# No. 1

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to staffing in the Department, p 3-9 of the SDS, can the Minister provide a breakdown of staff into job/service type, separated by region?

# **ANSWER**

The following table provides a breakdown of Disability and Community Care Services staff in the regions by service type in line with the SDS statements for the department.

# Staffing Profile DCCS for the 2010–11 Service Delivery Statement

Business Area	DCCS
Brisbane	243.18
Central Queensland	151.70
North Queensland	112.97
North Coast	164.06
South East	170.53
South West	187.97
Far North Queensland	55.98
Statewide Services	1683.83
Whole of Department 413	
Programs and Services	
Asset Management	7.06
Corporate Services	227.02

# No. 2

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP— With reference to p 27 of the Capital Statement, can the Minister provide a line by line breakdown of expenditure budgeted for 2011–12 for DISQIS, and provide a similar breakdown for all expenditure undertaken on this item in 2010–11?

# **ANSWER**

Budgeted amounts for 2011–12 as well as Actual Estimated expended amounts for 2010–11 on the DISQIS Project/Growing Stronger are as follows:

Other Capital Expenditure Disability Information System (DISQIS Project/Growing Stronger)	2010–11 Actual Estimated \$'000	2011–12 Budget \$'000
Growing Stronger Release 3.1	816	
Growing Stronger Release 3.2 & 3.3	4,937	1,827
Growing Stronger Release 3.4		3,203
Growing Stronger Release 3.5		356

DISQIS was renamed Business Information Solution in September 2010 with the first release of functionality to support the Growing Stronger reforms.

#### No. 3

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to the Growing Stronger program, p 3–6 of the SDS, can the Minister provide a breakdown of all expenditure in this initiative for 2010–11, including staffing and administration costs, IT costs, and a list of all processes and forms which have been discontinued as a result of this program.

# **ANSWER**

The following table provides the operating expenditure relating to Growing Stronger, related to:

- Growing Stronger Program
- Growing Stronger Implementation
- Growing Stronger ICT

Also included are the ongoing system support and depreciation costs for the Growing Stronger ICT Project, the Employee Expenses and Supplies and Services for 2010–11.

Growing Stronger	2010–11 Actual Estimated '000s	
Growing Stronger Program Employee Expenses Supplies and Services	4,079 1,085	
Growing Stronger Implementation Employee Expenses Supplies and Services	1,525 80	
Growing Stronger ICT ICT Operating expenditure ICT System support ICT System depreciation	1,370 693 424	

Key features of the new disability service system includes a streamlined intake process, making it easier to request access to government funded disability services; a professional face-to-face assessment process that is fairer for all applicants; and better linking to mainstream and specialist services. These are supported by contemporary ICT systems.

The Bligh Government's aim is to provide services to people sooner, before their needs become critical, and increase their capacity to live as independently as possible in their community.

## Outdated processes as a result of Growing Stronger include:

- Recording of Service Provision Events and notes on DISQIS with quarterly reporting
- team-based regional contact registers
- Multiple regional and team based information lists, directories and spreadsheets for mainstream services, each maintained by varying processes
- Priority funding panel processes at a regional and central office level
- Regular central/regional Priority Determination Process training for staff concerning the specific roles and duties for funding panels
- Multiple programs-based processes including panel preparation, determining funding allocation criteria for each panel and/or programs, making funding allocation decisions, recording decisions in multiple different documents and/or systems (panel minutes, team meeting minutes, DISQIS, registers, etc.)
- Varying procurement and contract management processes relating to each disability funded program
- Submission and approval memoranda to obtain funding for emergency and crisis events
- Paper-based funding approval submissions with individual grant budget proposals for block and individualised funding programs to create budgets for multiple programs each with individual program specifications.

#### Forms which have been superseded include:

- Program-based application forms
- DSQ Application Form
- Regional Application Processing Checklists (Intake)
- Regional consent forms
- Regional Funding Checklists (Intake) and Administration Checklists (Intake)
- Regional Eligibility Determination Reports (from panels or teams)
- Risk Meeting Minutes (performed by teams during Intake)
- Various Program based forms such as the Application for Support or Family and Early Childhood Services "Intake Forms"
- Local contact registers/spreadsheets to compile Eligibility Determination Reports,
- Initial Visit Checklists and Information Gathering Checklists
- Various Service Plans for each different service function—e.g. Family Plan, Activity Plan, etc.
- Various Priority Determination Process proforma, and scoring sheets for priority panels with complex Indicators of Criticality and additional weighting factors and confidentiality and conflict of interest declarations from each funding panel member
- Timeframes (Gantt chart) for regional and state-wide priority funding panels for each funding program
- Specific program manuals and guidelines.

#### No. 4

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to p28 of the Capital Statement, can the Minister provide a line by line breakdown of expenditure budgeted for 2011–12 for Strengthening NGOs, and provide a similar breakdown for all expenditure undertaken on this item in 2010–11?

### **ANSWER**

Strengthening NGOs is a flexible rolling capital grants program designed to enhance the capacity and capability of the non-government sector to respond to the needs of people with a disability and their families.

Commitments are made on a yearly basis and payments are made upon agreed milestones between the department and the non-government organisation.

