



LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

**STANDING COMMITTEE ON HEALTH, AGEING,
COMMUNITY AND SOCIAL SERVICES**

(Reference: [Annual and financial reports 2011-2012](#))

Members:

DR C BOURKE (Chair)
MR J HANSON (Deputy Chair)
MR A WALL
MS Y BERRY

TRANSCRIPT OF EVIDENCE

CANBERRA

FRIDAY, 22 MARCH 2013

Secretary to the committee:
Mrs N Kosseck (Ph: 620 50129)

By authority of the Legislative Assembly for the Australian Capital Territory

Submissions, answers to questions on notice and other documents, including requests for clarification of the transcript of evidence, relevant to this inquiry that have been authorised for publication by the committee may be obtained from the Legislative Assembly website.

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Amended 9 August 2011

The committee met at 1.34 pm.

Appearances:

Burch, Ms Joy, Minister for Education and Training, Minister for Disability, Children and Young People, Minister for the Arts, Minister for Women, Minister for Multicultural Affairs and Minister for Racing and Gaming

Community Services Directorate

Howson, Ms Natalie, Director-General

Sheehan, Ms Maureen, Acting Deputy Director-General

Hambleton, Mr Graham, Director, Policy Planning and Business Support, Disability ACT

Starick, Ms Kate, Director, ACT National Disability Insurance Scheme Taskforce, Disability ACT

Whitten, Ms Meredith, Executive Director, Policy and Organisational Services

Evans, Ms Jacinta, Senior Manager, Therapy ACT

THE CHAIR: Good afternoon everyone and welcome to this public hearing of the Standing Committee on Health, Ageing, Community and Social Services inquiry into annual and financial reports 2011-12. Today the committee will be examining the disability and therapy services component of the Community Services Directorate annual report. Could I also confirm: have you read the privilege card on the table in front of you?

Ms Burch: Yes.

THE CHAIR: Do you understand the privilege implications of the statement?

Ms Burch: Yes. Someone will say no one day. Sorry, chair.

THE CHAIR: Before we proceed to questions, minister, would you like to make an opening statement?

Ms Burch: If I may make a brief opening statement, chair, thank you for the opportunity to come before you through Disability ACT and Therapy ACT and tell of the work that we do. In the ACT the national disability strategy directs the work that we do in Disability ACT, and that is articulated through *Future directions: towards challenge 2014*.

Since announcing our intention for the ACT to be a launch site for the national disability insurance scheme, the NDIS, the Community Services Directorate has been working to make the NDIS a reality here in the ACT. To bring this reality closer, we have negotiated with the commonwealth for an additional \$10.6 million over three years for disability services as we prepare for the NDIS and also prepare for the share of the \$122.6 million available nationally for sector preparation for the NDIS.

We have not forgotten who the beneficiaries of the NDIS will be and have been working with people with a disability, their families and carers and service providers. We have established an NDIS task force to advise government on implementation and

have convened an expert panel to provide expert advice and the benefit of their lived experience of the NDIS to the task force. We have also invested in the community sector in readiness for the implementation by expanding a range of strategies and by supporting people to develop skills in decision making and self-advocacy.

We have not forgotten the ongoing business, though, of supporting people with a disability as we prepare for the NDIS. Disability services funding has increased from \$41.52 million in 2002 to \$83.6 million in 2011-12. Many wonderful community participation projects have been conducted in 2011-12, including the digital story-telling project and some social enterprises that continue to support people with a disability.

Turning to Therapy ACT, we provided services to over 4,900 clients in 2011-12, and the referral rates were similar to previous years, substantially increased numbers indicating a sustained demand for Therapy ACT services. Therapy ACT has also continued to exceed its target for client satisfaction, with the recording of 91 per cent of clients expressing satisfied or very satisfied with the services received.

To assist in the management of the ongoing demand for services, Therapy ACT continued to implement programs to support clients whilst they were on pending services, and these include longer consultations with potential clients to put interim strategies in place, a range of parent information sessions conducted prior to the commencement of therapy and early social work contact for children with multiple or complex needs. The notable success story has been therapy assistance in schools, and the evaluation of this has shown the success.

Can I also take the opportunity now to pay my thanks and regards to the executive and all staff that work in direct service provision in Disability ACT and Therapy ACT for the work they do in supporting our community. We are happy to take questions.

THE CHAIR: Thank you, minister. On page 21 of the annual report it states that the disability information and support hub in Belconnen, DISH, was launched a year ago. Can you tell us more about it, and has it been a success?

Ms Burch: I think DISH has been one of our success services—and I can go to Ms Whitten to talk in detail—but it has been a success and demonstrates our commitment to work as a single entrance point in many ways for people and their families that want to access services, because it is about having the right service at the right time and having one door to go through and having us respond to their needs rather than a client or their family needing to knock on multiple doors. So I am very happy with the success that it is showing so far. But I might go to Ms Whitten for the detail.

Ms Whitten: I was the responsible executive director of Disability ACT during the reporting period. I just want to say that this is a collaborative approach between government and the community sector which includes Belconnen Community Service, House with No Steps and Woden Community Service.

Most recently, we have had up to 1,900 inquiries at the DISH, which is an average of 160 inquiries per month. What is important about this particular service is that, as part

of that collaboration, we have a partnership with the Belconnen community arts area, so when you go to the DISH you see the amazing artwork that is on the walls as well.

The DISH staff have been involved with a range of events during the year, including the Multicultural Festival, “I Day”, the International Day of People with Disability, and the expo and market. And they have undertaken some digital story telling with people with disability during the year.

I will throw to Mr Hambleton, as he is on the governance committee for the DISH.

Mr Hambleton: As a collaborative opportunity, it enables the services to work closely together. You have often got people who are coming to the DISH or making contact with the DISH who are able then to get a cross-referral within similar sorts of service offering. You have got that with the House with No Steps, who are supporting people in transition from school to adult work, and you have also got their local advisory committee. So often there is a good synergy of people working closely together. Plus they have been able to run some forums. They have run one about money, about “how I use and spend my money”. They have also run one around accommodation support options. They have been really well attended; in particular, the accommodation support options one has been very well attended.

THE CHAIR: Minister, where did the initiative for this development come from, and how was it put together?

Ms Burch: With the DISH, we heard quite clearly, when we went out and spoke on our future directions policy, that a key plank in that was a no wrong door or a simple access point for those with a disability and their families. We saw that one as a responsibility for the different government agencies, but also about our partners, our community partners. Anyone who knows and understands the business knows that, whilst we are a provider through accommodation, supported accommodation, there are many other providers in this field around a whole range of programs, and they sit in the community sector. As Mr Hambleton touched on, there is very much an interest in accommodation and how we can be innovative and more flexible with accommodation. I see the DISH as being in many ways a central point. It came from a sensible notation, really, a voice from those in the community who just wanted a simpler, more straightforward and more collaborative environment for them to enter into. I think it is provided through the DISH.

THE CHAIR: How much consultation and negotiation were required to set it up?

Ms Burch: We can probably go to the detail.

Ms Howson: As the minister has mentioned, the synthesis of this was from our consultation with the community around our broad strategy in disability services, the future directions to 2014. It was a clear strategic goal to provide a more integrated approach to service delivery and services that gave families and individuals with a disability the right service at the right time. But then it moved into the context of identifying community sector partners that wanted to join with government to create this collaborative space. I was not involved in that directly, but Kate Starick was and she will be able to tell you about how that process actually worked.

Ms Burch: That is one of the key successes of the DISH: it is having the community partners. And it is more than just sharing an office block; it is about all those groups working together to problem solve and to work through the best options for families.

Ms Starick: During the reporting period I was the director in Disability ACT. With the consultation in the community, people identified that the services that provide that early outreach and early intervention approach—so starting to talk with individuals with a disability and families early on in their lives, the supports that work with young people leaving the school, local area coordinators who work with families to connect their family member or themselves to supports, activities and options, be they volunteering or some personal skill development options in their local area and community—were included. There was also feedback during that consultation for working with different groups around the community, be they people with cultural and linguistic backgrounds, Aboriginal and Torres Strait Islander people or people who were looking for housing options. One of the roles that we specifically set up in the DISH was the housing options facilitator to work with families whose child or adult child was considering taking that next step in their life and asking what things they would need to consider in that.

THE CHAIR: You also mentioned the role of Belconnen community arts within this collaboration. Why are the arts important in this area?

Ms Burch: It is increasingly being recognised, from an arts in therapy approach, that art is a very open and inclusive format and allows people of all abilities or disabilities to participate. Belconnen has a really strong arts program. Quite separately, it value adds in many ways to the community outreach community through Belconnen and Tuggeranong Arts Centre—those community outreach things—but this is a very strong program. When you see Black Mountain School, if you go to Tandem offices, they have some wonderful large paintings that have been produced by Black Mountain students. It is fantastic to see arts because the arts have no barriers. If you can have an implement and put an image on a bit of material or a canvas or some form to carry that image, it is open to all of us. I think it is good. You may want to add some more to that about how it works.

Ms Howson: Another example of where we are using art in a very particular service delivery design way is to provide it as a channel for expressing the voice of people with a disability. Where communication options that are available to everybody else are not available to those people, what we are finding is that through art they can express their needs and their desires and be able to describe the sorts of lives that they want to live. This is particularly important in the context of the new world that the national disability insurance scheme will offer people with a disability, which is entirely about allowing people to live the lives that they choose to live.

We have been doing some work with a community-based organisation on expressing the story of individuals through video technology. We have had, I think, two programs now run where young people, in particular, who have left school are able to describe to their family and to the community, at their consent, the sorts of things that are important to them in their lives and what they want to do. They are amazingly insightful. Families have even commented, I believe—I should be looking at Graham

here—that they did not realise that that is what the young person in their family felt so strongly about. That is another example, a very practical example, of where art can assist people with a disability.

