

PUBLIC ACCOUNTS AND ESTIMATES COMMITTEE

Inquiry into the 2023-24 Budget Estimates

Melbourne – Thursday 15 June 2023

MEMBERS

Sarah Connolly – Chair

Nicholas McGowan – Deputy Chair

Michael Galea

Paul Hamer

Mathew Hilakari

Lauren Kathage

Bev McArthur

Danny O’Brien

Ellen Sandell

WITNESSES

Ms Lizzie Blandthorn MLC, Minister for Disability, Ageing and Carers,

Ms Peta McCammon, Secretary,

Mr Argiri Alisandratos, Acting Associate Secretary, and

Ms Sherri Bruinhout, Executive Director, Homelessness and Housing Support, Homes Victoria, Department of Families, Fairness and Housing; and

Professor Euan Wallace, Secretary, and

Ms Louise McKinlay, Acting Deputy Secretary, Commissioning and System Improvement, Department of Health.

The CHAIR: I declare open this hearing of the Public Accounts and Estimates Committee.

I ask that mobile telephones pleased be turned to silent.

On behalf of the Parliament, the committee is conducting this Inquiry into the 2023–24 Budget Estimates. The committee's aim is to scrutinise public administration and finance to improve outcomes for the Victorian community.

I advise that all evidence taken by the committee is protected by parliamentary privilege. However, comments repeated outside this hearing may not be protected by this privilege.

As Chair I expect that committee members will be respectful towards witnesses, the Victorian community joining the hearing via the live stream and other committee members.

Witnesses will be provided with a proof version of the transcript to check. Verified transcripts, presentations and handouts will be placed on the committee's website.

I welcome the Minister for Disability, Ageing and Carers and officers from the Department of Families, Fairness and Housing. Minister, I am going to invite you to make an opening statement or presentation of no more than 5 minutes, after which time the committee will ask you questions. Thank you.

Lizzie BLANDTHORN: Thank you, Chair. I just note I am also joined by officers from the Department of Health for the ageing aspect of the portfolio.

Visual presentation.

Lizzie BLANDTHORN: Turning to the presentation, thank you very much for the opportunity to present on the disability, ageing and carers portfolio, including our government's investments made through the 2023–24 Victorian state budget.

Can I begin by acknowledging the traditional owners of the land on which we are meeting today and paying my respects to elders past and present.

I start with this slide, committee, to highlight that this budget – as the budget does overall – delivers on the commitments that the Victorian government made at the last election. The recent state budget invests almost \$7.6 million to deliver election commitments across the disability, ageing and carers portfolio. The government is strengthening local communities by investing in local and social infrastructure right across Victoria. This includes expanding access to nutritious food relief, supporting volunteering and enhancing local social infrastructure like neighbourhood houses and men's sheds.

The 2023–24 state budget has invested a further \$27.7 million to strengthen inclusion and safeguards for Victorians with disability. \$12.4 million will support the work of statutory bodies, including the Victorian Disability Worker Commission and the disability services commissioner, to ensure high-quality and safe services. There is \$8.3 million to break down systemic barriers and assist people to navigate and access

healthcare services through the continuation of the disability liaison officers program over three years and a funding boost to advocacy services of \$1.8 million in 2023–24. Seven million dollars will improve forensic disability services and invest in early intervention initiatives aimed at slowing growth in the prisoner population, develop an Aboriginal self-determination strategy and improve data analytics to support better service integration. Victoria also continues to advocate for and contribute to NDIS reform through the Disability Reform Ministerial Council.

To advance inclusion through vital facilities, services and education, the Victorian government has invested over \$13 million since 2015. This funding has contributed to 34 of the 114 Changing Places currently operational and is contributing to a further 36 places that are in design or construction. I have recently announced an additional 13 Changing Places resulting from the 2023 funding round. As part of this investment there will also be a \$340,000 contribution from the Commonwealth. This slide shows the current spread of government-funded facilities across Victoria, and the green dots indicate those identified from our 2023 funding round that I have just announced. The third Change Your Reactions campaign is launching soon, created in partnership with Amaze to raise awareness and promote the positive contributions of people with autism. Finally, as the largest provider of specialist disability accommodation in Victoria, the government has delivered \$30 million worth of building works to improve more than 450 homes across the state, benefiting around 1800 residents.

This budget continues government's investment in critical supports for older Victorians, carers and public sector residential aged care with \$42.2 million to better support older Victorians in aged care settings. This includes public sector residential aged care services to continue to provide high-quality care and maintain Victoria's nurse-to-resident ratios in high-care services. Funding also maintains an uplift to the residential inreach program. Thirty-eight million dollars will provide 100,000 hours of respite support for over 5000 unpaid carers through the additional Support for Carers program. This program builds on the supports provided to carers through the recurrently funded Support for Carers program. \$3.5 million will go towards continuing the statewide elder abuse helpline through Seniors Rights Victoria. I note that today is the awareness day for elder abuse. The government has also invested \$2.5 million in elder abuse prevention networks that provide community-based primary prevention and awareness.

We remain committed to celebrating and supporting older Victorians, carers and our communities. This includes supporting them through the seniors card, Carer Card and Companion Card programs and continuing to run the seniors festival, which engages Victorian seniors right across the state and online. The seniors card, Carer Card and Companion Card make it more affordable for more than 1.3 million Victorians to get out and about. The 2022 seniors festival supported 1883 free or low-cost events for more than 101,000 people across regional and metropolitan Victoria, and my thanks for the support of all 79 local councils, community and cultural organisations that helped provide these wonderful activities. Planning is now well underway for the 2023 seniors festival in October.

The CHAIR: Thank you, Minister. The first round of questions is going to go to Mr O'Brien.

Danny O'BRIEN: Thank you, Chair. Thank you, Minister. Minister, the sector has been told, I understand, that the state-funded integrated model of care for responding to suspected elder abuse will cease, or no funding will be provided beyond 19 August. What are you replacing it with, or will these clients now be without support?

Lizzie BLANDTHORN: Thanks, Mr O'Brien, As I noted in my presentation, today is the awareness day for addressing elder abuse, so I am very pleased to talk to what we are doing in relation to combating elder abuse. The 2023–24 state budget provides \$6 million over four years –

Danny O'BRIEN: Minister, with respect, you have had the opportunity to tell us what you are doing; you now actually are required to answer my questions. I am asking about the end of funding for the integrated model of care for responding to suspected elder abuse.

