# VERIFIED TRANSCRIPT

## PUBLIC ACCOUNTS AND ESTIMATES COMMITTEE

## **Inquiry into budget estimates 2007–08**

Melbourne — 10 May 2007

#### Members

Mr G. Barber Mr G. Rich-Phillips
Mr R. Dalla-Riva Mr R. Scott
Ms J. Graley Mr B. Stensholt
Ms J. Munt Dr W. Sykes
Mr M. Pakula Mr K. Wells

Chair: Mr B. Stensholt Deputy Chair: Mr K. Wells

## Staff

Business Support Officer: Ms J. Nathan

## Witnesses

- Mr G. Jennings, Minister for Community Services;
- Ms F. Thorn, secretary;
- Mr A. Hall, executive director, financial and corporate services;
- Ms G. Callister, executive director, Office for Children;
- Mr A. Rogers, executive director, disability services; and
- Ms J. Herington, director, aged-care branch, Department of Human Services.

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The CHAIR — I declare open the Public Accounts and Estimates Committee hearings on the budget estimates for the portfolios of community services and Aboriginal affairs. On behalf of the committee I welcome the Honourable Gavin Jennings, Minister for Community Services and Minister for Aboriginal Affairs; Ms Fran Thorn, secretary of the Department of Human Services; Ms Gill Callister, executive director — Office for Children; Mr Arthur Rogers, executive director — disability services; Ms Jane Herington, director — aged care; and Mr Alan Hall, executive director — financial and corporate services; departmental officers, members of the public and the media.

In accordance with the guidelines for public hearings I remind members of the public they cannot participate in the committee proceedings. Only officers of PAEC, the secretariat, are to approach PAEC members. Departmental officers, as requested by the minister or his chief of staff, can approach the table during the hearing. Members of the media are also requested to observe the guidelines for filming or recording proceedings in the Legislative Council committee room. Those guidelines are actually that you are only able to film the person who is speaking.

All evidence taken by this committee is taken under the provisions of the Parliamentary Committees Act, and it is protected from judicial review. There is no need for evidence to be sworn. However, any comments made outside the precincts of the hearing are not protected by parliamentary privilege. All evidence given today is being recorded. Witnesses will be provided with proof versions of the transcript, and the committee requests that verification be forwarded to the committee within two workings days of receiving the proof version. In accordance with past practice, the transcripts and PowerPoint presentations will then be placed on the committee's website.

Following a presentation by the minister committee members will ask questions related to the budget estimates. Generally the procedure followed will be that relating to questions in the Legislative Assembly. In other words, there are no supplementaries, but clarifications are in order. Before I call on the minister to give a brief presentation on the more complex financial and performance information relating to the budget estimates for the community services portfolio, I ask that all mobile phones be turned off.

Mr JENNINGS — Thank you, Chair and the committee, for that introduction, which has orientated us all and made us pretty clear about who is on my side of the table. I am pretty pleased to see, given my burgeoning responsibilities, that I have almost got as many members on my side of the table as you have on yours! Hopefully we can rise up to your expectations and respond to those issues.

The CHAIR — You have got about 10 minutes.

**Mr WELLS** — How many on your side from the audience?

**Mr JENNINGS** — I did not realise how interactive this was going to be! If it is this interactive, you actually probably will not get as much out of me as you might have wanted!

### Overheads shown.

Mr JENNINGS — Having said that, the first slide has listed responsibilities — I know the committee will be talking shortly to Minister Neville, but I just wanted to make sure that the committee had their heads up in relation to the division of responsibility as it crosses over between particularly children's services and aged-care services, which may prove to be a slightly vexing issue for the committee. This matrix provides you with a reminder of the areas of my responsibility. In terms of children, they relate to child protection and other family services, juvenile justice, and youth services such as secondary school nursing.

In aged care, I continue to be responsible for public sector residential aged care facilities; supported residential services, the home and community care program, the aged care assessment program, carer support, and dementia services. I will leave Minister Neville to speak for her own responsibilities.

It is important to indicate that in the areas I am responsible for we are embarking upon a range of change programs that have been underpinned by legislative reform and significant budget commitments by our government. I am very happy to be in the situation where I have inherited significant reform and investment that has been outlined in previous budgets and continued within this one.

In the area of improving outcomes for vulnerable children, I want to point out to the committee that there continues to be a major increase over the life of the Bracks government of our investment in child protection, family services

and youth justice services budgets, which is indicated clearly by the bar graphs before the committee. In child protection we have achieved a 93 per cent increase in allocation; youth justice is up by 79 per cent; and there has been an overall increase of 90 per cent in the budget allocation since 1999–2000.

As I indicated to the committee, an extensive amount of work has been done in partnership with the sector and the community to try to ensure that we provide for the safety, security and wellbeing of Victorian children. There is a well-developed body of evidence and legislative framework that underpin our work. That overhead is a snapshot of those pieces of work, which I am sure the committee can apprise itself of at a later time.

In particular, the most recent reforms have been proclaimed in the Children, Youth and Families Act, which came into effect on 23 April. That has engaged people in countless hours, weeks, months and years — you probably can count the years — of deliberations in that work. Very importantly, it is matched by a commitment from the government to fund programs that underpin that important legislative reform: \$225 million has been allocated from 2006–07 onwards into the forward estimates up to 2009–10.

I appreciate that the committee will understand that we are in a continuum of forward estimates from the 2006–07 budget forward over the life of the current forward estimates. I will give you an indication of the growth within those programs. The family support innovations program, which is designed to support families to stay resilient, strong and capable, in this current budget has \$7.2 million and in the forward estimates period, increases to \$11 million by 08–09. The Child First program, which is a coordination effort to ensure that we provide easy access for families to support the needs of their children, this year has \$1.6 million and that increases over the life of the forward estimates to 3.2.

Our approach to actually deal and respond to the needs of those children who may have been sexually abused or at risk of sexual abuse increases significantly over the forward estimate period, as indeed does our commitment to provide for new forms of foster care arrangements to more adequately deal with and respond to the needs of those very vulnerable children who require intensive foster care and residential care support. Indeed, a hallmark of the legislation has been our commitment to ensure within the principles of the best interests of the child that we account for the needs of Aboriginal children who, history would say, have a disproportionate high incidence with child protection systems and which we are hoping to address in the future.

One of the ways we are wanting to do that is to increase our support to Aboriginal community organisations charged with responsibilities and to increase investment within Aboriginal services across the sector.

There is some good news in Victoria in relation to child abuse substantiations. This is basically the level of determination of the level of risk that Victorian children are currently experiencing. In fact, I think the most telling part of this bar graph that the committee has before it is the relatively flat nature of the child abuse substantiations that have occurred in Victoria.

