Report under Section 11(c) of the Community Services (Complaints Reviews and Monitoring) Act 1993

Monitoring of disability services in NSW

INTRODUCTION

The *Disability Services Act 1993* (DSA) requires the Department of Ageing, Disability and Home Care (DADHC) to monitor (on behalf of the Minister for Disability Services) services funded to provide disability services in accordance with the DSA.

Under this legislation, the purpose of monitoring is to:

- 1. ensure services funded under the DSA, conform to the objects, principles, and applications of the principles of the legislation (section 6(1)), and
- 2. determine service compliance with the funding terms and conditions, and outcomes achieved by service users (section 15). In order to meet the requirements of section 15, DADHC is required to review services at least every three years.

Monitoring of disability services serves a range of purposes in addition to ensuring legislative requirements are met and funding agreements upheld. Monitoring of services provides a mechanism to ensure service users' rights, welfare, and interests are safeguarded, and that the quality of service is assured.

The purpose of this report is to document the outcomes of initiatives instigated by the (then) Department of Ageing, Disability and Home Care (ADD), and more recently the Department of Ageing, Disability and Home Care (DADHC), in the area of service monitoring.

BACKGROUND

The following brief history is based on information provided by ADD, and since April 2001, DADHC. It includes reference to key inquiry and review findings over this time, and the department's response to recommendations about service monitoring.

1995-1997

- In 1995, the Department of Ageing and Disability (ADD) became responsible
 for the funding, quality assurance and monitoring of disability services. At this
 time, Department of Community Services (DoCS) Community Program
 Officers undertook service monitoring on behalf of ADD. Such monitoring
 was limited to funded non-government disability services. In March 1997,
 responsibility for service monitoring was transferred to ADD Service Support
 and Development Officers (SSDOs).
- In its 1997 report on the Hall for Children Inquiry, the Community Services Commission ('the commission') recommended that 'ADD should proceed as quickly as possible with a performance monitoring / quality assurance and safety framework for all services funded and provided under the Disability Services Program'. The commission further recommended that the framework include self and peer assessments, provision for consumer involvement, and external monitoring and validation.

- In the same year the NSW Audit Office, following completion of its performance audit of large residential centres for people with a disability in NSW, recommended that ADD establish a range of systems to review and monitor service provision in large residential services, and that the Government review the effectiveness of service monitoring by ADD by 1999.
- ADD informed the NSW Audit Office and the commission that it would introduce a self-assessment tool for services to evaluate their performance against the disability services standards ('the standards'). The department advised that SSDOs would verify the results of these self-assessments to identify deficiencies in service delivery and monitor the achievement of desired outcomes for people with disabilities. This initiative would be implemented during the period 1997-1998.

1998-1999

- In 1998, ADD produced the *Standards in Action* manual to provide guidance for services in relation to the standards. ADD indicated that the implementation of the standards, using the manual, would be regularly monitored by the department's SSDOs and through other quality assurance processes that were being established within ADD.
- Following its inquiry into the Lachlan Centre (1998), the commission recommended that ADD should review the role of the SSDOs to assess their effectiveness, particularly focusing on:
 - their dual roles of service development / support and monitoring,
 - the monitoring tool to be used by SSDOs; and
 - their capacity to adequately cover the number of services assigned to each of them.
- In response to the Lachlan inquiry, ADD advised that annual self-assessments
 would pertain to both funded non-government and DoCS services, and would
 incorporate feedback from family members and others. For funded nongovernment services, the self-assessment would lead to the development of the
 deed of funding agreement and performance agreement or transition plan,
 against which SSDOs would monitor.
- In 1998, ADD reported that 45 SSDOs would visit, on a scheduled basis, between 40-60 funded non-government services per SSDO, over a 12-month period. In addition, the department's 'Service Review and Support Project' would focus on services where issues of concern had been identified, with SSDOs to develop action plans and monitor improvements. The department advised that the monitoring mechanisms, to support this framework, were under development and would only apply to non-government disability services.
- By 1999, the annual self-assessment by services was the primary method used by ADD to monitor compliance with the Disability Services Standards.

However, ADD did not have a regular or systematic process for checking the accuracy of these self-assessments.¹

- The Law Reform Commission, in its review of the DSA, reported that reviews of disability services generally occurred only when ADD received a complaint, or where specific issues of concern regarding a service had been identified. The department's Service Review and Support program investigated services where there were identified issues of concern. Services were 'registered' by the department where these concerns were significant. The department investigated some of these 'services of concern' and required them to implement an action plan that addressed the issues of concern. This was monitored until all outcomes in the action plan had been achieved.
- The Law Reform Commission recommended the establishment of an independent body to oversee and monitor the quality assurance process, and replacing the self-assessment procedure with a more accountable system of peer review.
- In 1999 disability services expressed concern that 'contract visits' focused on a 'tick the box' approach against the *Standards in Action* manual. The SSDO Protocol for undertaking scheduled monitoring visits in the Disability Services Program was centred on a DSP Checklist. ADD noted in the protocol that the checklist was an interim tool designed to check basic areas of health and safety in services, was not an assessment of conformity against the standards, and formed part of an overall monitoring strategy by the department.