And we are working closely with our colleagues in artsACT to explore more opportunities for the arts community in the ACT to get more involved with people with a disability.

Ms Burch: The movie *Beautiful* was a nice example of that collaboration, predominantly through the arts portfolio but around highlighting the narrative around people with a disability.

MR HANSON: The 160 a month—is that by phone, email, people turning up or a mixture?

Ms Starick: It would be a mixture.

Mr Hambleton: That is predominantly through our information service there, and that is just in the Disability ACT context. It is made through phone and email—occasionally a letter every now and then. That comes through to an information service where we have a dedicated information officer as a sort of key contact point to either redirect or answer the questions.

MR HANSON: So it is not a physical—

Mr Hambleton: People can turn up, yes, but the idea of it is that it is designed so that people can access it from anywhere. We have got a link on our webpage where people can click; that will take them to an email request. They can use the phone to call. Or they can drop in—and we do have people dropping in. But just because of Canberra being Canberra—some people are south et cetera—it is not always—

MR HANSON: I suppose that goes to my next point: Belconnen is obviously a fair distance, particularly for people with a disability, if they are in Tuggeranong or somewhere else.

Mr Hambleton: Yes.

MR HANSON: Have you looked, where this model is successful, to having an outpost perhaps for people to go to physically—

Mr Hambleton: It has been something that has been talked about. It is still early days in terms of the context, but it has certainly been something that has been explored. We are still getting used to this particular process working, which is working well.

MR HANSON: Yes. Where is Oatley Court in Belconnen? Is that near the bus?

Ms Howson: Yes; it is up near the Belconnen markets. It is that end of Belconnen.

Ms Burch: It is near the basketball courts, I think, from memory.

Ms Howson: Yes, the basketball courts.

Ms Burch: I am a southerner, but I think it is near the basketball courts.

Mr Hambleton: It is easy to park there. It has got good parking.

Ms Burch: But I take your point, Mr Hanson. It is something that we will look at, and if it is successful we will look at how we provide that offering for those on the south side of Canberra.

MS BERRY: My question is regarding the ACT social enterprise hubs, which are dealt with on page 23. Can you tell me about the social enterprise hubs that have been opened in the last 12 months, and specifically what industries they were operating in?

Ms Burch: The officials can also talk to this—I think Ms Whitten, Mr Hambleton and Ms Howson. Social enterprise is a critical point around access and equity for people with a disability. Many of these folks would sit outside a traditional employment model. It is about our finding innovative ways to engage them meaningfully through employment. I might go in the first instance to Graham and then work back up this way.

Mr Hambleton: The social enterprise hub currently supports 17 different social enterprises. Nine of those are microbusinesses and were kick-started by an innovation grant through Disability ACT's innovation grants. They range from—I have got to use the names, which are fairly innovative—Donkey Wash, Cafe Ink, Mulch, which is a new—

MR HANSON: What is Donkey Wash?

Mr Hambleton: Donkey Wash is—

Ms Burch: It washes donkeys, of course, Mr Hanson!

MR HANSON: I did not realise there was a big demand for that in Canberra.

Mr Hambleton: Donkey Wash is a young man with an enormously innovative mother who has thought outside the box. He has autism and he is quite fixated on washing machines, washing clothes and hanging out clothes. So she has built a small business around him doing that. He now does washing for various cafes and various other places. It is something that is a passion for him. It is a really innovative approach to using someone's strengths and enabling them to build a business to the point where she was telling me the other day that he is interested in seeing the books, seeing where the cash goes, which is always a good sign.

MR HANSON: Can we find someone to do my ironing?

Ms Howson: We can give you some information about that if you are interested.

Mr Hambleton: Then there is Ronnie's Succulent Snails, which produces snails for the restaurant trade. You have got recycleries and you have got herbs and worms,

which are all in a similar sort of vein. You have got a range. You have got Jack Mail, which drops off deliveries around town. A lot of these enterprises are developed to the point where they become not only self-sustaining but able to support the support costs and obviously provide a meaningful life for the young person involved. It is a very positive outcome. Interestingly, the ACT social enterprise hub won the big award at the Chief Minister's inclusion awards this year as being a very progressive and productive agency in the ACT.

Ms Burch: Ms Howson?

Ms Howson: My comment also related to the context of these enterprise hubs into the future as families are looking for meaningful ways for young people to participate in our social and economic life. We hope to see a lot more of these types of innovative businesses starting to be driven out of not only the needs of the community, the meaningful needs of the community, but also designed in a way that offers employment opportunities for people with a disability.

Ms Burch: And it is about linking, making sure you join multiple dots. The connection with the social enterprise hubs brings that business rigour with it. Carers ACT in their premises have a kitchen. The cafe is called Reach Out. They are bringing in young kids, young people. Maybe some of them are not so young; I do not know. Sorry, I should not be so flippant. They are being given some hospitality skills. They are pitching that skill to their interest and their capacity as well. Then there is employability in the bigger world, not just limited necessarily to these social enterprise cafes.

MS BERRY: What is the proportion, the number of employees in these hubs who are disabled?

Ms Burch: Within the social enterprise?

MS BERRY: Yes.

Ms Burch: Graham can talk to that. The thrust is that it is built around those. There is obviously some support work.

Mr Hambleton: The social enterprise is built around the individual with a disability. So the individual is the key person under consideration. Some of these enterprises are one-person organisations. Jack Mail is built around one young man. Donkey Wash is built around one young man. But then you have got things like the Mulch, which is probably looking at around 20 people initially involved in a whole range of enterprises there on the south side. Then there is Branching Out, to which the minister referred, where seven young people are also getting a qualification through CIT as part of that process. That is a recognised qualification that they are receiving.

Then you have got some other organisations like Paperworks, which is at M16. There are a number of people there who produce articles of paper. These are very attractive letters and envelopes et cetera. There are about half a dozen people in that. So it varies a little bit depending on the activity. But you do get, as I say, from the micro—one person—up to a slightly larger number.

MS BERRY: Yes. I remember reading about Jack Mail or seeing it on TV. It must have been one of the first ones.

Mr Hambleton: It was one of the early ones, yes.

Ms Burch: Yes, the red van is now a very familiar sight, particularly around the Deakin area.

MS BERRY: What type of support is given to the people that are hired under this program?

Mr Hambleton: Once again, it depends on the individuals. In some situations it is one to one. In other situations it is shared between a couple of support people that may be involved. As I said earlier, one of the situations we are seeing now—Jack Mail is one—is that the organisation is able to fund the support worker. It completely does not rely on government funding at all because of the profits made from the enterprise.

MS BERRY: Are there any plans for expanding this over the next 12 months?

Mr Hambleton: We are continually working with the ACT social enterprise hub. We have the enterprise grants and with the NDIS there are a lot of opportunities for people to take up those sorts of options for themselves.

Ms Burch: But I also think it is other opportunities through government departments to offer employment for people with a disability. Thinking of Jack Mail makes me think of Jackson, which makes me think of intentional communities. One of his young friends, who will also be a resident in an intentional community, is in the mail service of Canberra Hospital. He does a fabulous job there.

MS BERRY: My background was in workplace relations and I have a question relating to what sort of oversight the directorate has to ensure that people employed in these hubs are aware of their workplace and health and safety rights.

Mr Hambleton: It is one of the things that the social enterprise hub assists with when they are setting up a microbusiness. It is really all the aspects around a business—from taxation through to workplace health and safety and other liabilities. That is the whole package that they wrap around somebody when they are helping them go through the process. It is not just a straightforward case of open the door and go. It is a case of thinking through all those aspects.

MR HANSON: What is the hub exactly? Is it a physical location? Is it a couple of people in the directorate?

Mr Hambleton: It is a virtual hub, really, because the person who is based there actually is from outside Canberra. They use a shared office in the Griffin Centre. He is here so many days a week. They then work with people at a distance as well. The beauty nowadays with email et cetera is that they are able to track them. They usually meet with the person, set it up, come back and revisit a number of times. The hub itself is not a resource-intensive arrangement. It is something that is done with quite a

minimal amount of funding.

MR HANSON: So how do people find out about it?

Mr Hambleton: Usually through the information service. That is one of those sort of connections, through their connections as well, through the ACT social enterprises hub. They share an office. They allow them to sort of use that as a promotional opportunity. We recommend and notify people as well through that.

MR HANSON: Does the hub have specific funding allocated to it or does the hub need to go back to access grants specific to whatever the proposal is?

Mr Hambleton: We provide them with some funding. It is a small amount of funding. I do not know exactly the figure, but we provide them with some funding. I think it is something like \$150,000. Then it is added to from other parts of the country. As I say, it is not based in Canberra; so it is added to from other governments. There is an opportunity—they do access other grants as well from time to time. If there is a particular grants scheme out, they will access that. Schools also promote the social enterprise hubs through the transition service that we operate with House with No Steps. That is one of the options that is presented to young people leaving school as well.

Ms Burch: They are connected to a broader national hub.

Mr Hambleton: Yes, it is all part of the—

Ms Burch: They do great work on very little, but they do fantastic work.

MR WALL: You mentioned that nine have been established with the use of an ACT government grant. Is there much of a demand for further micro enterprises to be set up with the assistance of a grant? What is the inquiry rate?

Ms Howson: Again, I think this is something where we are in the middle—or at the beginning, I think—of a change in the way in which families might be thinking about the service supports they need and individuals are thinking a bit differently about the things they might like to do. So we expect demand to grow as young people and families start to imagine different futures for the people that they love and care for.

We are expecting through the national disability insurance scheme, essentially commencing next financial year, that there will be access to funding through our enhanced service offer. We expect that we will see more demand for these sorts of support arrangements, and we will be adjusting accordingly.

MR HANSON: So this is the sort of thing that would be inside the NDIS, is it?

