

# Lifelong Assist: DIY Interactive Planning

*People with a disability and  
their families achieving better  
life outcomes*

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April 2013

Funded by:  
Department of Families,  
Housing, Community Services  
and Indigenous Affairs

Prepared by:  
TLConsult for The Association for  
Children with a Disability (ACD)

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# Contents

Please note:

The National Disability Insurance Scheme (NDIS) was renamed DisabilityCare Australia on 18 March 2013. Both names are used interchangeably throughout this report.

We extend our heartfelt appreciation to all the people who generously contributed their time to share stories of their lives and provide invaluable insights into how an effective planning process might look.

Images used within this document are a combination of stock imagery and photographs from ACDs archive library.

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# Foreword

**Elizabeth McGarry**

*Chief Executive Officer*

*Association for Children with a Disability*

**The establishment of Disability Care Australia (DCA) formerly known as the National Disability Insurance Scheme (NDIS) represents a giant step forward in transforming the way Australians with a disability utilise supports needed to live a life of purpose and meaning. Disability Care Australia is the greatest advancement in service system improvement in a generation.**

Australia ranks 21st out of 29 OECD countries in employment participation rates for people with a disability. In addition, around 45% of Australians with a disability are living either near or below the poverty line however DCA funding alone will not change these statistics.

People need to be able to systematically undertake effective planning that ultimately identifies all the elements they require to achieve their personal goals. Lifelong Assist offers an interactive planning system that is a step-by-step, user-friendly and responsive mechanism. Its effectiveness lies in its capacity to enable people with a disability and their families to identify and plan how to meet their needs through a combination of formal and informal support, mainstream and disability specific services and community based opportunities. It offers the best opportunity for them to increase their level of health and wellbeing, economic independence and active participation as full citizens.

The project was funded under the Practical Design Fund (PDF) established under the NDIS. The aim of the project is to fill a gap in the design of Disability Care Australia, by developing:

- *A planning tool, which can be used by people with a disability and their families to support the thinking, identifying, planning and deciding on what they believe will best support their life choices.*
- *Recommendations relating to the role of Disability Service Organisations (DSOs) and Local Area Coordinators (LACs) within the framework of Disability Care Australia.*

Our Association for Children with a Disability (ACD), has extensive experience in developing resources that support children with a disability and their families to think and plan for their future and we were well placed to develop Lifelong Assist. It aims to shift the power balance in favour of people with a disability and their families, enabling them to maximise choice and control over how they want to live their lives, whether or not they are eligible for funding via Disability Care Australia.

We were excited to bring together an expert reference group and a team of consultants both with extensive experience in disability (as consumers and providers), in research, consultation and change management.

ACD knows that the best outcomes are achieved when people with a disability and their families have greater confidence to:

**know**

**where to go and how to plan for current and future need**

**build**

**their capacity to better engage in planning and decision-making**

**decide**

**what type of informal and formal supports are right for them**

**nurture**

**and strengthen their community connections**

**choose**

**the life they live by taking greater responsibility to self-direct and self-manage the supports they need.**



**Elizabeth McGarry**

*Chief Executive Officer, ACD*

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*A good system shortens the road to the goal. Planning is bringing the future into the present so that you can start doing something about it now.*

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# About the project partners

## Lead Agency

### Association for Children with a Disability (ACD)

Suite 2, 98 Morang Road,  
Hawthorn Victoria 3122 Australia  
T: (03) 9818 2000  
F: (03) 9818 2300  
E: mail@acd.org.au  
acd.org.au

Established in 1980, ACD is a not-for-profit organisation providing information, advocacy and support to families who have a child or young person with any type of disability or developmental delay living in Victoria. We believe that every person should be afforded the opportunity to realize their full potential.

ACD is run by parents and siblings, so we understand issues from a family perspective. We are also resolute in our belief that real life experiences must inform the development and implementation of public policy.

## ACD staff supporting this project:

**Elizabeth McGarry**  
Chief Executive Officer

**Janice Chan**  
Manager, Projects

**Debby Conlon**  
Co-ordinator, Community Education

**Di McCarthy**  
Manager, Parent Support Team

**Gina McAdam**  
Parent Support Worker

**Megan Brown**  
Parent Support Worker

**Helen Johnson**  
Parent Support Worker

## Project Managers

### TLConsult

PO Box 16 Kew East,  
Victoria 3102 Australia  
T: 1300 971 805  
tlconsult.com.au

**TLConsult has consulted to small businesses, large companies, government departments and NGOs facilitating consultations that are creative, equitable, respectful, inclusive and underpinned by rigorous consideration of their financial impact.**

**Tom Pagonis**  
Co-Director and Principal Consultant

Tom has a 25-year track record in Project and Change Management; he has extensive experience in developing solutions to complex industry change initiatives in the public and private sector, both in metropolitan and rural contexts. Tom successfully implemented the Our Forests Our Future scheme, the \$110M government program to redeploy Victorian timber industry workers.

Tom can identify barriers to change, and formulate practical and cost-effective change solutions. He also has experience in executive training, tertiary education governance, policy development, and evaluation and testing of practical applications.

## Liz Kelly

Co-Director and Principal Consultant

Liz Kelly has worked in human resources and financial management across a broad range of industries in the private sector for over 20 years. As Chief Financial Officer of a large corporation, she headed a department of 200 staff and a \$250 million operating budget. Liz is a parent of a child with a disability, is the past president of the Association of Children with a Disability (ACD), a board member of Children with Disabilities Australia (CDA), a current member of the Victorian Disability Services Board and the Victorian Disability Advisory Council.

## TLConsult project team

### Catherine Caruana

Catherine provides research services and writing solutions for government, business and community organisations.

As a lawyer, researcher and published writer, Catherine brings to her work 25 years' experience in legal practice, social and legal research, policy formulation, knowledge translation and community development.

She has written for ministers, magistrates, private consultants and publications in print and online.

## Christian Astourian

Christian works full time as a coordinator for Diversity and Disability, which is a self-advocacy program for people with a disability from a non-English speaking background run from the Migrant Resource Centre North West in St Albans. Christian is Deputy Vice President and a member of the People and Governance Committee. He fluently speaks 4 languages.

He sits on the Disability Advisory Committee for the Melbourne City Council and the State government Disability Service Board with the Disability Service Commissioner. He is also a board member for Arts Access Victoria and at federal level he is the chairperson of the disability advisory committee for the Federation of Ethnic Community Councils of Australia.

## John Monroe

John has previous experience working in legal research and HR policy. He has sat on the board of, and provided policy advice to, the Monash Student Association as a student representative studying the Bachelor of Laws. He has undertaken legal research and writing for a Melbourne law firm, and taken part in several reviews of academic policies.

He brings to this project his skills in policy writing, and his experience of consulting with, surveying and representing groups facing disadvantage.

## Polly Walker-Dorras

Polly has worked as a consultant with TLConsult for over a year, providing strategic HR and Industrial Relations support and advice to a variety of clients. She is currently completing her Graduate Diploma in Legal Practice at the Australian National University.

She has previously worked as a project officer for the Victorian Association for the Care and Resettlement of Offenders, where she was charged with writing a plain language guide to prisoner legal issues and conducted project scoping and project design work.

Polly has also completed several internships including an observation placement at the Melbourne Magistrates Court, and practical legal placements at the Western Suburbs Legal Clinic and Ringwood LegalAid.

She completed her LLB (Honours) at Deakin University, where she also worked as an academic support worker with the Disability Resource Centre. Polly served on the Deakin University Student Association board for two years as Welfare Director and Vice President. As part of the board, Polly oversaw the implementation of major organisational change.

## Katherine Hardy

Katherine has worked for TLConsult as a Project Officer/Operations Manager. Katherine brings her experience from the telecommunications and health insurance industries, as well as substantial advocacy experience due to her work on various student representative bodies while at University. She has strong organisational skills and an academic background in Politics and Spanish.

## Bohn Studio

Visual communications agency

Bohn Studio provides expert advice in relation to visual communications and information design with particular focus on 'user centred' interface design.

Bohn Studio is a team of designers that are passionate about developing unique and engaging visual communication solutions with a strong design foundation. They have extensive experience with government agency's, private enterprise, not-for-profit organisations locally and internationally.



