

# VERIFIED TRANSCRIPT

## PUBLIC ACCOUNTS AND ESTIMATES COMMITTEE

### Inquiry into budget estimates 2008–09

Melbourne — 22 May 2008

#### Members

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

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

#### Staff

Executive Officer: Ms V. Cheong

#### Witnesses

Ms L. Neville, Minister for Community Services,  
Ms F. Thorn, Secretary,  
Mr A. Hall, Executive Director, Financial and Corporate Services,  
Mr A Rogers, Executive Director, Disability Services,  
Mr P. McDonald, Executive Director, Children, Youth and Families,  
Ms P. White, Executive Director, Operations, and  
Ms B. Whitmore-Seidel, Director, Program and Sector Support, Children, Youth and Families,  
Department of Human Services.

**The CHAIR** — I declare open the Public Accounts and Estimates Committee hearing on the 2008–09 budget estimates for the portfolios of community services, mental health and senior Victorians. On behalf of the committee I welcome Lisa Neville, Minister for Community Services; Fran Thorn, Secretary of the Department of Human Services; Alan Hall, executive director, financial and corporate services; Arthur Rogers, executive director, disability services; and Paul McDonald, executive director, children, youth and families. There may be some others whom we will call up from the ranks as needed. Departmental officers are also here. Members of the public and the media are welcome. In accordance with the guidelines for public hearings I remind members of the public that they cannot participate in the committee's proceedings. Only officers of the PAEC secretariat are to approach PAEC members. Departmental officers, as requested by the minister or her 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 this room.

All evidence taken by this committee is taken under the provisions of the Parliamentary Committees Act and 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 verifications be forwarded to the committee within three working days of receiving the proof version. In accordance with past practice, the transcripts and any presentations or documents will then be placed on the committee's website.

Following a presentation by the minister, committee members will ask questions relating to the budget estimates. Generally the procedure followed will be that relating to questions in the Assembly. I ask that all mobile telephones be turned off. I invite the minister to give a brief presentation of no more than 5 minutes on the more complex financial and performance information that relates to the budget estimates for the portfolio of community services.

#### **Overheads shown.**

**Ms NEVILLE** — Thank you very much, Chair. I was just going to take the committee through some of the key areas within the community services portfolio, looking at what has been achieved, the challenges, and the way in which this budget attempts to address that. Given the time constraints I will not be able to cover all of community services, but I will focus particularly on disability and the children, youth and families area.

What underpins our work in disability is of course the disability state plan. The plan is a shared vision and a commitment between government and people with a disability and the sector. It has a whole-of-government approach that puts the needs of individuals at the heart of policy and practice. This has been reflected in the priority of our investments since 2002 when the plan was first launched. This slide gives a sense of some of the achievements that we have been able to realise over that period of time, particularly noting that we now see a 105 per cent budget increase in disability since 1999–2000. But some of the other key achievements have been the closing the Kew Residential Services, the new Disability Act 2006, the establishment of the Disability Housing Trust, the commencement of My Future My Choice, which is the program to support young people in residential aged care to find better accommodation and the establishment of the Victorian Disability Advisory Council. But of course there are many challenges. We know, for example, that we have demand growing at about 4 per cent per annum. We know that employment opportunities for people with a disability are minimal despite the fact that many can and want to work. We also know we need to work closely with carers as they age and plan for the future of their children. Unfortunately we still need to tackle negative perceptions in our community about the ability of people with a disability. We must also continue to ensure our focus is on individualised support and make sure our services are based on people's needs rather than the needs of the services.

To try to meet and tackle some of these challenges, this budget represents the biggest ever investment in Victoria's history for disability services. It sees an increase of \$105.3 million over last year's budget, and, as I said, represents a 105 per cent increase in disability service funding since 1999–2000. The budget provides \$44.4 million, or \$233.4 million over five years, for new initiatives to continue the reform and enhancement of disability services. The investment is in addition to \$19.9 million for 08–09 provided in last year's budget, and it will see an extra 3700 people receiving services. It does not include the announcements by the commonwealth of additional funding. Some of the specific areas of funding, areas in which this funding will be spent on, include 70.6 million over four years to increase access to individualised support packages; \$50 million in new capital investment to replace support accommodation facilities; \$10 million over four years to support young people to develop job skills and achieve long-term employment options; \$16 million over four years to deliver respite services, including a respite

information service and a carer's reward card; additional funding to the non-government sector for attendant care services; the implementation of more individualised funding approaches; as well as \$5 million for access to aids and equipment and a further \$10 million for My Future My Choice on top of the COAG commitment that Victoria already has.

Moving on to children, youth and families, this has again been a major area of reform for the government. There is new legislation, a new focus on early intervention and prevention, and also record investment, seeing an extra 110 per cent in funding since 1999–2000. A key focus is on providing more support to vulnerable families earlier to help them before they hit a crisis point and require statutory intervention. The statewide rollout of family support innovation projects is now complete across all 79 LGAs, a year earlier than previously planned, and it supports the statewide expansion of Child FIRST. These teams will be operational in 16 catchments in 2008, and this again is a year ahead of schedule. These reforms have contributed and are continuing to contribute to arresting the growth in notifications that other states are experiencing, which you can see on the slide. In addition we have implemented initiatives to enhance out-of-home care services, including therapeutic foster care and the Hurstbridge Farm. However, there are emerging challenges when we work with vulnerable children and families. In out-of-home care placements, even though we have the lowest growth in Australia, the growth rate continues to rise — around 49 per cent as at June 07 — but we are significantly behind the other states.

Kinship care, which is the other graph there, is the fastest-growing form of out-of-home care, and we need to continue to support kinship carers. We also need to continue to build the capacity of our residential care workforce and the capacity of indigenous organisations to be able to deliver on the legislative reforms. This budget has a particular focus on supporting children in out-of-home care; more money for 12 pilots of a therapeutic model of residential care; more money to support kinship carers to ensure stability and quality; also more money to pay for the increased demand for caregiver reimbursements; and a focus on indigenous children particularly in residential out-of-home care.

We continue our approach to youth justice. There is also our whole-of-government family violence program and, as you can see, these are the particular initiatives that sit within my area, within community services. Also concessions continue to grow to over \$1 billion. This budget provides additional concessions particularly to tackle the impact of climate change with the increase in the water concession cap of 14.8 per cent as well as some other measures to support and assist low-income families.

**The CHAIR** — Thank you, Minister. We have about 1 hour and 25 minutes for questions on the community services portfolio. I might take up where you left off, and you might want to inform the committee across all of your portfolios on specific subsidies or concessions and revenues forgone within your portfolio and whether there are any changes to these in this year's budget. You might even want to tell us in more detail about your concessions review.

**Ms NEVILLE** — Yes, I will do this across all the portfolios. I have got responsibility for a range of programs where concessions and subsidies are in place to assist members of the community. The most notable is the concessions program. A detailed listing of those concessions — I will not go through every part of that — is provided through DHS in our resource guide on concessions.