Ms Howson: Eventually we would expect that the disability sector itself will start to—you will see more emphasis on this emerging as individual consumers manage their own package of funding. They will choose to use some of that funding to invest in supports to enable people to work in meaningful employment. The sorts of supports that people will need will become more evident over time and we will see different

service providers being in a position to provide those supports. I think it is something we will see continue to grow and evolve over the next three, five to 10 years.

MR HANSON: It seems that there are budget grants and things that are specific-purpose grants for employment and so on. Then there is NDIS. It seems that it is difficult to know sometimes what is going to be inside NDIS. We are told, “No, that is the subject of an employment grant that comes from somewhere else. Therefore, it is not NDIS.” Probably we will get on to NDIS in a minute. But I am just wondering whether these specific grants that have been provided already will get wrapped into the NDIS. Are they part of the funding? Do they get absorbed into the funding or is it additional funding? How does that work?

Ms Burch: It is a yes and no. Maureen Sheehan might be able to provide some information.

Ms Sheehan: I am the senior executive responsible for national disability insurance scheme implementation in the ACT. It is a very good question, Mr Hanson. Because the national disability insurance scheme will bring together both existing commonwealth programs and existing state and territory programs, we will find that employment programs come inside the national disability insurance scheme, and they are funded through commonwealth sources. So employment programs, yes. As Ms Howson was saying, under the new scheme, individuals will have the size of their packages determined in consultation with them setting their aspirations and the outcomes they would like to achieve in their lives. For people who set the aspiration of employment—and many people will do that—their packages will support their employment.

The social enterprise hubs are perfect in that sort of environment where people can set that very individualistic way of achieving an employment outcome, so it is not just a question of going to a more traditional form of supported employment for people with a disability.

MR HANSON: So there is a bucket of money that already exists and then there is a bucket of money coming from NDIS.

Ms Sheehan: Yes.

MR HANSON: So what happens there? Does that existing bucket remain or does it get absorbed?

Ms Sheehan: Those arrangements are being worked out at the moment between the commonwealth and the states and territories. But the goal will be that, over the period of the three years of the launch—we call it a launch rather than a trial—of the scheme in the ACT and in the four other sites around the country, the existing programs will move across to the control of the national disability launch transition agency. Although the programs are block funded at the moment—to take an example the committee would be familiar with, an employment program such as Koomarri—in the new arrangements that funding will be transferred across to the commonwealth launch transition agency. Then the individual person with the disability will set their goals and aspirations and will have their own funding and will choose where they would

like it to go. It is quite a different model, but the major theme of the national disability insurance scheme is control and choice in the hands of people with a disability.

So you can see in that model existing programs will come together and then the focus is on what the person with the disability wants to achieve for themselves, and then they will choose to have that thing which meets their needs rather than just having to make a choice from more traditional supports and services which we have block funded in the past.

MR HANSON: Do the amounts that have been described for the NDIS locally and nationally incorporate Koomarri and other groups—the block funding? Is that wrapped inside that?

Ms Sheehan: Yes, it does.

MR HANSON: That is not necessarily new funding? It is an amalgamation of existing funding as well as new funding?

Ms Burch: Yes. There will be existing funding; we have extended the contracts for all of our organisations until June-July next year. Then that block funding, in the main, will go into NDIS funding. Then there will be new funding as agreed between us and the commonwealth and, indeed, the other jurisdictions that are part of the NDIS. Some of these decisions about what is in and what is out are still being worked through. But those jurisdictions that have their start button from July this year will certainly be making those decisions in the coming weeks.

MR HANSON: Let us say there is someone who gets a service from Koomarri at the moment under block funding. The launch is only 2,500, then 5,000. What happens if that person who is getting existing services from Koomarri under block funding is not selected as someone who is part of the 2,500 for the launch when that money from Koomarri gets wrapped up into NDIS? What happens to them?

Ms Sheehan: That is a good question, Mr Hanson. There are special arrangements for the launch sites—that is, people currently receiving the services will continue to receive services. I have used the Koomarri services as an example now, but I think the way that we would want to think about those services in the future is different. On the whole, about double the amount of funding will go into disability services over the next three years. So people who would have loved to have worked with Koomarri in the past but could not because the funding was not available in the past will be able to say in this new environment, “I really want to work with Koomarri.” And because they have a package, they will actually be able to get an employment service from Koomarri. It really will expand tremendously the choices people have and the funding available for them to achieve employment.

THE CHAIR: I think we are up to your substantive question, Mr Hanson, although that seemed pretty substantive.

MR HANSON: It is on the NDIS. So the establishment is 2,500 and that kicks off—

Ms Burch: That is what we will see coming through the door in the first phase, yes.

MR HANSON: So that kicks off next year?

Ms Burch: Next year.

MR HANSON: And when does that grow to 5,000?

Ms Burch: I think by 2016.

Ms Sheehan: That is right; 5,025 is the estimate that has been agreed with the commonwealth.

MR HANSON: How long is the launch for? Three years, you said?

Ms Sheehan: Yes.

MR HANSON: So what happens at the end of the three years?

Ms Sheehan: At the moment, Mr Hanson, the agreement at the Council of Australian Governments is that the five launch sites around the country will operate for three years. So in the ACT the estimate of 5,000 will accommodate all of the people with a disability in the ACT who would be eligible for the scheme. There are 5,000 people that will transition in Geelong and Barwon in Victoria, 10,000 people in Port Macquarie and Newcastle in the Hunter region, in South Australia it will be 5,000 young people from birth to age five, and in Tasmania it will be about 1,000 young people who will transition over the next three years as they leave school.

So throughout the next while states and territories are in negotiations with the commonwealth about how they will then move to transition to the full scheme at the end of the three years, and that will be the entire population of people with a disability in Australia. The Productivity Commission estimated that about 410,000 people nationally will be eligible. You can see that is a large number compared to the approximately 20,000 people who will be involved during this launch period. But for the ACT it is the entirety of our population. So by the end of our three years we will have everyone transitioned into a new scheme based on control and choice.

MR HANSON: And how many do you anticipate that to be?

Ms Sheehan: 5,025 is the estimate at the moment.

MR HANSON: Yes, but you said that that expands at the end of that because at the moment there is—

Ms Burch: We anticipate that will capture the entire need of the ACT.

MR HANSON: So you do not think it goes beyond 5,025?

Ms Burch: The Productivity Commission and our figures are indicating that, but as we get closer, the next set of questions are about what happens if there are 6,000 and what happens after that. And that is what we need to keep an eye on. There will be

clear criteria around who is captured in the scheme. There will be clear criteria about the programs and offerings within the scheme. This is new. The start of this has not happened yet, so to try and be very clear about what happens in three years is ambitious, if I can say that, Mr Hanson. But, needless to say, there is such commitment around the country to see this work that Disability ACT will be watching and reporting monthly. But in our negotiations with the commonwealth, if we need to respond in the outyears, we will certainly seek to respond.

MR HANSON: The ABS figures that I looked at for 2009 said there were 15,900 people in the ACT identified as having a profound or severe core activity limitation. So I am surprised that the figure seems to be capped on a sort of ongoing basis—

Ms Sheehan: Mr Hanson, we can certainly have a look at those figures again and look at the definition of where that description would fit. But the figure that we are working with at the moment was generated through a combination of ACT demographic data and the Australian Government Actuary. We are quite confident that it is a reasonable estimation for us.

The other piece of information we are working with is that at the moment people receive either a specialist disability service, a specialist mental health service or a service through the home and community care program. At the moment—after we matched up to see who is receiving services in a number of programs, and we have only recently been able to do that data matching—somewhere between 1,700 and 2,400 people are receiving a service. So that gives us a good idea that double that number of people we estimate would be eligible.

Ms Howson and the minister have just passed me a note reminding me that there are also people who have a disability because of a catastrophic injury—it might have been through a motor vehicle accident or some other sort of accident—and they will be covered through the national injury insurance scheme, the NIIS. So the higher figures would also incorporate those people. In addition, it would incorporate people over the age of 65 who now go into the aged-care system. I think the committee would be quite familiar with the way in which the commonwealth government has now taken over all responsibility for people over 65. But we are certainly happy to give you a breakdown.

MR HANSON: No, that helps to explain it. I was trying to work out how you pare down the bigger figures that come from the ABS to 5,000. But that might explain it. What about population growth? How is that factored in?

Ms Sheehan: We factored population growth into what we would expect to see in the next three years. Given that we estimate a doubling of the number of people who will actually receive a service, we are quite comfortable that in that movement between, say, 2,400 and 5,025 we can accommodate population growth.

Ms Burch: But, again, Mr Hanson, given such a fundamental shift in how we deliver in three years, we are very mindful of all these questions.

MR HANSON: I am just trying to get an order of magnitude, I suppose, because if it is incremental growth, the 5,000 is about it, with ups or downs a bit. But the figure

that I had, the 15,000, you have helped explain that; so that is good. Who is going to make the decision, then, about who is going to be eligible and who is not and what amount they will get for their package? Who is the gatekeeper?

Ms Burch: Is it formalised, named now, the authority?

Ms Sheehan: It is the launch transition agency that will make the decision.

Ms Burch: Yes.

MR HANSON: The launch transition agency?

Ms Sheehan: It is very exciting. In fact, I am happy to tell the committee that, under the legislation to establish the national disability insurance scheme and the commonwealth gateway where people will be assessed and have their packages established, it is called the launch transition agency because it is the launch, as I described, of five sites, with about 20,000 people, which will trial different parts of service delivery over the three years. And it is transition because, over time, the whole of the disability community will transition to the new scheme. It will be administered by the commonwealth government—and it will be a statutory authority administered by the commonwealth—and assessments will be made at that agency. Package size is determined and then packages are administered through that commonwealth scheme.

MR HANSON: That was introduced yesterday in the federal parliament, was it not?

Ms Sheehan: It was formally passed by both houses yesterday.

MR HANSON: A bit distracting, what was going on yesterday.