Product	2010/11 Actual	2011–12 Estimated Budget
Day & Respite Services	\$37,264	-
Building Modifications and Refurbishment	\$450,000	-
Asset Acquisition and Development	\$52,138	_
Asset Acquisition and Development	\$128,900	-
Vehicle	\$30,000	-
Annerley, Modifications	\$9,216	_
Day & Respite Services	\$33,000	
Housing	\$550,000	-
Accommodation Services	\$11,151	_
Asset Acquisition and Development	\$50,858	-
Asset Acquisition and Development	\$282,000	\$143,000
Autism Early Intervention Services	_	\$700,000
Building Modifications		\$345,000
Autism Early Intervention Services	_	\$977,810
Asset Acquisition and Development	_	\$500,000
Contemporary Housing Initiative	_	\$1,900,000
Building Construction	_	\$583,000
Vehicle	_	\$45,300
Unallocated*		\$4,766,890

<sup>\*</sup>Unallocated refers to projects currently being developed by the Department of Communities and which will be scheduled throughout 2011-12 as the projects are approved

#### No. 5

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to p 27 of the Capital Statement, can the Minister list all facilities built to date or to be built under the Positive Futures program and Wacol Redevelopment, including (a) total cost and (estimated) completion date; (b) total number of staff, separated into employed and planned; and (c) total number of clients, separated into currently placed and future clients for whom capacity is planned?

# **ANSWER**

The Positive Futures initiative includes a capital works program that provides safe and robust accommodation facilities for adults with an intellectual or cognitive disability who exhibit severely challenging behaviour. The Positive Futures capital funding expenditure (actual and proposed) is as follows:

Project	Capacity	Total Cost	Status
Refurbished villas	16	\$6.661M	September 2009 (Completed)
Duplexes (2x2) for emergency/crisis	4	\$6.185M	January 2011 (Completed)
Forensic Disability Service*	12	\$11.207M	December 2010 (basic construction completed)
Wacol infrastructure redevelopment	NA	\$6.599M	Estimated completion June 2012
Purpose-built accommodation	4		Estimated completion January–June 2013
Purpose-built accommodation	2	\$25.061M	Estimated completion January–June 2013
Purpose-built accommodation	4		Estimated Completion January–June 2013
New construction / purchases	6		Estimated completion January–June 2013
Modifications of NGO existing properties	Up to 30	\$9M	Estimated Completion June 2013

<sup>\*</sup>Modifications meet identified health and safety issues for clients and staff, including improvements to security.

The capital grants funding was initially earmarked a capital works (equity funding) for transitional accommodation at Wacol but has been converted to capital grants (output funding) to better meet the needs of more individuals through longer-term, community-based accommodation across the state.

Positive Futures clients are supported by a mix of government and non-government service providers. Staffing levels are determined in response to individual client need and level of support required to manage complex and challenging behaviour.

#### No. 6

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to the Capital Works program of the Department, p 27–28 of the Capital Statement, can the Minister list by item all expenditure on capital excluding the Positive Futures program, including location and function of facility?

# **ANSWER**

The following table indicates expenditure on capital works, excluding the Positive Futures program, including location and function of facility, budgeted in 2011–12.

Community Mental Health		
Location	Function	2011–12 Budget \$'000
UPPER MOUNT GRAVATT	Consumer Operated Services—upgrade	\$0.168M
COES CREEK PARREARRA	Transitional Recovery Program Consumer Operated Services	\$1.722M

Supported Accommodation			
Location	Function	2011–12 Budget \$'000	
MARYBOROUGH	Respite Facility	\$0.780M	
LOGANLEA	Long Term Accommodation	\$1.861M	
NERANG	Long Term Accommodation	\$0.125M	
LABRADOR	Emergency/Transition Accommodation	\$2.421M	
ONE MILE	Emergency/Transition Accommodation	\$1.471M	
Various (FNQ, NQ & Brisbane)	Land	\$2,5M	
Various (TBD)	Facility upgrades	\$5.346M	

	Wacol Infrastructure Redevelopment	
Location	Function	2011–12 Budget \$'000
WACOL Utilities, Roads \$0.800M		\$0.800M

#### No. 7

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

MS TRACY DAVIS MP—With reference to p 27 of the Capital Statement, can the Minister list by individual items all facilities that make up the \$270 000 spent to date and the \$1.89 million budgeted for the next twelve months, including location, type of facility, expected completion date and total number of clients catered for at each facility?

# **ANSWER**

Location	Actual or Forecast Completion	Function	201011 Est Actuals \$'000	2011–12 Budget Cost \$'000	#s of clients catered for
UPPER MOUNT GRAVATT	25/05/2011	Consumer Operated Services—respite; office; day activities and telephone counselling	\$0.270M	\$0.168M	4
SUNSHINE COAST	Forecast—December 2011 (TRP) & Forecast—February 2012 (COS)	Transitional Recovery Program and Consumer Operated Services	\$0	\$1.722M	3
HERVEY BAY	Forecast—March 2012 (COS)	Consumer Operated Services	\$0		3

#### No. 8

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

MRS LIZ CUNNINGHAM MP—In relation to the Electorate of Gladstone—

What funding was allocated and spent in the electorate on Disability Services and Mental Health Services (reported separately) for the financial years 2009/2010; 2010/2011 and what is proposed for the financial year 2011/2012 reported separately?