**The CHAIR** — You will give us a copy of that.

**Ms NEVILLE** — But principally the main ones administered are the mains electricity concessions, mains gas concessions, the non-mains electricity concessions, water and sewerage concessions and pensioner concessions for municipal rates and charges. In 06–07, \$264.8 million was expended on the provision of these particular concessions or subsidies. For 07–08 we cannot confirm yet what those figures will be as concession payments; it is an entitlements program, not an appropriated budget. In 08–09 the government will make changes to key concessions and hardship programs to assist more vulnerable members of the community and households to afford water, energy and other essential services. Key changes are making water and sewerage services more affordable by providing \$42 million over four years to make it more affordable for low-income earners; funding of \$2.1 million to ensure eligible concession cardholders continue to receive free emergency ambulance services; funding of \$2.5 million over four years to further assist with the electricity bills of concession cardholders who suffer from some sort of health condition that means they are unable to regulate their body temperature; and providing funding of \$9.2 million over four years to provide an additional 1855 grants through the Home Wise appliance and infrastructure grant program. This was previously known as the capital grants scheme.

In the disability area the aids and equipment program provides people with permanent or long-term disabilities with subsidised aids, equipment and home and vehicle modifications to enhance their safety and independence, reduce reliance on carers and prevent premature admission to institutional care or high-cost services. Recurrent funding for the aids and equipment program in 08–09 will be \$29.6 million, and the program will assist about 28 310 Victorians.

The very successful companion card scheme is currently assisting over 19 156 people to access leisure and recreational opportunities without additional admission cost. The companion card is issued to people with significant permanent disability who can demonstrate they are unable to access most community activities and venues without attendant care support. In supporting the card over 1200 key industry participants have formally affiliated to accept the companion card, and 66 of the 79 Victorian local governments have formally affiliated with the companion card.

Across the area of children, youth and families there is only one service that actually incurs a fee, and that is in relation to adoptions. There are no concessions provided for these fees. In relation to youth justice it is known that adolescents 18 years and under and young people on youth justice orders are often unable to afford dispensing fees, so the Victorian government funds a pharmacotherapy dispensing support program to assist this most disadvantaged group to access opioid substitution therapy. The program has consequently removed a major impediment to commencing and retaining young people in a program that treats their drug addiction.

In terms of senior Victorians, as detailed on page 213 of budget paper 4, the estimated cost of concessions administered within the health category is \$506 million for 08–09. The senior Victorians portfolio has responsibility for approximately \$6.6 million of this amount, and this is an increase of 0.2 over the allocation in 07–08. The concession program administered within the senior Victorians portfolio is the Victorian Eyecare Service, which is a fixed budget program that provides optometrist services and spectacles to eligible people who are pension and health care cardholders to ensure they have correctible or preventable visual impairment. That gives you a summary of the concessions, fees and subsidies across all my portfolio areas.

**The CHAIR** — Thank you, Minister. I do appreciate there is a treatment of this in the budget papers, but we are trying to be a bit more comprehensive in the way we are looking at it this year. If there are any more questions, we will probably send them to the department to provide a little bit more comprehensive information. A list is always easier to see. It gives a comprehensive picture across the whole thing. Of course in the transport area, as you just mentioned, there are significant concessions to seniors, as well as pensioners too. We will be looking to try and consolidate these when we view our report in terms of the chapter.

**Mr RICH-PHILLIPS** — Minister, I would like to ask you about the new CSTDA that is coming up next year. The Prime Minister last year indicated that would be fast-tracked. That has not happened and the budget papers note that at the earliest we will have it is January of next year. Minister Macklin has indicated Victoria would get, on a fifty-fifty funding basis, approximately \$90 million extra a year — \$450 million over the life of the agreement. Given those funds have not come through because the PM has not delivered an early agreement, has the Victorian government contributed funding in the disability area to make up for the funding that would otherwise have come from that agreement had it been delivered as promised?

**Ms NEVILLE** — I am pleased to say there is a pretty positive working relationship existing between the commonwealth and the states in the significant area around disability and ensuring that the arrangements around commonwealth and state funding for disability are well coordinated and are about enhancing the services and not competing across the commonwealth and state field. We are in negotiation for the next agreement and there has been progress made in relation to that agreement. Through the commonwealth budget, for example, on 13 May they made some announcements. Those included redirecting funding of \$901 million over four years from the disability assistance package to the commonwealth state/territory disability agreement. That will mean that states and territories will be responsible for delivering accommodation support and other services that were to be delivered by the commonwealth government previously under the disability action plan.

**Mr RICH-PHILLIPS** — But that does not constitute new money, does it? That is just reallocating — —

**Ms NEVILLE** — It is money that has not yet been yet allocated.

**Mr RICH-PHILLIPS** — No, but it is not actually new funding for disability. It is existing funding that will now be — —

**Ms NEVILLE** — It is on top of the current CSTDA.

**Mr RICH-PHILLIPS** — It will now be state responsibility rather than a commonwealth responsibility, but it is not actually new — —

**Ms NEVILLE** — It is all new funds. It is on top of the current CSTDA that operates at the moment, which is due to expire in June of this year. This is on top of those current arrangements and that package of money.

**Mr RICH-PHILLIPS** — But in terms of service delivery though, those are services that are currently being delivered by the commonwealth?

**Ms NEVILLE** — No. The commonwealth allocated and made an announcement that on top of the CSTDA there would be \$962 million which they would administer. Of that, about \$901 million has not been allocated; the rest was allocated to some agencies. The \$901 million is new money that does not exist in the CSTDA, has not been allocated, and will absolutely go to building and enhancing disability services that are able to be provided in Victoria and across Australia.

**Mr RICH-PHILLIPS** — For the current financial year until the new agreement comes into place has the Victorian government added additional funding to make up for the delay in the new CSTDA?

**Ms NEVILLE** — The CSTDA was extended to June of this year. So current money is still coming in. The budget I have just been speaking about has allocated an additional \$44.4 million, which equates to, in fact \$105 million of new money in the 08–09 budget, which is well and truly above our commitments under the CSTDA.

**Mr RICH-PHILLIPS** — If the CSTDA had been fast-tracked, as the PM suggested, it would have been \$90 million, is that correct — with the commonwealth component and the 45 you have talked about from the state?

**Ms NEVILLE** — What will become available, which we did not have before, from 1 July, is the \$901 million, and we are in negotiations with the commonwealth about our share of that at the moment. There is a meeting of disability ministers next week in order to progress that. It is expected that the CSTDA will be extended until January next year, as the other agreements have been, and that there will be indexation as part of that. So you will have the \$901 million, you will have the CSTDA continue with some indexation on top of that until the new agreement is finalised at the beginning of next year. In addition to that the commonwealth has also announced \$100 million, which is unmatched money, to provide for supported accommodation and respite services, and that will be distributed across the states on an equity basis, and we are expecting around \$24 million — it is still to be worked out in detail but around \$24 million — for Victoria to assist in building further supported accommodation.