Lizzie BLANDTHORN: The point I was going to go to, Mr O'Brien, is that the \$6 million over four years is for the four years, which is funding certainty for the first time. I take your point, but what is important here is that there is certainty in the funding in relation to being able to continue the work that we are doing to combat elder abuse.

Danny O'BRIEN: Is that for the agencies providing that through the integrated model of care?

Lizzie BLANDTHORN: I am sorry, could you repeat that?

Danny O'BRIEN: Is that for the agencies that have been providing that through the integrated model of care? One service provider alone has seen over 1200 clients over the funded period since the pandemic, and the demand has increased: the waiting list is currently between eight and 12 weeks for people who are complaining about elder abuse.

Lizzie BLANDTHORN: There was the initial four-year commitment, which was supplemented by the \$1.86 million in 2021, the \$1 million in 2021–22, the \$2.85 million in 2022–23, and this investment is in addition to the existing operating budget for elder abuse and initiatives that may have been funded through other portfolios as well – it is not to say that the work that we are doing in relation to elder abuse is only within the portfolio responsibilities that I hold. One good example of that is the Victoria Police education to its officers on elder abuse that has delivered and evaluated the financial elder abuse trial, so there is other work happening across whole of government. It is important to note that we do have certainty for the first time and that that certainty will ensure that the important work that the government is committed to in addressing all forms of family violence, and elder abuse is a serious form of family violence – I note you had the minister for family violence this morning, but –

Danny O'BRIEN: I understand you have given us some of the alternatives, but can you advise whether any of the people working for these agencies that are providing the services now through the funding for the IMOC will lose their jobs?

Lizzie BLANDTHORN: What the Victorian government is doing is raising awareness of elder abuse. We are working with the Ethnic Communities Council of Victoria, we are providing an elder abuse family counselling and mediation service interfacing with Women's Health West and the Orange Door networks in inner Gippsland – that may or may not come into your area, Mr O'Brien – Bayside Peninsula, north-eastern Melbourne and Barwon –

Danny O'BRIEN: Can I just confirm then that the integrated model is no longer being funded beyond August?

Lizzie BLANDTHORN: As I have said, Mr O'Brien, we have \$6 million over four years. It is the first time that we have had funding certainty, and the –

Danny O'BRIEN: This question is specifically about the integrated model of care.

Lizzie BLANDTHORN: I am telling you that the \$6 million over the four years is \$3.5 million over four years to continue the funding that goes to Seniors Rights Victoria, a state-based service providing information, support and referrals to protect the rights of older people, and \$2.5 million over four years to deliver local elder abuse prevention networks to raise awareness of and prevent elder abuse. There is as I just outlined earlier the additional work that is being done with the Ethnic Communities Council of Victoria, Women's Health West, Orange Door networks in inner Gippsland, Bayside Peninsula, north-eastern Melbourne and Barwon, and for the first time there is certainty in that funding. It does also build on the \$14.3 million which was invested between 2019–20 and 2022–23.

Danny O'BRIEN: Minister, as I have mentioned, one of the agencies providing these services has seen a 15 per cent increase in the number of physical assaults, non-fatal strangulation and threats to kill towards victims, as an example of the sort of demand for the service. Are you guaranteeing that those services will be able to continue despite the fact that the integrated model of care funding has been cut?

Lizzie BLANDTHORN: Well, I think the other important point here, Mr O'Brien, is the integrated model of care trial and the targeted bushfire recovery project were both quite impactful, but it is time to better integrate our service delivery to broaden it across the community and family violence service capability. Counselling and mediation services, including financial counselling, will remain available in the areas no longer serviced by those initiatives, as well as access to training and resourcing. Professionals working with older people can continue to access secondary consultation from Seniors Rights Victoria or Better Place Australia, as I outlined

in relation to the earlier funding. Importantly the four-year funding provides that funding certainty that just has not been there for this important work before.

Danny O'BRIEN: Okay. Minister, can I move on to the state disability plan that you referenced in your intro, which says on page 30 that a particular focus in the first two years will be housing, among other things. Given the housing waiting list has now gone beyond 60,000, can you advise how many of those on the housing waiting list have a disability and whether numbers have increased or decreased?

Lizzie BLANDTHORN: I might pass to the Secretary for that question, Mr O'Brien.

Danny O'BRIEN: Sure.

Peta McCAMMON: I do not have that information to hand. I would have to check in with Homes Victoria whether we keep that data in terms of people with disability on the waiting list.

Danny O'BRIEN: The data is available, though?

Peta McCAMMON: I am not sure. I will have to come back to you on that.

Danny O'BRIEN: Given the housing minister indicated that 5 per cent of the Big Housing Build would be for disability, presumably someone has it. I think I have asked this question actually before, Secretary.

Peta McCAMMON: If we do have it, I definitely do not have it here with me today. I am more than happy to take that on notice.

Danny O'BRIEN: Okay. Given the target of trying to address housing for people with a disability, how are you going to measure your outcomes? How are you going to measure the performance as to whether you are actually increasing housing opportunities? You might think about it and come back to me.

Lizzie BLANDTHORN: We will endeavour to provide you with any relevant information we can, Mr O'Brien.

The CHAIR: Thank you, Mr O'Brien. We are going to go to Mr Galea.

Michael GALEA: Thank you, Chair. Good afternoon again, Minister. Good afternoon, officials. Minister, budget paper 3, page 40, table 1.11, refers to community participation and support funding. Could you please outline what these initiatives entail.

Lizzie BLANDTHORN: Thanks, Mr Galea. We definitely can do that. As, I am sure, previous ministers have advised this committee, this budget is about doing what matters and delivering on the commitments that the Victorian government made in the previous election. In the disability, ageing and carers portfolio these commitments were focused on delivering for local communities right across our state. As I detailed in my presentation and as the map of the state demonstrated, the breadth is from one end to the other. This was through commitments to 60 local organisations, totalling almost \$7.6 million in funding, and these projects were backed by Victorians right across our state, with local communities supporting the government's plan to support local community organisations. These community service organisations facilitate community connections, they deliver essential supports and they link Victorians experiencing vulnerability to what are the critical services in their community. The investment will strengthen the support available, ensuring community-based organisations are able to continue providing assistance and services to those who need them most. As I am sure many before me have said over the past two weeks, this is a government that is committed to doing what matters and ensuring that local organisations have the capacity to continue to be well equipped to support their communities.