#### **ANSWER**

In relation to non-clinical Community Mental Health Services and Disability Services:

- In 2009/10, \$111,213 was spent for Community Mental Health support activities and \$4,412,369 in Disability Services to the State Electorate of Gladstone.
- In 2010/11, \$175,745 has been committed for Community Mental Health support activities and \$4,753,390 is committed in Disability Services to the State Electorate of Gladstone. An additional allocation of over \$300,000 will see an Autism Early Intervention service established in the Gladstone Electorate by Autism Queensland.
- In 2011/12, at this time, \$223,316 is allocated for Community Mental Health support activities and \$4,123,043 is allocated in Disability Services to the State Electorate of Gladstone. Additional funding available in the 2011/12 year has not yet been allocated.

In relation to the Home and Community Care program:

 In 2009/10, \$2,728,552 and in 2010/11 \$3,024,233 was provided to organisations in the Gladstone region for capital, one-off and operating grants

#### No. 9

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

MS LIZ CUNNINGHAM MP—In relation to the Electorate of Gladstone—

What funding was disbursed in the electorate on infrastructure for Disability Services and Mental Health Services (reported separately) for the financial years 2009/2010; 2010/2011 and what is proposed for the financial year 2011/2012 reported separately?

#### **ANSWER**

Under the Disability and Community Care Services Capital Works program \$551,000 was dispersed in 2009–10 for the refurbishment of the Gladstone Disability Service Hub. The total cost of the project was \$831,000 with \$280,000 expended in 2008–09. The Disability Service Hub is a place where people with a disability can come together with other local residents to access classes in cooking, language, health and wellness as well as art and craft activities.

Under the Disability and Community Care Services Capital Grants program \$50,000 was dispersed for the commencement of the construction of 2 x three-bed houses under the Supported Accommodation (Disability Assistance Package) program. A further \$461,000 was deferred into 2011–12 for the finalisation of construction with the project totalling \$511,000. This project will provide suitable housing options for people who have a disability and who have ageing carers.

Community Mental Health funding to Gladstone service providers was used for direct service delivery only.

The Bligh Government takes its responsibility for looking after Queenslanders seriously, and is focused on providing capital infrastructure to support people with a disability or mental illness.

#### No. 10

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### OUESTION

MRS LIZ CUNNINGHAM MP-In relation to the Electorate of Gladstone-

- (a) How many Disability Services clients have been funded for the years 2009/2010; 2010/2011?
- (b) How many Mental Health clients have been referred to Rockhampton from the 4680 postcode for treatment as in patients?

#### **ANSWER**

(a) The following table shows the Disability Service clients in the Gladstone State Electorate for 2008-09 and 2009-10.

Year	Number of unique service users
2008-09	254
2009-10	306
2010-11	Currently unavailable*

\*Provisional data for 2010-11 is available in August 2011, with final data provided by the Australian Institute of Health and Welfare in February 2012.

(b) In relation to the number of mental health clients who have been referred to Rockhampton from the 4680 postcode for treatment as inpatients, my Ministerial colleague, the Honourable Geoff Wilson MP, Minister for Health has responsibility for inpatient mental health services.

The Department of Communities funds three non-government organisations that deliver community mental health services in the Gladstone area: Anglicare Central Queensland, the Endeavour Foundation, and Gladstone Community Linking.

All three organisations support people to live in the community and avoid unnecessary admissions to inpatient care as well as support people post-discharge from inpatient care, to return to community living.

For example, across the three agencies there are three people supported through the Housing and Support Program, 117 people annually receive counselling and personalised support, and community education sessions are delivered to approximately 600 people annually in relation to mental health and mental illness.

#### No. 1

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

### QUESTION

Minister, page 3–3 of the SDS refers to the Department of Communities leading the community recovery response following extensive damage to communities caused by flooding across the state and Tropical Cyclone Yasi in North Queensland. Can the Minister outline what types of supports people with disability and the frail aged, and the organisations that support them, have received from the Department of Communities?

#### **ANSWER**

# During the Flood and Cyclone Events:

Disability and Community Care swung into immediate action by contacting all clients known to them and requesting all funded non-government service providers made contact with their clients. Disability and Community Care Service staff also supported these organisations in their efforts to contact clients.

To ensure the specific needs of people with a physical disability were properly catered for, four evacuation points were organised by the Cerebral Palsy League specifically for people with a physical disability. These evacuation points were separate to those centres established by Emergency Services.

Service providers in all flood impacted areas were contacted and assistance was provided to them as necessary. Alternative service arrangements were made for clients affected by the closure of these impacted services where this was sought by clients or their families. For example, six funded non-government service providers from the North Coast Region had minor flooding to their premises. Disability Services staff assisted the evacuation of two residential facilities and arranged temporary alternative accommodation for clients. In addition to this, 17 Lifeline clients from the south side of Brisbane required evacuation due to flooding. Autism Queensland was able to assist Lifeline with necessary temporary support for these clients. In North Queensland, Prescare, who provides services as far north as Mackay, offered to provide assistance to other service providers and clients where required. The collaborative effort of non-government service providers during these challenging times is supported and appreciated by the Bligh Government.

Communication was central during these unprecedented events.

Recognising the importance of emergency public briefings by the Premier, the services of AUSLAN interpreters were organised to meet the needs of the deaf community.