2000-2002

- In 2000, the NSW Audit Office found substantial reliance in ADD on self-assessment reporting that was not validated by the department. At this time, ADD used four key mechanisms in its monitoring of services:
 - 1. Self-assessment reporting
 - 2. Service user feedback questionnaire
 - 3. SSDO monitoring of services through using the DSP Checklist
 - 4. Service Review and Support
- In response to recommendations made by the Audit Office, the department advised that its reform agenda included a review of its monitoring procedures and practices, and that the review would be completed by the end of 2000.²
- In April 2001, DADHC was established. In September 2001, DADHC advised that a new monitoring framework had been developed, and would be implemented in 2002.

Review of the Disability Services Act 1993; Law Reform Commission report (1999)

² Group Homes for People with Disabilities in NSW; Audit Office Performance Audit (June 2000)

- In February 2002, DADHC stated that it would be implementing a new Integrated Monitoring System (IMS) for all funding and service delivery activities in 2002.³ The components of the IMS were:
 - Level 1: Entry level monitoring done at the organisation level, looking at service management, financial viability, and standards compliance.
 - Level 2: Basic monitoring done at the service and outlet level, looking at evidence of self-assessment, and considering service user satisfaction, data, and unit costs to develop a 'performance profile'.
 - Level 3: Short Assessment monitoring done at the service and outlet level that incorporates the Basic monitoring along with a site visit and inspection with a critical focus on areas of development.
 - Level 4: Full Service Review monitoring done at the service and outlet level that incorporates the Basic monitoring along with a site visit and inspection with a full review of service activities. Full Service Review would be undertaken on all services, every three years.
- In April 2002, the commission produced the *Food for thought* report, noting 'it is a concern that a robust monitoring framework has not been introduced earlier, given the known risks to people with disabilities. Although the development of a new monitoring framework is a welcome development, timely implementation will be critical'. The commission recommended that DADHC 'implement the monitoring framework as a matter of priority, and that this framework be supported by effective practice tools that all services can use to promote service improvement'.
- In November 2002, the Legislative Council Standing Committee on Social Issues Final Report on Disability Services, *Making It Happen*, was released, and included consideration of monitoring and quality assurance. The Committee reported that it had received 'consistent evidence that current systems for service monitoring and quality assurance are insufficient to ensure quality outcomes for all service users'. It identified some concerns with the monitoring systems, including non-rigorous self-assessment systems; information collected through monitoring processes not acted on by the department; too few SSDOs to visit services frequently enough to monitor adequately; and monitoring requirements for government providers being less rigorous than those for funded services.
- DADHC commenced regionalisation of its structure in 2002. *Making It Happen*, released the same year, commented that 'an appropriate monitoring framework is particularly important to ensure that accountability is maintained within the service system as it becomes more flexible and less centralised'.
- Making It Happen, noting the DADHC advice that its new service monitoring framework would commence in 2003, recommended that the new DADHC service-monitoring system be 'designed around the measurement of client

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³ Young Deaths – Children with Disabilities in Care (Mannix) – Community Services Commission report (February 2002)

outcomes and client satisfaction', and include canvassing of service user views and satisfaction. The report further recommended that systems be developed to ensure that information collected through monitoring activities is acted on at the individual level and used systemically as part of the planning, policy and industry development responsibilities of the department.

- In response, DADHC advised that the IMS would provide a consistent framework for monitoring services, incorporating users views and the results of monitoring activities such as those of OCVs. DADHC advised that the IMS 'improves the way in which information is collected, exchanged and combined to provide insight into performance. It is intended to stimulate a culture of improvement in the quality and performance of the service system'. DADHC further stated that the IMS 'is being implemented through the regional structure of DADHC and is supported by a Standards and Quality Unit within the Central Office of the Department'.
- The Integrated Monitoring System was never implemented.

2003 - 2004

- In May 2004, DADHC advised the NSW Ombudsman that a new monitoring system, the 'Quality and Performance Monitoring System', would be implemented from July 2004.
- On September 1 2004, DADHC advised the NSW Ombudsman that the system is again termed the 'Integrated Monitoring System', and will be implemented on a trial basis from late September to March 2005. Full implementation of the system will commence from July 2005. Reportedly the new system, which is comprised of annual service self-assessments and triennial service monitoring and review visits, is one of the department's current priorities.

CONCLUSION

The steps that the department now reports that it is taking, including the development of a Continuous Improvement Matrix, state wide training of staff, and consultation with the disability sector, are positive. They provide a framework for a comprehensive monitoring system.

However, given the protracted delays in implementing a service monitoring system that is sustainable, transparent and effective, this office should formally monitor the department's performance in this area.