I draw the committee's attention to the very stark difference in the jurisdiction we often compare ourselves with, New South Wales, where there has been extraordinary growth in child abuse substantiations that have occurred within that jurisdiction. From our perspective it actually demonstrates that we have been quite effective in intervening earlier in family support programs.

We also recognise that when children are out of care we have an obligation to provide support to foster carers, who do a great labour of love on behalf of this community each and every day. As you can see, there are significant caregiver payments — we as a community are obliged to provide some financial support for the out-of-pocket expenses and the costs of providing those foster care arrangements. As the committee can see, there has been significant investment provided for within this budget and going forward in relation to foster carer payments. We also recognise that there is a need to make sure we have appropriate residential facilities for when children need intensive residential care. There is a rolling program of capital investment within the residential sector.

Moving into the area of disability, the committee can actually see there has been continual growth during the life of our government for investing in services for people with disabilities and their carers and the service system that provides for those needs. There has been an 87 per cent increase during the life of the Bracks government to the size of disability services. Indeed, in this budget that the committee is currently considering there is \$214 million over the life of the forward estimates period to deal with those needs into the future. They relate to \$184 million of output initiatives and \$30 million of asset initiatives.

To give the committee an indication of what those services cover, there is significant investment for individual support programs. The committee would realise that there is an important direction in disability services to provide for the individual care needs of those in our community with disabilities and trying to tailor specific programs to meet their needs. There is an increasing emphasis, both within the programs but in terms of the resource allocation, to provide for that individual care planning support.

We also recognise that there has been a load, a disproportionate load perhaps, carried by carers for their loved ones and those in their community that they provide care for and assistance. There is an additional \$13.1 million over four years for additional episodes of respite care to provide some breathing space as a fillip to those carers who provide that important work each and every day. Indeed, we provide specific assistance for carers who may wish to re-enter the workforce and perhaps have felt hamstrung about their capacity to do that.

There is a significant investment in the technability program. I do not know whether we invented that word for this program — we might have! The notion of this is to try to ensure that we invest in information technologies and information services that provide for and cater for the breadth of needs of people with disabilities and that ensure that they can more effectively and efficiently access information and use information to empower them and fulfil them in their daily lives. There is \$12.3 million provided over the life of the forward estimates to support people in our community with acquired brain injury, which I bring to the committee's attention.

We can also continue the important programs that have seen great results, including the Futures for Young Adults program, which I draw the committee's attention to, which provides for life planning for young people with disabilities leaving education. We recognise the need to provide support for community service organisations, because most — well, not most — a lot of the services in the disabilities sector are provided by the non-government sector. They can be the inevitable NGOs that have very low-cost structures and the not-for-profit organisations that we need to provide support to. Indeed there is also significant investment in capital initiatives that I have outlined in terms of the refurbishment of the residential sector.

In aged care, members of the committee would realise that we have had a significant increase over the life of our government in aged-care services, and indeed this year it has topped \$1 billion when you include allocations for aged services within the aged-care program and the small rural services. That is a significant increase, and again this year we continue a trend of providing for new initiatives with significant investment in capital — which has been a hallmark of our government — and with a commitment to redevelop 45 residential aged-care facilities across Victoria, 43 of those being in rural areas.

There is significant investment in home and community care in terms of an output measure this year. We would hope to see 400 000 more hours of service reaching 6000 more clients during the life of the program. We want to make sure that home and community care reaches the people who may not readily get access to it, including people from diverse backgrounds and indigenous people who are underrepresented within the HACC community. We actually understand that people might feel vulnerable at home and need additional assistance, whether it be through personal alerts or through specific initiatives, to make sure that they can eat well by providing for dental care or dentures, and to make sure that people can see and get around their daily lives in comfort.

They are features of the initiatives in this year's budget, and, as I have indicated, we are continuing a trend of investing significantly in capital infrastructure across Victoria. It is a hallmark of our government that we have reinvested in aged-care facilities right across the state, the vast majority of these being in rural areas. That continues to be the case with the announcements made today. We are also facilitating new investment in aged-care facilities through innovative approaches such as the Land Bank.

That is pretty much the rapid-fire introduction to my areas of responsibility, but I welcome the committee's interest and questions about these portfolio matters.

**The CHAIR** — Thank you, Minister. I appreciate the introduction. I would like to begin by asking you, as I have asked every other minister: what impact will the portfolio spend be having on productivity, particularly new initiatives under your portfolio?

Mr JENNINGS — I thank the Chair for his concern about productivity, because obviously this is an issue about which all of the Victorian community beyond PAEC want to have some confidence that we are being innovative and that we are trying to make sure that we deliver services in a way that is cost effective and delivers the maximum result.

I want to draw to the committee's attention that with a lot of the work we do — I will outline a couple of initiatives that we are actually undertaking — it is very important to understand that, for instance, in child protection and family services, 70 per cent of that work is provided by the non-government sector. In terms of our drivers of reform, we actually have to understand that we are a funder of non-government services, and we seek, in partnership with them, to drive productivity reform.

We have done this in a variety of ways — for instance, using the Community Sector Investment Fund, which is trying to ensure that there are technological responses, that there is training that provides for efficient services and that there is an approach to continuous improvement. There are hundreds of hours that we would actually allocate to the field to provide for ongoing efficiencies in terms of understanding best practice and the need to have continual improvement. There is extensive work, as I indicated, in child services alone. There have been 265 training sessions over the last two years designed to support the capacity of organisations to undertake that work.

In terms of disability services, we have some reforms that try to ensure appropriate practice and efficiencies, and in fact there are some statutory obligations that apply in the disability field. For instance, we have a new disability services commissioner who is charged with the obligation of ensuring that services are provided in an efficient and effective fashion. We have established an Office of the Senior Practitioner who drills down into what the effective and appropriate treatment regime would be to ensure there is best practice being applied in that sector. We have confidence that those initiatives and statutory obligations will be met.

I am sure that the Chair, in the committee's conversation with the Minister for Health previously, knows that right across the Department of Human Services there is an integrated and coordinated approach in terms of driving savings and productivity. I will not go back over those unless the committee particularly wants me to, but we are part of that discipline and that approach within DHS.

**The CHAIR** — Thank you, Minister I hope you will continue with the Community Sector Investment Fund, to make it work and perhaps enhance it, because it offers a bit of microeconomic structural adjustment in the sector, which I am sure will deliver good dividends right across the state.

**Mr WELLS** — My question is in regard to child protection. It would be the expectation of the community that all vulnerable children who need a service would receive that immediately. My reference is to BP 3, page 95, which talks about child protection reports.

How many children were referred to protection by the child protection hotline in the last budget period? How much money will be spent on the child protection hotline in 07–08? How many child protection cases referred to the hotline were not allocated, and therefore what is the waiting list? I suppose the more disturbing question is: why was it that a child of 3 had to spend 5 hours at the Preston police station last week because for 5 hours no-one could access the child protection hotline? I refer to an article in which the Office for Children executive director blamed a staff shortage for that. I note also that you have asked for a full and detailed explanation of why this took place. Could you answer those in whichever order you choose?