# Summary

The Lifelong Assist Planning Tool is a necessary and efficient process that people with a disability and their families and carers can use to determine natural and formal supports that best suit their needs and resources they seek from DisabilityCare Australia. It is designed to increase the independence and self efficacy of people with a disability and their families.

Unlike other disability service planning approaches, the Lifelong Assist Planning Tool places people with a disability and their families in the driver's seat, allowing them to identify and decide what supports and activities will achieve their self-defined life goals.

Based on the principles of empowerment and self-direction, the tool will act as a guide through how, why and when to plan, as well as bringing a much needed self-guided, user-friendly format currently unavailable to people with a disability and their families.

*Lifelong Assist*

.....  
**Provides people with a disability and their families access, in the comfort of their own home, to the resources and information necessary to plan for the future.**  
 .....

**Advises and supports people in a parallel way to a disability support worker by suggesting the most up-to-date, effective and relevant resources.**  
 .....

**Collects data to allow governments, disability and mainstream services, and the private sector to more effectively respond to the needs of people with a disability by filling identified gaps in supports**  
 .....

**Promotes competition by giving users the knowledge and power to choose their own disability or mainstream services to meet their needs, and**  
 .....

**Promotes the economic and community participation of people with a disability and the reduction of inefficiencies in disability service provision and funding.**  
 .....

*The substantial database of resources that will form the backbone of the tool will allow people with a disability and families the opportunity to locate the services they need, rate their performance on a set of pre-determined criteria and, in some cases, obtain provisional costing of their services.*

*Portability of plans produced via this guided process will ensure that people with a disability and their families will no longer be required to engage in multiple planning processes, bringing about much needed uniformity of plan formats to the sector.*

*Extensive community consultations that informed the development of the Lifelong Assist Planning Tool demonstrated that once further developed, it has the capacity to achieve the essential and fundamental purpose of DisabilityCare Australia – **independence**.*

# Overview:

## Lifelong Assist Planning Tool

People with a disability and their families achieving better life outcomes

Effective planning in the disability sector is particularly important in Australia. In comparison with other OECD countries, our overall performance in outcome and cultural terms for people with a disability, their families and carers has been poor.

Policy promises of achieving equality of opportunity, fairness and upholding basic human rights have gone largely unfulfilled. This could continue to be the case under the new system if funding is not linked to well-thought out plans.

**If the sector-wide capacity to facilitate change and develop plans is ignored it could result in the continuance of a “scatter gun” approach to funding allocation responding to short-term crisis rather than the aspirations of individuals. Despite improved funding the system would remain unfair, fragmented and inefficient with the key aims of DisabilityCare at risk of not being realized.**

Building the capacity of the system, support organisations, as well as individuals and their families, will contribute to the realisation of choice for the individual and the broader facilitation of increased community engagement. The development of this planning tool will support and guide the change that is required for success.

Although local and international service-driven planning systems exist, by developing and utilizing user-driven planning processes, Australia can improve life opportunities for people with a disability and their families (physically, socially and economically) and in doing so, reduce poverty and increase workforce participation.

- The current employment rate of people with a disability in Australia is low against the OECD average. People with a disability in Australia are only half (50%) as likely to be employed as people without a disability.

In comparison:

- For the OECD, the relativity is 60%.
- Considering the top eight OECD countries, the relativity is closer to 70%.
- Forty-five per cent of people with a disability in Australia live in or near poverty, more than double the OECD average of 22%.
- The Gonski report highlighted research findings that show students with disability are less likely to complete Year 12. In 2009, approximately 30 per cent of people aged 15 to 64 years with a reported disability had completed Year 12, and 15 per cent had completed a bachelor's degree or higher. This compares to 55 per cent and 24 per cent for people without disabilities respectively (Gonski, 2011)<sup>3</sup>. This comparative lack of educational attainment has a negative effect on the employment prospects and level of income for people with disability.
- It is estimated 80% of the total support need of people with a disability is provided by this so-called 'informal care' network of families and friends. Moreover, the availability of informal care is declining due to a combination of ageing carers, reducing 'stock' of family support, and plain burn-out.<sup>1</sup>

- A recent report on relinquishment of children with a disability into state care in Victoria showed an 157% increase in the number of new state based care arrangements entered into from 2010 to 2011.<sup>2</sup>

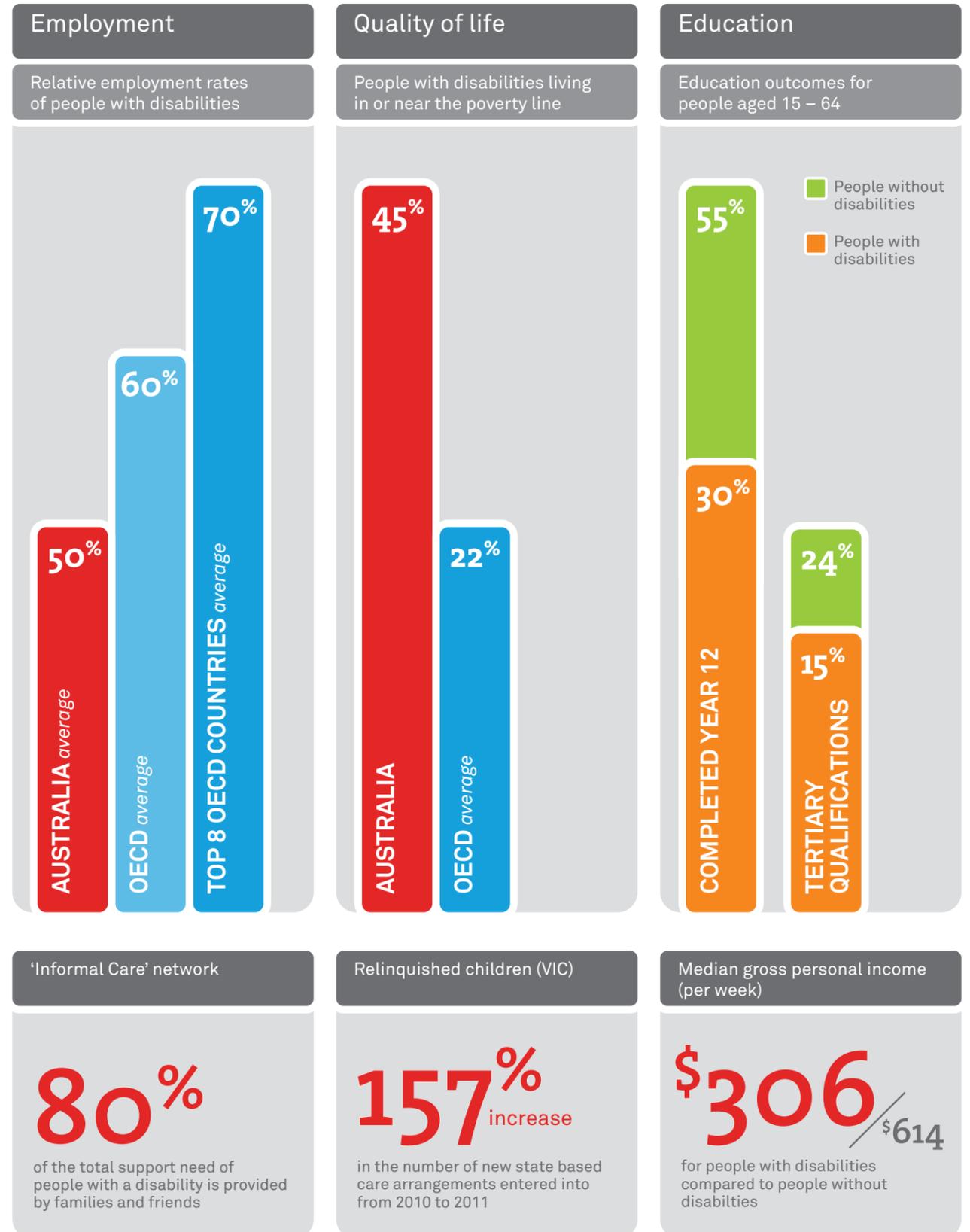
- The median gross personal income per week for people aged 15 to 64 with reported disabilities was \$306, compared to \$614 for those with no reported disabilities.<sup>4</sup>

<sup>1</sup> Price Waterhouse Coopers Disability expectations: Investing in a better life, a stronger Australia – November 2011

<sup>2</sup> Victorian Human Rights and Equal Opportunity Commission- Desperate measures: The relinquishment of children with disability into state care in Victoria – May 2012

<sup>3</sup> Review of Funding for School – December 2011- ABS 2010a

<sup>4</sup> Review of Funding for School – December 2011- ABS 2010a



# Overview: Lifelong Assist Planning Tool

The key aims of this planning system is to link the outcomes of the productivity commission recommendations to the 2010 – 2020 National Disability Strategy by providing the means to achieve:

## Personal and community support

by valuing individual preferences to strike the right balance between harnessing informal supports and accessing formal supports for inclusion in the community and ensuring a person-centred approach is taken.