**Mr RICH-PHILLIPS** — Will that flow before the CSTDA?

**Ms NEVILLE** — The CSTDA is still flowing.

**Mr RICH-PHILLIPS** — The new CSTDA?

**Ms NEVILLE** — The \$901 million will flow from 1 July and the \$100 million, as I understand, will come forward before 30 June, because it was 07–08 money.

**Ms MUNT** — I would like to talk about disability funding as well. Budget paper 3, page 291, talks about enhancing disability services and outcomes. Also in your presentation there is a page on disability funding. It seems to me that there is a very big increase in disability funding, including a whole lot of new funding. I was wondering if you could detail what that funding will be used for. Also, on this page it gives the increases in funding but it does not give the total funding for disability services. I wonder if you could detail that as well?

**Ms NEVILLE** — Thank you for that. It is a very significant budget for disability. In fact, as I indicated in my presentation, it is the biggest ever increase in funding in disability in Victoria's history. So it is a significant increase, which takes the total funding for disability services to \$1,175 million. It is a significant increase.

**The CHAIR** — That is just under your portfolio, isn't it?

**Ms NEVILLE** — That is right. That is under my portfolio. That is what sits under the community — —

**The CHAIR** — So there are disability services for kindergartens and things like that which are separate.

**Ms NEVILLE** — That is right. So there was additional money on top of that that was provided as part of the whole of government disability commitment which sits also within the department, particularly in the Department of Education and Early Childhood Development.

**Ms MUNT** — So it is a huge spend when you put it into figures.

**Ms NEVILLE** — It is.

**The CHAIR** — It would be useful to have a figure for the whole package across government.

**Ms NEVILLE** — Yes, someone can quickly pull that out actually. I will just take you through some of our specific funding, so hopefully by the end I will be able to give you that particular figure. But it is a 105 per cent increase. This particular year we have allocated \$44.4 million in 08–09, \$233 million over five years, and it is really about continuing the reform and enhancing disability services in Victoria. It is a very significant boost to try and meet some of the demand patterns that I talked about also in my presentation. It is also in addition to further investment that we committed last year that comes on board in the 08–09 year, which is \$19.9 million.

The 08–09 budget initiatives provide more responsive and enabling supports for people with a disability, easing the pressures on families and carers and strengthening the capacity of the non-government sector to deliver its essential supports for living and participating in the wider community. I will just take you through a little bit of what that means and what that represents in numbers of people as well. So in this year's budget, 08–09, \$17 million will provide additional individualised support packages that promote access for an additional 340 people with a disability to a range of flexible support options based on their individual choices and needs. It builds on our commitment of an additional \$12 million which is also provided in 08–09, which will promote access for a further 350 people with a disability; \$4.2 million in 07–08 to pilot enhanced client-centred planning — this initiative is to pilot in two regions, one metro and one rural, and the pilot is not included as a specific performance measure, as it is a pilot; \$9 million in 08–09 to support the ongoing viability and sustainability of the non-government organisations who play a very important role in providing community-based supports and services to people with a disability; \$3 million to assist the disability service sector to transition from what has been historically block funding to a much more individualised funding approach which we know will put some pressure on the non-government sector but is really about providing much more flexible and more individualised focused support and more choice to people with a disability.

There is also \$5 million to increase the number of people with a disability or chronic illness who have access to aids and equipment. It is in addition to \$3.9 million that was committed under LFS for aids and equipment that also comes on board in 08–09; \$3.7 million to expand carer support which includes \$3 million to deliver 300 episodes of respite that are flexible and meet individual families' needs. Respite has changed a bit and someone might want to explore that a bit further but it is a really exciting area of change in supporting people with a disability and their families.

**Ms MUNT** — Very welcome too.

**Ms NEVILLE** — Yes. There is money to establish the carer reward card to recognise the contribution of carers; also money for a centralised respite information service — that is about better informing and enabling carers to get advice and information about access to respite services; \$2.4 million to provide intensive support to eligible young people to develop their job skills and achieve a sustainable and long-term employment outcome; \$1 million on top of another \$4 million which was an LFS commitment — that comes on board in 08–09 to address the increasing demand for the slow to recover ABI program; just over \$1 million to facilitate the disability action plans in public and community organisations — so that will enable us to work with more than 50 of those organisations to improve people's access to buildings, et cetera, and workplaces to improve employment opportunities and participation of people with a disability; also \$1.6 million to develop a targeted community awareness strategy to try and shift community attitudes and perceptions about people with a disability and their capacity to contribute and participate in the community; \$50 million which will come forward in 07–08 which will be given to the Disability Housing Trust, which is now called Housing Choices Australia, to replace 38 supported accommodation facilities over the next three years in partnership with the department; \$10 million, which is in 07–08, on top of the \$60 million COAG commonwealth-state commitment for My Future My Choice, which assists young people in residential aged care who want to either move out, want enhanced support, or young people who are at risk of

entering residential aged care to find alternative accommodation, and this will assist around 43 younger people who move out to either be able to move back home or into some other form of accommodation.

Money is also provided to continue the consultation and planning about the future of the Colanda Centre, which remains one of our institutional care areas. The investment will continue the process of the service transformation that has been initiated by the government under the State Disability Plan by providing more responsive enabling supports for people with a disability, easing the pressure on families and carers and strengthening the capacity of the non-government sector.

**The CHAIR** — Okay. Thank you, Minister.

**Dr SYKES** — Minister, I have got a question on supported accommodation but just before I go there: just putting the budget increase in context you said that the expenditure in your area has gone up 105 per cent since 1999 but the state's income has gone up the same amount so it is really just keeping track with the increased income of the state.

**Ms NEVILLE** — I will just have a bit of a look at the per cent, but it is a significant per cent as well so we have acknowledged these demands.

**Dr SYKES** — Yes, you have doubled it, but the point I am making is the money available for spending has doubled too.

**Mr BARBER** — That is why we take in more taxes. So that we can double it.

**The CHAIR** — We could quote you on that.

**Ms NEVILLE** — Obviously, it is about a long-term commitment to continuing to try and meet the pressures and the demands — —

**Dr SYKES** — Yes, but you would be disappointed if you had not doubled the expenditure given that you have got double the income to spend. Just looking at supported accommodation, I noticed in your introductory remarks that \$50 million is being allocated to new investment in refurbishing or replacing all the buildings and rebuilding supported accommodation units. Looking at pages 106 and 107 of budget paper 3, it appears to me that there is no increase in the number of new beds. There are no new beds coming on line. Given that the Auditor-General's report commented that there is a continuing crisis in unmet accommodation needs for people with a disability across Victoria, and he also said currently demand for supported accommodation exceeds supply by around 30 per cent — that is, 1370 people in need of accommodation — and the DHS forecast is that demand will grow by around 4 to 5 per cent annually, given that situation and given that you recognise that there is an ageing population and older carers, what is being done to make more beds available to address that backlog?