**Mr JENNINGS** — You are relying on my cumulative memory, but I will do my best to respond to all the various questions embedded within that scoping.

**The CHAIR** — Particularly in the context of the estimates and the budget.

**Mr JENNINGS** — Excellent. I thank the committee Chair for keeping us on the straight and narrow. As an overall introduction to this question can I just say that the program that the Deputy Chair has referred to is the after-hours child protection information service that is funded to the level of \$5.815 million in the current budget.

That relates to the ongoing operation of a 24-hour service that is available to members of the community. It receives a very large number of calls during the course of the year — 61 900 calls per year are received through that service. Those calls are taken, and those calls are responded to. So if we are starting from the premise that we are not delivering a service that is responding to Victorians' need, I start by saying that is a very large number of calls that are actively responded to — and actively responded to, in the main, in a very efficient and effective fashion.

Indeed, my understanding is that 97 per cent of the calls are responded to within 30 minutes. Indeed, whilst we would like to provide for all calls to be responded to within that period of time, we are pretty close to being able to provide that degree of support. When you consider that between 160 and 170 calls come in an hour, that would be an onerous — —

Ms CALLISTER — In a 24-hour period.

Mr JENNINGS — Yes, okay. The 160 to 170 calls actually occur within a day rather than an hour.

Mr WELLS — Hang on, we have cut from a 24-hour period — from per hour to per day.

**Mr JENNINGS** — No, I have given you a leg-up, because I know that you are now very excited about that. Go back — —

**Mr WELLS** — We just want the truth. We just want to try to get to the bottom of what happened to this poor kid last week. That is why we really want to get to the bottom of it.

**The CHAIR** — We are actually talking about the services; we are not interested in individual cases.

**Mr WELLS** — Yes, we are talking about the efficient service that you are referring to.

**The CHAIR** — That's fine.

Mr JENNINGS — There is no doubt about this, you do not have any difficulty about getting to the truth.

Mr WELLS — Yes?

Mr JENNINGS — The truth is that 61 000 calls are actually taken each year — in fact, 61 900 calls — and they are taken efficiently; 97 per cent of them are actually responded to within half an hour. My faux pas at the moment is getting the wrong denominator for when those calls come in. But the substantive point remains. There is a significant team that responds to the needs of Victorian families each and every day. They do it on a 24-hour basis. There are four unit managers who are funded within the \$5.8 million, there are seven team leaders, there are four specialist infant protective workers, and there are 35 child protection workers who are employed within that service. And under normal circumstances, in the vast majority of cases — and as I indicated, 97 per cent of calls in that time — that they are very efficient and responsive to the needs of the Victorian community.

There were some difficulties on the night in question that the member referred to, on the basis of a shift shortage due to a work practice where a number of staff, who not only provide for outreach work from this service but in fact do follow-ups through the Children's Court, had been effectively rostered on to undertake to discharge their Children's Court responsibilities. That meant that there was an unusual shortage in the office at that period of time — and, as I indicated to you, a very unusual shortage that occurred during that period of time. Attempts to augment the number of staff that were in the office at that time were not successful. As you could understand, and anybody in the community could understand, at some point in time when the workers who are within the service are responding to the urgency of needs that are coming in to them, they make priority decisions about whether they respond to those calls coming in or whether they spend time on the phone trying to get other people to come in. That judgement call is actually something that we are going to be examining and reviewing in light of these operations.

The case in question — the good news in this story is that the child in question was in the custody of the police, as Mr Wells quite correctly indicates. The child went from the care of the police to the Royal Children's Hospital, and at no time from the intervention of the police was the child in question at risk. That is a very important thing for the committee to the understand and for the community to understand. Whether in fact it is a satisfactory arrangement for the police or the ambulance service to make calls to the after-hours service and in fact there be a delay — I volunteered immediately, I volunteer to the committee — not acceptable, will not be tolerated, and we will in fact ensure that it will not happen again.

**Mr WELLS** — Can I just clarify one point, Minister: are there no children who have been reported to the after-hours service who are on a wait list, waiting for a service? The point is that you are talking about the 97 per cent hit rate in regard to responding, so there is obviously the 3 per cent. Does that mean that there is a waiting list? What happens to the 3 per cent that are not being —

**The CHAIR** — It is responded to within 30 minutes.

Mr JENNINGS — They are responded to outside of 30 minutes. The substantive issue that you are talking about crosses over into the way in which child protection works and the way in which decisions are made on the notifications that are received by child protection, and how they are prioritised in terms of the assessment that is made by child protection officers about the way in which those matters will either be investigated or substantiated. In that context there are some delays in some investigations, but in terms of the crossover question between your concern about the after-hours service and what happens with child protection, it happens the following day. All of those matters would be examined by the child protection officer within the region the following day.

Mr WELLS — So there would be no waiting list other than — —

Mr JENNINGS — They are all examined — —

Mr WELLS — The next day?

**Mr JENNINGS** — The subsequent issue is, after they are examined, there is determination about whether there are matters that are going to be investigated fully by a full investigation of the family, which may then lead to a substantiation of the issue.

**Mr PAKULA** — Minister, I refer you to page 97 of budget paper 3, to the Children, Youth and Families Act. I wonder if you could tell the committee how the implementation of that act will improve the wellbeing of vulnerable children and other young people?

Mr JENNINGS — Thank you for the question, Mr Pakula. You may or may not know that it has been a big couple of weeks in relation to the Children, Youth and Families Act. It was proclaimed on 23 April and will lead to a new common implementation of the best interests of the child principle that underpins this act. It will be a common template that sees all providers of care — the Children's Court and the agencies that become involved within the purview of providing a responsibility to provide for Victorian children — will have a very consistent and definite approach to the way in which they address child welfare issues and the capacities of families.

We will actually see that there will be a new service configuration that supports this approach. I think the committee would appreciate that in the past child protection issues have been all too often reactive. They have actually come in too late after lot of damage has been done and children have been exposed to excessive risk, and we are trying to provide some remedies well and truly after the damage has been done. The new service configuration is to try to prevent that damage from occurring and prevent risk factors in the lives of Victorian children; indeed, beyond just providing for a secure environment to deal with those risks, to provide for the developmental needs of children. That is a very important emphasis in the new legislation and the new regime.

Consistent with this we have funded in the last number of budgets, commitments to family support innovation programs that have been designed to be flexible and responsive to deal with the need to strengthen families to make them more resilient and robust, and there has been significant investment within the last few budgets to achieve that: \$5.2 million allocated in 2006–07, rising to \$11 million in the 09–10 budget, so, as we can see, this is an escalating effort over the life of the forward estimates to try to make families more resilient and to prevent those children being at risk.

