

# DEPARTMENT OF HUMAN SERVICES VICTORIA DISABILITY SERVICES REPORT ON SECTOR CONSULTATIONS FOR MODEL OF SELF-DIRECTED PLANNING

[http://www.dhs.vic.gov.au/\\_\\_data/assets/pdf\\_file/0005/365396/cis\\_report\\_on\\_consult\\_sess\\_plan\\_mod\\_case\\_man\\_pdf\\_310809.pdf](http://www.dhs.vic.gov.au/__data/assets/pdf_file/0005/365396/cis_report_on_consult_sess_plan_mod_case_man_pdf_310809.pdf)

## **Executive Summary August 28, 2009**

This report describes the policy context, methodology, findings and conclusions and recommendations arising from statewide consultations with the disability sector about a draft model of the self-directed planning process.

The Disability Services Division, Department of Human Services (DHS), has been developing a model for self-directed planning to help people with a disability, and their families and service providers to understand what is involved in making self-directed approaches work.

Stakeholders were consulted during June and July 2009 to seek their views on the model and how it might be improved. Ten workshops were held in June – five with people with a disability and their families and five with service providers – across all the DHS regions throughout Victoria.

After the workshops in June, the consultation materials were posted on the DHS website and further feedback was sought electronically.

Findings from the consultations are presented here, noting separately feedback from people with a disability and their families and feedback from service providers about issues concerning the model itself, issues that may affect implementation and other systemic issues that stakeholders wanted to raise for consideration.

The main findings from people with a disability and their families overall are:-

- while the model is clear, the reality is not so straightforward as gaining access to planning involves multiple appointments and signing of forms, and service provision is ad hoc.
- the model would be easier to understand if users were provided with a map or checklist to help them navigate the planning process.
- families need better direction on what's available and how to access it.
- facilitation and case management roles seem clear, but effective implementation will require sufficient, well informed and trained personnel.
- the definition of 'case management' assumes it is time limited, but this is not necessarily the case.

The main findings from service providers are:-

- although the model for self-directed planning shows that people with a disability have pathways to developing a plan that includes informal and community supports, it does not ensure people can access information and supports they need.
- also, it was not always clear from the model that a person may either implement a plan themselves, or, if they need help, they may request a facilitator who will provide as much

- or as little support as the person requires.
- clearer role definitions are required – especially regarding support coordination and case management.
  - there is lack of clarity around the definition of ‘complex’ and who falls in this category
- People with a disability and their families, as well as service providers, also touched on various systemic issues to do with levels of funding, staff turnover and its implications for continuity of care, time delays in putting supports in place once a plan has been developed and the choice and quality of services available (especially in rural regions).

The main conclusions about the model itself are that although the model seemed generally to provide people with a disability and their families and service providers with a clear conceptual framework – people often said it looked good on paper - there were several aspects of the model which people identified as in need of strengthening. These are noted at the end of this report, and recommendations on how improvement might be effected are provided, where relevant.

Key issues concerning the model itself were:-

- the model needs to specify more clearly to whom a person with a disability or their family members might go initially to start the self-directed planning process.
- the model could make clearer reference to how individuals or families direct their own planning process.
- people with a disability and their families and service providers suggested that, to emphasise the flexibility in the system, it may be useful to represent the model in circular format, rather than in a linear fashion.
- stakeholders generally believed it would be helpful if the model indicated how long it will take typically for things to happen as a person works through the self-directed planning pathway.
- the diagram currently is ‘full of jargon’ – terms like ‘disability service provider’ and ‘episodic’ and acronyms like ‘ISP’ and ‘DSR’. People asked that ordinary language should be used in the diagram and the service definitions that support them.
- stakeholders suggested that the model could be clearer about where an individual goes after receiving an Individual Support Package (ISP).
- the model could indicate where a person might re-enter the planning system or secure access to additional resources if they already have an ISP.
- stakeholders emphasised that the definitions accompanying the model need to be clear and easy to understand.

One issue which the model is criticised for having overlooked is the provision of independent support and counselling for people who may not know what they want at the outset. This criticism is surprising, because the definition of ‘Assistance with Planning’ suggests that this sort of independent support is available under the proposed planning model.

It is unclear where needs assessment comes into the pathway – especially before a person enters the self-directed planning process. Also, some service providers felt the counselling and support role of case managers is not recognised under the model. Another significant concern is a sense that the model may inadvertently have the potential to involve too many people in a person's life.

- People with a disability indicated that, where possible, the planning that takes place at three different points of a person's involvement in the service system (assistance with planning, facilitation and support coordination) may be undertaken or guided by a key contact or support person.

The main conclusions about key issues concerning implementation are also noted, and recommendations are offered at the end of the report.

Most people with a disability and their families are concerned about having to deal with multiple people in the planning process, preferring a key contact point.

People with a disability and their families need flexibility in the system, and want to be able to revisit their plan, as needs change over time. Commonly raised concerns were lack of clarity around definitions (such as “case manager” and “facilitator”, “complex situation”).

Service providers shared consumer concerns that the language used to explain the model was not clear enough, and that it needed to be in plain English and use less jargon. Definitions needed to be clarified and used consistently.

Overall, the consultations and subsequent analysis revealed that the model (including the diagrams and definitions associated with it) can be made clearer and more effective as a framework for self-directed planning if these issues are addressed in terms of the feedback provided and recommendations offered in this report.

Twelve recommendations are provided on how to improve the model and address issues affecting its implementation - See full report on above link.

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