The initiatives that we are funding can be grouped into the following categories: expanded food relief through Foodshare, enhanced social infrastructure in Beaufort and Murchison, improved volunteering partnerships and strengthened community sector capacity to meet critical needs and build community participation. This funding supports a range of diverse communities, including older people, single parents, regional households, culturally and linguistically diverse communities, carers and people with disability. The investment both addresses the short-term service needs resulting from recent emergencies, such as cost-of-living pressures, and supports longer term capacity building to increase community resilience as well, and it builds on the significant

investments in community support already delivered by the Victorian government, ensuring that local communities have accessible wellbeing and support services which are close to home.

Michael GALEA: Thank you, Minister. Could you provide some details as to how this initiative will help people across the state?

Lizzie BLANDTHORN: Yes, sure. As I said, the focus is in areas right across Victoria. Just to list a few, there are many of them that are in the electorates that are represented here at the table today.

Danny O'BRIEN: Please give me a mention.

Lizzie BLANDTHORN: I can give you a mention, Mr O'Brien, don't you worry about that. In Mr O'Brien's electorate of Gippsland South we are investing \$100,000 to support the Rosedale Neighbourhood House and \$50,000 to support the programs at Leongatha Community House.

In Mrs McArthur's electorate of Western Victoria we are investing \$800,000 to develop a master plan for the conversion of the old Beaufort Primary School and start early works; \$100,000 to the Centre for Participation in Horsham to support volunteers and local community work; \$75,000 to support the Ballarat Foundation; \$100,000 to support Volunteering Geelong; \$100,000 to Creswick Neighbourhood Centre, who provide a broad range of programs for locals in Creswick; \$100,000 to Maryborough Community House to ensure they are well equipped to continue helping local families and members of the community; \$80,000 to support Ballarat Neighbourhood Centre; \$60,000 to Anglesea Community House to continue to create a more connected, inclusive and caring community; \$50,000 to support Springdale Neighbourhood Centre; \$50,000 to Wedderburn Community House; \$50,000 to Gellibrand Community House; and \$100,000 to the Bluebird Foundation in Geelong.

Given Mr Galea has asked the question, it would probably be unfair not to go to some of Mr Galea's, if I can find them here in my notes. Ms Sandell's are \$40,000 to Kensington Neighbourhood House and \$40,000 to the centre connecting community in the north-west. I might perhaps leave it there. I cannot actually find Mr Galea's in front of me, but I did read them last night.

Michael GALEA: I believe there was \$6,000 towards a steam engine group in Wantirna South.

Lizzie BLANDTHORN: Yes, that was it, and I did make a note that you have been a particular advocate for that.

Michael GALEA: They are very, very excited to receive the funding.

Lizzie BLANDTHORN: Sorry, Mr Galea. I have now found them here in front of me: the Keysborough Learning Centre, with an \$80,000 grant; \$50,000 to ensure the Hampton Park Uniting Church continues to be a local hub for the community; \$200,000 to support Frankston Brekky Club; and a \$100,000 grant for Bk 2 Basics in Narre Warren North. I might leave it there and give you an opportunity for another question.

Michael GALEA: The Bk 2 Basics group in Narre Warren do amazing work too. It is quite a long, exhaustive list, which is fantastic to see – so many good groups being supported with this funding.

Bev McARTHUR: So many efforts at pork-barrelling.

Lizzie BLANDTHORN: Mrs McArthur, I think you had more than anyone.

Michael GALEA: If I can also ask about food relief, which I believe is part of this as well, referencing budget paper 3, page 43, how does this part of the initiative work?

Lizzie BLANDTHORN: Yes, thank you. Over the next two years the government is investing almost \$7.6 million to deliver on our election commitments, as I said, and funding is being targeted to local communities. It also includes the \$2.2 million for FareShare to expand the provision of nutritious meals to people across Victoria who need it most and \$5.3 million in grants to 60 community-based organisations, including neighbourhood houses, men's sheds and community organisations, so they can continue to play an important role in supporting their communities, including through the provision of food relief. \$1.53 million of this investment is being provided to 16 community organisations to provide food and other essential items and

services to Victorians experiencing hardship and disadvantage: the Frankston Brekky Club, Western Emergency Relief Network, Reservoir Neighbourhood House, Knox Infolink, Diamond Valley Community Support, Bk 2 Basics Melbourne, the Bluebird Foundation, St Kilda Mums, Big Group Hug, Cultivating Community in Richmond, Port Phillip Community Group, Hampton Park Uniting Church, Foothills Community Care, Southern Peninsula Community Support, the Philanthropic Collective and Banyule Support and Information Centre. This investment will help create communities across the state that are better equipped to withstand, adapt to and recover from adversities, such as pandemics, natural disasters and emergencies, as well as increased cost-of-living pressures. And as I have just noted, we have invested \$2.2 million to expand the food relief support through FareShare.

Michael GALEA: Fantastic. Thank you, Minister.

The CHAIR: Thank you, Minister. For the next 7 minutes we are going back to Mr O'Brien.

Danny O'BRIEN: Thank you. Minister, you just took on notice at the end there how you will measure housing disability outcomes. Can I add to that employment levels and education, which are also parts of the disability plan. Could you add those two to the question taken on notice?

Lizzie BLANDTHORN: To the extent that we can provide the data, as opposed to the Minister for Education –

Danny O'BRIEN: No, this is particularly about how you are going to measure the outcomes of the disability plan.

Lizzie BLANDTHORN: The disability plan is a whole-of-government plan, so yes, we can provide information in terms of how it will be reflected within the plan. But it may be that the data itself is data that comes from education.

Danny O'BRIEN: As I mentioned, the former housing minister indicated that at least 5 per cent of the new social housing will meet the needs of Victorians with a disability. Given that, are you able to advise what the net gain in disability-suitable housing will be once the big build is complete?

Peta McCAMMON: Sorry, I am just recollecting what the minister actually said at the hearing, in that we had an aggregate number of net gains. So let me see what we can provide in terms of what that means for disability accessible housing.

Danny O'BRIEN: The recent departmental annual reports have indicated that there has only been a net increase of 74 new social housing units, and I am wondering whether that will mean that on a 5 per cent basis we are only likely to see four new disability-suitable houses coming?

Peta McCAMMON: I am happy to take on notice what data we can get. I cannot do the maths in my head on that.