Child First is a new innovation. I went to the Barwon region yesterday to kick-start the Child First program throughout Victoria. It is an effort to coordinate a range of community-based services on a sub-regional catchment basis, so something up from the local government area but not too much — two or three local government areas would come together to provide a catchment of providers to deal with the holistic needs of families. So what happens is that if a family recognises, or somebody puts a family in connection with a Child First service, after the initial assessment and interview process, then there would be a determination about the range of needs that family might have. The Child First service would then tap into that range of services. Rather than making a family in the traditional way go from pillar to post, from one service to the other, there will be the one central access point to make sure that those services are easily available and accessible and deal with the holistic needs of those families.

In fact, going back to Mr Stensholt's question about productivity, you can actually see this is a relatively light investment to achieve very big results, because in fact the Child First program itself at the moment is funded at

\$1.6 million this year to introduce nine of those services, rising to 5.1 in the next two years. The extraordinary benefits that will be derived from efficiencies and integrated coordination of previously disparate and fragmented service configuration in the lives of these families will be a major benefit both in terms of results for families and their children, but a major, major investment in productivity and more efficiencies within the sector generally. I think the Public Accounts and Estimates Committee should be alive to that important dimension.

We would also realise, in the context of Mr Wells's question a minute ago, there has been significant investment in child protection services — an increase from November 2005 of 100 additional child protection workers that have been funded within the budget. We are providing support and encouragement to those people to undertake their important responsibilities and hopefully make child protection and family services a good place to work. I would actually hope that that is outcome, because quite often the only scrutiny these workers come under is either malevolent or mischievous interpretation about the capacity of their work. There is great work being done out there and we are hoping to cultivate that culture in the years to come.

**The CHAIR** — Thank you, Minister. I am sure Dr Sykes will ask about the country, where it is a good place to live, work and raise a family.

Mr DALLA-RIVA — Please — just one a day!

**Dr SYKES** — Minister, I have a question in relation to sexual abuse of children and the adequacy of funding for the development of appropriate policies and the correct application of those policies by staff. I wish to illustrate the basis of my question with two case studies.

One relates to an incident in a local special school where there was an alleged sexual assault by one student upon another student. Both the alleged perpetrator and the alleged victim remained at the school while the problem was investigated. The parent of the victim was very frustrated by the lack of information provided to her because of following apparently the policy. Secondly, she was frustrated or very concerned about the lack of protection provided to her and her child, the alleged victim. She actually successfully took out a intervention order on the perpetrator. Interestingly, when the mother of the victim took out an extension of the intervention order, DHS contested the extension of that intervention order on behalf of the alleged perpetrator.

The outcome of the whole episode was that the case was found proven; that there was a sexual offence committed and there was substantial criticism of the handling of the whole process. The issue in this case that I am raising is what appears to be an issue of policy to not fully inform parents of children with disability of alleged sexual assaults and inadequacy in the protection of the victim in this case.

A second example which I would quote to you, a very recent one, is where a child with an intellectual disability alleged that she had been sexually assaulted by her father. The action by the government agency involved was to telephone the mother and to advise her to immediately leave home with the child. Fortunately, after getting over the initial shock of that telephone call, the mother and father further investigated the issue, and they established that in fact that no sexual assault had occurred because the child's definition of her private parts included her whole torso. So there was no touching of the child's private sexual parts.

The agency involved is extremely apologetic for having caused this trauma to the family. It has done its best to correct the issue, the matter or the pain. But the issue in this case is where there appears to be, in this case, what we will say is a relatively simple failure to thoroughly investigate the allegation in the first instance by cross-questioning the child that made the allegation and verifying what she in fact meant by her 'private parts'.

In pulling those two case studies together, I come back to asking the question: does the budget provide for adequate funding to review policies where there are shortcomings identified; secondly, does it provide adequate training of staff to ensure that they implement the policies thoroughly and correctly with the minimum risk of these unfortunate consequences?

**Mr JENNINGS** — I share Dr Sykes' concern about the incidence of sexual abuse that occurs within our community, and I want to make sure that children are supported and empowered to deal with these matters and that their families feel appropriately supported as well.

If in fact you, Dr Sykes, stopped your question at the first example, you might have got a different answer to what you will actually get by giving me the second question. The two examples are actually very telling. They go from

either ends of the spectrum in relation to the range of issues. One is actually whether in fact we are overzealous in pursuing a case in one instance, when in fact it was not warranted, and the other example is in fact when we are under-zealous in relation to one where it was.

The range of issues and the assessments that underpin the real circumstance, the real risk and the real degree of danger that has been imminent is very complex. We have to have confidence in them, and the people who work in this area have to be able to tease out the relevant facts and to be able to provide the appropriate intervention. Quite often public commentary on these issues — and I am not accusing you of doing it, because I know that you have done it in a very sombre, appropriate and overly sensitive way — has a tabloid approach that does not get to the underlying complexities or does not actually appreciate the complex practice issues that are embedded within those issues that you have raised with me. I hope the Public Accounts and Estimates Committee, and certainly we, from our vantage point, appreciate the importance of that work.

We have provided within this budget for specific funding; an increase in funding is available within this budget — \$6.5 million has been provided within the budget, that I am responsible for, for dealing with support for sexual assault services. In particular we are focusing on additional counselling and support for children and adults.

In particular you will be pleased to know that there is additional funding for rural crisis care services. We are wanting to make sure that beyond what might be the disclosures of children coming forward with either claims that might be real or perceived, we in fact recognise that there is a need to provide some additional almost pastoral care support to young people. Within the funding allocation this year, we have additional treatment programs for children who may be demonstrating behaviour that may be indicative of them being sexually abused or at risk of being sexually abused. So in fact we are trying to go further in relation to going in a pre-emptive way to try to make sure we provide that support for those children.

Indeed we understand that workforce development for this area is an emphasis of the work. We want to make sure that we have people who are capable of providing the most professional, responsive and respectful service. As I have indicated to you through the budget allocation, we actually understand that our rural and regional communities have every right to expect that quality of service being provided within their community.

In relation to the starting point of your question as it relates to special schools, you will understand that I am not responsible for special schools, but I am very happy to work in a collaborative way with my colleagues about that interconnection between the service that I am responsible for and those schools.

Mr SCOTT — The question I would like to ask relates to aged care services. In budget paper 3 on pages 293 and 294 is table A.6. I would be grateful if the minister could inform the committee of the state government's commitment to upgrade the facilities for aged-care services as outlined in that particular area of the budget papers.