## Learning and skills

by facilitating planning to support life-long learning from early childhood services, to vocational training and tertiary education, with a focus on transition points.

## Health and wellbeing

afford the appropriate link between someone's health and the disability system, ensuring wellbeing and enjoyment of life.

## Economic security

by planning for skills attainment required for employment, work readiness, business opportunities and financial independence.

## Inclusive and accessible communities

by providing a more holistic appraisal of life aspirations and resultant individual support needs by identifying access requirements to public transport, parks, buildings and housing, digital information, civic, social, sporting, recreational and cultural life.

## Rights protection, justice and legislation

by providing relevant information and support regarding people's rights, relevant legislation, including access to advocacy the electoral and justice systems.

If adopted fully the proposed planning approach, within DisabilityCare context can achieve strong economic, fiscal and social gains. This approach is underpinned by the view

- *That people with a disability and their families are best placed to estimate what are reasonable and necessary supports.*
- *That people with a disability have the right and responsibility to decide, given the appropriate support and resources they require.*
- *That people with a disability are drivers of their own destiny.*
- *It provides a means to manage risk and cost escalation.*

**The plans will allow for rigorous measurement of success and individual outcomes against benchmarks of economic independence, engagement, social inclusion and quality of life.**

In and of itself, the Lifelong Assist planning tool will not guarantee the overall success of DisabilityCare. Combined with other elements of the scheme, it provides the key mechanism for competent local area coordinators and efficient disability support organisations to enhance the life experiences that people with a disability and families desire. A key role of local area coordinators and disability support organisations will be to connect people with a disability and their families with their local community while building the capacity of the community for such interaction.

The role of the DSO and LAC will be to work in harmony using deep listening, as the means to perform an interface role and are therefore well-placed to understand an individual's needs, identify local services and supports that are available, and link the two together.

**Support should not be unduly specified or regulated to ensure creative innovation.**

**Peer support is a reliable, valuable and sustainable form of support. DSOs should facilitate and encourage this (Duffy & Williams 24)**

# Introduction

**Our development of this planning ‘tool’ and the recommendations were informed by the knowledge that maximising opportunities for choice and control in making decisions that affect our lives is a basic human right and an essential part of being a citizen.**

The Association for Children with a Disability (ACD) obtained funding under the Practical Design Fund of the National Disability Insurance Scheme (NDIS, now known as Disability Care Australia) to:

- *develop a resource to assist people with a disability, their families and carers to plan for their own care, support and development over the life course; and*
- *provide recommendations on a model for involvement of Disability Support Organisations (DSOs) and local area co-ordinators within the framework of Disability Care Australia (DCA).*

The resulting resource, Lifelong Assist (LLA) is intended as an online, interactive and self-directed planning ‘tool’. It provides a package of tools and resources aimed at maximising personal choice, and encouraging aspirational, holistic and future-focussed approaches to planning life supports. Although aligned with the assessment and resource allocation under Disability Care Australia, our intention is that Lifelong Assist is used for planning irrespective of eligibility for funding under the new scheme, and independently of disability services. It can also be used to plan access to other mainstream services for example education, health, work, community and social life.

**The step-by-step guided process is designed for use by people of all ages and with varying levels and types of disability, and where support to plan is required, by the family, friends, carers and others chosen by the person planning to assist.**

In a nation-wide consultation, ACD presented a prototype of the tool to people with a disability, their families and carers, service providers and other stakeholders. This report outlines the key characteristics of the Lifelong Assist tool as informed by their feedback, the project activities undertaken in the development of the resource, and recommendations relating to its further development, a contextual framework for its use, and the role Disability Support Organisations (DSOs) and Local Area Co-ordinators (LACs) could play to support planning and related activities.



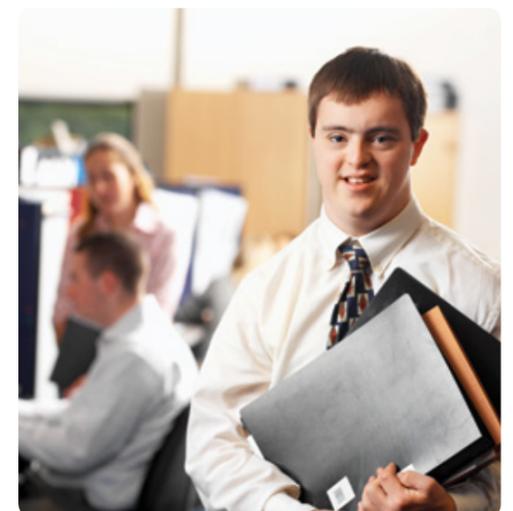
# The story so far...

The report by the Productivity Commission, Disability Care and Support confirmed what the majority of people with a disability, their families and carers know from lived experience that disability support in Australia is “underfunded, unfair, fragmented and inefficient” (Productivity Commission, 2011, p.3). The Commission also found that despite a gradual move towards person-centred practices and planning processes, more so in some jurisdictions than others, the deficiencies of the current system means there remains minimal scope for choice and empowerment in the allocation of support. The result is that many people living with disability in Australia face significant barriers to participation in employment, education, and other functionally and socially important activities, and limited opportunity to drive the changes that could enhance their quality of life.

Under the terms of reference, the Commission was required to consider an approach that takes into account, amongst other things, the desired outcomes for each person over a lifetime, provides individualised support and assists people with a disability to make decisions about their support. From all indications to date, these principles of respect for autonomy, independence and personal agency will underpin the final form of the scheme. Australia’s commitments under the United Nations *Convention on the Rights of Persons with Disabilities*, (adopted by the UN in 2006 and ratified by Australia in 2008), requires it to so do.

In their report, the Commission outlines possible avenues for greater consumer choice to be exercised under the new scheme, i.e., primarily via individualised packages and self-directed funding (Productivity Commission, 2011, chapter 8). Defining the processes that could assist people to make those choices was beyond the broad sweep of the Commission’s terms of reference. Planning is envisaged as a process aligned with assessment under the scheme, and as “an essential aspect of self-directed funding” (Productivity Commission, 2011, p.353). The Commission’s recommendations therefore refer only indirectly to planning i.e., in the context of assessment (recommendations 7.2, 7.7, & 7.8), self-directed funding (recommendation 8.2) and in the support that disability organisations should provide to help people to plan (recommendation 10.1).

**In spite of increasing acceptance that principles of person-centred practice and self-directed approaches should be at the heart of disability support, opportunities for choice and control remain limited for most people. Effective planning is central to shifting the power balance.**



The following outlines the methodology adopted for this project and the various stages of inquiry and development.

### Development of a draft tool

With 30 years in the disability sector, and our experience developing planning resources, ACD came to this project with ideas about how the promise of DCA to promote greater choice, control, and community participation for people with a disability could be made a reality. The first step therefore was to combine this insight with a targeted literature review of best practice in support planning, and with the expertise of the project consultants, an outline of preferred approaches to support planning was formulated.

**The philosophical principles of person-centred planning provided the basis for this draft tool. However from the outset we envisaged this resource as playing a role in helping to effect a cultural shift from dependency and passivity to one of empowerment and personal agency. As such, we have characterised Lifelong Assist as a do-it-yourself process for people with a disability and their families.**

Using the term “person-centred” where someone is doing their own planning is somewhat of a tautology. It suggests a presumption that planning is done by one person on behalf of another, or that there must be intervention to support another person to plan. We recognise the need for such support for many people, and in fact emphasise in the tool the importance of working collaboratively with others to plan, especially when planning supports for children, for people with profound disability, or where a person lacks the confidence, energy, experience, or empowerment to plan. However in order to make the resource a meaningful one for all people within the broad spectrum of “disability”, our preferred description of the process is *self-directed planning or DIY planning – an approach that covers the range from making a plan on your own, with access to the right information, planning with the support of peers, family members, friends and/or carers, through to facilitated planning or substituted decision-making.*

We knew there was a plethora of planning tools and resources freely available but they are all designed for use by disability support workers, utilising a person-centred approach. Building on these strong foundations and shifting the balance of power in favour of people with a disability and their families as primary decision-makers, we brought together the best from these processes in one package.