Danny O'BRIEN: That would be good if you could take it on notice. Really what we are after is what the net figure of new houses will be that will be suitable for Victorians with a disability.

Lizzie BLANDTHORN: Sorry, Mr O'Brien, can I just clarify too: these are matters for the Minister for Housing that could have been asked of the Minister for Housing. We are happy to work with him to provide what information we can that might assist your inquiry. We are not trying to be difficult, but they are questions that fit with the Minister for Housing. Disability is obviously a whole-of-government responsibility.

Danny O'BRIEN: But as you will recall, Minister, and as the Chair knows, we have had this from the small businesses minister, from the Aboriginal affairs minister – who was the other one; there was another one – where it was, 'It's whole of government, so I can't answer any of the questions.' It is somewhat frustrating that, as the minister for disability with a state disability plan that says housing is a priority for the first two years, you cannot actually answer questions on whether we going to deliver enough housing for people with disability.

Lizzie BLANDTHORN: Well, I can, Mr O'Brien, answer questions in relation to housing, for which I am responsible, insofar as they relate to my portfolio – so supported disability accommodation, the interactions with the NDIS and supported residential services. But there are obviously in portfolios like disability and

women and Indigenous affairs many overlaps with other portfolios as well. As I said, we are not trying to be difficult, and we can be helpful, but we have come prepared to answer the questions within our own portfolio.

Danny O'BRIEN: Okay. You signed the state disability plan, is that right, Minister? It is your plan –

Lizzie BLANDTHORN: Yes.

Danny O'BRIEN: even though it is just whole of government. Are you confident as disability minister then that there will be the necessary increase in housing for disability-affected Victorians? Sorry, I am putting that in a very clumsy way, but you know what I mean.

Lizzie BLANDTHORN: Again, Mr O'Brien, I am here to talk to the budget that we have before us. That is the focus of this estimates, and that is what I am prepared for in front of me. I am more than happy to take your questions offline and –

Danny O'BRIEN: But hang on, you literally had the state disability plan highlighted in your presentation. That is what I am asking about. Is that your portfolio or not?

Lizzie BLANDTHORN: Mr O'Brien, the state disability plan is a whole-of-government responsibility that ties together responsibilities within my portfolio but also portfolios of other ministers. Part of the statewide disability plan is that as a whole-of-government approach we all work together to deliver the best outcomes we can for people with disability. I am happy to take your queries offline. I am not saying that we cannot assist you in providing answers to your inquiries, but we are not here prepared to answer questions from another portfolio.

Danny O'BRIEN: Well, just to be clear, this actually was not a data question. It was for you as disability minister: are you confident that you have got the mechanisms in place to meet your objectives in the state disability plan?

Mathew HILAKARI: Chair, we have strayed, again, into another portfolio area, which Mr O'Brien himself –

Danny O'BRIEN: I have just re-asked the question specifically about this portfolio.

Mathew HILAKARI: You have asked a number of questions of ministers who do not cover those areas.

The CHAIR: Mr O'Brien, you have had ample opportunity to ask the Minister for Housing –

Danny O'BRIEN: Ample opportunity, Minister? Do you really want to go there? Ample opportunity – what did we have, 7 minutes? Three lots of 7 minutes.

The CHAIR: and the minister before us has told you that she is not trying to be difficult. She is here to answer questions that are relevant to her portfolio.

Danny O'BRIEN: I just asked her a specific question as disability minister.

The CHAIR: Can I suggest that you ask questions relevant to her portfolio, please.

Danny O'BRIEN: Minister, page 174 is the 'Output summary by departmental objectives'. The 'Seniors Programs and Participation' – is that your portfolio, Minister?

Lizzie BLANDTHORN: Yes, Mr O'Brien.

Danny O'BRIEN: Right, thank you. It shows a \$10 million cut, which is a 10 per cent cut to the budget from last year. What programs are being affected by this cut to the budget? And for the record, everybody who is not paying attention, it literally says that in there in the brackets – 10.1 per cent reduction – so it is in the budget papers in this portfolio.

The CHAIR: Thank you, Mr O'Brien. Keep the sarcasm to a minimum, thank you.

Danny O'BRIEN: I am just pre-empting in case anyone is not sure what portfolio we are talking about.

The CHAIR: You are erring on the side of being disrespectful. Thank you.

Lizzie BLANDTHORN: Thank you very much, Mr O'Brien. We are investing in older Victorians and do value older Victorians. There are a number of programs, and I also spoke to them in my presentation in relation to what we are doing to support senior Victorians. The Victorian government is funding the seniors card program, the seniors festival and the seniors awards, and these initiatives value, support and showcase indeed older Victorians and their achievements in the community. There is the seniors card program. To support this, \$400,000 is allocated to the seniors –

Danny O'BRIEN: Sorry, Minister, this is telling us what you are doing. The question was: with the \$10 million cut, what is it that you are not doing this year that you were doing last year?

Lizzie BLANDTHORN: Well, I am telling you what we are doing, Mr O'Brien, and we are continuing –

Danny O'BRIEN: No, that again is not answering the question I asked, Minister. The question is: what has either concluded or has been cut specifically and so will not be provided going forward?

Lizzie BLANDTHORN: Mr O'Brien, we are doing a number of things to support senior Victorians.

The CHAIR: Apologies, Minister, I am going to cut you off there. We are going to go to Ms Kathage.

Lauren KATHAGE: Thank you, Chair, Minister, officials. I am also interested in the Victorian state disability plan, and page 40 of BP3 sets out the initiative there. I am just interested in what is funded under this state disability plan.

Lizzie BLANDTHORN: The state disability plan is, as we have just explored with Mr O'Brien, a key document to progress the whole-of-government –

Danny O'BRIEN: Oh, now we can answer questions about it.

The CHAIR: Mr O'Brien.

Lizzie BLANDTHORN: Mr O'Brien, I was more than happy to answer questions about it. I am very pleased to answer Ms Kathage's question about it as well. The state disability –

Bev McARTHUR: The answer is written down.

The CHAIR: Excuse me.

Lauren KATHAGE: This is my time to ask the questions, and I am listening to the minister's response. I also listened carefully to the Minister for Housing, who explained previously that the 74 figure was a complete lie. I will not use something which I have been told by a minister previously is incorrect, and I am going to listen very carefully to the minister now about the Victorian state disability plan.