Mr JENNINGS — I thank Mr Scott for his question, because this just reinforces Dr Sykes' question; this could have been seen as a regional question rather than the one that has come from a city-based member. But I think it is important for us to recognise that one of the hallmarks of our government has been to reinvest significantly over the life of our government, and more than \$400 million has actually been allocated. Indeed \$424 million has been allocated over the life of our government to redevelop 45 facilities; 43 of them in rural Victoria.

When I initially arrived in my responsibilities as Minister for Aged Care and beyond that as Minister for Community Services, I inherited a very large portfolio of projects that required redevelopment to make sure that they satisfied the 2008 accreditation requirements of the commonwealth. I am pleased to tell the committee, as I have told it before — Mr Rich-Phillips has asked me on two or three occasions whether in fact we are going to meet 2008 accreditation, so if he is going to ask that question again, I have front-footed it — that we are.

Indeed, in the budget papers and the asset investment program that Mr Scott referred to, this year we are adding to that series of commitments by redeveloping the Leongatha hospital campus — the nursing home there — which is a \$10 million commitment. It is an important first stage in the redevelopment of the Leongatha hospital precinct. It will provide ongoing care with 36 beds for older members of the community who require assistance there. I am very pleased to say that when I visited that hospital last November they were pretty enthusiastic, so they cannot wait for that project to roll.

That is pretty much the case in Nathalia as well, where we will be developing 26 beds — 6 acute and 20 high-care residential beds — in an \$18 million program, which demonstrates our ongoing commitment to ensure that when older people require it in this community, they can have residential aged care.

We also understand the importance of capital investment in those communities. This may not be very well understood by the Public Accounts and Estimates Committee but the projects that I have been responsible for have been a major driver of economic activity throughout many small, rural communities in the last four, going into five years, and indeed is a major ongoing employer for people who work within residential aged care.

Some places, and I am mindful of Rainbow in particular — and I think from memory about 700 or 800 people live in Rainbow, over 1000 people turned up for the event. The reason why they turned up for the event in that number when we opened the new residential aged care facility — —

**Dr SYKES** — It was a pot of gold at the end of the rainbow, Minister!

Mr JENNINGS — Pretty much. In fact it was the biggest thing that had happened there for 20 years, and indeed will continue to be. The hospital's aged care facility will continue to be the major employer in town. And that is how important it is to communities.

But we also recognise that there is a need to invest in metropolitan services, so there is major investment in Caulfield General Medical Centre, which will be providing allied health to the suite of services that are provided at Caulfield General. In fact I was out there earlier this week, in the nursing home that we funded during the life of our government, and this will add to the significant redevelopment of that service. Indeed there is some additional funding to allow for the reconfiguration and upgrade of Calvary Health Care Bethlehem, which is also in the same area.

So overall we are going to continue in the business of being a major provider of residential aged care. We provide about 16 per cent of all the beds in Victoria — about 6500 beds we provide. No other state in Australia is a provider of residential aged care. The Victorian government will continue with its commitment to residential aged care during the life of the forward estimates, and I am pleased to say whilst I continue to be responsible for it.

**The CHAIR** — Thank you, Minister. Yes, we are very unique in that regard, particularly looking after the country. I understand Mr Barber wants to concentrate on the Aboriginal affairs portfolio, so I call Mr Rich-Phillips.

Mr RICH-PHILLIPS — Minister, I would like to ask you about the Victorian aids and equipment program. The budget papers note that this budget provides \$30 million over five years to provide an additional 15 000 items through that program. You may be aware of a Melbourne Citymission report that was released in October last year that commented on the program and noted that:

As a result of underinvestment, increasing demand, and inefficiencies in the program, access to aids and equipment is characterised by long waiting times for many people with disabilities: most families who participated in recent Melbourne Citymission research had experienced delays ... The impact on individual health and wellbeing of unreasonable delays in meeting needs can be substantial for all those with disabilities, but especially for children.

That same report also noted the manner in which applications are categorised into:

'no waiting' for immediate needs, such as oxygen equipment, wheelchair repairs, continence aids.

'high urgency' where aids and equipment are issued as soon as funds are available to purchase items —

and —

'low urgent' where items are made available subject to budget, waiting period and clinical factors...

Can you tell the committee how many people are currently on waiting lists under those three categories? To what extent will the funding that is mentioned in the budget reduce those waiting lists, in terms of numbers, and to what extent will the funding reduce the waiting times for people who are on those waiting lists?

**The CHAIR** — I assume we are referring here to page 91?

Mr JENNINGS — Ninety-one, yes.

Mr RICH-PHILLIPS — No, page — —

**The CHAIR** — 'Clients accessing aids and equipment', is that correct?

**Mr RICH-PHILLIPS** — BP 3, page 16 was the reference I was making.

**The CHAIR** — I was looking also at the quantity — the numbers with the target for this year: 'expected outcome' — 31 000, et cetera. Minister, over to you.

 $\mathbf{Mr}$   $\mathbf{JENNINGS}$  — Good, I am glad we have found where we were. I thought that was where we were. The good news — —

**Mr RICH-PHILLIPS** — I was referencing page 16 as well.

Mr JENNINGS — Yes. The good news for Mr Rich-Phillips and those in the community who are concerned about this is that my answer to the Public Accounts and Estimates Committee is fairly similar to what I went on the public record with in the Legislative Council only a week or so ago. I obviously did not make an impression on you there, so hopefully I will make an impression — —

Mr DALLA-RIVA — A bit more detail, Minister.

Mr JENNINGS — I do not think so — surely!

**Mr DALLA-RIVA** — We do not get detail in your answers to questions.

**Mr JENNINGS** — I do not know that is the case; I have never heard that complaint before.

Mr RICH-PHILLIPS — I did not say 'waffle' — lots of words but not much detail.

**Mr JENNINGS** — You do not hear this problem ever.

**The CHAIR** — Can we concentrate on the answer, please, rather than the interplay.

Mr JENNINGS — Okay. The good news is that there have been about 5000 people who have been on the waiting list, which is a figure that I volunteer, and in fact my best advice is 5138 people have been on the waiting list for this program, which is a significant reduction to what it had been a year or two before. So we have in fact taken nearly 2000 people off the waiting list during the life of 2004, 2005 and 2006. So it is consistently good news.

I think I might have volunteered the substantive nature of that detail to you in the Legislative Council, but I also indicated that there are about 6000 people who are going to be the beneficiary of the one-off payment that actually occurred at the end of the 2006-07 budget. So if you have a look at the budget paper on page 91, you will actually see that there is quite a — if you actually have a look at the life of the estimates period here, we started off with a target of 24 910 people receiving a service, and the outgoing expected outcome is 31 110. Now that spectacular increase — —

**The CHAIR** — A good result!

Mr JENNINGS — That spectacular increase is being directly attributed to a \$9.5 million injection that was made in the outgoings of the 2006-07 budget. That will make significant inroads; as you can actually see, it is 6200 people — it is larger than the waiting list. In fact I do not know that we are actually chasing up an additional 800 people to get serviced, because in fact, as you would appreciate, there are a range of various service needs and those needs vary across the different needs of people who are waiting to receive a service.