**Ms NEVILLE** — I think just to be clear that the combination of both state and commonwealth capacity will provide new and additional accommodation, and we have been delivering that already. I just want to be clear so that — —

**Dr SYKES** — So where does that appear in the budget papers?

**Ms NEVILLE** — Since 1999–2000 there are around 257 additional supported accommodation places coming on in 08–09, and a further 75.

**Dr SYKES** — That does not show up in the papers. Your prediction for 08–09 is the same as 07–08, isn't it?

**Ms NEVILLE** — If you have a look at what we are measuring in the budget papers, when you talk about bed capacity — —

**Dr SYKES** — Page 106 says for clients in shared supported accommodation the 2007–08 target was 4880, the expected outcome is that and the target for 08–09 is 4880, so there is no change.

**Ms NEVILLE** — Exactly. If you have a look at bed capacity in the disability and service system it is much more complex than it used to be. What we used to do, and really what this is trying to do as well, is that we

used to count the number of beds in institutions. That was pretty easy: Kew and Colanda and Sandhurst. We used to count those beds and so we always knew how many accommodation supports that there were. But we are now managing a much more flexible, more individualised range of accommodation services for people with a disability, including providing supports for people in their own homes to live at home.

If you look at out-of-home care accommodation support, there is a total of just over 1000 — 1065 — facilities that provide accommodation and support. This has increased from 1045 with the redevelopment of Kew, so we have got an additional 20 properties in the Kew redevelopment. The total of that includes 902 long-term group homes, so they are a specific form of accommodation — a group home that people might call CRUs. There are 82 facilities that provide respite care; 32 that provide congregate care for larger numbers; 15 accommodation units providing independent living; 13 units that provide outreach accommodation; a holiday facility for Kew residents; and there are a total of 287 supported accommodation provided by the non-government sector. They also manage some on our behalf. There are over, as you see, 4800 people in the group home component of the total component of beds of accommodation stock and this is reflecting people who live in a group home. These places will increase as innovative options become available — for example, My Future My Choice. That will be a form of accommodation for some — it will not meet everyone's needs — young people in residential aged care. There will also be additional accommodation that is built. The commonwealth has also announced, as I said before, about \$24 million or \$23 million for the state government to build further supported accommodation and it might — —

**Dr SYKES** — It does not show up in the — —

**Ms NEVILLE** — No, because that money will flow from the — —

**Dr SYKES** — I will cut to the chase. The Auditor-General — —

**Ms NEVILLE** — But can I just finish, Bill? So if you then look at what is also provided in here under clients receiving individual support, what that enables is for people to have choice about their accommodation. A lot of those packages are used to assist people to live at home, to live independently in a flat or a unit, to live in stock that is being built by the Disability Housing Trust, for example. In the past the way that we supported people with a disability in terms of accommodation was either institution-based or group home-based. We are now moving to a system which is about individualised funding and support packages to people with a disability to assist them to make the right choice. Some of those packages enable people to move out of, for example, our current group home arrangements and back into more appropriate accommodation because they have the capacity and the desire to live more independently than living in a group home arrangement. There is a flow in and out of the group home arrangements. There will be growth in that figure over a period of time, but where the biggest growth is going to be in accommodation for people with a disability is going to be enabling people to make choices about where they live with the support that they need to do that.

**Dr SYKES** — Sorry, I am not finished. When Mr Dalla-Riva has done the sums on the total forms of accommodation available on page 106, there has actually been a decrease since 06–07 from 5088 to 5070. But again to cut to the chase, the Auditor-General has identified 1370 people in need, and he has identified or reported that the DHS forecast is that demand will grow by 4 to 5 per cent per year. If the Auditor-General comes back tomorrow and asks how you are addressing the needs of those 1370 people, what is the answer? Has the number been reduced? Is it going to be reduced with either supported accommodation or other means, or are there still going to be 1370 people in need?

**Ms NEVILLE** — Firstly, can I just say they are numbers of people, not facilities. So they are the number of people.

**Dr SYKES** — Yes. Sorry, they are numbers of people, but the fact is that it has gone from 5088 — —

**Ms NEVILLE** — Which does support what I am saying in that what we are trying to do is support people with the right packages to make choices.

**Dr SYKES** — The 1370 — —

**Ms NEVILLE** — Rather than just saying that people with a disability should and have to live in a group home, that they should and can with our packages be able to choose other more appropriate forms of accommodation — —



**Dr SYKES** — I accept that argument.

**Ms NEVILLE** — Which is a good thing; it is a really good thing.

**Dr SYKES** — I will accept the argument, but now if you could answer the question: 1370 have been identified by the Auditor-General as unmet demand; if he comes back tomorrow and says, 'What plans do you have in place, what will be the number at the end of the next financial year?', will it still be 1370 with unmet demands or will it be reduced to, say, 600 because for the other 770 their needs have been met by A, B, C and D?

**The CHAIR** — Dr Sykes, I might point out that as I understand what the minister is saying you need to look at individual support and residential accommodation support together and that they are now looking at packages, rather than just simply whacking people into an institution.

**Dr SYKES** — Yes, I understand that.

**The CHAIR** — You will see under 'Individual support' further up the page there is an increase of 5500 clients receiving individual support for next year. The footnote says that some of those are for acquired brain injury and those sorts of things. That is the way I am reading it, as a total thing.

**Ms NEVILLE** — There might be a question about the long term, whether these are the only performance measures, and we need to have a look at that.

**The CHAIR** — Maybe the minister can try to give us something in writing to try — —

**Ms NEVILLE** — Can I just say that the number of those waiting is declining. In 04, 1950 people were waiting. It is now on the decline, so the trend is down. That is obviously through a mix of measures, through our young people in nursing homes program, through the money from the commonwealth and through the individual support packages. They are all about and are all designed to try to continue to drive those figures down but also to meet the right needs in the right way.

**Dr SYKES** — I am happy with the general principle, but perhaps there can be a question on notice. Currently the Auditor-General has identified the figure as 1370 and the minister has said it has come down from a higher figure. My question on notice is: what will it be at the end of the 2008–09 financial year; what is your target?

**The CHAIR** — In responding to that, I would understand if the response comes back with a more sophisticated analysis in terms of individual packages as well as actual places. I note also that in the Auditor-General's report there was a response by the secretary which I assume they will probably review and come back to us on.

**Dr SYKES** — At the end of the day you have to address those needs. If all this is happening, that number should be reducing.

**Ms NEVILLE** — Yes, and it has been.

**Mr SCOTT** — Minister, my question relates to younger people in residential aged care. On pages 309 and 312 of budget paper 3 is a detailing of a \$10 million investment in the My Future My Choice program. Could you give the committee some information on this initiative, because I understand it is dealing with the very important issue of young people living in residential aged care?