The Disability Online and Disability and Community Care Services websites were key communication vehicles during disaster crisis. Existing email listings of peak providers were utilised to ensure that members and other key contacts were provided with timely communication. Further, the Disability Online website encouraged individuals and families to register with Red Cross and to establish a Rediplan to ensure others knew their needs and wishes for ongoing support.

For cyclone impacted services, Disability and Community Care Services liaised closely with the region's local providers and clients to provide support, and also ensured that peak/state-wide bodies remained well informed.

#### Following the Flood and Cyclone Events:

In recognition of the impact the flood and cyclone events had on service providers, an additional \$2 million non-recurrent funding was made available to 18 service providers in 2010–11 to be provided to people with a disability or mental illness with crisis accommodation, respite care, urgent essential modification to temporary accommodation and interpretation/translation services.

Information was also circulated to Disability and Community Care Services to peaks and providers about the availability of assistance to non-government organisations and clients under National Disaster Recovery and Relief Arrangements, and under Operation Queenslander—the Bligh Government's action plan for rebuilding Queensland.

As part of the recovery process the Disability Online website was updated with information targeted to people with disability, addressing their mental health and well-being needs following a disaster, as well as information on staying safe in disasters

The 2011–12 State Budget also provided \$11.2 million over three years for extra mental health community services to assist all Queenslanders in areas affected by recent natural disasters.

Disability and Community Care Services will continue contributing to the Human–Social Recovery Line of Operation Queenslander to ensure our most vulnerable Queenslanders are supported.

#### No. 2

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

Minister, page 3–2 of the SDS refers to a key objective of the Department of Communities being a focus on 'more inclusive, active, and safe communities'. Can the Minister outline what types of activities have been supported by Disability and Community Care Services in the Department to contribute to more inclusive, active, and safe communities for people with disability?

#### **ANSWER**

Disability and Community Care Services (DCCS) supports a range of activities that contribute to more inclusive, active and safe communities.

A key DCCS initiative to be finalised later in 2011, will be the release of a 10 Year Plan for enabling Queenslanders with a disability. The plan will assist in progressing a vision Queensland being a more inclusive, safe and welcoming state for people with a disability. Key strategies will be developed to improve access across a range of areas including education, employment, housing, healthcare, and transport, sport, recreation, arts and cultural activities, as well as the way in which disability services are delivered.

The department's 53 Local Area Coordinators across the state also support inclusive communities, assisting people with a disability and their families to plan for the future and connect to services in their local community. This service will be further enhanced with an additional five Local Area Coordinator positions to be funded in 2011–12.

In relation to 'safe communities' the *Disability Services Act 2006* (the Act) provides a framework for delivering services and meeting community expectations of quality, accountability and safety. The Act provides a strong foundation for promoting the rights of people with a disability, increasing their wellbeing, safety and encouraging their participation in the life of the community.

The Act helps protect people with a disability from abuse and neglect, and has established safeguards to allow the government to respond to concerns for the safety of people with a disability who receive services funded by the Department of Communities. This includes criminal history screening, a complaints system, the Disability Sector Quality System, investigation and monitoring and maintenance of policies.

The department has implemented legislative reforms to promote the safety of people with a disability who exhibit challenging behaviours with positive behaviour support and regulating the use of restrictive practices. This was in response to the Honourable Bill Carter's, report Challenging Behaviour and Disability—A Targeted Response. In order to better protect the rights of adults with an intellectual or cognitive disability amendments were made to the Disability Services Act 2006 and the Guardianship and Administration Act 2000.

Disability and Community care Services also contributes to a more inclusive, active and safe communities through Disability Action Week. Disability Action Week is the major annual community awareness activity of the Queensland disability sector. It encourages the general community to "see beyond the disability" and promotes equitable access and inclusive communities.

The Building Family Capacity initiative supports families who have a child with a disability by assisting the parents to make connections with their local community, providing forums and training, and developing resources to support young people with a disability through adolescence.

Disability and Community Care Services through Community Mental Health have contributed to the Queensland Inclusive Social Enterprises Project which has provided employment in social firms for 82 people who experience mental illness and were previously marginalised from mainstream employment.

Specifically our community mental health supported accommodation programs (HASP and P300) have helped 474 people leave hospital and free up hospital beds for people that need that level of care. The support provided as part of this supported accommodation also helps people to socially connect with their community.

Individuals are supported in a range of ways including to participate in recreational and, sporting activities, supported to get a job and to maintain their employment and supported to maintain their accommodation.

The joint and State and Commonwealth Government, Home and Community Care program provides funding for services to support frail older people and younger people with a disability to actively participate in their community. This includes supporting them to attend social and recreational activities, go shopping and communicating with family and friends.

#### No. 3

## Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–3 of the SDS refers to the purchase of land in far North Queensland, North Queensland and Brisbane Regions. Can the Minister outline the purpose for which these parcels of land will be used for?

#### **ANSWER**

Disability and Community Care Services' rolling capital program aims to increase the availability of well-designed and accessible dwellings and facilities that meet the needs of people with a disability and people with mental illness, wherever they live across the state.

This is progressed in close collaboration with both Housing and Homelessness Services, which is responsible for social and affordable housing initiatives in the Department of Communities, and with non-government service providers.

Included in this work is much-needed new and refurbished residential accommodation, respite centres, and purpose-designed and built specialised accommodation.