Lizzie BLANDTHORN: Thank you, Ms Kathage. As I said, it is the key document to progress a whole-of-government disability inclusion agenda. The plan was launched last year and is designed to make Victoria more inclusive and accessible. There are around 1.1 million Victorians with disability, and we know that around 150,000 of these Victorians are currently participants in the NDIS. Through the state disability plan it remains our responsibility and commitment to provide all Victorians with disability accessible and inclusive mainstream services and infrastructure, irrespective of whether they have an NDIS plan.

As a part of this commitment we are continuing our investment in the state disability plan. This includes an investment of \$3.9 million in 2023–24 and \$8.3 million over three years, which will deliver on key health and advocacy commitments in the plan and progress the Victorian government's disability inclusion agenda. This investment comprises \$2.1 million in 2023–24 and \$6.5 million over three years to continue the disability liaison officer program in health services to improve access to essential health care for people with disability. \$1.8 million in 2023–24 continues a funding boost for the Victorian disability advocacy program to meet ongoing demand. This investment moves us closer to realising the vision of an inclusive Victoria for an inclusive and fair state. It supports us meeting our national and international obligations to uphold human rights.

These investments implement government commitments. The two investments continue our record. The disability liaison officer program will support delivery of several health commitments in the plan and action against the systemic reforms in health services, including those related to co-design, building disability-competent and inclusive workforces and embedding more effective disability data collection. Our investment in the Victorian disability advocacy program delivers on a commitment in the plan to support a thriving disability advocacy sector led by and for people with disability, which is foundational to the long-term vision for equity, access and participation as outlined in *Inclusive Victoria*. The investment in this budget builds upon our funding of \$15.1 million in the last budget to implement the state disability plan.

Lauren KATHAGE: Thank you, Minister. You just spoke about disability liaison officers. Are you able to provide some more detail on what specific benefits they will provide to people with disability?

Lizzie BLANDTHORN: Yes, sure. Thank you for that question. The budget invests, as I said, \$2.1 million in 2023–24 and \$6.5 million over three years to continue the disability liaison officers program in health services. The DLO program was established in December 2020 to improve the access to health care for people with disability during the COVID-19 pandemic, including access to COVID-19 vaccination, testing and support. It is important to note that since its establishment the program has responded to more than 31,780 referrals. Referrals come from a range of places, including self-referrals from people with disability as well as from their families, carers, support workers and GPs as well as other health providers. Over time the program has increasingly supported people with disability to access other critical healthcare services as well. Of the more than 8400 people assisted to date in 2022–23, more than 70 per cent saw assistance with other non-COVID health needs, such as support to attend an outpatient appointment or with an inpatient admission, for example.

People with disability supported through the disability liaison officer program have reported experiencing a range of barriers accessing health care previously, including barriers related to booking services, which was 29 per cent; communication needs, 22 per cent; psychosocial support, 12 per cent; and mobility and physical support, 9 per cent. The disability liaison officers provide a direct support to people with disability, ensuring they are accessing the health care that they need. This could be reasonable adjustments, which may include providing a low-sensory space or variation to usual triaging processes, for example, or communication assistance, which could include the provision of an Auslan interpreter, communication tools or plain-language health information. Psychosocial support is another and could include prebriefing ward staff on a patient's phobias or helpful communication techniques – again the low-sensory space can be a part of that as well – intervening with supportive and de-escalating communication strategies, which would help with things like minimising anxieties, and prepping ward staff to better manage individual needs. So there is a range of things that fit within reasonable adjustments, communication assistance and psychosocial support. They are also based in health services across metropolitan and regional Victoria, ensuring access for all Victorians, and our investment in this budget builds on the \$4.1 million provided in 2022–23.

We know the program is working. We know it is providing valuable assistance to Victorians. It is a flagship initiative in response to COVID-19 for people with disability, and it has gone on to help many more. This action means that Victoria's vaccination rates for NDIS participants have been amongst the highest in Australia, which is something that I have been proud to report when this item has come up with DRMC ministers, for example. Disability liaison officers are also driving longer term health services and system improvements projects, such as co-designing a disability identifier that could be integrated into medical records and also trialling the implementation of a health passport so that people with disability could use that to communicate their needs with a health service. The program also supports the delivery of action plans.

The CHAIR: Thank you, Minister. Mr O'Brien.

Danny O'BRIEN: Thank you, Chair. Minister, can I go back to the cuts issues. On budget paper 3, page 185 –

Lizzie BLANDTHORN: Sorry, which page? 185?

Danny O'BRIEN: 185, the 'Total output cost'. The footnote there says:

The lower ... target primarily reflects completion of Government policy – initiatives.

But if you go to the previous page, under ‘Number of hours of respite and support services’, which is also forecast to be down, it says:

The lower ... target reflects available funding.

I am trying to help you with the answer to my original question. Is that one of the services that will be cut due to the \$10 million budget cut?

Lizzie BLANDTHORN: The respite funding was in reference to carers respite, and it did at the time reflect the available funding in what is obviously a difficult fiscal environment on a number of fronts. We have done significant work, and we are confident that the respite will still be able to be delivered at the same level as the last year.

Danny O’BRIEN: Okay. Page 184 again shows a reduction of 72 pension-level beds available in assisted supported residential services, and the explanation is that:

The lower ... target reflects the projected reduction in bed numbers in ... Supported Residential Services.

Thank you for that. When the need is at its greatest for these sorts of beds, why are we seeing a reduction?

Lizzie BLANDTHORN: Supported residential services, are you asking about, specifically?

Danny O’BRIEN: So the last performance measure on page 184.

Lizzie BLANDTHORN: Supported residential services are regulated under the supported residential services and associated regulations, and the human services regulator monitors compliance, but importantly these are private facilities making independent decisions. The SRSs are providing accommodation and support for people with daily living support needs, including those who are exiting health, justice and homelessness settings. There have been some closures of supported residential services, and the sector is experiencing pressures through rising operational costs due to static revenues as there have been no material increases to Commonwealth pensions. Even with financial assistance from the Victorian government, the market is contracting. This is often recorded in closure data as a non-renewed lease, so to speak – SRS proprietors will make a commercial decision not to renew a lease and instead close the SRS. In 2022–23 three SRSs have closed, sadly, which is a total of 86 beds. Two of these were pension-level SRSs which were in receipt of government funding assistance, which resulted in 41 fewer pension-level beds –

Danny O’BRIEN: So we lost 41 and we are we going to lose another 72?