- A **web-based, interactive** resource, with links to information and resources at the user’s fingertips including **social network links** and **community forums** for people with disabilities, their families and carers;
- A **do-it-yourself** approach that *starts* from the premise that many people have the capacity to make their own decisions with the right support and information, without necessarily needing someone to facilitate the process;
- Where assistance to plan is required, **support and guidance for planning partners** (family members, friends and/or carers) to ensure that person-centred principles are at the heart of the intervention;
- Links to a **database** listing disability specific and universal services, supports and resources relevant to the planner’s age, location and personal circumstances, and an ability to **rate services** on certain established criteria;
- The ability to **cost** certain kinds of support, **print** a completed plan, **share** the plan with others and **review and update** the plan easily.
- The resulting plan would be **portable**, replacing the numerous plans and assessments required under the current system when accessing services or for particular life transitions.

It is envisaged that the Lifelong Assist planning tool will interface with DisabilityCare. Other documentation regarding assessment and securing supports could be shared, thus preventing duplication of information gathering and associated documentation, achieving cost efficiencies and maximising opportunities for people with a disability to shape their own support.

Running with these ideas, ACD and the project team developed a prototype tool. This draft was further refined following input from the reference group and the essential attributes were incorporated into a digital presentation (see Appendix 1), ready to take into the field.



Sector consultations digital presentation (see Appendix 1 for full document)

The story so far...

## Project activities cont.

### Consultations

**Our consultation process was underpinned by the Disability Rights Movement motto “Nothing about us without us.” In developing the planning tool, we drew on the views, skills and experiences of a broad and diverse community.**

A total of 25 consultations were undertaken across every state and territory, taking in the views of a cross-section of people with a disability, including:

- People with sensory impairments
- People with physical disabilities
- People with an acquired brain injury
- People from a CALD background
- People from Indigenous communities
- Parents and families both of younger and older children
- Ageing parents
- Service providers
- People from urban, regional and remote locations

(see list of consultations participants, right )

Our approach to the consultation process ensured that in developing our planning tool we were able to gain insight into the particular and diverse needs of thousands of people across Australia.

Feedback on the Lifelong Assist tool and input on the role of DSOs and LACs was sought by way of focus groups and interviews. Consultations sought to ensure the best mix of disability type, age groups, indigenous and CALD groups, as well as participants from urban, regional and remote areas.

All consultations were conducted in line with protocols established to ensure we complied with the *National Statement on Ethical Conduct in Human Research*. Written consent to participate was sought from participants, on the following grounds:

- *participants were informed of the purpose of the consultation, the people involved and the funders of the project;*
- *the privacy and confidentiality of the contributions would be protected, and no participants would be identified or identifiable in any documentation arising from the project;*
- *telephone support would be provided if any distress was caused by the discussion;*
- *advice was provided about the procedure for handling complaints relating to the information gathering process.*

Co-facilitated consultations of 90 minutes to 2 hours in duration were held at a site nominated by the initial contact organisation, consisting of a powerpoint presentation that walked the participants through the essential characteristics of the tool, followed by informal discussion. Feedback in relation to the possible role of DSOs and LAC in planning was also collected in response to suggested supports for planning. Notes were taken of the general tenor of the responses, specific concerns raised and suggested improvements of the tool, as well as any anecdotes or useful quotes.

Participants were also encouraged to contact the consultants with any further input after the session via direct contact.

Data from all the information-gathering activities were then sorted and coded, with emerging themes and issues identified. Suggestions for improvement of the tool were then incorporated into the final design outlined in this report.

### List of Consultation Participants

#### NSW

Association for Children with a Disability (NSW)  
Spinal Cord Injuries Australia

#### QLD

Endeavour Foundation (Ayr & Brisbane)

#### SA

Carers (SA)  
Dignity for Disability (SA)  
Kelly Vincent MLC  
Blind Citizens Australia (Adelaide Branch)

#### VIC

UnitingCare\*  
Diversity & Disability Victoria  
Association for Children with a Disability (VIC)  
Noah’s Ark Early Intervention  
Villa Maria – My Time Group  
Early Childhood Intervention Australia ECIA (VIC)\*  
Blind Citizens Australia (BCA) Melbourne  
Deaf Victoria  
Youth Disability Advocacy Service  
Brainlink  
Gunditjmara Indigenous Community (Heywood)

#### WA

Ethnic Disability Advisory Centre  
Carers (WA)

#### TAS

Association for Children with a Disability (TAS)

#### NT

Disability Advocacy Service – Alice Springs  
Darwin Community Legal Service – Aged and Disability Advocacy Service  
Group organised by Bruce Young-Smith

#### ACT

Group organised by Maureen Howe

*The majority of consultations were conducted with ‘service users’. Those indicated above with an asterisk (\*) represent ‘service provider’ consultations.*

### Reference Group (Critical friends)

Input was sought from a reference group chaired by the CEO of ACD and comprising of individuals with personal experience of disability, professionals working in the disability sector, and individuals with relevant experience or expertise. Members listed below participated on the basis of their individual expertise, not as representatives of specific organisations.

#### Christine Mathieson

CEO VicDeaf

#### Anne-Maree Newbold

Family Carer

#### Gill Pierce

Manager Policy, Carers Victoria

#### Bryan Woodford

Convenor, Victorian Government NDIS Taskforce

#### John McKenna

Individual with a disability

#### Bronwyn Morkham

Director, Young People in Nursing Homes Alliance

#### Beth Sutcliffe

Expert on early childhood development, university lecturer, former manager, Aspect Victoria (ASD provider)

The reference group worked closely with the ACD and project team at each stage of the project. They provided input into the draft planning tool, the form and content of the consultations and their expertise was heavily drawn upon in formulation of the recommendations relating to the structure and make-up of the DSOs and LACs’ role. This complemented the broader consultation within the community.

The story so far...

## What we learned from the literature

**A targeted literature review, with two foci, was conducted. The first aim was to look at best practice approaches to personal planning in the disability sector, to review planning tools currently available for use in Australia and internationally, and to consider the barriers to effective planning.**

The second explored potential models of service provider/consumer/community partnerships in the disability sector.

The literature review focussed on articles and literature of greatest relevance to developing a self-guided planning process. Person-centred planning, an approach that is central to the disability sector in the UK and is gaining increasing acceptance in Australia, provided the starting point. Of particular assistance was a literature review on person-centred planning recently conducted on behalf of the NSW Department of Ageing, Disability and Home Care (van Dam, Ellis & Sherwin, 2008). The work of Helen Sanderson Associates was also drawn on extensively. As leaders in the field of person-centred planning, particularly in the United Kingdom, Helen Sanderson Associates have developed numerous resources that incorporate a range of different processes, often in collaboration with other person-centred planning proponents, including early pioneers such as John O'Brien, and Jack Pearpoint.

Despite a lack of large scale studies on the outcomes resulting from implementing person-centred planning, there is some evidence from the UK that **PCP results in significant positive changes in many domains of people's lives, including in exercising choice, the development of social networks, contact with family and friends and in participating in community based and scheduled day activities** (Robertson, 2007; Emerson & Stancliffe, 2004). Less positive outcomes were linked more to participant characteristics relating to their mental health, and the presence of emotional, behavioural, or health problems, rather than ability to plan (Robertson, 2007).

The literature, however, does not support any assertions about the widespread effectiveness of PCP (van Dam, Ellis & Sherwin, 2008). In fact the authors of one paper, suggest that PCP has been over-sold and commodified (Duffy & Williams, 2012). What is clear from the literature, and is supported by the authors of planning tools themselves, is that the underlying beliefs and attitudes that inform planning are more important than any particular method or template used (Duffy & Williams, 2012; Sanderson, 2000). In fact to assert that any one particular approach to planning is definitively the best approach, would be contrary to the very notion of adopting a flexible, person-centred approach.