Ms Burch: Yes.

MR HANSON: We might have missed that one. Do you know how that is going to physically occur? Is it going to be co-located with Centrelink or is it going to be a separate entity? Have you had any discussions around that?

Ms Sheehan: We have not had discussions about physical location in the ACT at this stage, because the agency will not start assessing people in the ACT until July 2014. But in the first year, as the minister was saying earlier, from 1 July this year until 30 June 2014, the ACT will have an additional \$10.5 million which will go into extra service delivery, into an enhanced service offer, which will put additional resources into the community for people with a disability, to provide services for them in a way that they choose. That will be administered through Disability ACT, through the existing system. And it will not be until a further 12 months that the commonwealth agency has to set up shop and that people will go through there.

So over that time we will, of course, be having discussions with the commonwealth about where that will be and what that would look like, and we will be very fortunate, because we will have had the experience of establishing the agency in those other sites, in Geelong, in Newcastle, in Hobart, in Adelaide, and that will give us a lot of information about what really works for people with a disability. So we are very

fortunate.

MR HANSON: Looking at it from the consumers' perspective—and I am just trying to work it through—let us say I have got a disability and I currently access some support packages through Disability ACT. And the first thing that is going to happen is that there is an injection of \$10.5 million, which will then come to me to then decide what I want to purchase in terms of a support or it expands the current supports, or how does it work?

Ms Burch: This is the grants?

MR HANSON: Yes.

Ms Burch: I think there is \$7.9 million out of that \$10 million that is going directly into grants. So there will be two rounds, July and September of this year. These are grants directly to individuals.

MR HANSON: To the individuals?

Ms Burch: To the individuals. So if they are getting an existing resource through an agency, whether it be Koomarri or Tandem, that will be retained. That will continue. But then the grant will be for whether they want to buy additional equipment or whether they want to buy additional hours of respite or community activity.

MR HANSON: And who is going to make that decision about who gets the grants and what they are?

Ms Sheehan: The assessments will be made by a team of assessors who will be employed through Disability ACT. And the grants program will be widely advertised, as the minister was saying. One of the great benefits of this program in the first year will be that we are obviously very keen to find those extra 2½ thousand people whom we believe should be getting a service, but we do not actually know who they are or where they are at the moment. We have some very good ideas, because we do see people with a disability—and this does include people with a serious mental illness—in other service systems where they might get a service in that system. They might go to their GP but they might not receive another service to support them in the community.

So this grants round will actually be an opportunity for those people to come forward and, with our assistance, receive a grant and for us to know about them. Then, when the national agency opens its doors in 2014, we can assist them to go through to the national agency, have an assessment and then get all of the supports that they really need to operate in the new environment where they will have the choice and control about how they would like to live their life. They will have the resources to support that choice and control.

Ms Burch: But what will be critical in this is the dovetailing from the work that would have already been agreed for those launch sites that are starting in the middle of this year and making sure that that criteria and eligibility dovetail into that. When we get to 2014, we have not set up an unrealistic expectation as well. So our

assessment—

MR HANSON: So they will not lose any funding as well, I suppose?

Ms Burch: Pardon?

Ms Sheehan: Excuse me?

MR HANSON: This is to make sure they do not lose anything they have got? This \$7.6 million or whatever it is that goes as a grant, is that guaranteed then to just go with them into NDIS, or is it then a separate evaluation?

Ms Burch: I think one of the key planks of the NDIS is—and this goes to your question around who is the gatekeeper and criteria and eligibility framework—this is a national scheme. One of the flaws in our existing arrangements from jurisdiction to jurisdiction is that we will apply a set of criteria, New South Wales will apply another and South Australia will apply another. That is what has resulted in our disability services being described as a bit of a hotchpotch, whereas one of the key thrusts of this is common assessment and common criteria for eligibility. So whether a family is seeking to have a child assessed in New South Wales or Queensland, it does not matter. Through this agency, it will be the same.

MR HANSON: And who are these people? Who is qualified to make a decision about whether someone is eligible for whatever package it is? It seems like it is a—

Ms Burch: I think we are finalising this. The Productivity Commission's view is that the authority would be the holder of the funds and the distributor of the funds, but there are very clear criteria. There is the role of an independent assessor that will go in and meet with the client, meet with the person or the family, and make that assessment. Then, from that, there will be the determination of the allocation of funds. "This is the suite of services in your area or region." In broad terms, that is how it should be working.

Ms Sheehan: Yes, and it will be established. We have had the legislation passed, as we just said. Sitting under the legislation will be a number of rules, pieces of delegated legislation, effectively regulations, which will describe each part of the assessment so that it is very clear and transparent and everyone will understand what those criteria are.

If people are unhappy with an assessment then they can appeal against that assessment. The commonwealth has already agreed that it will establish a special division of the federal Administrative Appeals Tribunal that will deal with the national disability insurance scheme. It will be the most clear and transparent process so that people can understand what the rules are and, then, if they are not happy they will still be able to make an appeal.

Ms Burch: So, in many ways, whilst there will be local assessors, they are not assessing to our criteria. There is no role for us to go in and make a change to that. It goes through the central agency.

Ms Sheehan: Yes.

Ms Burch: This is such a fundamental, significant change. I admire, can I say again, the work that Disability ACT and the community sector have been doing through the task force and the expert group to get this to the stage that it is, with such big questions: what do you do with block funding? With all of those agencies, who is in, who is out? How do we prepare the community sector to be able to go out to the client base with a suite of services that they would be interested in buying at a price that is affordable for them within their package? The sector will not look the same in two years time. It will look completely and absolutely different. It is big.

MR WALL: Minister, I understand that one of the initial focuses in the rollout is going to be young people, about the 18 to 25 age group, with complex needs. What work has been done in undertaking to ensure that there are proper transition programs available as they come out of school into the workforce?

Ms Burch: I will go to someone in a minute, but we have had a transition program in place for kids that are leaving special school, and it has been in for two areas. One has been in community engagement, and the other has been in employment. Some young folk need to be supported strongly in the community, and others will have the opportunity to move into either a social enterprise or some employment type of arrangement. That, until now, has been managed through House with No Steps over a two-year arrangement, a two-year transition period, until they sort of fit into the adult determination of their response.

In recognising that this is a really important area of work to do, and certainly in response to a number of things that we have heard, we have put an additional \$5,000 on the table for these young kids as they transition out of school. I think we are talking with the year 12 graduates and year 11 graduates at the moment, and, again, similar to the enhanced service, this will be a direct \$5,000 grant to the young person leaving school for them to have a look at what it is that they want. The support will continue through House with No Steps. And this is a little different. They might want to go to the gym, they might want to go to an employment opportunity. It really is dependent on them. But I might go to Kate Starick.

MR WALL: So there is no stipulation that that \$5,000 grant needs to be used on disability service transition?

Ms Burch: There probably is, and if I may, I will go to Ms Starick about that.

Ms Starick: With the enhanced service offer, the \$5,000 to school leavers Ms Sheehan just talked about, the transition that people with disabilities and the ACT community will need to make for a new state under NDIS cannot be underestimated. People will potentially be going from not having as many opportunities to making choices, even about some of the most basic things in their lives, to actually having enormous choices about life goals, employment, recreational participation, things that potentially many people in the community may take for granted but things other people have not had the opportunity to have. So with this \$5,000, the stipulation is that you use this \$5,000 or up to \$5,000 to support reducing the impact that your disability has on participating in the aspects of life that we all take for granted. And

that really is the only stipulation.

To help people make that transition and for families to make that transition, we are also looking at getting some specially trained people to work with families and individuals so that they can refocus or re-imagine their lives, not just in purchasing perhaps more of what they have, which would be fine, but perhaps looking at something quite different to what they have traditionally or in the past been able to access.

So with the grants, the main aim is that what you purchase improves your quality of life, reduces the impact of your disability, helps you to participate economically, socially, recreationally and join the ACT community, I think, more fully.

MR WALL: Are there currently sufficient services in this sector to provide for the demand? Obviously you are anticipating an increase in demand. Where do we sit at the moment and what is the outlook?

Ms Burch: I think we are blessed with good community organisations and a good suite of services. But if you go to any forum on this matter there are service providers and consumers alike that would say that there is probably work to do in this area. And there is certainly work to do in the area for organisations to move from block funding, to get a business sense about what are their offerings, what are the costs to that and how do they start to be realistic about that so they can promote that offering so that people who are purchasing it are very clear about what they are getting. So I think there is an area for growth. I do not think you would talk to anybody with a disability, their family or a community provider that would not recognise that there is certainly some need for growth in this area.

MR HANSON: In terms of growth in the area, I want to go to the community sector pay case that came through last year.

Ms Burch: Yes.

MR HANSON: That was going to have an impact on the budget. I cannot remember, but it was quite a bit, wasn't it—\$23 million or something?

Ms Burch: Over the life of the transition, and I think, from memory, it was about a seven-year transition.

MR HANSON: Yes.

THE CHAIR: We are still taking supps on the NDIS, members.

MR HANSON: This is relevant to the NDIS.

MS BERRY: Was your question a supplementary question?

THE CHAIR: Yes.

MR HANSON: Yes, it is a supp.

MS BERRY: Not you.

MR WALL: I guess it was relating to the initial focus of the NDIS and then, from there, the services that are going to be available in transition.

MS BERRY: Okay. I thought he was asking about community organisations.

Ms Burch: Sorry, but if I can go back to Mr Wall—

MR HANSON: It relates to those service providers.

THE CHAIR: Yes.

Ms Burch: If I can go back—I think Ms Starick touched on it as well—people may think outside the square. Their community respite traditionally was purchased through a service, a disability service. They might think, “Actually, I don’t want that. I want to go to boot scoot dancing or to the gym or something else.” So it does indeed open the door to other opportunities as well.

THE CHAIR: I have got some supplementaries now, thanks.