Providing support and housing for clients with an intellectual or cognitive disability, with often complex disability and health-related support needs, as well as clients with a mental illness, that is appropriate to their various requirements is a complex challenge this government has recognised and planned for.

New capital funds of \$2.5 million in each 2011–12 and 2012–13 will contribute to the bank of land for future construction of accessible dwellings in the far north, the north and the Brisbane regions of the state.

This funding will contribute towards providing more appropriate accommodation and respite options, suitable for:

- People with a disability or who require a high level of physical support needs
- Queenslanders with a mental illness as a community-based alternative to long-stay clinical care
- Younger Queenslanders with accommodation and support who may otherwise be in residential aged care facilities, or who have ageing parent carers
- Young people with a disability who exit the care of the state, who may otherwise be at risk of becoming homeless, as well as
- People with a disability or mental illness who are eligible for general social or affordable housing.

#### No. 4

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–4 of the SDS refers to the valuable services delivered by the non-government sector. Can you tell us about the purpose behind the red tape reduction initiatives that the Department of Communities and in particular your Disability Services and Mental Health portfolio is progressing, and the benefits for funded non-government organisations?

#### **ANSWER**

The Bligh Government is committed to a strong and sustainable non-government service system, a productive partnership with funded providers and to flexibility and responsiveness by funded providers.

In 2011–12, Disability and Community Care Services will provide a record \$1.318 billion in grants to non-government service providers.

Disability and Community Care Services is an active member of the Queensland Compact Governance Committee, which includes government and non-government members and is chaired by independent chair, Ms Carolyn Mason.

Through the Compact, the respective partners have prioritised the achievement of reduced red tape through a range of strategies, including:

- one Common Service Agreement for all non-government organisations funded by the Department of Communities
- streamlining the range and number of quality management systems for funded providers through the trial currently underway of a common Human Services Quality Framework, and
- transitioning from an input funding and service delivery model to an output based service provision model and reporting.

Throughout 2010–11, 262 of the 269 (97%) funded non-government disability service providers have transitioned from an input Funding Agreement to an output-based Common Service Agreement and are realising the benefits of significantly reduced reporting requirements. These service providers accounted for approximately \$533 million in disability services 2010–11 funding alone.

Under the terms of their former agreements, it is estimated that these providers had been required to submit approximately 2,600 financial acquittal breakdowns each quarter. Under the Compact's red-tape reduction strategy of moving to output funding, this has been reduced to only 262 single Certifications each quarter.

Community Mental Health transitioned 53 of 54 service providers to output based service provision in 2010–11, with similar benefits in red tape reduction.

In addition to the Compact strategies, Disability and Community Care Services is progressing Growing Stronger reforms, which introduce a streamlined and consistent intake and assessment process for disability services.

Under Growing Stronger, applicants now apply to the Department for disability support through just one, three-page form. Previously, applicants were required to complete, as a minimum, a 27 page form; and other forms were also required depending on the programs being applied for. In addition, there is no longer a need for non-government service providers to run their own separate intake processes. This also frees up resources for actual services.

I would like to take this opportunity to acknowledge the significant contribution and commitment that non-government providers have demonstrated in supporting these initiatives and look forward to delivering further benefits for providers through priority actions that will be progressed by the Queensland Government through the Queensland Compact in 2011–12.

#### No. 5

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–3 of the SDS refers to supporting Queensland's vulnerable individuals, children and families through earlier intervention strategies. Can you outline the range of early intervention initiatives that are being delivered by disability and community care services, particularly in regional areas of the state?

# **ANSWER**

In relation to supporting Queensland's vulnerable individuals, children and families, Disability and Community Care Services provides a range of early intervention services for children and adults with a disability or mental illness, and their families and carers, throughout the state including in regional areas.

Building Bright Futures: an action plan for children with a disability—birth to eight years 2010–2013 provides a framework for the Queensland Government to improve access and participation in early intervention services for children with a disability and their families.

Additional funds of \$12.7 million are being provided over the three years of the action plan for specialist disability services to children with a disability.

Under the Autism Early Intervention initiative, 12 services have been established to date. 317 children with autism and their families received support in 2010–11

Regional Queensland has been a key focus for this initiative to date. All services established in regional areas of the state incorporate outreach to children and families in rural and remote areas, helping families access appropriate supports for their children aged under six years.

2011–12 is no different, with supports for children with autism and their families being further enhanced with three services that were funded from 2010–11, being established in Bundaberg, Mackay, and Gladstone. Between them, these will service an additional 154 children taking the total number of children expected to be supported in 2011–12 to approximately 470.

The Autism Early Intervention initiative provides outreach services to children and families in rural and remote areas, helping families to access appropriate supports and centre based services for their children under six years.

Each year, up to 40 families with children with a disability are also supported through the self-directed support pilot initiative to plan and access services of their choice. A total of \$482,800 was allocated to pilot this initiative on the Sunshine Coast over the two years of 2010–11 and 2011–12.

Under this initiative, funds of \$482,800 were allocated to assist up to 40 young adults with an acquired brain injury in Brisbane to plan for and access supports they need to live in the community.

Family and Early Childhood Services (FECS) are provided directly by Disability and Community Care Services through its regional offices. FECS staff support children aged up to six years with, or at risk of, a significant developmental delay, and their families, through therapies, counselling, aids and other supports.