Reviews of international systems using person-centred planning processes conducted overseas were also useful in considering potential barriers to making and implementing effective plans, and in developing a suggested framework for DSOs and LACs

### What is person-centred planning?

Person-centred planning has been described as:

*"a process for continual listening and learning; focussed on what is important to someone now, and for the future; and acting upon this in alliance with their family and friends....a completely different way of seeing and working with people with disabilities, which is fundamentally about sharing power and community inclusion"* (Sanderson, 2000, p.2).

PCP differs from service-led planning which is largely predicated on professional assessments of need and what the service can offer to meet that need (Callicott, 2003). PCP rather aims to support a person's aspirations, irrespective of what the system can currently offer. (van Dam, Ellis & Sherwin, 2008).

The key features of person centred planning are to ensure that:

1. The person is at the centre of the process;
2. The person, family members and friends are partners in planning;
3. The plan reflects what is important to the person, their capacities, and what support they require;
4. The plan reflects what is possible now, not just what is available;
5. The plan uses natural and community supports where possible;
6. The plan results in actions that are about life, not just services;
7. The plan aims to foster opportunities and skills to achieve personal relationships, community inclusion dignity and respect;
8. The plan involves ongoing listening, learning, and further action. (van Dam, Ellis & Sherwin, 2008).

In essence, PCP aims to situate power and control over decision making with the focus person and their planning allies (Mansell & Beadle-Brown, 2003; Kilbane & Thompson, 2004b; Michaels & Ferrara, 2005).

Planning for one's life has been described as a pathway of decision-making moments (Duffy & Williams, 2012). When planning is self-directed, the person with a disability is faced with a series of such decisions, including:

- Whether to approach a service for assistance;
- Which information to share about their circumstances;
- The type of lifestyle they imagine for themselves;
- The life opportunities/issues to focus on;
- Who, or what might help them to plan;
- The elements to include in the plan;
- The degree of involvement in managing their own funds;
- Which supports that are freely given they can draw on;
- Which community supports and amenities they can draw on;
- Which service providers to approach;
- What refinements or adjustments are required once an arrangement is in place. (Duffy & Williams, 2012, p.7).

At a minimum, any proposed guided planning process should provide assistance with the making of these decisions.

The story so far...

## What we learned from the literature cont.

### Person-centred and self-directed planning

The following provides a broad outline of the most common methods of person centred planning, and the ways that they differ.

#### Person-centred planning

Four common Person Centred Planning tools recognised in the international literature are MAPS (McGill Action Planning Systems), PATHS (Planning Alternative Tomorrows with Hope), PFP (Personal Futures Planning) and ELP (Essential Lifestyles Planning).

MAPS was initially concerned with fostering greater inclusion in schools for children with a disability. It's focus is on the gifts and needs of the person and involves wider 'dreaming' of futures, while recognising the fear of what the future may bring (Stalker & Campbell, 1998). PFP also develops a vision for a better future by exploring what needs to change in a person's life in five designated life areas (Sanderson, 2000). In PATH, planning teams work with the person with a disability to make direct and immediate changes, with less focus on gathering information about the person. And ELP, designed for people with severe disabilities has been a useful process for people moving out of institutions. The process helps to identify what is not working in the person's life and the day-to-day support that is required (Sanderson, 2000).

#### Self-directed Planning

Self-Directed planning approaches transfers greater control to the person with the disability and their family to take the lead role at all stages of the planning process. Self-direction is underpinned by the values of independence, choice and social inclusion.

The process focuses on discovering a person's skills and capacities, allowing them to identify and prioritise their hopes, goals and lifestyle choices. Together with their family they are then able to design the supports that will meet their own needs and goals, rather than being limited to choosing only from a predetermined list of service options.

Self-directed planning means that services and support must be directed by the person and their family. ([www.resourcingfamilies.org.au](http://www.resourcingfamilies.org.au))

While there is crossover in many aspects of these processes, where they differ is the ways in which the information is gathered, the people involved in the process and whether the focus is on day-to-day issues or on more longer-term issues. Different tools may suit different people at particular points in their lives.

A lot of work has been done in Australia developing resources and guides to support the planning process – these are too numerous to mention, but some, including handbooks produced by the Department of Human Services in Victoria are listed in the reference list.

**ACD has produced resources to support decision making, including [Through the maze: An overview of services and support for parents](#), the [Kindergarten Inclusion](#) tip sheets, [Positive Education Planning \(PEP\)](#) and [Transition to Secondary School](#) booklets, to assist parents and children to navigate the early learning and school years and [Learning to Lead](#), a guide to planning supports for children with a disability and their families.**

### Planning approaches in Australia

Emerging in the late 1980's and 1990's in the United States, (O'Brien and Mount, 1989; Mount, 1992; Garner and Dietz, 1996), PCP approaches to the provision of disability support has gained some traction in Australia, particularly in states where self-directed funding arrangements are available i.e., Western Australia and Victoria.

Personal plans, as prepared under the Individualised Support Packages (ISP) program in Victoria share some aspects of PCP in that they help with goal setting, aim to promote community participation and to strengthen informal supports, and can be developed by the person on their own, or with the support of a facilitator (Victorian Government, 2009).

Disability advocates in Victoria have also reported that the skill of facilitators to listen deeply and capture key information to ensure plans accurately reflect the desires of people with a disability and their families, has generally been inadequate.

Even in states with provision for self-directed funding, arrangements where a person manages and acquits their individual budgets are not widespread. Capacity for choice in plans developed under the ISP program are still subject to the inherent limitations of an under skilled, under resourced and fragmented system.

The Productivity Commission concluded in their 2011 report that a large percentage of people with a disability in Australia have little choice over where they live and who provides them with the personal support they require (Productivity Commission, 2011).

Person centred planning and supported decision making can also be found in the movement away from substituted decision-making under state guardianship laws for those deemed not to have legal capacity, towards more graduated levels of intervention, and focussing on ways of supporting a person to make their own decisions, where possible (Victorian Law Commission, 2012; Brayley, 2009).

## What is missing

Although there are a range of planning approaches applied within the disability, education and other settings, outcomes for people with a disability and their families, as evidenced by the statistics discussed earlier, are still poor. Is this the result of ineffective planning, an under-skilled workforce, over-bureaucratic processes, crisis-driven funding approaches and other systemic deficiencies, lack of useful information or a combination of all of these?

The gaps in current planning processes can be outlined as:

- *The focus is on supported and facilitated planning rather than self-directed planning;*
- *There is a confusing array of options, and the differences are often subtle;*
- *There does not appear to be any cultural or ethnic specific tools in existence;*
- *They are largely paper-based processes, and don't link the planner directly with the information and resources that might be required;*
- *A person can have many plans in a variety of settings but none of the plans relate;*
- *They are driven by service system constraints rather than reflecting individual need;*
- *They are generally disability-centric and devoid of a more holistic approach to achieving whole-of-life goals;*
- *A new plan is created every time a person enters a new stage in life or a different system of funding without any reference to past plans developed.*

Further, the effectiveness of any planning is dependent on the degree to which the process is genuinely informed by person-centred and self directed approaches. The Centre for Disability Studies has reported instances where plans were created without the person involved being present, without any consultation with families and or carers, or where capacity to participate in the process is negligible given the low power base of the person concerned (Centre for Disability Studies, 2004). Hence the importance of training and support to assist people to plan effectively (Duffy and Williams, 2012).

### Issues to consider – person-centred or self-directed planning

The overseas experience has shown that making person-centred planning the mainstream approach impacts significantly on the disability system and the individual services and workers that support people with a disability, requiring “widespread and fundamental system and organisational change” (van Dam, Ellis & Sherwin, 2008). In light of this, strategies relating to change management, workforce development and innovative practices are an essential corollary to change on the scale envisaged by the implementation of DisabilityCare Australia.

Although person-centred planning presents a positive approach, the balance of power still rests with service providers and the degree to which people with a disability are able to direct the process is ‘hit and miss’.

Training and support in PCP has also been identified as central to its effective implementation (van Dam, Ellis & Sherwin, 2008). To date, training has primarily been provided to the staff of disability organisations, particularly in jurisdictions where self-management of funding is possible. It is, however, increasingly seen as important for training to be provided to self-advocates, and the families, friends and carers who assist others to plan (as for example, the training provided by VALID – see Stone, n.d.). The need for greater investment in the capacity of individuals and families to make their own plans has been recognised by a number of commentators (van Dam, Ellis & Sherwin, 2008) and is a given under the new scheme.