MR HANSON: Can I ask one specifically on this particular issue?

THE CHAIR: We will come back to it. I have a supplementary around NDIS. You were talking before about the location of the agency in Canberra in 2014. Is that going to be a single location or will there be multiple locations?

Ms Sheehan: That is what we need to negotiate with the commonwealth. The idea is for a wide gateway in the same way that we were describing with the DISH. You can go to the DISH, you can get information about services online or you can make a phone call. We would want the gateway into the NDIS to be a wide gateway as well. So yes, there need to be some physical locations, but in addition there need to be other ways of getting information about the services.

Ms Burch: We have to work through what and how that is.

THE CHAIR: Coming back to the grants to individuals, you have talked about the process about how that will be assessed and adjudicated and said that it will be widely advertised. But is there going to be any support provided to individuals to do their grant applications?

Ms Sheehan: Yes, there will. Thank you, Dr Bourke; that is a very good question and something that we were very concerned about. We did not want to just do more block funding of services; we wanted to give people a choice. But we were also concerned: if we just do grants, does that mean that 1,000 people have to fill out a grant application form, and is that going to be too difficult? We are taking advice from the community, from the disability community, from the Aboriginal and Torres Strait Islander community and from the culturally and linguistically diverse community about the ways in which they would find it easier to access grants.

We are fortunate to be in a directorate with artsACT that runs a \$6 million a year grant program, and we will have online access to grant applications. In addition, people can take the opportunity to come in and meet with someone at Disability ACT. We will be putting on, I think, six or seven additional people to work with those with a disability to literally fill out the application form as they work with the person. It will not be an old-fashioned approach: "Please fill out this grant application form, and then we'll assess a paper-based form." It will be actually working with people to get information that will assist to make an assessment and then forwarding the grants in that way. We will make it as simple as we possibly can.

THE CHAIR: Will you be taking a proactive approach with this particular client base, given that many of those disabilities may be intellectual?

Ms Sheehan: Yes, we will. We will absolutely need to be taking a proactive approach. As I was saying earlier, given that we think that probably only half of the people who are actually eligible for a service are getting one at the moment, we will be actively going out into other areas where we think we will find people with a disability, including a serious mental illness, to make them aware of the existence of the grants now so that we can start to give them some additional services. From the broad experience that we have in the Community Services Directorate, where we see people with an intellectual disability or a serious mental illness in our other services, we can see that their lives would be greatly enhanced if they had a specialist disability or mental health service but they do not have it at the moment. We would see them in homelessness services. We would see them coming in and out of Housing and losing their tenancies because of their difficulty. So we will go and find people there and link them in with services.

The minister just passed me a note—and Ms Howson as well. Disability ACT already funds a number of advocacy services and support services to specifically assist people with a disability to advocate on their behalf. ADACAS would be an example of that, and People with Disability is another—groups such as that. We have already provided several hundred thousand dollars worth of funding to those organisations to assist them in gearing up for the NDIS to promote the new way of doing things to people with a disability so that they will be better able to operate in that new environment of control and choice.

THE CHAIR: Thank you. Back to you, Mr Hanson.

MR HANSON: Thanks. Mr Wall raised the issue about provision of services and who is going to provide them. Obviously it is going to mean an expansion in people providing those services over time. With the doubling of money, it may not be a doubling of services, but it is going to be an increase. I am just trying to work out what impact that will have on the community sector pay increase. I will go back to quoting you, minister—the wonders of Google—

Ms Burch: I am glad you read every word I say, Mr Hanson.

MR HANSON: Yes, well, this is expressed in a form I might struggle with but it says:

This is an investment of \$27 million over eight years which will go to support our community organisations and the workers ...

That would obviously have been done on modelling based on the size of the community sector then.

Ms Burch: Yes.

MR HANSON: Have you now said, “Okay, NDIS equals bigger community sector; therefore, that \$27 million will now be \$37 million, \$40 million”?

Ms Burch: Again, it goes back to an earlier answer to a question from Mr Wall. These offerings are far broader than just the block funded services through disability. Again, I would not imagine that, in the community sector, wage increase or wage scope will be captured if somebody wants to do dancing, boot scooting or going to the gym, which are all legitimate supports that they can purchase through the NDIS or through the enhanced service. There could be a growth—within the early modelling there was certainly growth factored in—but not every service will need to be—

MR HANSON: No, but I imagine that boot scooting will be a fairly small proportion and that most of it will be on disability services provided through the community sector. I do not know what that percentage is, but the question I am asking is: has that modelling been factored in, and is that a further impost on the budget or is that part of the funding allocated to NDIS?

Ms Howson: Mr Hanson, these are the things we are working through with the sector as we speak. We will be putting an enormous amount of effort into what we are calling the sector reform agenda. Your question, I think, is premised on an assumption of all things being equal, but what will change, I think, substantially will be the structure of the workforce. That pay increase also relates to organisations that are currently paying under a particular threshold. Again, these are things we have to work through in a modelling sense, but we might expect that pay rates will change as the workforce itself will adjust and the numbers of people in the workforce will adjust. It is a question that we all need to examine closely as we do further work on modelling how the sector might look into the future and what might change in terms of the demographics of the workforce and the possible adjustments around wages and salaries in that context.

MR HANSON: When we were at a forum that Ms Starick was at—the Deafness Resource Centre, talking about the NDIS and how it is going to roll out—one of the issues that they raised was that experience in other jurisdictions is that if you make the money available the price just goes up. For example, particularly with some niche services where there are a limited number of providers or there is a limited number of types of technology that are the solution, if those providers of either services or equipment know that there is now money available—say there is a \$10,000 grant available for piece of equipment X—all of a sudden, that piece of equipment miraculously becomes \$10,000. How do you envisage regulating the environment, monitoring it or just making sure there is not price gouging—so that boot scooting classes, for example, minister, do not go through the roof? I am very concerned about

that.

Ms Burch: There are a couple of things that will contain and constrain that. The other argument, though, is that if you are a smart purchaser—I do not go and buy a telly for \$10,000 if I can buy a telly for \$1,000. People become smart when they have got their own money from which to buy and it is a limited amount of money.

But also the national agency will be benchmarking services—and the price for services as well. Suppose you have somebody who is allocated \$30,000 and then through the broker—I am not sure what the term is. If they are assessed for a package of \$30,000, there will be a broker to help them support and source the programs and the services they want. That is another gatekeeper, because they are linked back to the national agency—please jump in if I am saying anything wrong—that has some benchmarks wrapped round this.

You are right, Mr Hanson: there is significant money being put into the disability sector. On the flipside of that, I have been approached by some—again, if you are out talking to providers—who would say that this provides an opportunity for the bigger national agencies to come in and actually undercut because of their ability to run a lower price service because of economies of scale. It is something that we need to be mindful of, but we have that national agency with some clear benchmarks, common assessment tools and an understanding about what is an expectation that would be purchased through whatever the package is. I am not quite sure if anyone else wants to add something.

Ms Sheehan: That is a perfect answer, minister.

Ms Burch: And I am not even sitting around the negotiations table.

MS BERRY: I have a supplementary regarding the NDIS as well. When the ACT was named as one of the launch sites for the NDIS, I attended one of the consultation meetings about that. There were lots of people there that were filled with hope; so it was really exciting. As you say, Ms Sheehan, about the announcement yesterday, people are actually going to see some movement in this and it is actually going to happen. But I wondered within the ACT what kinds of consultation you would be conducting and how interested people will find out about these consultations. You were talking before about finding these people and talking to them.

Ms Burch: I will go to the detail. One of my messages to Disability ACT is that people are hungry for information and we need to be out there through electronic media, paper-based media, word of mouth, town hall meetings. I do not care what it takes, but given this is such a fundamental shift in how we go about providing services to people with a disability, and they are hungry for information, any and all opportunities should be taken. I am quite happy to go to—

Ms Sheehan: The task force has developed—it has been approved by our expert reference group and by the minister, of course—a very extensive communication and engagement strategy with all of the major stakeholders for the national disability insurance scheme. This is clearly people with a disability, their families, and carers and providers, but also the general community. The ways in which we will engage

will be various. Meetings are good; face-to-face discussion is good. But it is not the only thing. So we have got extensive information on our website. We will be using social media. We will be visiting specialist disability and mental health groups. For example, Mr Hanson was talking about the meeting at the Shepherd Centre. That is a good example of how we will have a discussion with those sorts of specialist disability groups.

We have been meeting with the peaks, such as the Mental Health Coalition. We were talking earlier about ADACAS, which is the disability advocacy agency and so on. So communication will be absolutely essential. We will be very happy to provide the committee with a schedule of engagement forums that we have and also all of the contacts for the other ways in which information can be given and gained.

I should say, of course, that we are just as eager to receive information from people with a disability and their families and carers and providers. So we do provide those opportunities for online feedback but also face-to-face feedback.

Ms Howson: Ms Berry, I might also add that I am the co-chair of the NDIS expert panel with Ms Sue Salthouse. We have members that represent people with a disability and sector providers, carers and family members on that committee. They have been overseeing the development of this consultation strategy and are certainly holding us to account.

THE CHAIR: More supplementaries?

MR HANSON: On NDIS?

THE CHAIR: Actually, I will take a substantive question from Mr Wall.

MR WALL: I have a substantive question but it still sort of relates to the NDIS. I understand that there is an age restriction or an age limit of 65 which is being implemented as part of the NDIS. How many residents in the ACT are anticipated to be affected by that cut-off?

Ms Sheehan: I will go to the issue of the age. At the moment, as I said earlier, the commonwealth government has taken responsibility for provision of services to people over the age of 65. The most recent change there was with the home and community care program, which I think most people would be aware of. It provides very useful services such as meals on wheels, what we would have called home help in the old days. Most recently, that home and community care program has been split so that services for people over 65 are now directly provided from the commonwealth and for people under 65 still by the states and territories.