Sherri BRUINHOUT: Mr O’Brien, there is an expected closure by 30 June of another SRS with 32 beds, so we are expecting by the end of this year that that SRS will also close.

Lizzie BLANDTHORN: It is the number going to –

Danny O’BRIEN: Thirty-two beds – is that Merriwa Grove in Cobram?

Sherri BRUINHOUT: That is correct.

Danny O’BRIEN: Can I ask about that, Minister: is there anything you can do? I understand they lease a government-owned facility. Is there anything you can do to step in and ensure that facility does not close?

Lizzie BLANDTHORN: I will come to Merriwa Grove. It is 41 pension-level beds that are being reduced. The number will go to 73, including Merriwa, so it is not an additional 73; it is 41, and then the Merriwa, Cobram, issue takes it to 73 –

Danny O’BRIEN: The point is these are obviously very vulnerable people. You have got people at Merriwa Grove who may be forced to move 200 k’s away from family and friends and homes. Is there anything that you will do to assist in getting these beds back and getting this particular facility reopened or kept open?

Lizzie BLANDTHORN: Yes, thank you, Mr O’Brien. So the SRS in Cobram – Merriwa, as you have identified – there are 19 men who live in Merriwa, and it is closing as the owners have made a commercial decision that the business is unviable. Our information is that Merriwa Industries provided 60 days formal

notification of the closure to the human services regulator on 28 March, significantly more than the minimum 28-day notification requirements under the legislation.

The department – to go to your question about what the department can do – as I said these are private facilities. I am well aware that they are vulnerable people. I have done voluntary work in SRSs in my time as well, so I am familiar with the people, the issues and the circumstances that we are talking about here. But the department is working closely with Merriwa Industries, the community visitors program and the local community health providers to coordinate the closure of the SRS and also to ensure that supports to residents continue to be of the required standard during the closure of the SRS. Haven Home Safe is being funded to work closely with the 19 residents of the SRS and the SRS staff and families on sourcing alternative accommodation options that best suit the needs of all of those residents. As of 6 June five residents have confirmed new accommodation and each remaining resident has an individualised tailored plan for alternative accommodation. These plans are being confirmed and implemented over the next week. Many of the remaining residents at Merriwa are now eligible for residential aged care places as well, and other residents and their families are being actively supported to explore options at other SRSs or housing with NDIS supports if that is relevant to the person as well.

Danny O'BRIEN: Okay. But you will not be able to assist to stop it from closing, Minister?

Lizzie BLANDTHORN: Well, as I said, Mr O'Brien, these are private facilities.

Danny O'BRIEN: No, I understand that.

Lizzie BLANDTHORN: We are assisting the facility, and if you want me to continue, I can tell you also that Merriwa Industries has indicated a willingness to extend the closure date if all residents have not yet been successfully relocated by 30 June, and –

Danny O'BRIEN: Okay, I am –

Lizzie BLANDTHORN: Sorry, Mr O'Brien, this is important to go to one of your other points about the land. The land at 59 Warkil Street is freehold land held by the Department of Health portfolio agency, but Merriwa Industries has leased the property for NCN Health, and the lease will cease on 30 June or soon after. So the department is working with Merriwa to deliver the best possible outcome for these residents, many of whom, as you have correctly identified, are in vulnerable circumstances and are in need of our assistance to ensure that they have somewhere to live following Merriwa's decision.

Danny O'BRIEN: Okay. Thank you.

The CHAIR: Thank you, Minister. We will go to Mr Hilakari.

Mathew HILAKARI: Thank you. Just a few moments ago you mentioned some of the seniors programs and participation. And thank you, Minister and also officials, again for your participation this afternoon. I might take us to 'Critical support for Victoria's unpaid carers' on page 40 of BP3. I am just wondering if you could outline to the committee what this program represents and will undertake.

Lizzie BLANDTHORN: Yes. Thank you, Mr Hilakari. In this year's budget we have announced an investment of \$38 million over four years for the critical support of Victoria's unpaid carers. To provide the committee with some background, in Victoria we have more than 700,000 unpaid carers that provide a vital role supporting the person they care for and the broader community. Many of us know these people in our own families, and indeed my grandmother was a great advocate for carers. Her husband became a quadriplegic diving into a swimming pool, and she gave up her full-time job as a nurse to be a carer at home. So these are issues that have always been alive in my family and which I have a particular interest in, but I know I am not unique in that fashion. I think most of us probably have a similar situation somewhere in our own families.

In this budget we have continued to prioritise our carers. Caring for a loved one is a highly rewarding task, but it can also be extremely taxing. It has physical, psychological demands and time pressures placed upon carers. Unpaid carers require support to sustain their care role and maintain their own health and wellbeing. We have a strong focus on increasing respite access for carers in regional and rural Victoria and improving reach to carers from diverse communities, including culturally and linguistically diverse carers, First Nations carers, young

carers and LGBTIQ+ carers. The additional respite investment will see more respite provided to more carers, including carers in regional and rural Victoria and carers from diverse communities. Over the last two years, investment in additional respite has funded more organisations in regional areas to deliver respite, improving respite accessibility for regional carers. It is important to note that carers are doing it tough on a daily basis, and these supports really are critical in being able to provide that support to them.

Mathew HILAKARI: I might take you now to budget paper 3, page 47, which goes a little bit further into the budget for carers respite. Can you go into any other supports that are provided?

Lizzie BLANDTHORN: Yes. Thank you. In 2023–24 the Victorian government is investing \$38 million over four years for additional respite for unpaid carers. \$9.5 million additional respite for carers funding per year will see 100,000 hours more respite, supporting around an additional 5000 more carers across Victoria, which I spoke to briefly before. The investment will see Victoria's more than 700,000 unpaid carers able to access respite, helping carers maintain their own health and wellbeing and sustain their care role.

Carer respite is delivered by a broad range of carer support services across metropolitan and regional Victoria, identified through competitive submission processes. The additional respite program provides a variety of innovative ways for carers to access respite, helping carers across Victoria access the right kind of respite at the time they need it and from trusted providers. Since 2019 this program has provided a broad spectrum of respite support to carers, from support groups and activities that increase social connection for the carer through to more traditional forms of respite such as in-home care or an overnight stay at a care facility for the person that they care for. Through this funding carers are supported to have a break, make connections with others and know that their loved one is being safely cared for. And we know the program is providing value for Victorians. In 2021–22, the combined programs delivered more than 300,000 hours of carer support and respite to more than 20,000 Victorian carers. Through the program carers can receive around 20 hours of respite support per year, supplementing other supports they may receive through the Commonwealth Carer Gateway, NDIS supports or aged care supports.