As you can see, the report that you quoted from pre-dated that significant commitment and also pre-dated the commitment going forward. So beyond the \$9.5 million there is another \$20.3 million going forward in the forward estimates which is designed to address those waiting-list concerns, and there are many elements of the waiting list that we optimistically think will be removed — for instance, that those children who are waiting at the Royal Children's Hospital for aids and equipment through the fantastic services provided there, we think will be eliminated through this investment.

We are also adding to the program to provide for the aids and equipment needs of people who are on extended aged care at-home packages and community aged care packages, which is a commitment that we made at the last election which will open up access to this program to people who previously were not eligible for this program because they were receiving commonwealth-funded assistance. We are also opening up a program to provide for greater home modifications and, for the first time, vehicle modifications.

So we think that the story about waiting lists is that we are trying to remove them and in fact we have probably provided enough money to remove the existing waiting lists, but as anybody in public life will know, in fact there is a certain elasticity in the nature of these programs and we may expect more people who may currently not have applied, to apply in the future. So I may not be able to come back here in 12 months time and say there is no waiting list, but at the moment we have accounted, in cost terms, for the current waiting list.

Mr RICH-PHILLIPS — Are you able to break down — —

**The CHAIR** — You want the breakdown among the three areas, do you?

Mr RICH-PHILLIPS — Yes.

**Mr JENNINGS** — I have not got that before the committee at this moment, but we can probably track that down subsequently.

**Mr RICH-PHILLIPS** — As to the money, you mentioned \$20.3 million in the estimates; can you reconcile that figure, please, with the \$30 million that is mentioned on page 16, over five years?

**Mr JENNINGS** — Yes, I can. It is the \$9.5 million going back in 2006–07 and it is 20.3 going forward; so add those two together.

Mr RICH-PHILLIPS — Right; okay.

Ms GRALEY — Minister, I think you probably understand that there is nothing more emotional for a local MP than have a family, usually a lone mother, in the office with children with a disability. I understand that the performance of the Victorian disability services system is linked with commonwealth negotiations on funding. I am hoping that the minister could provide us with an update on the development of the next CSTDA and how he thinks this will play out in the future.

Mr JENNINGS — I thank Ms Graley for her question and her concern, and hopefully I will give her a sense of optimism rather than pessimism, because in fact it is very important for all of us to have a sense that we can respond to the needs of any family that may come knocking on your door and may require assistance. So I would like to end on an optimistic note, but I have to indicate to the committee at the moment that the negotiations up until this point in time have not been very fruitful or satisfactory. The commonwealth-state territory disability agreement — of which there have been three previously — is about to run out at the end of June. In the last financial year what that meant for Victoria was that the Victorian budget allocated about \$1.04 billion worth of services through that agreement.

The commonwealth provided \$129 million worth of services. So, as we can tell, about 88 per cent of the commitment was funded through the Victorian government, and the commonwealth level of contribution, we contest, is not equitable in terms of Victoria's share of disability funding or equitable in the terms of the relative weight that the jurisdictions should carry in relation to this important area.

The federal Parliament Senate process did a lengthy examination of the needs of the disability sector, and came down with a report in February that indicated that there is a whole range of unmet needs that the commonwealth should invest in. It was a unanimous report from the Senate inquiry, so you would have actually thought that when the commonwealth minister came to negotiate with state and territory ministers in Brisbane at the beginning of April, that in fact we would have common ground to embark upon the fourth agreement.

Unfortunately that was not the case. The commonwealth is very committed to accountability measures and wanting to make sure that all states and territories obliged with accountability undertakings to it — which is fair enough, from Victoria's perspective; however, there was not a corresponding commitment to grow the program going forward, so there is no agreed growth formula between the states and the commonwealth. There is no agreement about the level of indexation that is appropriate to provide to the field. In fact the indexation rate that the

commonwealth wishes to apply to the price structures of the program is very low indeed — 1.8, which is at the very low end of the scale in relation to indexation factor. There was no particular agreement to any specific purpose payments outcomes, whether they be to mirror the younger people in nursing homes initiative.

I will go off at a tangent to actually say that is one of the successful models of engagement between the state and the commonwealth, so in fact it is within our wit and wherewithal to be able to find opportunities where we can actually agree on a certain direction. Indeed in younger people in nursing homes we allocated \$30 million each — commonwealth and Victoria, going forward — to try to provide for more flexible and responsive needs for younger people who might otherwise live in nursing homes.

So we are capable of finding some common ground, and I am absolutely determined to find some common ground with the commonwealth in relation to this. In fact in the state of Victoria we think an 80:20 share going forward is something that we are happy to countenance. We are very happy to comply with accountability measures. We are very happy for us to have an agreed assessment about what projects we can jointly fund. So the offer is available from the state of Victoria. We actually hope that the commonwealth will respond. In fact we are waiting for the commonwealth to respond, but states and territories will be putting in a combined position to the commonwealth shortly hoping to recommence negotiations in June, because these issues are far too important for them to be shunted from one jurisdiction to the other, and we should be working on an agreed set of principles and priorities.

**The CHAIR** — I thank the minister on that important issue.

**Mr DALLA-RIVA** — Minister, I refer you to budget paper 3, page 91 again, in respect of disability services targeted services. In respect of vehicle modifications, as we know, they can cost in the vicinity of \$20 000 plus. I note, minister, in your earlier response in respect of the clients accessing aids and equipment, that you have got an expected target of 26 210 clients accessing aids and equipment. How many vehicles would you expect will be modified in the forward estimates in the 2007–08 target period? I am referring to a comment you made in the *Age* on 27 April, where you mentioned:

For the first time we recognise that mums and dads want to take their children out and about and have an active and full community life —

which I agree with.

The question is: in terms of the priority for vehicle modifications, will it be families with young children or adults who have been waiting for vehicle modifications for a period? Finally, in terms of the guarantee, will the total cost of each vehicle modification be met by the allocated funding? I guess there is a three-part link in terms of vehicle modifications.

Mr JENNINGS — It is a very good question. I have to volunteer that my answer that I give you at this point in time I do not think is going to be a great answer. The various issues that you outlined are a work in progress in terms of the particular allocation within the funding envelope for this purpose, what the demands may be, because at the moment we have not had a waiting list for this because the program has not been opened to this area. So in terms of what the demands may be coming on us, we are not quite sure. What in fact might be the best way that we can actually spread the investment to provide for the biggest range of people — whether we go to the greatest need, or whether in fact we try to provide for a range and spreading the resources as far as we possibly can, without necessarily the most expensive investment; these are the types of finetuning of this program that we are going to be doing during the life of 2007–08.