Because that home and community care program will become part of the national disability insurance scheme, what the commonwealth, states and territories have agreed is that if you enter into the national disability insurance scheme under the age of 65 but you turn 65 during the period, you can make your own choice about whether you would like to stay inside the national disability insurance scheme or whether you would prefer to make the move into the aged-care system. Different people will make choices because of services that are most appropriate for them. So it is appropriate

that people will have that choice.

However, from now, if you are already 65 then you are within the aged-care services provided by the commonwealth. There is that eligibility. That will not change under the NDIS. So it is essentially business as usual for people over 65. For people under 65, they will come into the NDIS but then they will have a choice about whether they stay within NDIS or whether they move into the aged-care system.

I am unable to say to the committee today how many people who go into the NDIS will turn 65 during that period. Of course, I am unable to say who would make the choice to stay within the scheme and who would make the choice to go into the aged-care system. But that is something that we will be obviously keeping a very close eye on throughout the three years of the launch.

MR WALL: As a supplementary to that, you are anticipating that there is going to be a larger number of people accessing a larger number of services under the NDIS. As they transition into that over-65 bracket, if they do choose to go into the aged-care services, are there sufficient resources there to address that future demand?

Ms Burch: That is through commonwealth.

Ms Sheehan: Yes, that is a matter for the commonwealth. With or without the NDIS, people over 65 would receive aged-care services through the Australian government, through the commonwealth government. The question of whether there are enough resources available is really a question I think for the commonwealth government.

THE CHAIR: Are there any more supplementaries? If not, I will ask a substantive question. Minister, I refer to page 22. Could you update me on the centre-based respite services delivered, I understand, from Kaleen and Charnwood and the feasibility study to determine their future?

Ms Burch: We manage four centre respite services—a child's, teenage and two adults. We certainly have done some work over the last 18 months or so to look at replacing them. Some of them are a number of years old. Some of them were not purpose built.

Ms Sheehan: Yes, only one of them.

Ms Burch: A number of them are not purpose built. Out of the four, I cannot recall which ones are purpose built. So we have done some feasibility, and certainly we have made a commitment to expand and rebuild those services. I make it very clear where my interest is in this. I would really like to see the children's respite service renewed. It is an older building. It needs some upgrades. I think it is beyond upgrades, personally. It is also about how we respond over time to have one on the north and one on the south. In the longer term planning, it is a work in progress. But respite services are a very critical, important part, in addition to community based. Parents like to send their kids to respite if they are going on holidays with their other family members as well. Do you want to talk to this, Ms Starick?

Ms Starick: The only thing I would add to that is that in addition to the benefits of

centre-based respite or out-of-home respite, some of the feedback that we got from the feasibility study was for other options that were more flexible for people and how to use centre-based respite more flexibly. When you and I perhaps want respite, you might, for example, get a babysitter and go out to dinner, or you might have somebody stay at a friend's house.

What did come back from the feasibility study was how better to use the centre-based respite more flexibly during the day as well as overnight and what are some of the development opportunities that can be used. As somebody is transitioning or making that life change from moving from their family home to a more independent living arrangement, what can the out-of-home respite setting offer to gain those living skills? I think that is all I would add to that comment.

THE CHAIR: What sort of utilisation is happening with these respite centres?

Ms Burch: I think the utilisation rate is fairly high. There are some vacant nights, from my understanding. That is usually short-term cancellation—changes in family circumstances. But you would appreciate that it is very hard to plug somebody into those nights to get a utility out of that night. I am not quite sure if anyone has any figures here.

Ms Starick: We are meeting the targets around the out-of-home respite nights that we fund. Where we have seen growth, again, is in that flexible respite option, whether that be respite provided in the home or the significant growth that has occurred in community access and community support, where people are having a respite effect, if you like, or the family or the carer is having a respite effect provided whilst the person with a disability is accessing employment opportunities, volunteering opportunities or activities that are actually bringing a benefit and are enjoyable to them as well.

Ms Whitten: The annual report at volume 2, page 130, has the details in terms of the centre-based respite and the in-home respite. It shows that we are fairly well on target at the moment.

THE CHAIR: How does the availability of respite in the ACT compare with state jurisdictions?

Ms Burch: As in the number of nights that could be available and the demand on it?

THE CHAIR: Per population, perhaps.

Ms Whitten: That might be something we need to take on notice.

Ms Burch: Yes, we are happy to take it on notice. I would have thought it is comparable, given that we have got a target. But that is only a mere assumption, chair. We will take it on notice and bring it back. But I think, as Ms Starick said, if you look at the growth in flexible respite, there has been over 100 per cent growth of that in the last decade. People are starting to recognise that there are more, and there should be more, opportunities rather than just centre-based respite as well.

THE CHAIR: Talking about accommodation, what sort of work has been done on innovative accommodation options for people with disabilities in the ACT?

Ms Burch: I think we are starting to move in the right direction with innovation in accommodation. It has been one thing for the officials to nod politely when accommodation is raised. I was very pleased to commence the intentional communities project. I think about 18 months ago we scratched the dirt down there. That will see a complex of about 25 townhouses with about five young folk with a disability move in there. Clearly, it is called an intentional community so that a good lot of the other tenants around them move in with the intention of being exemplar neighbours and support them through those normal social neighbourhood supports that are very good.

Also, I was really pleased to work with Glen Keys on Project Independence. That will see the government invest in land. We will support the construction of two properties. The third property, I understand, will be built through Glen Keys's philanthropic abilities. The benefit of that sort of project is that it does give choice about whether you rent or it gives you a choice of buying in. Once you start to buy in, the business model starts to be self-sustaining over time.

Mr Hambleton has made comment about an accommodation support coordinator within the DISH. We have also with Community Connections got a home share service. Like many of us when we leave home, we share. We all have shared flats. Sometimes we have fond memories of that; sometimes we do not. But home share services has a similar model. So it gets like-minded people to share. That is to come. There are probably others who would like to talk about it. Mr Hambleton may like to talk more.

Mr Hambleton: Yes, the other one would be the link model which CatholicCare have set up. They have just opened their second one. That is where individuals have their own place in the community but they have a coordinator to make sure they are connected or linked to their community. They are just about to start building their third one, the funding for which is coming from commonwealth, some from Disability ACT, some from Housing ACT and some from CatholicCare, so it is a shared process. The initial involvement of CatholicCare is quite intensive to connect people to the community, and then it gets lowered so that the resource is able to move from one model to another. Interestingly, their first one started off with nine properties and two people from that community have volunteered to join it because they realise the advantages of being part of that sort of connected community. There is also the home share model the minister referred to, where the person with a disability is the head tenant and the other person becomes their flatmate. That is a great concept as well.

Ms Burch: We have established within Disability an innovation accommodation unit to look at what are the accommodations beyond group homes, because we have been limited for some time into group homes. We know that young folk may have aspirations to buy in but cannot buy in to a full home but may want to share. That is the opportunity provided through Project Independence. As we move through the NDIS and just generally as the community grows, there will be other community groups and people coming forward with ideas and thoughts about other possible accommodation models as well. We have also made an election commitment to build

something similar to the Ross Walker Lodge building at Hackett that is run through St Margaret's, where there is fairly independent living—nice little bedsit units with shared communal facilities.

THE CHAIR: You have talked a couple of times, minister, about buying in with a couple of different projects there. Could you go into that in a little bit more detail for us, thanks?

Ms Burch: Project Independence is probably the one where I think it will start to be realised, and that model will produce three homes. The governance arrangements and the business model arrangements will allow someone to buy in to their bedsits, so to speak, or to buy in to their share. In a similar model to what we have done with our aged-care units, they will buy in at a value and then when they exit they will exit at the assessed value minus—I will let Ms Sheehan talk to the detail of that.

Ms Sheehan: Thank you, minister. With the older persons units we built under the nation building program, a portion of those, as the minister was describing, will be administered in very much the way aged-care units are in retirement villages. The model is called loan licence, and I think the committee would be familiar with that model.

What happens is that you do not purchase the property outright because it belongs to part of the group, but you buy a licence. As the value of the property increases over time, at the time you decide to sell, you get the increase in the value. But the integrity of the community is maintained because you sell it back to the community. So in the case of Project Independence, you would sell your licence back to Project Independence and then they ensure that a like-minded person with a disability can buy in to the program. It is the same thing in the case of the older persons units because a loan licence is aimed at a low income person who can buy in at that level.

It is a tried and true model, and it is marvellous to see it being extended to affordable housing options for people with a disability. In the new NDIS environment, people will be looking for affordable housing options, and it is a wonderful way of allowing families to bring forward capital they have for the long-term benefit and housing options of their family members with a disability.

Ms Burch: Because if you talk to folks—parents are who I mean by “folks”—they want to see their young person established in their own safe, secure accommodation free from the risk of being moved about against their desires and will. So if there is a capacity, as Maureen said, to use their own resources and capital to secure that for their young person, it is a very attractive proposition. It will not be suitable for everybody, and I think that is the purpose of the innovative unit for accommodation. It is recognising that there are all levels of disability—physical capacity, getting on with your neighbours—a whole mix, just like there is in any community. So it is important that we have enough of a product offering to see if we can accommodate as many as we can.

MR HANSON: I have a supplementary going back to respite care. Disability ACT provide respite services and then there are community-provided services. How do you decide whether you are accessing one or the other? Are some people eligible for

respite care in Hartley Lifecare, or whoever it might be, and some in Disability ACT? Where is that delineation? If I had a kid with a disability and wanted respite care and some is provided by the community sector and some by Disability ACT, what am I eligible for? How does that work?

Mr Hambleton: There is a certain amount of self-selection. There is a process of seeing whether or not you are eligible, and when people come through Disability ACT and they make an approach, an assessment is done by somebody from our individual response team. But also some families become connected to particular agencies—you mentioned Hartley, and Tandem House is another organisation that people will approach. And so it just depends. Some of it is around availability. Some people make connections because of staff they know or other cohorts of people that go to those particular places; they may be friends of the young people, for example, that go there and they will make particular arrangements that they know will work for multiple families.