Carer respite is offered through a range of providers and in a range of ways. This may include group activities, outings, social events, camps and trips away as well as the more traditional forms of respite such as the in-home care or the overnight stay in the care facility, as I mentioned before. Carers can be supported in their own home. They can be supported in the community. It can be day or night, it can be overnight or weekend or midweek stays, and respite can be provided to a carer alone or to the person that they care for. It could be an activity that someone is doing with the person who is being cared for so that the carer can do something else or something that they can indeed enjoy together as well.

Some examples of these respite initiatives, for the committee's benefit: a carer may engage at a coffee catch-up with other carers in a local cafe – a Chatty Cafe – where they can connect with others. The person cared for – the care recipient – may be supported to attend the opening of an art show in a local gallery or a group activity or assisted to do gardening. Parent carers of children with a disability may share in an organised physical activity class while at the same time their children are supported in age-relevant activities as well, or a carer providing care for a partner with dementia may both go on an overnight stay or a bus trip or the like together. For young carers, often something like a weekend camp to connect with other young carers and to help build their resilience can be something that carers are interested in as a form of respite as well.

Mathew HILAKARI: So it is really caring for our carers.

Lizzie BLANDTHORN: Caring for our carers. Exactly.

Mathew HILAKARI: Anyway, that is just one for you and the department should you wish to take that up at a future point.

Lizzie BLANDTHORN: Yes, that is it. We can take that one on.

Mathew HILAKARI: I might take you to budget paper 3, page 55, on a different topic now which is related to better services for older people in aged care settings. I am just hoping you could outline to the committee what these investments will deliver.

Lizzie BLANDTHORN: Yes. The budget invests around \$34.3 million in 2023–24 to continue the delivery of better services for older Victorians in aged care settings. This funding is essential to ensure that in our public sector residential aged care we are continuing to meet our nurse-to-patient ratios, providing a high quality of care to residents. This investment also includes funding to maintain an uplift to the residential in-reach program, which reduces the need for an aged care resident to be transferred to a hospital in the circumstances where appropriate and safe care can be provided within the residential aged care facility, which obviously minimises the burden on the resident associated.

Mathew HILAKARI: Thank you.

The CHAIR: Thank you, Minister. We will go to Ms Sandell for the next 7 minutes.

Ellen SANDELL: Thank you, Chair. I want to ask about neighbourhood house funding. My understanding is that \$40,000 was allocated to Kensington Neighbourhood House and \$40,000 to the Centre in North Melbourne, but neither of those organisations really know anything about this, to be honest. They had no idea. They did not ask for the funding. I mean, they are very grateful for the funding, but they would like a little bit of detail about what it is for. The first they really heard about it was yesterday – I think they received a call inviting them to a round table. Can you provide any more detail on what it is for? Can they use it for wages? Is there anything they cannot use it for? Is it only for capital? Those kinds of questions.

Lizzie BLANDTHORN: Yes, sure, and I appreciate you have also been working with my office and others in relation to this matter, Ms Sandell. I cannot speak to why they may not have been aware of the commitment in the first place, but what I can say is that the budget delivers on the election commitments, and they were part of the election commitment, which was overall a recognition of the important work that neighbourhood houses and indeed men's sheds do right across our state. The department is working to contact all of the funded organisations post budget to ensure that they know what their allocation is and what it can be used for, which is potentially why they have recently received that call – I think you said it was yesterday.

Ellen SANDELL: Yes.

Lizzie BLANDTHORN: The department is working to contact all funded organisations in the community participation and support initiative. My advice is that they have been contacted, so that would obviously be the call that you were referring to. The Centre is receiving the \$40,000 grant and Kensington Neighbourhood House is also receiving a \$40,000 grant to support the work that they do in the communities. And I am sure the department will be pleased to talk to them in the detail, the granular detail about what they can –

Ellen SANDELL: Has it been decided? They are interested in whether there are any constraints around that. Can it just be used for their regular programs? Is it for new programs? Is it for capital? Is it for wages?

Lizzie BLANDTHORN: The department will work with them to work out what would be in their best interests, but it would be fair to say that the money was about delivering projects in local communities that support cohesion and connectedness and provide support to the local community.

Ellen SANDELL: Is there a date by which it needs to be expended, do you know?

Lizzie BLANDTHORN: I might defer to the Secretary, if there is, or Deputy Secretary.

Peta McCAMMON: I suspect once we have provided the funding to the neighbourhood house we would have a contract in place, but I will just check with Argiri whether we have got any detail.

Argiri ALISANDRATOS: We are working with the neighbourhood house on that. It is a 2023–24 initiative; it is an election commitment. And we will engage with the neighbourhood house to assist them to calibrate the funding within their community. And that is obviously conversations that we are going to be having with the neighbourhood houses and all the initiatives right across the board.

Ellen SANDELL: Okay. Thank you. I appreciate this probably cuts across a couple of different portfolios, but my understanding is that this budget discontinues funding for public transport concessions for 25,000 unpaid carers on a Carer Card. Why is that?

Lizzie BLANDTHORN: So there was the public transport concession, which was part of the initial carers strategy, and whilst that is not specifically listed within the budget, that will continue. The department of transport will fund that from the department of transport.

Ellen SANDELL: So there has not been any discontinuation of the Carer Card discount?

Lizzie BLANDTHORN: No.

Ellen SANDELL: Okay. That is good news. I also want to ask about accessible tram stops. I know, again, it goes across a few different portfolios, but we have kind of been told to ask different various people – different ministers say that it is for a different minister. So there was a commitment that there will be accessibility upgrades to Gertrude and Smith streets tram routes. There was an announcement that that was funded in this budget. Where is that funded? Is that in public transport accessibility and amenity upgrades?

Lizzie BLANDTHORN: It is a matter for the department of transport and the public transport minister, so I cannot speak to the technicalities of where it is located.

Ellen SANDELL: I think I asked him, and he pointed me to someone else.

Lizzie BLANDTHORN: I obviously completely support them, and I had some controversial ones in my own electorate previously in Pascoe Vale that needed to be built that faced some community resistance, if you like, but they are an important part of our transport network.