Duffy & Williams (2012) suggest that it is preferable that people are provided with a provisional indication of the funding they will receive, as this improves the quality of the plan. The UK experience has shown that when a blank sheet approach is used, costs can escalate.

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*“My son has 5 plans and he is only 10... how many will we have when he is 25?”*

---

Consultation participant, Victoria

The story so far...

## What we learned from the consultations

**People with a disability and their families are a diverse group within our population. The social and economic contribution they are capable of making is massively undervalued and often forgotten. There were many and varied robust discussions. It was clear that change is long overdue and despite people's frustration their ability to show reliance and provide feedback on the future of planning under a new system was inspiring.**

There was overwhelming support for people to direct and control their own planning as long as there were the resources available to realise their goals. In considering the path to change people said the tool needed to be flexible and accessible; it needed to be kept simple and support should be available for those who cannot make their own decisions or do not want to.

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*"I'm 70 I have been planning for and looking after my daughter all her life – if I was 30 years younger I would think this is a great idea."*

---

Consultation participant, Ayr

People's experience with planning was as varied and diverse as the groups we consulted with, but the majority of people thought the most effective plans are made when there is resources and information available. The concept of choice and control can only be achieved when there is more than one thing to choose from.

People insisted it was an essential element of the tool to provide the ability to plan mainstream areas of life and that accessible and inclusive mainstream structures should be complemented by appropriate specialist disability funding and support.

All groups expressed the desire to have an effective infrastructure of well-trained LACs who are local to the area, have a genuine commitment to person-centred planning principles and understand the needs, goals and preferences of the people with a disability and their families that they support.

There was agreement across the groups consulted that having self-belief and improved expectations is essential. All groups were very pragmatic and believed that what was important is the ability to have aspirations in life. Family and support organisations will be the primary facilitators in setting the expectations for individuals to dream and then helping them to define life goals, aspirations and priorities.

Many participants found the concept of 'dreaming' in the tool at best irrelevant and at worst insulting; as they were too busy struggling with the basics of life. Sensitivity to these needs should to be kept in mind when developing the proto-type further. Despite this, most people understood the importance of allowing people to identify what they need to lead an interesting and fulfilling life.

All groups agreed that it is important for the planning tool to recognise that life and experience is not static but fluid, and that goals will change and plans will need to incorporate changes as well as long term and short term goals. Our emphasis on the need to review plans reflects this.

There was majority support for the view that a planning tool of this kind would help people, either on their own or with the support of others, to identify where change is needed, set goals, and problem solve when taking action to achieve goals. Many people felt that a critical element to the success of planning using such a tool is its ability to evaluate goals against the reality: that is, the strengths weaknesses and underpinning wants of the person with the disability.

*Most people have achievable dreams that remain unfulfilled, either because others have shut them down or because they lack self-belief. While we concede this, we must also recognise that for people with a disability, the dream is more often than not a modest one – 'an ordinary life'. (PWC)*

# About the planning tool structure

# Introduction to tool

## Using the Planning Tool

The tool will be available on many different web and mobile device platforms, ensuring that it is accessible to a wide range of users.

Those without access to the internet, or needing assistance in using the tool in any way, may access the tool with the assistance of family and friends and support staff at a local Disability Support Organisation. This means that the experience of using the tool is a supportive one.



WEBSITE



APP



DOCUMENT



COMPUTER



MOBILE DEVICE



ASSISTED ACCESS

## Logging In

The tool will first provide a log-in page at which returning users can enter their details, and new users can create an account. This will protect the **confidentiality** of the user's information, which will not be revealed to any other person, organisation, or government body without the user's express consent.

## Access and Use Settings

New users will first be prompted to enter their access settings. These access settings make the tool more **accessible**.

The tool provides 'tool-tips' throughout which will make the tool **easy to use**. As well as tips on how to use the tool, it will provide **support** to users who feel they need some assistance with planning. These can be turned on or off depending on the level of explanation and support users require, and may be delivered in the user's preferred method of communication e.g. through text, audio, video, or a combination of these.

All of these options for how users prefer to utilise the tool will be retained by the tool for subsequent visits, and can be changed at any time, as the tool **adapts** to the needs and preferences of its user.

## Introduction to Tool

The tool will ask the user if they would like to:

- Make a plan;
- Review an existing plan; or
- Just find relevant information and resources.

This page will also provide information to users, answering questions like:

*'What is planning'*

*'What is person-centred planning'*

*'Why should I plan'*

*'What are my rights'*

 I have never created a plan

 I would like to create a plan

 Why should I plan?

 I have a plan and would like to update it

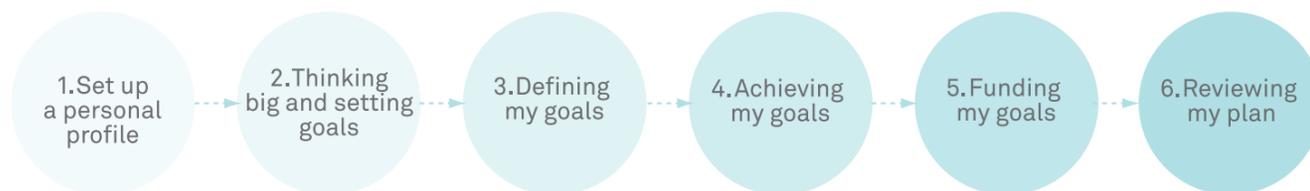
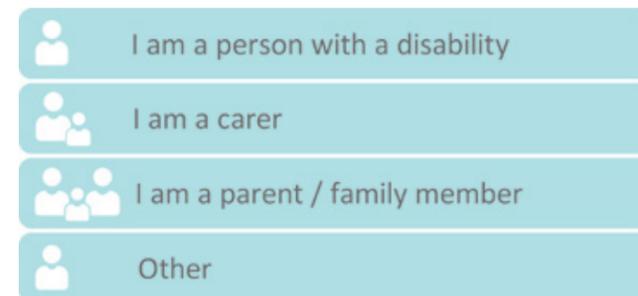
# Making a plan

## Personal Profile

### Type of User

The user will be asked whether they are in the category of 'a person with a disability', 'a family member of a person with a disability' or 'other'. The tool will adapt to these different kinds of users by varying the questions asked in the Personal Profile and suggesting information and links to resources more relevant to that person's situation in ***Achieving Your Goals***.

Where the user is not the person with a disability, the tool will at subsequent sections encourage the user to take into account the feelings and wishes of the person with a disability, as a reminder to the user that the tool is for self directed planning. This will vary depending on the age and level of independence of the person with a disability.



### My Profile

At the My Profile stage, the tool asks the user several questions to construct a personal profile, including their: name; date of birth; address/postcode; type of disability; important people in their life; their personal history; their strengths and other qualities; and what things are most important to them. For family, friends and carers of people with a disability, these questions will be about both themselves and the person with a disability in their life.

Many of these questions will be optional so that users feel comfortable about the information they provide, and all information entered will be treated with the strictest confidentiality and not be provided to any other party (such as service providers or the DCA) without the user's permission.

Step 1: Creating my personal profile

Name: John

Where I live: 3101 | Age: 23

Type of disability (optional): Cognitive impairment

How I communicate: [text area]

Personal history: [text area] eg where you grew up, work history, etc

Important people in my life: [text area] eg. mother, neighbour etc

Qualities: [text area] eg. things you're good, what people admire about you

What's important to me: [text area]

next >

These questions are useful in creating a universal plan so that the information will not need to be repeated for every service provider and government agency, and in setting out relevant information that will assist the user in planning at later stages of the tool. Some of the questions, particularly age, location, and type of disability, will also help the tool suggest the most relevant resources at the ***Achieving Your Goals*** stage.

On completing the personal profile, the user will have the opportunity to view information that might be relevant based on the details already entered. These links will include information on a range of topics, such as disability, location or age –specific advocacy services and specialised information for those who have just been diagnosed or acquired a disability or recently had a child with a disability.

After entering these details, users wishing to continue creating a plan will proceed to ***Thinking Big and Setting Goals***. Alternatively, users may choose to 'Just find relevant information and resources', which will take them to ***Information and Resources***.

Users may also choose to ***'Connect with others in my situation'***, which would connect them with other users through a social network function or forum, with permission. This would allow users to support each other in planning, setting relevant goals, etc.