It is a terrific question in the sense that it goes to the heart of what our deliberative thinking is going to be over the next few months. I am very happy to come back and let you know, the community know, when in fact we have built those parameters of the system so I can meaningfully answer that question.

**Mr DALLA-RIVA** — So can we expect something perhaps provided on that? Is there a time frame you are expecting, given that we are — —

**Mr JENNINGS** — All of that deliberative work, all that scoping work — —

Mr DALLA-RIVA — I understand.

Mr JENNINGS — An example of it may be — just in terms of the efficiencies of being a purchaser of equipment, which we have not been previously — what is our purchasing power? We are not quite sure whether we go through the existing providers and the existing network — which I am sure we will do — about who does those vehicle modifications, because in fact there is a sub-industry that actually undertakes it. We actually have not quite worked out what is the most cost-effective and transparent way to enter into that market, because we do not want to disadvantage people from actually having access to participating in that market. It will take a few months. It is an imminent issue, but by the end of the year — —

**The CHAIR** — So we will not having anything in the next 30 days, but I am sure we will keep this under review. Minister.

Mr WELLS — Minister, I refer to budget paper 3, page 79, the aged care assessment relating to both the cost per assessment and the wait between the client registration and the ACAS community-based assessment. It is a three-part question but all related. Why is the cost per assessment over 9 per cent higher in 06–07 than what it was in 05–06, and why is the target of 15 days not being met? It seems to have been stuck on 20 days in terms of the wait between the client registration and the ACAS assessment. How do you expect to meet your target of 15 days, which is in the 07–08, at the same time as reducing the output cost per assessment?

Mr JENNINGS — That is accumulatively about the best question I have actually ever received in relation to the accounts, really, in all my time of appearing before the committee, because it actually relates to the budget paper and the output measures pretty comprehensively, doesn't it.

Mr WELLS — Thank you!

 $\mathbf{Mr}$   $\mathbf{JENNINGS}$  — I must say, maybe under your chairmanship, Mr Stensholt, the committee is actually digging deeper into the — —

**The CHAIR** — We are, we definitely are — we have a whole lot of new members, Minister.

**Mr JENNINGS** — You are quite right to indicate that there has been a concern about the average waiting time for people who receive assessments in the community, and that is absolutely true. It is not disputed, and in fact this is actually something that we do not find acceptable either.

What we can say is that there have been major gains and major success in relation to assessments that are actually undertaken within hospital-based settings, which has in fact been a major problem for all of us. We see the system of integrating residential aged care, community care and acute hospital care as being a major problem. A major problem has been that people are staying inappropriately too long within hospital-based settings — acute hospital settings — which is not necessarily accounting for their needs, no. 1, and is a very high, extremely high cost structure.

In fact if we have erred in the emphasis within this program and what we have achieved, we have actually achieved great results in making sure that those assessments take place in a very timely fashion within hospital-based settings and within residential aged-care settings. That has been our emphasis and priority, and we have been very successful at that.

In terms of the staff and the support that has been provided for average waits in the community, we have been stretched, given the nature of some staff turnover and the difficulty of finding specialised staff who have expertise in this field. You would be aware that this is an issue that both the state and the commonwealth are particularly mindful of, and we share a responsibility of trying to ensure that there are better outcomes within this program. We have allocated significant one-off state investment to try to remedy this situation.

Indeed, the cost structures that you indicate relate to the recruitment and training of additional staff. The unintended consequences of where there may have been staff reductions is that in fact we need to invest to try to attract people to the field, to train them and to ensure that our capacity increases over time. Hopefully this will be something that the commonwealth and ourselves can agree on in future as being an area warranting joint attention and investment.

**Mr WELLS** — Minister, just to clarify, how many additional staff do you think you need in this program to be able to reach your target of 15 days?

Maybe we could get Ms Herington's microphone a bit closer!

**The CHAIR** — It is good to see a minister prepared to take advice.

Mr JENNINGS — Sure. I am sorry that I offend the committee and my colleagues at the table if in fact I am just such a precious pup that I have to answer all the questions myself. The nature of what I indicated to the committee about this needing to be a collaborative approach has been reinforced by my colleague here, who reminds me that there is a COAG-auspiced process to try to get to the nub of this problem.

To just re-emphasise that point: it is a collaborative effort, where we both have funding arrangements. That does relate to the budget allocation and the target figure that is indicated here. In fact our forward estimates remain flat and static without anticipating what the commonwealth level of investment may be, so we may have some variation to the program on the basis of some matched funding that may subsequently come into Victoria from the commonwealth.

On the question of the number of people that we may need to recruit, there is a certain degree of elasticity in that depending upon the regional variation and the needs of the program, and depending upon the skill mix and what the service configuration may be. There is not a one-size-fits-all response to this on the basis of what the various service configurations of a community may be, what the starting point of the ACAS may be. I cannot actually provide the committee with an estimate of the number of people, so I will pretty much stick to my substantive answer there.

**The CHAIR** — Thank you, Minister. I might note that in response to the questionnaire we sent around, the Department of Human Services was not able to provide us with data of estimates for June 2008. Perhaps this could be supplied — every other department seemed to be able to supply it.

Last year we saw the Disability Act, which I thought was a great hallmark in the work of the portfolio. I would like you to give us a report on the progress for that with particular reference to what is in the budget here and the estimates in order to implement that new act.

Mr JENNINGS — I thank Mr Stensholt for his question. In fact, as I indicated in my introduction, I have been the beneficiary of a number of great reform programs that will redesign and reconfigure our obligations and service capacity to Victorians. Certainly that is the case within the Disability Act, which will be coming on stream in its full implementation as of 1 July. It clearly outlines the state's obligations in terms of service provision.

There are within the budget papers a number of undertakings that we must fulfil. For example, the requirement for individual case planning is a requirement that is in the budget paper where we actually have to comply within 60 days for 100 per cent of people who require a plan to be developed — we are obliged to develop it in accordance with the act. That is one indication of the onerous nature of this for the state and the people who provide services for people with disabilities.

There are also a lot of support mechanisms and reinforcing mechanisms about best practice in capacity. We have appointed a disability services commissioner who is charged with statutory responsibilities for reporting to the Parliament about the capacity of the sector, will have a role in terms of providing for effective advocacy and education services being provided to the field about best practice, about what the standards of practice should be.

The office of the commissioner will be able to provide for mediation services so that people can exercise their rights. That applies to people with disabilities themselves in terms of the quality of service they are being provided with, or indeed there will be access for their carers, their loved ones to be able to have remedies through mediation and support through the office of the commissioner. We are establishing a council to provide advice to both the commissioner and me about the range of needs in the sector and the effectiveness of the implementation of the act.