Ellen SANDELL: We are very keen to see them rolled out.

Lizzie BLANDTHORN: Yes, I completely agree with you, but it is a question for the Minister for Public Transport.

Ellen SANDELL: So in relation then to the commitment to be compliant with the *Disability Discrimination Act*, we heard when I asked the transport department that only 26 per cent of the tram network is compliant. What is your interaction with that? And I guess the broader question is: when will the government fulfil their commitment to be compliant across the whole network?

Lizzie BLANDTHORN: Again, that is really a question for the Minister for Public Transport. Obviously as disability minister and as a local member I am supportive of accessible transports and accessible public transport and have had many arguments in the communities I have represented about such issues, but it is a matter for the Minister for Public Transport.

Ellen SANDELL: Okay. I will ask about the Office of the Public Advocate. This year there is a target for decisions made by the public advocate under the *Medical Treatment Planning and Decisions Act* that looks like it is likely to be missed by quite a long way. It shows the government is underperforming in terms of the situation where a person may not have decision-making capacity or is getting a guardian appointed to them by VCAT to make medical treatment decisions. I am just wondering: what is the problem with appointing guardians to make decisions and what is the government's plan to fix it?

Lizzie BLANDTHORN: I might ask the Secretary of Health to answer that question for you.

Euan WALLACE: I am not sure, Ms Sandell. I will take that on notice. I do not have that information in front of me.

Ellen SANDELL: Okay. Thank you. That is all. Thank you.

The CHAIR: Thank you, Ms Sandell. For the last session we are going to go to Mr Hamer. Hopefully it works this time.

Paul HAMER: We will give it a go. Thank you, Minister. Thank you, officials. I just want to lead off as following on from Mr Hilakari. You were mentioning the residential in-reach initiative. I was wondering if you could just elaborate on that initiative a little bit more and just outline what that initiative does.

Lizzie BLANDTHORN: Yes. Thank you, Mr Hamer. I would be pleased to. I am sorry I got cut off quite early in the piece, but this is an important initiative which is helping people as far as possible be better connected with health services in their residence rather than needing to go to hospital. So it is an important program, which as I said, we are delivering, investing \$34.3 million to continue the delivery of better services for older Victorians in aged care settings, and as part of this commitment we are investing \$30.5 million to public sector residential aged care and then the \$3.8 million, as you say, in additional funding in sustaining the residential in-reach program.

The residential aged care system in Victoria is supported by a workforce of approximately 68,000 as of 29 April last year, and approximately 11,000 of this workforce supports residents in our public sector residential aged care. The government supports public sector residential aged care services by providing a range of safety and quality initiatives which help better build capacity, and the residential in-reach program is a really important part of that. In this budget we have invested the \$11 million over three years for the continuation of the uplift to residential in-reach capacity, which reduces, as I said earlier, the need for a resident to be transferred to hospital in circumstances where it is appropriate and safe for the person to be cared for at home. This minimises the burden on the resident associated with accessing acute health care and also reduces avoidable demand on hospital services.

Residential in-reach services form a component of the health independence program, a non-admitted subacute service. Residential in-reach services provide on-call telephone support and advice to aged care facilities and assessment and management of the resident's acute medical condition at the aged care facility in collaboration with the resident and their representatives, residential aged care staff and also the resident's general practitioner – GP. This support is provided by hospital-based specialist nurses – for instance, senior nurses, clinical nurse consultants and nurse practitioners – as well as doctors, being aged care registrars or geriatricians, to residents in public, not-for-profit or for-profit aged care facilities. These services are structured to provide a rapid response to a change in a resident's health status in circumstances where the resident's general practitioner is unavailable and aged care staff are considering transferring the resident to hospital, therefore the residential in-reach services are not intended to substitute for the care that is the responsibility of the resident's GP or that of the aged care facility itself.

Our investment in this budget builds on \$3.8 million provided in 2021–22 for the program, sustaining the residential in-reach services capacity payment. The demand for the residential in-reach services has been increasing, with an average of more than 20,000 additional residential in-reach contracts being delivered in 2020–21 and 2021–22 than in 2019–20. Year-to-date data indicates that demand for residential in-reach services remains equally as high in 2022–23, with almost 85,000 contracts reported thus far. Less than 5 per cent of people accessing residential in-reach services are hospitalised, and the number of aged care residents accessing these services is increasing each year. In 2013–14, 8668 aged care residents accessed residential in-reach services on one or more occasions, and by 2021–22 this had increased to more than 17,000 aged care residents.

Paul HAMER: Thank you, Minister. It is a fairly broad community initiative – that is, the residential in-reach program. Can I also go to the disability advocacy program, which is described on page 47 of budget paper 3. I was just wondering if you could outline how much funding is allocated in the budget for this program.

Lizzie BLANDTHORN: Yes. Thanks very much. This is also an important part of the investment in disability services across our state and the Victorian disability plan. We are providing funding of \$1.8 million in 2023–24 to continue a funding boost for the Victorian disability advocacy program to meet the ongoing demand. This builds on funding in previous years. The program supports 23 organisations to deliver self-, systemic and individual advocacy through core funding of \$3.3 million per annum, and since 2017–18 the Victorian government has provided an additional \$13.9 million to the advocacy sector through successive state budgets as well as the COVID-19 investments, and this includes \$1.8 million in 2022–23 to address high levels of demand for the Victorian disability advocacy program. It is a service that serves as a safeguard for the rights of people with disability. It protects against exclusion and discrimination and serves to assist in meeting human rights obligations. It plays a central role in amplifying the voice of people with disability and also driving reform and good practice. Continuation of increased capacity in the Victorian disability advocacy program will improve access to advocacy that upholds human rights and also supports equitable participation. The Victorian disability advocacy program supports agencies to undertake the different types of advocacy: self-advocacy,

whether it is people building the capacity to represent themselves; individual advocacy – individual representation by a professional advocate, relative, friend or volunteer; or systemic advocacy – working for long-term social changes to ensure the collective rights and interests of people with disability are served through policy, legislation and practice.

The CHAIR: Thank you, Minister. Minister and department officials, the time has come for the end of questions today. Thank you so much for appearing before the committee this afternoon. The committee will follow up on any questions taken on notice in writing, and responses are required within five working days of the committee's request.

The committee is now going to take a very short break before beginning consideration of the portfolio of corrections at 2:15 pm.

I declare this hearing adjourned.

Witnesses withdrew.