point: Responses

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

-

Other Comments

-

5.

Question One

Does this make the pathways into disability services easier to understand?

- Option – Kalimna
- Like the idea of flexibility
- Opportunity to do work experience
- Then offered a full-time or part-time job
- Discussions on interest and likes
- Looked at pictures to identify things that they would like to do

-
- Check list with pictures as well
 - Looking at group activities i.e. Cooking classes:
 - Everyone has a choice of what they would like to cook
 - Getting the ingredients
 - Like getting paid for jobs
 - Like working independently
 - Likes being asked what they want to do
 - Makes you feel you have achieved things
 - Surprising family members in doing things that they thought you were not able to do in the past
 - Given more opportunities
 - Helping families move forward
 - Talking about the things they like doing – more chances
 - Easier to talk to workers initially rather than family members – sometimes!
 - Great being listened to
 - Funding constraints
 - Supports in place to make it work
 - Everyone working together

Question Two

How clear is what you will receive from each service?

- More education, resources and opportunities
- Resources and funding for education (externally and internally) → really important
- Sharon gave example of how much more confident they were to provide planning and “be proactive” because they did have intensive initial training and support
 - Feel so supported they very low turnover
- Can in turn put pressure on management for the cost of the training

Question Three

What do you think needs to be in place to make this work?

-

Other Comments

-

6.

Question One

Does this make the pathways into disability services easier to understand?

- How do you know about it (the services)
- Three boxes before contract with DHS → information for services
- Major issue is information for parents about the system before entering information about disability services in the health system
 - Ensuring parents / carers have the information otherwise e.g. :
 - Hospitals, GP's
 - Brochures in health services
- Lack of authority of "contacts" in DSR and lack of continuity

Question Two

How clear is what you will receive from each service?

- Families / persons with disability don't often know about services – so how can they access?
- Knowledge of services available (broaden sense) to support people with a disability and their families
- Training of DHS staff
- Uncertainty as to available funding and time line
- Get Planner involved earlier
- Facilitation and Planning is same role! – Don't separate

Question Three

What do you think needs to be in place to make this work?

- Brick walls in the system
- Can't plan if the support you will receive is not clear e.g.

-
- When receive an ISP
 - How much
 - Assign one person to a service user from Day 1
 - Give timeline for when will receive an ISP

Other Comments

-

7.

Question One

Does this make the pathways into disability services easier to understand?

-

Question Two

How clear is what you will receive from each service?

-

Question Three

What do you think needs to be in place to make this work?

- Communication of accurate up-to-date information to families
- Clear path to follow

Other Comments

For people where the support system is working well, we hope any proposed changes will not change their way of receiving support.

8.

Butchers Paper

Question One

- Having a consistent worker
 - Good listener
 - Lots of options
- Model has easy to understand steps
 - Challenge to implement effectively within practice
- First contact in pathway needs to have knowledge and authority to make decisions
- How can community find out about model – how to get started
- Planning needs to be backed by funding / resourcing
- Improved information and education for case managers and families
- Model allows space for people to be listened to
- How does model promote communication in the system, and less / no red tape
- People (individuals) not “cases”
- 2-way communication. Proactive
 - engage people earlier (e.g. schools)
- Explain terminology
- Key transition points on the pathway
 - Plan proactively e.g. late teens

Question Two

- Pathway – needs to happen when you need it
- Requires respect for the person
- Timely access to service pathway e.g. at diagnosis
- Early intervention – earliest contact with planner
- Inter-relationship facilitator and planner
- Liaison
 - Internally DHS

-
- DHS and families
 - Whole-of-Government approach
 - Funded training and education for people involved in pathway
 - Clear communication from intake → plan
 - Information about pathways into the community and sector
 - Understanding of options within pathway