**Ms NEVILLE** — Thank you for that. This is a really important issue and it has been a major concern and a major priority for the Victorian government. We have also been working very strongly in cooperation with the commonwealth government. It is a national problem and all the states and territories have committed to some change in this area. In fact Victoria has been certainly leading the way. We signed our bilateral agreement with the Australian government in August of 06 committing at that time \$60.2 million in joint funding over five years. In this budget this \$10 million represents an addition to that \$60 million joint funding.

As at February this year there were about 213 people under 50 who were in a residential aged-care facility in Victoria. The initiative My Future My Choice has three main objectives. They include providing alternative accommodation and support for younger people who currently live in a residential aged-care facility. Where this is what they choose, this is about how we support those. We are trying to provide an alternative suitable option where

they do not want to remain in residential aged care. We are also seeking to minimise the number of young people being admitted to residential aged care in the future, by providing more appropriate options. We do want to enhance the quality of life for young people who are in residential aged care. What the initiative has involved is a comprehensive assessment and individualised planning for all the people younger than 50 who are currently living in residential aged care and who choose to participate. Not everyone has decided to participate, so we have provided this to 150 people out of the 213.

Provision of new, more suitable housing and support options which meet the needs of people who would otherwise be living in or are at risk of entering residential aged care includes in-home support and new facility-based models located within the community. The range of options will respond to the diverse needs of the population. People with acquired brain injury are the primary target group. To date funding has been allocated for the development of seven new purpose-built services to provide accommodation for a total of 46 people: in Alphington, Glen Waverley, Noble Park, Balwyn, McKinnon, Geelong and north and western regions. Further services will be developed as the initiative progresses. The provision of these new services will strengthen the capacity of the disability housing sector to respond to people with a range of disabilities and support needs. Priority for further developments in coming months will include options in rural Victoria.

Over 30 individual support packages have also been allocated to enable people to be supported in their own home or in another community setting, if that has been their choice. Many of these people were ready for discharge from hospital or rehabilitation services, with the residential aged-care placement their only option. Other packages have enabled people to move out of a residential aged-care facility back to their home or into another community setting.

To prevent future inappropriate admissions to residential aged care, wherever possible a joint strategy between aged-care assessment services, health services and disability services is being established. Regional disability services are working actively with their residential aged-care and ACAS colleagues to avoid admissions of younger people wherever possible. In addition, Multiple Sclerosis Ltd has recently commenced a pilot project to identify and respond to factors which lead to early admission for younger people with MS.

For younger people who remain in residential aged care, because that is what they have chosen to do or because they are still waiting for a more suitable option to become available, the My Future My Choice package has also allocated additional supports to improve their quality of life while remaining in a residential aged-care facility. About 90 funding packages have been allocated to provide community access, being able to go home on a weekend — all those sorts of things — social opportunities, therapy and allied health aids and equipment, and case management for younger people in residential aged care. We are continuing to work with the commonwealth to ensure that we are monitoring and evaluating the outcomes of this program. The \$10 million is welcome and will ensure that we are able to meet even more of those demands, and the intention is to not allow that figure of 213 to grow, but to continue to bring that down as well as prevent inappropriate admissions to residential aged-care facilities.

**Mr DALLA-RIVA** — Minister, I refer you to the service delivery budget paper 3, page 109. As you know, I put a few questions on notice in the upper house. I asked you a question 1355 in relation to the numbers of young people receiving a leaving care support response, which is in the budget paper. I asked specifically in respect of the 2006–07 budget how many young people have been supported as a direct result of these funds. In your reply you said:

The 2006–07 information will be reported in the 2008–09 budget paper 3 and the 2007–08 information will be reported in the ... annual report ...

I have gone to the budget paper, to page 109, in respect of exactly that question that I asked in Parliament and in respect of exactly your response that you would provide it in budget paper 3. I note that in the budget paper it has 'nm' — no measure. I am concerned that the response you gave me was not exactly what would be reported in the budget paper. Secondly, I am trying to get a feel for the 450 target expected outcome and future target being the same. How much money of the allocation that is down below 213 is apportioned to that? Because I understand in the 06–07 budget it was 2.09 growing to 3.73 recurrent. Is it still 3.73 recurrent into the forward estimates? Or has that increased? And if so, then why is the target not increasing correspondingly?

**Ms NEVILLE** — I am not sure why it is 'nm'. I do not know if Alan has an answer to that. But as I understand it, there were about 424 young people who were assisted in the 06 — —

**Mr DALLA-RIVA** — Four twenty?

**Ms NEVILLE** — Four hundred and twenty-four young people who were assisted in 06-07.

**Mr DALLA-RIVA** — So we take that as the given number?

**Ms NEVILLE** — As I understand.

**The CHAIR** — It could be there may not have been a measure in that particular year and it was introduced the following year. You would have to go back to the history in terms of — —

**Mr DALLA-RIVA** — Yes, it is just that the response from the minister was that it would be provided.

**The CHAIR** — You have got a number now.

**Ms NEVILLE** — Yes. In terms of the — —

**Mr DALLA-RIVA** — Yes, the second part is about the funding allocation. Is it still \$3.73 million or is it higher?

**Ms NEVILLE** — Yes. The funding continues to grow as allocated, so rising \$2.09 million rising to \$3.73 million in 2009–10.

**Mr DALLA-RIVA** — Sorry, where is that?

**Ms NEVILLE** — In 08-09 there will be \$3.167 million in this budget. You are quoting figures that were announced at the time, in the budget?

**Mr DALLA-RIVA** — Yes. I am trying to get a feel for the expected income or the expected expenditure in the 08–09 forward estimates.

**Ms NEVILLE** — Sorry, \$3.167 million will be spent.

**Mr DALLA-RIVA** — Is that a drop? It is growing to 3.73. Is that up to — —

**Ms NEVILLE** — No, it is not a drop. The intention of the project — I think you asked in your question — it is rising from \$2.09 million.

**Mr DALLA-RIVA** — Two point zero nine growing to 3.73.

**Ms NEVILLE** — 3.73 in 09-10 over the four-year period.

**Mr DALLA-RIVA** — Okay.

**Mr PAKULA** — Minister, I am looking at the same budget paper that Mr Dalla-Riva was just referring to, but at page 291. Under the output initiatives 'Enhancing disability services and outcomes', I know that over the forward estimate period there is money allocated for a community awareness campaign in the vicinity of between \$4 million and \$5 million over that forward estimate period. With that in mind I am wondering what the government plans to do to raise awareness of disability issues and increase the community participation of people with disabilities?

**Ms NEVILLE** — This is again another really important area in terms of improving the opportunities and participation of people with a disability, turning around community attitudes, focusing on the abilities of people with a disability to encourage people to take up and to enable people to get jobs and participate more broadly in our local communities. The Office for Disability has already undertaken a number of initiatives to improve awareness at local levels. Educating the community around accessible housing options and supporting public sector bodies in relation to the disability action plans are some of our new initiatives.