## About the planning tool structure

# Making a plan

### Setting Goals

#### Thinking Big and Setting Goals

After creating their **Personal Profile**, users will be asked to think big and set their goals. This happens early so that the tool is not restrictive in what its users can plan. At this stage the tool-tips will explain that it is important for the user to 'dream big'. It is a self-directed approach to planning that puts the user's goals first.

This stage will include several questions and methods for focussing users on what aspects of their life are in need of improvement and what things they really want out of life.

Questions might include:

- 'What is working for you at the moment?';
- 'How would you like life to be?';
- 'What would you like to do, and why?';
- 'How will this affect your life?'; and
- 'What isn't working for you at the moment?'

Methods might include rating the user's satisfaction with different areas of life, and suggest that they set goals in those areas with which they are experiencing low satisfaction. None of these questions or methods are compulsory, as the tool will adapt according to needs of its user. The point is to guide users in deciding what goals they want to achieve by making them think about what they want in different ways.

These questions will adapt to the different users – for instance, the questions asked of a parent of a newborn with a disability may be different to those asked of a young adult with a disability. Importantly, the tool is intended to be relevant to families and carers by helping them plan for goals not only important to the person with a disability's life, but to their own as well.

For users wanting additional support, the tool can provide guidance on what goals might be relevant for a person in this situation based on their **Personal Profile** information. This could be in the form of case-studies, external websites, or even suggested goals based on the goals of those in similar situations. It would also reiterate that users can seek assistance in planning from professional support staff.

At the end of this section, users will be asked to enter their goals in their own words into the fields provided, and proceed to **Defining Your Goals**.

What stage of life are you at?

Please select ▼

- Early years
- Childhood
- Adulthood
- Other

### Defining Goals

After the user's goals have been set, they will be asked which of the life areas suggested, if any, each goal relates to. Based on information provided in the **Setting Goals** section, it may suggest certain life areas as more relevant to the user. These life areas may include:

- home;
- everyday life support;
- working;
- learning;
- money;
- fun;
- health;
- being connected; and
- choice and control.

Users may select as many or as few of these as they wish, including none of them.

Users will also have the option to prioritise their goals from most important to least important, which may assist them at later stages when determining dates by which each goal should be completed and the funding allocated.

The user will then proceed to **Achieving Goals**.

 John identified that he would like to get a job in a garden centre. This goal fits into the 'working' area of his life.

working

home everyday life support working learning money fun health being connected choice and control other

## About the planning tool structure

# Making a plan

### Achieving Goals

This stage will be repeated for each goal. Users will select a goal and be taken to the ***Steps to Achieve Goal*** stage for that goal.

#### Steps to Achieve Goals

The user will be asked to consider what steps they will need to take to achieve this goal. There will be links on the side bar to relevant information on achieving that goal depending on the life areas selected and, if a suggested goal was selected, that specific goal.

For each step, the user will be asked who can achieve that step, out of: themselves; their friends or family; or service providers/resources. For 'friends or family' this will link to people from the 'important persons in my life' question in ***Personal Profile***, but will allow any other entries. For 'service providers/resources', the user may enter a resource they already know they wish to use, or be linked to the ***Relevant Resources*** stage.

The user will also be asked to fill in the date by which steps should be achieved.

#### Relevant Resources

At this stage the tool will suggest a limited amount of resources relevant to the user's goal based on the information previously provided, as well as any resources which they have added to ***My Resources***. As well as these suggested resource types, the user will also be able to easily find resources by browsing through the life categories or by searching for a specific kind of resource with a search bar.

The user will first be presented with different types of resources, with the options to find more information on the type of resource and to be given a list of providers. These providers may be organised by proximity, cost, years of experience, expertise, user satisfaction, or other measures, depending on the user's preference. There will also be contact details and links to the provider's website if such details are known to the tool.

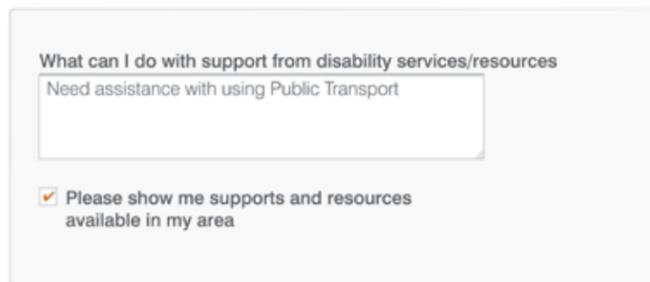
Once the user has completed the 'steps to achieve goals' stage as much as they can, they will move onto ***Funding My Goals***.

#### Funding My Goals

The tool will then ask the user the cost of each step, and how that cost can be funded. The tool will prefill the cost of any resources that the user has selected from its suggestions.

There will be suggested funding sources for users such as DisabilityCare and other community services, and links will be provided to these sources and information about eligibility for them.

Once this is completed, the user will be presented with a finished plan to achieve their goals.



What can I do with support from disability services/resources

Need assistance with using Public Transport

Please show me supports and resources available in my area

# Reviewing my plan

When a user is returning to the tool to review their plan, they will be directed to this section.

Users will have the option to go directly to **My Completed Plan** to view it and check off any goals or steps to achieve goals which have been completed. The tool will provide them with a progress report on their plan, and may encourage them to seek other supports if their progress indicates they may support in achieving their goals.

As the plan is intended to be a living document, the user can utilise this stage to edit any information it contains. Users in need of more support will be presented with several questions which will link them back to the stages of **Make a Plan**, such as:

- I want to change my personal details [\[links to Personal Profile\]](#);
- I want to change my goals [\[links to Setting Goals\]](#);
- The steps to achieve my goal aren't working [\[links to Steps to Achieve Goals\]](#);
- I need more time to achieve my goals [\[links to Steps to Achieve Goals\]](#);
- The resources I chose aren't working/weren't enough [\[links to Relevant Resources\]](#); and
- I'm unable to pay for the resources I wanted [\[links to Funding my Goals\]](#).

Example of a plan

Plan for: John

PLAN CREATED : DD Month 2013  
VERSION : 1.0  
PAGE : 1/5

**PERSONAL PROFILE**

ADDRESS: 1 Address Street, Suburb 9999

AGE: 23  
NATURE OF DISABILITY: Cognitive impairment

**AIMS/GOALS**

Find work to earn money so I can move into a share house with my friends.  
Acquire work experience with local garden centre.

**MY PLAN**

WHAT	HOW	WHEN	WHO	COST	FUNDING	ACHIEVED
Learn the Public transport system to get to work	Vocational Consultant help the garden centre to source appropriate supports for John in the workplace	03.13	John, Support person parents	Volunteer or paid support 15 hrs x 35 = \$525	NDIS	✓

# Information and resources

Users may come to this stage immediately or after completing a personal profile. This adapts so that users can search for information and resources without going through the process of creating a plan.

## Searching Information and Resources

Users may browse for information and resources by the life areas indicated in **Make a Plan**, or search directly for them using a search bar. Users who have completed a personal profile will also be provided with a list of suggested information and resources based on the details they have provided.

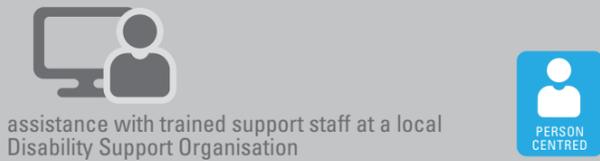
## My Resources

Users may add information and resources they are provided with at any stage of the tool to the **My Resources** section. This adds a 'shopping cart' function to the tool, allowing users to 'bookmark' particularly relevant information and resources for later and to collect a database of the information and resources most important to them.

## Lifelong Assist Planning Tool

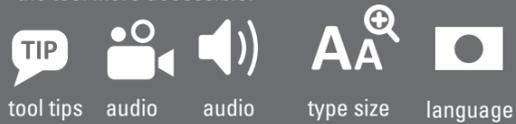
### INTRODUCTION

**USING THE PLANNING TOOL**  
Available on different platforms



### ACCESS AND USE SETTINGS

New users will be prompted to enter their access settings. These access settings make the tool more accessible.