MR HANSON: Is eligibility means tested?

Mr Hambleton: Eligibility is really determined on need, and that is a conversation. It is not black and white because some people have a greater need than others. There is always a conversation with the family about what is going to work for them. Then there is an allocation system done on the basis of the number of days available. At certain times there is really quite a high intensity of need. There may be a situation, for example, where the main carer becomes ill. We have had situations where the main carer may have developed an illness, therefore, there is a far greater need for respite. So there is a certain amount of fluidity in that. Access is usually assessed on an individual basis, but people access both.

MR HANSON: On the eligibility criteria, probably one of the key issues I hear about from people in the community is the need for respite care. It seems to be quite limited, and if you are looking for a private provider it is very expensive.

Mr Hambleton: It is an interesting one, because, as the minister referred to, while we have fairly full numbers in terms of our delivery, they are still not as full as you would think in the situation where there was an undersupply. I certainly know, for some of our community providers, they have times when they are quite quiet. Ms Starick mentioned before that there is a lot of looking for alternative solutions around respite. We have noticed that is a really growing thing. There was a recent report produced by the community living project with NATSEM where families with an adult child were not looking for centre-based respite options; they were looking for other options. There is a changing dynamic there. For some people it becomes quite an intense need—if they have a major crisis in their family they need to be able to address it and they need to have their family member in a respite situation. So that is probably where some sort of pressures occur in that situation.

MR HANSON: And for organisations like Tandem and Hartley, what is the funding model for those organisations? Do they get a bit of money from the ACT government, a bit of money from the federal government, a bit of money from charity?

Mr Hambleton: Yes, it comes through a range of sources. A certain amount of

funding comes through the HACC funding, but I am not fully conversant with how they get their funding through those models. But they get their funding from a number of sources.

THE CHAIR: A substantive question, Ms Berry.

MS BERRY: In 2012 some of the schools began trialling the after-school care program in some locations across the ACT for children with a disability. How has this program been received and what sort of feedback has been received from the users of the program?

Ms Burch: A report was presented to the Assembly, *Love has its limits—respite care services in the ACT*, but even before that report came through we had already started to look at after-hours and vacation care for children, particularly for younger people, so between the ages of 15 and 18. We established a number of services, and I think the service providers are in the annual report.

The response has been very positive, but I have to say that we are not at capacity in any one of those programs yet, whether it is after-school care or vacation care, for either the children or the teenagers as well. I am not quite sure why. We are doing all we can to promote it, and whilst the families that are using it appreciate it, we are nowhere near capacity as yet.

Mr Hambleton: I can add some detail there. We have got the two facilities for younger children—Cranleigh and Malkara—with 20 full-time places available. Currently we have 26 children enrolled, so people use it for certain days of the week et cetera. Then in our high school group, as the minister referred to, we have Belconnen Community Centre and Black Mountain School. At Black Mountain 16 people access 10 full-time places and at Belconnen only five young people are accessing at the moment, and it is a similar sort of number of community places. So we are working with that program; there are usually some sort of issues that we work around.

We have coordination of after-school care with community-based ones as well, such as Communities@Work, and a couple of other community agencies also have them. We pull together a coordination team to share learnings and knowledge so there is some sort of coherent response. But, as the minister said, at this stage, it is still underutilised. But there are potential things we are trying to look at, for example, with the Belconnen service; there are ways we can tweak it so we get a greater uptake of that service. There are a myriad of reasons as to why people do or do not use it.

In terms of vacation care, an interesting anecdotal story about Cranleigh is that it was so popular that the non-disabled children voted to go to that one because they thought it so fantastic and was more fun.

MS BERRY: I will have to find out about it.

THE CHAIR: Minister, you have some service agreements between Therapy ACT and public schools. Could you tell us about that, please?

Ms Burch: There are a number of connections between Disability ACT and Therapy ACT and the education directorate. One of the very strong programs that has been successful is the therapy assistance program. In addition to that there is the run-of-mill—I should not describe it as run of the mill—information exchange on some of these students. But I might go to Jacinta Evans, and she can talk more about that.

Ms Evans: Thanks, minister. Therapy ACT actually interfaces with the Education and Training Directorate very broadly. There are quite a range of ways in which the two agencies interact. Of course, the therapy assistance program has been more high profile and has had great results but, in general, the work that we do with education can be ranging from the work that we are doing in special schools right through to the professional development opportunities that we are providing to teachers. We provided about 19 collaborative workshops with teachers in the education directorate in the reporting period. So it is a very broad range in which we are interacting with education.

THE CHAIR: Minister, is this program also offered within non-government schools?

Ms Burch: The therapy assistance program is, I understand.

Ms Evans: Yes.

Ms Burch: In at least one of our primary schools.

Ms Evans: Yes.

Ms Burch: Non-government primary schools.

Ms Evans: We provided the program in the Mother Theresa Catholic Primary School in the reporting period. We are currently providing it at Holy Family in Gowrie, as well as five government schools and the two specialist schools.

THE CHAIR: What sort of feedback are you getting from teachers and parents about this program?

Ms Evans: It has been outstanding. It has really been very pleasing, the sorts of outcomes that we are having. In the pilot program, which was during the reporting period, we had 270 children who were able to access the program. And that is quite remarkable when you consider that that is only two full-time equivalent allied health professionals and four allied health assistants. So for 270 children to be able to access the program is really excellent.

The outcomes were that 80 per cent of those children either met or exceeded the goals that had been set for them. There was standardised testing done at the beginning of the pilot, and at the end we were able to say that at least 80 per cent had met or exceeded those targets. So it was actually a very good outcome. And I think for families in today's society, it is fantastic for families, for parents, to know that their child is getting a level of therapy input within the classroom, that the teachers are assisting and following up, that the parent can do some more but that they do not have to leave work, pick a child up, take them somewhere for an appointment. So that has actually

got an added benefit, I think, for families.

THE CHAIR: And still on Therapy ACT working in schools, what about the speech pathology services that you are providing in the Koori preschools? Could you tell us that about, please?

Ms Evans: Yes, certainly. We continue to provide speech pathology services and also occupational therapy services within the Koori preschools. That has been a really good interface also. And the main benefit, I think, in being in the Koori preschools is that those families who may not access our service for a range of reasons get to know the staff member that is popping in and out. They actually see that person as part of the preschool unit, and there may be a level of acceptance that might not otherwise be there if they were being sent off to a unit somewhere else to be assessed. Yes, speech pathology services are still being provided there and, as I said, occupational therapy services.

The benefit from that is that we are actually picking up not just the child that is in the preschool but the whole family unit. If mum is coming to pick up the four-year-old and the two-year-old is there, she might have a word with the speech pathologist or the speech pathologist might say, “Is your little two-year-old talking yet?” They can have that kind of a chat. And we might have an opportunity for some early intervention with that broader family group.

THE CHAIR: How important is that early intervention?

Ms Evans: It is absolutely vital, because the importance, particularly for our Aboriginal and Torres Strait Islander children, is that if we can get to them early, give them opportunities to have an assessment, get on top of any issues, particularly around the very high prevalence of middle ear infection in Aboriginal and Torres Strait Islander children, we might find that perhaps their hearing or their language is a little delayed. But there is the opportunity to actually provide that assessment early on and get on top of that. Best outcomes are achieved, obviously, the earlier we can provide some therapy and support.

Ms Howson: Different life course, potentially.

THE CHAIR: Thank you. Any supplementaries? Substantive question, Mr Hanson.

MR HANSON: Back to the hearing issue that we talked about before—and as I said, I was at the Deafness Resource Centre’s NDIS forum—there were a couple of issues raised about access to hearing aids. There were quite a few moving stories about just how difficult it is, particularly for people who do not have a lot of money, to prioritise getting a hearing aid. There were stories about, for example, young mothers who might have a hearing disability and who are putting their money into sending kids to school or a holiday for the kids or buying a car and, as a result, they are not accessing the technology. I am just wondering what support there is for people to purchase hearing aids, whether that is a federal issue, an ACT issue, what there is that is being done by this government about that, and are you aware of that as an issue?

Ms Burch: There are a couple of things. I might go to Jacinta on the K-PALS

broadly—hearing aids are one thing, but it is also aids and equipment in the more general sense too—if I may. Certainly, in the enhanced offer we can expect to have people put in requests for equipment then. The quality of life grants that we manage are also targeted for people to buy equipment. But that is through grant rounds. We do not provide, through disability funding, money for equipment other than through grant rounds. That is my understanding. But on the broader support in equipment particularly for children and young people, I might go to Ms Evans.

Ms Evans: Thanks, minister. The children and young people's equipment loan scheme does provide—

MR HANSON: I am particularly interested in hearing aids.

Ms Evans: Hearing aids, yes, I am getting to that. I understand. It does provide for equipment, but of course hearing aids do not lend themselves to being loaned in the same way as other pieces of equipment might. My understanding with hearing aids is that that would be a Health issue. I must say I do not know about the funding.

I can say that within Therapy ACT we see a very limited amount of hearing impaired children. It is only about half a per cent of the people that we see, and a lot of them are actually seen through organisations such as the Shepherd Centre where they have very specialised resourcing for them. In terms of hearing aids, I do not know about the costing and funding.

MR HANSON: It might be more of a Health issue?

Ms Evans: Yes.

Ms Howson: I believe it is Health.

Ms Evans: It is Health.

Ms Howson: I suspect the funding is at a commonwealth level, but we could take that on notice and get some—

MR HANSON: I am just curious. There are things for kids and so on, but hearing obviously is something that often affects people who are older as well, and hearing deteriorates. If you find yourself in that circumstance, that you are old and you do not have a lot of money, how does somebody who is in that circumstance access funding, either through the commonwealth or through the ACT government?