If I can just, firstly, touch on some of the things we have already done that have been extremely successful. Many members of the committee would have noticed the Bar None campaign, which was a community awareness campaign launched last year. It was an eight-week local media campaign aimed at recognising the leadership of

people and organisations in local communities that are tackling the barriers for people with a disability. As part of the campaign, Victoria's first media charter on disability reporting was developed and implemented in conjunction with News Limited-owned Leader community group. As a result of the charter, a clearly identified trend of improved reporting standards emerged throughout the campaign. Examples included more positive photographic representations of people with a disability, a decreased use of unacceptable language, and a wealth of stories that placed no undue emphasis on the disability but portrayed the active and varied role played by people with a disability in our community.

The campaign included eight regional events and one metropolitan event attended by about 2000 people. More than 150 Bar None stories appeared in the Leader community newspapers — 33 mastheads across Melbourne. There were more than 30 campaign-inspired stories on general access and disability issues, demonstrating a noticeable improvement in the reporting standards as a result of that media charter. There was extensive coverage in regional news media, including radio, television and print outlets. Stories about Bar None featured in 15 mastheads in regional papers. These stories focused largely on businesses and individuals that actively employ and support people with a disability, and sporting and recreation clubs that provide an inclusive environment. One example was the Spotlight store in Mill Park that works with a local employment agency to find suitable employment for people with a disability. The store has recruited three men with intellectual disabilities and is providing them with a supportive work environment. Another example was a bowling alley in Moorabbin that provides a fully inclusive recreational facility, with wheelchair-accessible lanes, gutter guards and ramps for players of all abilities to bowl. That would probably help a number of us, actually.

**Mr PAKULA** — I grew up at that bowling alley.

**Ms NEVILLE** — They are good cases to illustrate the really practical ways in which local businesses and organisations can really try and improve the participation of people with a disability.

In relation to accessible housing, the Office for Disability is currently working with the Office for Senior Victorians in building policy, and with the Office for Housing, VicUrban and the Building Commission to develop an accessible housing awareness campaign, and that is what funding has been provided for in the 08–09 budget. It will provide a coordinated approach to a range of accessible housing initiatives that aim to promote a greater understanding of the need for and the benefits of building and supporting accessible housing. It will comprise a number of elements, a media component, an advertising campaign and website and a consumer industry resource. It is anticipated that it will be launched later in 2008.

Funding was also provided in this budget for disability action plans. They are regarded as one of the most effective vehicles for increasing participation, promoting employment opportunities for people with a disability and systematically addressing physical, technological and attitudinal barriers for people with a disability in our community sector and also the public sector. We currently support all 10 Victorian government departments in the planning and implementation of their disability action plans. This additional \$1.1 million will enable us to work with about 450 over a three-year period. Also, in 08–09 the office has been allocated \$1.6 million to develop a targeted community awareness strategy and support a range of activities. It will deliver specific cross-government and community awareness campaigns aimed at improving educational outcomes and opportunities and promoting increasing participation in mainstream community activities for people with a disability. This targeted strategy will strengthen the current government effort to remove physical and attitudinal barriers for people with a disability in our community.

**Mr RICH-PHILLIPS** — Can I ask you about the concessions payable for water. I take you to page 113 of budget paper 3 which lists 638 000 households receiving water and sewerage concessions for the current year. Can you tell the committee what proportion of those 638 000 households receive the full concession or are eligible for the full concession?

**Ms NEVILLE** — One hundred per cent of the cap — up to the cap.

**Ms WHITMORE-SEIDEL** [inaudible]

**The CHAIR** — Can you come up to the table and announce who you are? Otherwise Hansard finds it virtually impossible to deal with. You will need to swap places with one of the others.

**Ms WHITMORE-SEIDEL** — I am Brenda Whitmore-Seidel, and I look after the budget for the children, youth and families division, and the concessions program — hence the question. You are talking about water and you want the percentage of people who receive the full amount of the cap for water, which is around 70 per cent.

**Mr RICH-PHILLIPS** — Seventy per cent of the 600 000?

**Ms WHITMORE-SEIDEL** — Yes.

**Ms NEVILLE** — Of the current cap.

**Ms WHITMORE-SEIDEL** — Of the current cap.

**Mr RICH-PHILLIPS** — The actual number for the current year.

**Ms WHITMORE-SEIDEL** — Yes.

**Mr RICH-PHILLIPS** — The increase the minister mentioned earlier — 14.8 per cent in the cap going forward — why is that less than the expected increase in water charges this year? Why are you having a declining proportion of the bill covered by the concession?

**Ms NEVILLE** — The 14.8 per cent increase in the cap?

**Mr RICH-PHILLIPS** — Yes. The charges are expected to go up 17 per cent, but your cap is only going up just under 15 per cent.

**Ms NEVILLE** — The cap is indexed for a start. I think there is only at the moment one water authority — and it is still going through a process of consultation — where it is more than 14.8 per cent.

**Dr SYKES** — Just for clarification, Minister, I believe the water charges for North East Water and, I think, Goulburn Valley Water are going up 50 per cent, or thereabouts.

**Ms NEVILLE** — That is over five years.

**The CHAIR** — A year on year increase — —

**Ms NEVILLE** — It is over five years. This is 14.8 per cent that is indexed and ongoing, so the cap will continue to rise to be able to do that. There is only one, as I understand it — and it is still going through consultation, so the final outcome is still to be determined — that is suggesting, I think it is Gippsland, that the first year the increase would be around 17 per cent but then it would decrease over future years. But the 14.8 per cent does cover the predicted rises in water, and will continue to grow by CPI.

**Mr RICH-PHILLIPS** — Consistent with water prices — —

**Ms NEVILLE** — With the recommendations that are currently being considered.

**Mr RICH-PHILLIPS** — So it is the government's position that it will maintain the same percentage of the bill as prices rise, so you will adjust the cap accordingly?

**Ms NEVILLE** — At the moment it is 14.8 per cent, which is indexed. We are still waiting on the final outcome of the decision by Essential Services Commission, at which point if any further adjustments need to be made they will be considered as part of future budget considerations.

**Mr RICH-PHILLIPS** — Just on the proportion receiving the maximum cap, for the other utilities you provide concessions. Are you able to get the figures, perhaps on notice, as to what proportion gets the full cap?

**Ms NEVILLE** — Sure.

**The CHAIR** — Minister, I would just like to ask you a question about aids and equipment for people with disabilities. Being disabled myself and relying on an aid and equipment — one of which failed during the hearing this morning, but fortunately I have got two so I can carry on — what is the budget — —

**Ms NEVILLE** — I do not think you are eligible for our aids and equipment.

**The CHAIR** — This is true. What are you going to do in terms of aids and equipment in this budget? I think you have got some information there on page 105 of budget paper 3. Can you advise us what funding you have for essential aids and equipment, and what are you going to do with that funding?