The Child Connect initiative, piloted in the regional areas of Townsville and Ipswich works with children with a disability and their families, and links them to early intervention and mainstream services. Outreach services are also provided through this initiative to connect isolated and hard-to-reach families with the services they need.

Early intervention supports to children and adults with a disability and their families are also provided through 53 Local Area Coordinators who help connect people to services in their local community and assist with planning for the future. Local Area Coordinators have primarily worked in regional, rural and remote areas of Queensland however the program was recently extended to include more urban areas of Cairns and Inala. Five more Local Area Coordinators will be appointed in 2011–12, all in rural and remote areas of the state.

Early intervention can also help to deliver better mental health outcomes, and forms an important part of the Government's vision to support the one-in-five Queenslanders who will experience a mental health illness in their lifetime.

Accordingly, the Time-Out-House initiative has been developed and established in Cairns and Logan to provide early intervention services for young people (15–25 years) showing the early signs and symptoms of mental health problems. This model offers up to three months community-based support for these young people, as well as short term accommodation of up to three weeks for those aged 18 and over.

Total funding of \$6.477 million over three years has been provided for this innovative model of service delivery.

Another innovative community mental health early intervention initiative is the Consumer Operated Services program. This initiative provides peer support targeted at people who have limited family and community supports and aims to reduce dependency on emergency mental health services.

An amount of \$1.8 million has been allocated to three services located in Brisbane, Sunshine Coast and Hervey Bay. In 2011–12, the program will support approximately 500 people through group and individual peer support and short-term residential services.

The Home and Community Care program, jointly funded by the Commonwealth and State Governments, provides a wide range of support to assist frail older people and younger people with a disability to remain living at home rather than accessing residential aged care or higher intensity specialist disability services.

In 2010–11, 803 individual service outlets across Queensland shared in approved funding of \$504.744 million for the delivery of Home and Community Care Services including capital and one-off projects. Services are delivered in almost all communities including many remote locations. They range from Cunnamulla in the south west to Doomadgee in the gulf and Thursday Island in the Torres Strait.

#### No. 6

# Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–6 of the SDS refers to community mental health. Can you give us a progress report against the \$31.8million provided to deliver non-clinical mental health community support services for individuals with mental illness, their families and their carers?

#### **ANSWER**

2010–11 has seen the culmination of a range of programs and initiatives that have been included in the 10 year Queensland Plan for Mental Health 2007–2017.

Our investment in expanding community-based support services for people with mental illness and their families and carers, is resulting in improved quality of life for clients.

In 2010–11, total funding of \$31.8 million was provided to non-government service providers to deliver non-clinical supports to assist people with mental illness, and their families and carers, in recovery, and to re-engage with, and live meaningful lives in their community.

The Transitional Recovery Program is now established on the Gold Coast and in Logan, Caboolture and the Sunshine Coast. Through \$3.8 million recurrent funding, a minimum of 53 people were supported to transition from acute and extended care facilities to community living.

Under the Transition from Correctional Facilities program, funds of \$1.503 million assisted a minimum of 141 people to return to the community with support.

Under the Resident Recovery Program, approximately \$2.5 million was allocated to five service providers and supported an estimated 300 people living in hostels and boarding houses.

An allocation of \$1.3 million was provided to Social Ventures Australia to continue the establishment of social enterprises throughout Queensland. Nine social enterprises have been established over the past two years, supporting 82 long-term unemployed people, including people with mental illness.

The Consumer Operated Services Program, the first of its kind in Australia, is now established in Brisbane, on the Sunshine Coast and at Hervey Bay. Operated by former consumers, these services assist clients to self-manage personal crises through the provision of 24 hour crisis prevention care and short term residential crisis prevention.

Training has also been provided to grow a competent mental health workforce, essential for achieving best outcomes for people with mental illness. Through \$0.425 million in 2010–11, nearly 700 non-clinical workers in key government and non-government services were trained to improve their mental health literacy and capability. In addition, a series of suicide awareness and prevention workshops was delivered by the Australian College of Community Services to staff from the non-government sector; and five x 20-hour "Building Better Communities" courses were conducted for 130 participants.

In closing, I would like to note progress with development of the Mental Health Community Services Plan 2011–17, following the very successful Mental Health Summit in December 2010 which was hosted by my predecessor the Honourable Annastacia Palaszczuk MP who was then Minister for Disability Services and Multicultural Affairs.

I can advise that the Plan is well advanced and is expected to be finalised soon, taking into account current discussions with the Australian Government in relation to measures in the recent Commonwealth Budget's National Mental Health Reform Package.

It is anticipated that when released, this plan will provide a roadmap for further strengthening the sector over the next six years in order to assist people with mental illness and their families and carers access the full range of community-based support services.

## No. 7

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–3 of the SDS refers to 'closing the gap' with Aboriginal and Torres Strait Islander Queenslanders. Can you outline for the Committee the disability and community care initiatives being delivered, and how they are contributing to, 'closing the gap' in Queensland?

#### **ANSWER**

Disability and Community Care Services (DCCS) is committed to closing the gap in life outcomes and opportunities for Aboriginal and Torres Strait Islanders with a disability or a mental illness, as well as frail older Indigenous peoples, and is working to improve access to disability and community care services, including non-clinical mental health services, for Indigenous peoples.

