

## **A draft Service Delivery Model for a proposed new carer support service system**

The ACT Disability, Aged and Carer Advocacy service provides independent advocacy to people with disability, frail older people and their carers in the ACT. Our vision is a world in which everyone may exercise their rights and responsibilities, lead lives of value and pursue their dreams. Our mission is to assert, promote and protect the rights and potential of people with disabilities, people who are older and people who are caregivers. ADACAS is pleased to provide a brief submission to this consultation.

As an independent advocacy service, we work with people who are often very socially isolated, new to their disability or caring role, and unable to speak up for themselves about matters that are important to their wellbeing. While our primary focus is the person with disability or the frail older person, we often work closely with carers in delivering advocacy outcomes for that person. In addition we provide advocacy on carer issues, where those issues intersect with the issues of the persons with disability or older person, or where the circumstances mean that the carer is actually the most vulnerable person in the situation at hand. We therefore have a broad experience which contributes to the comments that we make below on the proposed service delivery model.

ADACAS has reviewed the service delivery model as outlined in the discussion paper and makes the following comments:

- The proposed tiered approach to carer services enables efficiency through funding of different services at the national, regional or local levels. This model simplifies and streamlines funding arrangements and enables regional flexibility through the arrangements made by each regional agency. ADACAS broadly supports the tiered approach outlined in the paper.
- ADACAS notes with concern that there is no mention of advocacy and funding for advocacy within the document. This is a gap which needs to be addressed. ADACAS proposes a model which enables advocacy funding to flow through the regional hubs using subcontracting or brokerage arrangements to existing aged and disability advocacy organisations.
  - This ensures that the advocacy remains independent of service provision and conflicts of interest are not introduced;
  - that specialist professional advocates are available to provide advocacy to carers as required and
  - does not duplicate service delivery at the local level.
  - Where the person receiving care also requires independent advocacy this should be provided by a different advocate to ensure that both people receive advocacy according to their needs.

- While sub-contracting through block funding is typical, there is precedent for a brokerage model of advocacy being provided through IDEAS with NSW government advocacy funds, which could provide a model for development of a carers advocacy service as described above.
- Such a model is fully consistent with the proposed arrangements for other services funded by the regional hubs but delivered by local organisations.
- The discussion paper refers to three forms of respite supports for carers – short-term respite, emergency respite and planned respite. Of these it proposes that the carer service delivery will not support planned respite because this is already covered in other service systems.
  - ADACAS agrees that current aged care services enable access to planned respite through respite beds in residential aged care facilities for up to 63 days per year, and that the carer model therefore does not need to duplicate this support.
  - ADACAS has grave concerns however that planned respite is not adequately funded or supported by the National Disability Insurance Scheme. During Scheme development it was very clear that the NDIS would not fund respite as this is not a service which directly benefits the person with disability. ACT is now at full scheme rollout and the experience of our clients indicates that the NDIS is not funding respite at all for some participants and their families, and is funding insufficient respite for others. There is a large and growing gap in access to respite for family carers of people with disability which must be addressed by the Carer Service Delivery Model.
  - Insufficient access to reasonable planned respite for carers introduces significant risk for the person with disability and places potentially unmanageable strain on the family carers.
  - Without access to respite the informal care arrangements for many people with disability may breakdown leading to increased cost for the NDIS and poorer outcomes for people with disability and their families.
  - Additional costs and pressure are already accruing to the public health sector as people with disability and people with mental health issues are forced to access inpatient services when families need a break.
- The Service Delivery Model Overview (page 11) indicates some other services which will not be directly funded for carers – including delivery of education and training to carers. ADACAS is concerned about the removal of funding for delivery of training and recommends that this be included in the model.
  - Carers rarely have additional funds to spend on their own training and education needs and without funded places are far less likely to access these supports.
  - Investment in carer education will assist to sustain family carers in their roles.
- The Service Delivery Model does not specifically address the needs of Young Carers, aside from continuation of the bursary program. Again, supports for this group are not

being funded through the NDIS and the needs of young carers are therefore not adequately supported through that scheme. Young Carers face a range of issues including the need for counselling and peer support groups, additional support to maintain participation in education and social supports. Without specific inclusion in the service delivery model, the needs of this important group are unlikely to be met.

## **Recommendations**

ADACAS recommends that the Carer Service Delivery Model:

1. include funding for independent advocacy for carers
2. include access to planned respite for carers of people with disability
3. include access funded education and training for carers
4. include additional specific elements to address the needs of young carers

Thank you for the opportunity to contribute to this consultation. If you would like additional information please contact Fiona May at [manager@adacas.org.au](mailto:manager@adacas.org.au) or (02) 62425060