**Ms NEVILLE** — Thank you for that, Chair. We are very committed to ensuring that we are able to provide appropriate and responsive supports for people with a disability. We know that the aids and equipment program is an important component of encouraging and enabling people to participate in our community. Since coming to government we have increased the recurrent budget for aids and equipment by 80 per cent. It has grown from a budget of \$16.4 million in 1999–2000 to \$29.6 million in 08–09.

The aids and equipment program, for those who may not be as familiar with it, Chair, as you might be, provide people with a disability of all ages with subsidised aids and equipment like wheelchairs, walking aids, continence aids, domiciliary oxygen, and home and vehicle modifications to enhance their safety and independence. The program is delivered by about 30 issuing centres across the state, including five statewide providers. It was actually originally a program established by the Australian government back in 1981. It was then handed over to the states in 1997. Since then, as I have said, we have continued to increase the recurrent funding for the aids and equipment program. This year we will see it being able to support about 28 000 Victorians.

The new budget for disability supports includes an immediate one-off funding boost of \$5 million 07–08 to enable a further 2650 people to be assisted by the aids and equipment program. The funding will also support a number of equipment libraries and equipment advisory services, including the Motor Neurone Disease Association of Victoria and the Yooralla Independent Living Centre. The \$5 million funding is in addition to the \$3.9 million already committed for 08–09 under Labor's financial statement in 06, which allocated a total of \$20 million over a four-year period. The \$3.9 million will be used to support a further 2100 people to access aids and equipment over the 08–09 period. It will also continue to meet our commitment to establish a vehicle modification subsidy scheme and provide more home modification subsidies and to broaden the eligibility of the program to support people in receipt of commonwealth community aged care packages and extended aged care at home packages.

As part of the 07–08 budget announcements, \$30.2 million was provided to help meet the increased demand for aids and equipment to support people with a disability and their families. That included the \$20 million growth funding over four years and the \$9.9 million one-off funding in 06–07. Of the \$9.9 million, \$6 million was provided to reduce the risk waiting lists for new aids and equipment, \$3.5 million to resource a range of equipment libraries and 400 000 to the Royal Children's Hospital to clear the waiting list of 300 children. Subsidy levels have also been increased on a number of items. Since this funding the number of people waiting for aids and equipment has reduced by more than 60 per cent. In March 07, prior to the \$6 million funding boost, there were 5043 people waiting on the waiting list for aids and equipment. By June, following the additional money in 07, the waiting list had dropped to 1900 people. Because of the immediate impact on waiting lists, the government has funded increases to aids and agreement on a non-recurrent basis — one-off money to try and reduce waiting lists over that period. The additional new growth funding of \$2 million in 07–08 has had a direct impact on reducing the increasing waiting list figures, and the waiting list has remained relatively stable. The aids and equipment program has a significant impact on quality of life and improving independence, with 89 per cent of people reporting in the annual client satisfaction survey that their life is now better because of access to aids and equipment. It is a significant program and one that we continue to invest in to reduce waiting lists and meet the needs of people with a disability who require aids and equipment.

**Dr SYKES** — I have got a question on young people in nursing homes, but just clarifying the issue in the discussion on access to aids and equipment, in terms of your targets for clients accessing aids and equipment, your targets have actually dropped. In 2006–07 — and I am now referring to budget paper 3, page 105 — 30 343 accessed aids and equipment. In 2007–08 the expected outcome was 28 860, and your target for 08–09 is 28 310, so it is actually going down.

**The CHAIR** — I think the minister mentioned there was a one-off boost in 2006–07, if you look at the output cost across the next page.

**Dr SYKES** — It is still coming down, okay.

**Ms NEVILLE** — There is historically a commitment, wherever possible, where additional money is available or money that has not been spent is available, that we have been able to put it into aids and equipment. So you cannot really predict that from year to year. Also, the other thing about it is what you cannot predict is what sort of aids and equipment people might want. Some years you might find yourself in a high demand for oxygen, which added additional cost. It is about trying to make sure you have a program that is flexible and is able to actually meet the demand. So I imagine that the performance outcome will be higher than that. That is the best we can do to predict.

**Dr SYKES** — Then my question, Minister, relates to young people in nursing homes. I know you have covered this in part in your earlier responses. My assessment is that in budget paper 3, page 309, there is \$10 million going that way. Your media release of 5 May says you promise to reduce the number of young people in residential care by more than 35 per cent, and in that same media release you say there will be 46 new beds. My calculations are that there are 212 or 213 people under 50 in residential aged care, and 35 per cent of that is 74, so there is a difference of 28 people between your media release, or what your 35 per cent claims, and the numbers you are delivering. Can you explain that difference to me?

**Ms NEVILLE** — Firstly, can I just say, I think you said 46 beds; it is 46 people.

**Dr SYKES** — Forty-six people.

**Ms NEVILLE** — Just to make it clear that we are working on people and what their individual needs are — some of whom might want a facility, some of whom will not.

**Dr SYKES** — Yes, sorry, 46 people.

**Ms NEVILLE** — So of course, as I also mentioned we have our ongoing commitment to My Future My Choice, so there is the five-year program which we have agreed with the commonwealth, which involves \$60 million of joint funding which continues to roll out each year. On top of that we have also put in an additional \$10 million, so over the 08–09 period, that is what the figure is talking about, so there is the additional 46 out of the \$10 million, and then — did you say 75?

**Dr SYKES** — But even in the same media release one figure says 35 per cent, and your actual number is 46, and that does not —

**Ms NEVILLE** — Sorry, can you just say that again? So 35 per cent — you are talking about percentages — of the 213?

**Dr SYKES** — You are saying 35 per cent by 11 June and you are suggesting 46 in the coming financial year, so the rest will come in the subsequent period. Is that the answer, or is it coming from other sources?

**Ms NEVILLE** — It is the \$60 million, of which the portion in 08–09, combined with the \$10 million — so the \$10 million will include the 46, but there is also the flow-on of My Future My Choice for the 08–09 period —

**Dr SYKES** — So that will do the other 28?

**Ms NEVILLE** — That is right. The flow-on will continue either to build facilities, provide in-home support to people, move people out into in-home support; there is a range of measures, so it is the combination.

**Dr SYKES** — So the net result will be, or you are confident of achieving, your outcome of reducing it by 35 per cent, which is 46 one way and 28 covered by other means?

**Ms NEVILLE** — That is right, so our ongoing program will continue to roll out, but this gives that a boost and enables us to assist more people than we have been able to under the original \$60 million.

**Ms MUNT** — Minister, can I refer you to budget paper 3, page 309, under output initiatives for Human Services. There is a line item there, ‘Strategic replacement and realignment program — stage 3, for which \$50 million was allocated. Could you tell the committee what that is actually for?’