We are achieving this through a diverse range of initiatives.

Increased funding of \$100,000 per year for 2011–12 and 2012–13 will be directed to the Aboriginal and Torres Strait Islanders with a Disability Network of Queensland to employ two part-time Network Development Workers. This activity strengthens links between Indigenous communities and specialist disability services and assists Aboriginal and Torres Strait Islander people to access services.

A total of 53 Local Area Coordinators are employed to assist individuals and families access local supports and networks. Many Local Area Coordinators provide practical assistance to help Indigenous people with a disability in rural and remote areas, access information and to build supportive networks and relationships. Five more LACs will be appointed in 2011–12, including roles focused on the Cassowary Coast, the Palm Island community, the NPA community in Cape York, and the Yarrabah community south of Cairns.

Another key initiative to 'close the gap' is through Child Connect which is being trialled in Ipswich and Townsville in 2010–11 and 2011–12. This initiative targets hard-to-reach families, including Aboriginal and Torres Strait Islander families, caring for a child up to six years of age with a disability or developmental delay and links them to early interventions services and relevant community programs such as parenting programs.

In 2010–11, six Aboriginal and Torres Strait Islander organisations were allocated \$1.168 million in recurrent funding to support Indigenous people with a mental illness, their families and carers with community mental health education and awareness campaigns, counselling, access to support groups, suicide prevention, and the provision of Family Well-Being Programs. In 2011–12, the Mental Health Disaster Recovery initiative includes initiatives targeting Aboriginal and Torres Strait Islander Queenslanders in disaster affected areas.

We are closing the gap in life outcomes and opportunities through the Home and Community Care (HACC) Aboriginal and Torres Strait Islander Service Development Plan 2009–12 which set outs how the program's activities and resources will be used to enhance HACC services for Aboriginal and Torres Strait Islander clients

The HACC program funds 64 Aboriginal and Torres Strait Islander service providers, and has processes and procedures in place to monitor the quality of services delivered, financial performance and compliance with service agreements.

The program also funds four Indigenous Service Development Officers to provide culturally appropriate support to Aboriginal and Torres Strait Islander HACC service providers throughout Queensland.

Closing the gap and improving training and employment opportunities for Aboriginal and Torres Strait Islander people is being achieved through the Community Services Skilling Plan Skills Development Scholarships which includes Aboriginal and Torres Strait Islander disability services and Home and Community Care workers in the non-government sector. In 2010–11, 48 Aboriginal and Torres Strait Islander people were awarded scholarships for accredited training against the Disability Work qualifications and relevant professional development.

In 2010–11 we piloted a HACC Indigenous Peer Support Network, with 12 participants, as a strategy to enhance recruitment and retention of Aboriginal and Torres Strait workers in HACC. Disability and Community Care Services also implemented an Indigenous Mentoring Program in Central Queensland, Brisbane, Wide Bay and the Gold and Sunshine Coast areas, through the Skilling Plan.

We are also planning a Statewide Disability Services Indigenous Gathering event to be held later in 2011 which will be a Queensland first, and bring together representatives from Disability and Community Care Indigenous service providers for two to three days of information sharing, networking and capacity development. This will also contribute to DCCS' forthcoming Indigenous Strategy.

#### No. 8

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

# QUESTION

Minister, page 3–3 of the SDS refers to new funding of \$7.4 million to expand support for young people with disability leaving school or the child protection system. Can you outline for the Committee the extent of existing support and the benefits of the new and other additional funding?

# **ANSWER**

In 2011–12, the Bligh Government will assist more young adults with a disability. Many of these young adults have loving and committed families, but others have limited social support systems and need our help.

I am pleased to advise that an additional \$5.2 million in new funds has been made available in 2011–12 to support an additional 54 young adults with a disability who are transitioning from state care. In addition, \$0.8 million in growth funds (\$6 million in total) has been allocated. This will bring the total funding for the initiative in 2011–12 to \$26.474 million, and will assist approximately 340 young people with a disability transitioning from the care of the state to community living arrangements and life as an adult.

The main component of support provided is for accommodation with young people having the ability to use the funds in a variety of ways including:

- support at home and support to manage their household;
- taking part in recreation and leisure activities;
- strengthening personal and family relationships and networks;
- purchasing necessary aids and equipment; and
- the provision of specialist services where required.

The additional funds assist young to access the valuable accommodation and community engagement supports they need to reduce the risks that are typically inherent in young people making the transition from care to an independent adult life.

I am also pleased to advise that an additional \$4 million was provided in 2010–11 over what was available in 2009–10 for young people with a disability leaving school.

On top of this, in 2011–12, an additional \$2.16 million in new funds is available to assist school leavers with a disability to make the transition from school to adult life. In addition, \$4.5 million in growth funds (\$6.66 million in total) has been allocated. These additional funds alone will assist approximately 420 additional young people leaving school in 2011–12.

This brings the total funding to support school leavers with a disability to \$49.591 million, and will assist approximately 3,300 young people make this important transition to adulthood.

These supports aim to help young people leaving school to improve their social, developmental and psychological outcomes as they move towards adult life. In addition, the young person will have an enhanced opportunity to develop informal and formal supports within their community.