We have also introduced a senior practitioner who is charged with the responsibility of making sure that we have best practice, in particular in relation to practices such as compulsory treatment orders and restrictive interventions and other actions that may be done by service providers in disability in the name of maintaining safety and security for the community. But very importantly, we have to be mindful of the human rights aspects to ensure that people who are in those forms of orders and in those forms of intervention do not adversely impact upon their quality of life and their freedoms as citizens of this state.

It is a very important balance to make sure that we as a community are confident about the behaviour of people who may have very volatile or disturbing behaviours but yet have absolute right to ensure that they are not being

inappropriately treated. The combination of the senior practitioner and the services commissioner, we think, will play an important role in trying to ensure that there is appropriate practice taking place. I can say to the committee that the sector generally is pretty enthusiastic about the bill. There have been very passionate debates that led to its establishment.

**The CHAIR** — Telmo Languiller did a lot of work as parliamentary secretary.

Mr JENNINGS — A lot of work. The parliamentary secretary was a very busy man in terms of community engagement. There has been a lot of community engagement about this bill. There are very high expectations from all in the sector and in the community about our achieving better outcomes for people with disabilities, and I am pretty confident that the combination of things within the Disability Act will enable that to be the case in the years to come.

The CHAIR — Thank you very much for that.

**Mr RICH-PHILLIPS** — Minister, I am sure you would be disappointed if I did not ask you about aged-care facilities.

Mr JENNINGS — Good on you!

**The CHAIR** — They are very good. They do very well.

Mr JENNINGS — Excellent.

Mr RICH-PHILLIPS — Perhaps as an aside you might tell the committee what proportion of the aged-care budget you are responsible for versus Minister Neville. My substantive question goes to the issue of the commitments made for the Bendigo Stella Anderson facility and the Trentham Nursing Home — commitments that were made during the election in November. Funding has not been provided in this year's budget for those two facilities, so can you please tell the committee why not, when redevelopment will commence and whether you are confident that those two facilities will meet the requirements for accreditation in 2008?

Mr JENNINGS — That is beautiful! Let me actually start with the end first. Yes; just in case you thought I was being disingenuous at the beginning of my presentation to the committee today, all the Victorian public sector residential aged-care facilities will actually achieve 2008 accreditation standards. That is the good news, to answer the question.

It is all good news, really, because the commitment to redevelop those two services — Bendigo and Trentham — will take place over the life of the government. Indeed in previous iterations of public accounts and estimates I was always asked about when the capital program was going to roll out to ensure compliance with 2008. I consistently came back and said we will actually deliver on our commitments over the life cycle of the government and indeed make sure that we meet those standards, and that is going to be my answer when I come back. If it is not the answer, I will let you know, but I am pretty confident it is going to be the answer. Those projects will be funded in coming budgets.

In answer to your first question, I am not privy to be able to tell you off the top of my head what aspects of the budget Minister Neville is responsible for, but I — as I indicated to you before, on the basis of what is in the aged-care program and the small rural services program — am responsible for outputs of \$1.0216 billion of services related to aged care.

Mr RICH-PHILLIPS — That would suggest there is only about \$10 million left for Minister Neville.

**Mr JENNINGS** — As I said to you, I do not know the number off the top of my head.

**The CHAIR** — We can pursue that with Minister Neville.

**Mr PAKULA** — Minister, could you inform the committee how the government's commitment to the home and community care program of \$83 million over four years will improve and increase service provision? In asking the question I am referring specifically to pages 80, 84 and 85 of budget paper 3.

Mr JENNINGS — Thank you for the question. Yes; one of the good things that I have been responsible for over a number of years and continue to be responsible for is the home and community care program — a major provision of support to seniors in our community and people with disabilities who want to live independently at home but require some additional support. Whether it be nursing care, personal care, help around the home or Meals on Wheels, these are the types of programs that are funded through home and community care. As lingering members of PAEC will know, I have actually come to the committee and told you on a number of occasions that under normal circumstances home and community care around the country is a 60-40 program, where the commonwealth contributes 60 per cent and the states contribute 40 per cent.

That has not been the case in Victoria. Over the life of our government we have gone pretty close to a fifty-fifty match, and indeed in the current budget of \$470 million in this year Victoria has funded \$57 million beyond what our matching component is. It is a significant commitment we make to seniors and people in the community who require assistance. We recognise that in the forward estimates with \$83 million in the next four years to try to keep that momentum and capacity going within the system. We estimate that will provide for about 400 000 hours additional service and that in the order of 6000 additional people will be able to receive access to that program.

We recognise there are some reasons for us to make sure there is appropriate accessibility within the programs, so in the last triennial funding round and going forward we will be trying to make sure we do a number of things. The first is that we provide for equity across the state so that regardless of where they live people have a reasonable probability of receiving that service. When I arrived in the portfolio there was a very unequal distribution of those funds, and to be honest there continues to be a bit of an unequal distribution of those funds. On a per capita basis there is a disproportion between rural areas and metropolitan areas. With the triennial funding arrangements we are trying to address that imbalance by allowing for ongoing quality of service and by not diminishing any funding that goes into regions and then subsequently into LGAs. We are trying to distribute growth money through the program to try to address those imbalances.

We are establishing a benchmark for funding across rural areas which is higher than the benchmark for metropolitan areas. Members of the committee would understand that is probably an appropriate thing to do, given the tyranny of distance factors and transport factors that may come into providing for people within the program who might be socially isolated and have additional transport costs in rural areas. It is very important within that two-tiered system of regional benchmarking and metropolitan benchmarking for us to allocate maximum funding to cater for growth. That is the first issue.

The second issue is in relation to accessibility for people from culturally and linguistically diverse backgrounds to make sure they receive service in accordance with their needs. We estimate that somewhere around one in five Victorian seniors speak another language at home and come from a background where English is not their first port of call in relation to language. There may also be some cultural impediments to the accessibility of the service, and we want to try to overcome those. We have embarked upon investment strategies to try to turn that around so we have a more representative and responsive service configuration.

Exactly the same theory applies to members of our indigenous community in terms of their access to the program. There has been significant investment made in the last three years, and indeed there will be going forward, to try to account for the home and community care needs of indigenous people within the program. They are the major emphases and drivers of this program in the years ahead.

The CHAIR — Thank you, Minister. That pretty much concludes our consideration of that portfolio. Just before we finish I note that I would appreciate it if we could get an answer from the Department of Human Services to question 9 of our questionnaire. I am happy that it be taken on notice and be provided within 30 days. We would appreciate that. We are also looking for a departmental indication of the costs involved for the portfolio department in regard to servicing the Public Accounts and Estimates Committee, both in terms of staffing and resources, that you expect to have next year on the basis of experience over the last few years. I thank all witnesses for their attendance.

Witnesses withdrew.