**Ms NEVILLE** — Certainly. Thank you for that. This is, as I talked about in my presentation, in relation to our \$50 million commitment to continuing our strategic replacement program for disability accommodation in Victoria. This funding is being done in a partnership with the Disability Housing Trust, which is now known as Housing Choices Australia, and the government. Just to remind the committee, the Disability Housing Trust was established back in 2006, and we established it with a capital grant of \$10 million. That was about providing new and innovative forms of housing for people with a disability. It is a community based charitable trust, with a board elected by its members, with the exception of the chair, whom I, as the minister, appoint. The 08–09 budget provided \$50 million in 07–08 to the Disability Housing Trust — Housing Choices Australia — to replace 38 supported accommodation facilities over the next three years, in partnership with the department. It builds on our strategic replacement program that we have been undertaking over the last few years to ensure that all our facilities meet disability standards and provide the best and most modern forms of care and arrangements for people with a disability who do need to live in a group home.

The committee will probably be interested to know that the Disability Housing Trust has already developed a number of other housing opportunities through a range of partnerships and joint ventures. It is developing a family package, for example, which is used to assist in working with families who wish to assist in accommodation development for their family members with a disability. There are approximately 80 housing opportunities in planning and development stages, of which 36 have been purchased or are under construction. A number of properties are now tenanted. Examples of some of the accommodation options provided or in development include a two-bedroom unit in Eastern Metropolitan Region; 3 units with five bedrooms all up in Southern Metropolitan Region; 2 two-bedroom units in Gippsland; Parkville Gardens, with nomination rights for 12 properties in Parkville; and 8 in regional Victoria — 2 in Geelong, and 3 each in Bendigo and Ballarat. They are examples of innovative developments and accommodation options, which I was talking about a little bit earlier in terms of individual support packages and different choices that people are making. The residents in these new places all receive support and were on the disability support register or have moved from a group home to a more independent option.

To assist project developments the Disability Housing Trust has now established significant partnership arrangements with a housing association and community service organisation, and the coming together as the Housing Choices Australia organisation has brought together the Disability Housing Trust, Singleton Equity Housing and Supported Housing Ltd, all of which have a very long history in developing and delivering supported accommodation and alternative accommodation for people with a disability, including those with an intellectual disability. It will aim to continue to provide and manage a range of affordable accommodation for people with a disability. For example, tenancy and property management — they will be managing in excess of 600 properties and 1000 tenancies of people with a disability. This will grow over the next few years as they continue to develop new properties and new arrangements for people with a disability and their families.

**Mr DALLA-RIVA** — Page 109 of budget paper 3 relates to child protection and family services delivery. I note in the number of operational Child FIRST sites that its target is 24. I understand these services were supposed to take the pressure off child protection and intervene earlier. My understanding of the budget paper is we see that the same number of clients receiving a specialist assessment and treatment service is there; there is a minor reduction in child protection reports also in that area; and there is an increase in the daily average number of placements from 5300 to 5400. I guess what I am trying work out is: with the increase from 16 to 24 there really is no noticeable change in some of those other measurements in some of the other areas. I am just trying to work out: is Child FIRST failing to meet its objectives, or does it just indicate that child protection is, as everyone knows, pretty much stretched as it is? How are you going to apply these projected number of operational Child FIRST sites to ensure there is a reduction in some of those other key areas, which there does not appear to be? Are you expecting a period of time delay?

**The CHAIR** — I am not sure what Mr Dalla-Riva is getting at there, but anyway.

**Ms NEVILLE** — You have mixed up a number of different things in that. If I can just firstly talk about the front end of our system, which is really what Child FIRST is all about. I mean by that how do we manage and continue to manage what has been substantial growth in notifications right across the country. I think I showed you a graph in the first presentation I did on, in fact, how well Victoria is doing. We are undoubtedly leading the way. There is growth in notifications, but we are basically stabilising our growth. We will continue to grow a bit, and in fact in the context of the new legislation, it would be predicted that you would have some growth, because, as



people would be aware, the new legislation also provides, importantly, for very early notification: pre-birth notifications, unborn children notifications, all designed around intervening very early.

We would predict in fact there would be some increase in that, because we are wanting to encourage a system that is about identifying potential risks for children and issues in families very early on in the process. A system around Child FIRST, our system around family support innovation projects, is all about intensive, early intervention and prevention services for families. We are predicting a pretty stable number of reports despite the fact that we are encouraging additional reports in unborn children, and in the context of a national major increase in notifications, we are predicting a stabilisation around notifications. Child FIRST: as you see, we are rolling this out more quickly. We are going to be a year ahead of schedule. The reason we are doing that is that we think that this is a really important platform to ensure that families are identified early, that families get intensive support; not just one-off support but ongoing, intensive support to turn around the issues that often contribute to children having to come into the out-of-home care system.

Can I also say that Child FIRST is not just about saying we want less notifications; in fact what we want is to ensure that we can also arrest some of the out-of-home care growth. What we want to make sure is that we are getting in early before the problems become entrenched, before it becomes more difficult, before there is greater damage to children to ensure that families have a real opportunity to sort through their problems. I do not want to give a message to the community that they should not be alert to the wellbeing of children. We are trying to measure in a number of ways — both in stabilising notification growth but also in giving a message — that it is important we all have an interest in children's wellbeing as well as ensuring we have got the services to keep families together, because we think that is the best outcome for children.

With out-of-home care placements, there is, as I spoke about before, a challenge for all governments, but in Victoria we are growing at around 49 per cent, the growth rate in out-of-home care placements. I think New South Wales is growing at about 300 per cent from the recent inquiries they have had in their child protection system. So again we are hoping that we are able to get to a point where we can start to stabilise that but at the same time continue to ensure that the out-of-home care system that we have is also the best possible. Internationally and across Australia, Victoria is held up as the model for child protection. These are early days yet, but we are already seeing some results in terms of arresting growth in notifications, and I think the Child FIRST program will prove to be extremely successful in helping us continue to do that.

**Mr DALLA-RIVA** — Maybe you can take on notice my question about the cost per site. I do not know if you have provided that, but you have increased it in that total output cost from 118 to 121.7. I would be curious what the cost componentry of that would be — of each of the sites.

**Ms NEVILLE** — It will vary a bit, again, on the partnerships, but — —

**Mr DALLA-RIVA** — They are not part of DHS, are they?

**Ms NEVILLE** — They are a partnership; they are alliances between family support agencies. For example, I launched one in Maryborough the other day, which is for the Southern Loddon Mallee region, and it has St Luke's involved, it has the Bendigo Community Health Services involved and it has two Aboriginal organisations involved. It has a unique model around indigenous support, and it is going to be really interesting to see how that goes — I think, very positively. It brings together a number of organisations which will play a range of roles, but within the Child FIRST sites there are also very strong linkages, rightly, with the statutory child protection system, and that is one. It has been great to build those relationships, but also it is about learning about the sort of supports and interventions that work with families. So a lot of the sites, not in all, will have a child protection worker operating out of them.

**The CHAIR** — Thanks, Minister. Obviously this program is getting out there and getting right ahead of its targets, so we are pleased with that. Minister, that completes our questions on community services, and I thank the officers.

**Witnesses withdrew.**