Ms Burch: We will take it on notice.

MR HANSON: That would be really useful, thanks, because then maybe we could provide some of that information back to people who are raising it as a concern.

Ms Burch: Yes, and if we can, though, just provide you with some information more broadly on other equipment.

MR HANSON: Sure.

Ms Burch: Ms Evans, please.

THE CHAIR: Ms Evans, you wanted to say something?

Ms Evans: Thank you, yes. With the children's equipment and loan scheme, they do provide specialised equipment to children up to the age of 16. It is very specialised equipment. It requires a prescription from an occupational therapist, a speech pathologist or a physiotherapist. There is a specialised team who do that work, which is quite labour intensive, but the benefit for a family in coming to the team is that it is all in one place and they can work through what is needed. For example, with a wheelchair, they can go through the process of having that prescribed and they can then trial a number of different chairs, how that might work for the young person and make a decision around that.

Basically the equipment is available for assessment purposes, for loans and for trialling. And then there is an agreed period of time in which the family is able to use that piece of equipment. In the longer run, what is hoped is that the family might then choose to purchase it through the grant funds that are available or the enhanced service offer in the future.

Ms Burch: So it is a very good and well-received service. As you would imagine, some of these pieces of equipment are very expensive. The ability to see how it works within your family, your family home and the comfort of the child, regardless of whether it is a static bit of equipment or a mobility assistant, are important.

MR HANSON: And that loan service has moved out to Kambah; is that right?

Ms Burch: No, this remains in Therapy ACT.

MR HANSON: At Therapy ACT.

Ms Burch: Yes, at Holder. And it is supported. When families go in, they are supported by a therapist and go through the different options there.

MR HANSON: Thank you.

THE CHAIR: Supps? Minister, what sort of specialised equipment are we talking about here, apart from wheelchairs?

Ms Burch: There is a range of specialised equipment. Some of it could just be a simple sitting-support device or a simple sitting-table device for a young child to be supported in a sitting arrangement, whether it is for activity. I am just thinking of drawing and bits and pieces. But, again, Ms Evans can go to the detail.

Ms Evans: It is very broad, according to what the child might need, from things like mattresses and pillows that are very specialised for people with particular kinds of disability, through to things like walking frames. In terms of speech and language, there are a number of pieces of equipment that might assist a child, whether it is a button that they press that allows them to have that very early communication through

to really very high tech interactive devices that children who are non-verbal can use. So it is a very broad spectrum of equipment.

We are constantly updating. We have been fortunate that we have been able to not only maintain the equipment but also add to the store. And I must say that families who have got value out of it have taken good care of equipment. They put equipment back in. A number of families have also donated pieces of equipment into the pool as their children have grown out of it and recognised that that might benefit other people. Obviously we have got to have a quality control mechanism around that, but it still means that for children there are a lot of things out there.

As the minister referred to, it might be a corner sitting device so that a parent can know their child is being safely supported in a very simple way, right through the whole spectrum—safety equipment-type things for children to be mobile, all sorts of things.

Ms Burch: And some of these pieces of equipment are designed and built by TADACT, which is a fabulous group of innovators that makes all sorts of equipment devices for people with a disability. One of the images I have from an event out at TADACT was the young fellow, a cerebral palsy kid, on the platform, the scooter platform. Forgive me, if I may, it was a simple device. It was a squarish platform that had wheels on it, with a brace to hold this young fellow up. By young, I mean a five or six-year-old. He is a young fellow with cerebral palsy and he has significant difficulties in walking and standing. But strap him into this thing and then give him a scoot around, it was like he was Superman, and the smile on his face was just extraordinary. A simple device built by a local, voluntary group provides such freedom for a young fellow. You could not buy it.

THE CHAIR: No more supps? Substantive question, Mr Wall.

MR WALL: Thank you. Minister, the employment strategy for the directorate has as one of its objectives doubling the number of people with a disability working within the sector. In 2009 I believe there were about 327 employees identifying as having a disability. Where is that number up to now?

Ms Burch: I will ask Ms Howson to respond to that.

Ms Howson: I am sorry; I will have to take the specific number on notice—unless anyone here can help me with that? No. I might say, though, that the number will be in volume 2.

MR WALL: I guess part of that as well would be the number that are full time and part time and a breakdown of the number of hours that some of the part time and casuals are working as well. That would be appreciated, please.

Ms Howson: We can do that. We do clearly have a commitment to increase the number of people with a disability that see us as an employer of choice and to lead by example across the ACT community. That is an area I have particularly asked Mr Hambleton to focus on as an executive sponsor, both within our organisation and, as I said, leading by example across the ACT government.

THE CHAIR: Supps?

MR HANSON: Yes. How is the ACT government actually looking to increase that number? Given that you do not know exactly what that number is, what are the programs that you have got specifically to increase that number of people with a disability working in the ACT government?

Ms Burch: I think Ms Whitten might have the number.

Ms Whitten: There is a number in the annual report of 31 people with a disability who are employed by the directorate.

MR HANSON: I am just looking at the broader ACT government. I assume that you set the strategy for the whole government?

Ms Whitten: There is a specific strategy for the ACT public service. That is led by the Chief Minister and Treasury Directorate; we can get that number from them. And that would be reported in the Commissioner for Public Administration's annual report, which I did not bring with me.

Ms Burch: It is something that we report on regularly, so we will get the number back to you. But I might ask Ms Howson to talk, as Director-General for Community Services Directorate, about some of the aspirations or programs that she would look to to enhance our support for people with a disability.

Ms Howson: First and foremost, it is just a reflection of what are our ACT public service values and about people feeling very comfortable about being able to talk to us about the support needs that they require in order to be able to fulfil the responsibilities of their position. The other thing is, of course, the way in which their colleagues support them, in both a cultural and very practical sense, to be able to fulfil the roles that they have.

Graham, I do not know if I can ask you to talk specifically about some of the ideas that you are thinking about progressing. We did do some very specific work on a disability employment strategy for CSD. I think that is about two years old now. It went from practical support like the types of equipment and computer-based technology that might support, for example, people with a visual impairment to be able to work correctly to adjustments to workstations and all those things that are available to people that come to work for us.

We will certainly be looking at our recruitment process to make sure that there is not any unintended discrimination extended towards people with a disability who may have the appropriate skills and abilities to be able to apply on an equal playing field for positions that we offer. Working with the community sector, we are interested in identifying people that have an interest in coming to work with the public service and how we might be able to facilitate that process. Is there anything you would like to add, Graham?

Mr Hambleton: The other thing is how we market what we do in terms of

universities and various places like Canberra Institute of Technology and people coming through those areas who may have the appropriate skills. And then, as Ms Howson said, it is looking at our interview process and making sure that we are not only non-discriminatory but really encouraging people to apply for various roles.

MR HANSON: If you are in a circumstance where, particularly in smaller areas, you want to employ someone who has a disability but there would be an acceptance, perhaps, that there is a lower productivity that might come out of employing someone with a disability, depending on what that disability is, are there any grants available so that, if you do employ that someone, you can maybe get 1.5 FTE or something like that to cover some of those gaps—specific grants?

Ms Howson: Again, I would have to take that question on notice unless some of my colleagues can help me.

MR HANSON: Sometimes there are some people who will be able to fit into an organisation: if they are given the support, they are fully productive and that is fantastic. But there will always be times when employing someone is going to be a difficult choice, because they may not be able to fill the whole role and you might need to have to get support for them and so on. That sometimes just comes down to a fiscal equation. I am just wondering if there is money there to support additional employment.

Ms Howson: My understanding is that the commonwealth have just reprofiled their disability employment strategy. And I believe that we have got some new disability employment providers that are establishing in the ACT at the moment, funded, again, through the commonwealth. Their specific role will be to work with employers to make adjustments to the job description and look at what is the impact in the workplace and, again, whether there is any support that can be provided, whether it is practical, technological or other support.

That is something that we are interested in exploiting. We are just waiting for those new providers to be established. We will soon go to talk to them about being very interested in being an employer of choice for people with a disability and starting to work with them more closely. They will have the expertise in assisting us to make that transition effective so that it is a successful experience for both ourselves as the employer and the employee.

Ms Burch: I would add two things. The first—and I think Natalie touched on it—is around the scope of work and the need to be realistic and to be a bit flexible about how you scope your work. If you need two persons—if you can get the job done by two—do not exclude that as a possibility, but scope it accordingly within your resource. The other thing does not apply to government agencies, but we made a commitment for a payroll tax deduction for those in industry in the community sector, in the non-government sector, for employing people with a disability. That is something that we have committed to putting into place to encourage businesses to employ people.

MR HANSON: So if you are a business and you are paying payroll tax, if you employ someone with a recognised disability—

Ms Burch: Without the election commitment in front of me, Mr Hanson—I could refer you to a wonderful website and you could find it—from memory, it was about a levy for a couple of years for those that employ a person with a disability. So there is a bit of a give back to business to encourage them to employ people with a disability.

MR HANSON: Then you triple their rates.

MR WALL: Is that policy implemented yet, minister?

Ms Burch: It is an election commitment, and we are working through all our election commitments now as we go through this year's budget cycle.

THE CHAIR: It is now 3.30, members. Before I adjourn, I would like to remind members that the committee has resolved that supplementary questions are to be lodged with the committee office within four business days of receipt of a proof transcript from this hearing. The committee asks that ministers respond within 10 working days of receipt of those questions. Answers to questions taken on notice are to be provided five days after the hearing at which they were taken, with day one being the first business day after the question was taken.

The committee's hearing for today is adjourned. The committee's next public hearing on annual reports is at 2 pm on 4 April, with the ministers for community services, ageing, housing and Aboriginal and Torres Strait Islander affairs.

Ms Burch: Thank you.

The committee adjourned at 3.31 pm.