These additional funds will assist young school leavers to undertake a range of activities such as economic participation and further education opportunities in their community which will in turn, help them to achieve their goals and aspirations.

#### No. 9

#### Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–3 of the SDS refers to new funding of \$4.3 million to expand accommodation support for people with disability to live in their communities. Can you outline for the Committee the existing support and the benefits of additional funding?

# **ANSWER**

Accommodation support services assist people to live as independently as possible in their own home or in shared housing with other people with disabilities, depending on their circumstances, preferences, and the level of support required. Assistance with personal care, household management and access to the community enables people to live as independently as possible.

The 2011–12 State budget delivers new funding of \$4.34 million towards accommodation support funding for people with disabilities. This comes on top of an additional \$13.33 million in 2011–12 under the Disability Assistance Package, and \$7 million through growth funding under the National Disability Agreement.

All up, a significant increase to accommodation support funding amounting to \$24.67 million has been achieved in 2011–12.

This injection of funding will make a significant impact on the demand for ongoing accommodation support services.

It is anticipated that these funds will assist over 400 people in 2011–12.

In 2010–11, Disability and Community Care Services allocated over \$500 million to assist people with accommodation support, through a range of service providers, comprising non-government organisations and the department's Statewide Disability Services. This level of funding provided a total of 7,500 accommodation support services to 6,590 people with a disability.

In 2011–12, the Bligh Government's investment represents an enormous boost for accommodation support services. This level of commitment is evidence of this government's readiness to take on the big challenges faced by people with disabilities in our community.

#### No. 10

## Asked on 27 June 2011

THE ESTIMATES COMMITTEE asked the Minister for Disability Services, Mental Health and Aboriginal and Torres Strait Islander Partnerships (MR PITT)—

#### QUESTION

Minister, page 3–6 of the SDS refers to the Disability Assistance Package. I note that a key priority under this Package is the sons and daughters of older carers. Can you advise the Committee about the achievements under this initiative?

#### **ANSWER**

The Disability Assistance Package has prioritised the sons and daughters of ageing carers.

Since this four-year joint State—Australian Government initiative commenced in 2008 it has been a great success in Queensland, and we have exceeded the targets set by the Australian Government.

In 2010–11 Queensland received \$17.99 million from the Australian Government to increase accommodation support places, individualised support packages, respite and respite effect places; and in-home support.

After matching this funding with state funds, I am pleased to report that in 2010–11 Queensland exceeded its targets by delivering 240 accommodation support places, 144 individualised support packages, 586 families received in-home support; over 762 respite and respite effect places were funded.

I am also pleased to report that 89 people received accommodation support in 2010–11 to transition from living with their older carers to a place of their own.

The family members of older carers are also receiving priority access to 30 new houses being built across the state with Disability Assistance Package capital funding.

In 2011–12 Queensland will receive an additional \$19.43 million under the Disability Assistance Package from the Australian Government. This is funding for accommodation support, drop-in support and respite. This funding in conjunction with state funding will provide a further 119 accommodation support places and 79 individualised packages. The sons and daughters of older carers will have access to around half of these additional places and packages.

In 2011–12, \$4 million of Disability Assistance Package funding will be allocated to recurrently fund mobile attendant care services. These services provide personal assistance to people in their own homes, which are tailored to their own needs and lifestyle. It is particularly suitable for people with physical disabilities or neurological degenerative conditions requiring support for short periods of time. This can include getting into bed, assistance with turning at night, or personal care routines in the morning.

In 2010–11 Queensland created 240 accommodation support places, exceeding the target of 51 by 189 places.

We also funded 144 individualised packages, 65 more than the target number of 79 individualised packages.

586 families received in-home support, 144 above the target of 442.

And over 762 respite and respite effect places were funded, 124 places more than the set target of 638.

In total, over the first three years of the Disability Assistance Package, Queensland has delivered 586 accommodation support places against a target of 136 places; 319 individualised packages against a target of 211 packages; 1829 families received Inhome support against a target of 1184; and 2018 respite and respite effect places against a target of 1711 places.

In 2011–12 the Disability Assistance Package will provide \$2.7 million in additional respite funding, of which \$1 million will be allocated to provide flexible respite for young people aged 13–18 years, and \$1.7 million to respite and respite effect, with this funding prioritising the family members of older carers.

This government recognises the long-standing contribution provided by older carers and in acknowledgement of their role, additional respite services have been established over the last four years that specifically cater for older carers and the family members they care for.

In 2010–11, Disability Services provided \$4.2 million in recurrent funding to 22 respite service providers across 25 locations to provide respite to older carers aged 65 years and over and to Indigenous carers, 45 years and over. This funding provides respite to 906 families with older carers.

These dedicated services are funded to either deliver or broker respite services in their local area and enable people to receive a range of respite services according to their needs and preferences.

Respite provided by this initiative includes in-home support, centre-based respite and community-based support. In some locations, emergency respite and other flexible respite options are available.

This initiative takes a strategic approach to supporting older carers by not only providing respite but also engaging with older carers in transition planning.

Transition planning involves putting in place other viable support arrangements for the family member, and taking active steps to prepare for the time when carers can no longer provide the support the person with a disability needs.

We understand that older carers want certainty and peace of mind about who will care for their child when they are no longer able to, that's why the Bligh government is committed to prioritising disability services to the family members of older carers.