### LOGGING IN

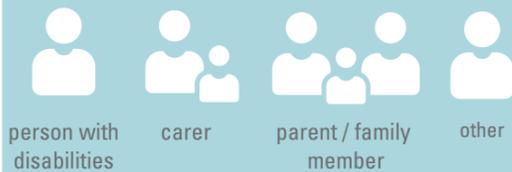


### MAKING A PLAN

User have the opportunity to create a confidential profile, define and set goals, prioritise goals access relevant resources and build a plan. Users have added flexibility to navigate the tool to suit their personal circumstances or needs.

#### PERSONAL PROFILE

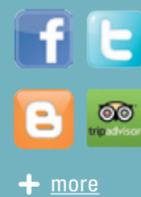
TYPE OF USER



MY PROFILE



DIRECT LINKS to other areas of tool provide the user flexibility ie GO TO:  
[My Resorces](#)  
[Connect me](#)  
etc



#### SETTING GOALS

THINKING BIG AND SETTING GOALS



DEFINING GOALS



#### ACHIEVING GOALS

STEPS TO ACHIEVE GOALS  
RELEVANT RESOURCES  
FUNDING MY GOALS



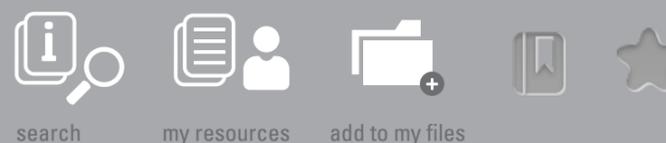
### REVIEWING MY PLAN

Users have the option to review their plan. The tool provides options to check, update, add etc to their plan.



### INFORMATION & RESOURCES

Users may browse, add and store information and resources based on details they have provided. Functionality includes bookmarks and favourites.



# Key attributes of the Lifelong Assist planning tool

# Key attributes of the planning tool

# 1

*the tool is accessible*

It's incredibly important that any person, regardless of background or disability, is able to use this tool. There was broad consensus across consultation groups that language and legibility options had to be included to ensure that people with a disability, their families or the groups that they represented would be able to access planning. [In particular, indigenous and CALD groups were adamant that the tool needed to be in their languages so that people in their communities would use it.](#) Some parents explained their children responded best to pictorial languages such as Symbol, and that it was important that children have some understanding of what is being planned for them. [Other people said they needed text to be quite large or have high contrast text so as to be able to read it.](#)

The tool must be accessible across numerous devices to increase its appeal and ease of use for different people – [many younger parents pointed out that while they were much more comfortable using a desktop computer, their children are skilled at using mobile devices.](#) The tool must also be accessible in hardcopy or through a professional planner (LAC) because people may be unable to or uncomfortable using internet devices, such as a group of parents with older children who said that although they loved the idea they would be unlikely to use the tool because of their unfamiliarity with computers and the internet. [They just wanted to talk to a human with whom they felt comfortable sharing their children's story, plans and aspirations.](#)

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## action:

Ensure that the tool covers all feasible languages and preferred means of communicating



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## action:

Allow for a variety of sound and text visibility options



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## action:

Develop the tool so that it can be accessed across multiple electronic and hardcopy platforms



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## action:

Ensure that there are well educated Professional Planners coming from a variety of cultural backgrounds and are representative of the diversity of disabilities who can utilise this tool and are available to provide assistance



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*“People often respond better when they are connected and supported by people who they feel understand them”*

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Consultation participant, Brainlink

# 2

*the tool is do-it-yourself*

The tool needs to empower its users to have control of their own planning. People with a disability and their families are often dependent on the knowledge and skill of professional planners and service providers who most often direct users to their own agency's resources. People with a disability and their families need to be equipped with information about resources which allow them to make an informed decision about their own lives devoid of potential bias. This aligns with the philosophy of DisabilityCare that people with a disability should have control over the supports and funding they receive. Consultations supported DIY for those with the capacity to plan themselves, provided that assistance was available for those who could not. One group consulted said that this takes the self-directed planning model which they support one step further.

Parents also felt that not depending on others could be a huge timesaver. An overwhelming majority of people consulted said that DIY planning meant users did not have to rearrange their own lives to fit into the schedules of service providers and professional planners, but instead could decide when and under what circumstances they wanted to plan. This was important as users have busy lives and will not always be able to set aside the necessary time to plan in one sitting. It's also important for regional and remote users who may not have immediate access to planning support.

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**action:**

Most people should be able to use the tool without the advice of professional planners- but should have access to planners as required

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**action:**

The information and resources should be comprehensive enough that users are not disadvantaged by the lack of a professional planner

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**action:**

Users should have control over when they use the tool and for how long. This must include a save and return function

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*“I love the DIY concept. Sitting down with someone over and over again who asks me the same questions every year does not add value to my experience. I understand they have a job to do and that some people will need help with planning but rather than fill in a 40 page bureaucratic document I can just fill in what I want and get it and it is in my time”*

---

Consultation participant, Ayr

# 3

*the tool is intuitive and easy to use*

To empower users and so that people can use the tool themselves, it has to be easy to use. This includes the language and concepts being simple, the layout and design being intuitive, and the process being an efficient use of users' time. Consultations found that many planning documents currently in use are difficult to understand and incredibly bureaucratic – one person who only wanted to plan to go fishing ended up having to fill in a plan that was 40 pages long. Some people in consultations hadn't planned because they felt that they shouldn't have to go through a complex process when people without a disability didn't need to. This tool cannot be so complex as to discourage people with a disability and their families from using it. The tool should do most of the work for users so that their simple interaction generates a plan with enough information to satisfy bureaucratic processes.

The tool also needs to be able to explain how it works and what it is doing at each stage. This will need to be in multiple forms to adapt to the vision and hearing needs of individuals, although videos have proven successful in consultations at getting across tips and information. This should include explaining to users why they should plan at all, what rights they have as a person with a disability, and how the tool will work. These explanations should be from people with a disability or family and friends of people with a disability. Having an explanation from somebody in the user's position was found to empower users and increase their engagement with the tool.

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**action:**

The tool's layout must be easy to navigate so that a user can access any stage of the tool or piece of information at any time

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**action:**

The tool should automatically create a plan based on user responses to questions

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**action:**

The tool needs to have tips and explanations of what is going on at every stage, told by people with a disability and their families

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*“I understand economics and the opportunity cost of the time it takes me to navigate the system of endless and disparate services and processes. I could at least be working part time, but I spend all my time trying to find the most appropriate services. I am no longer an economic participant and not paying tax.”*

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Consultation participant, Villa Maria (My Time Group)

# 4

## *the tool is flexible and retains user preferences*

The tool has to be flexible enough that most people's preferences are able to be met, and it must remember people's preferences so that they are retained for subsequent planning sessions. Preference options should include accessibility options, as well as options for other aspects of using the tool such as security, connecting with other people, and news, information, and resources. These should be retained and synchronised across a users' account to assist logging in and out of the tool on different times or through different devices.

It's also important that the tool be flexible enough to meet people's expectations of the planning process. Some people consulted wanted to go through all the planning stages because they were ready to work out what their goals were and plan for them. Some people with a disability affecting their mobility felt that this process was unnecessary because they knew exactly what kind of resource they needed, and just wanted to use the tool to rank them by price, proximity or quality. Some parents of very young children with a disability felt that planning was too difficult at their stage and that first they would like to get a general overview of information relating to their circumstances. To encourage users to plan, and to meet the needs of those who don't need a complex plan, the tool must adapt to these different ways it could be used.

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**action:**

Users must have options over how they access and use the tool, and these must be retained in their account

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**action:**

Users must be able to start using the tool either by creating a plan or through immediately accessing potentially relevant information and resources

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*“All I need is a wheelchair I don't want to have to go through a huge process I know what I need I just want to be able to find it and send my plan off for funding”*

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Consultation participant, SCIA

# 5

*the tool  
collects  
information  
and improves  
services*

A key to the success of the new funding paradigm is the ability for disability and mainstream service system to respond to the needs and increasing participation of people with a disability. All groups we consulted with could see the benefit that data collection capability a tool of this kind could provide to government and the mainstream.

There was a level of cynicism and concern about data collection and it was seen as imperative that any information should be de-identified and people should have a choice about who sees their information.

Conversely one group who expressed that there was no resources and were looking for vacation care said 'wouldn't it be great if service providers could see that this was what we wanted and provided a responsive service to meet our need'.

Another group said that it would be useful for a school to see how many children in their local area had disabilities so they could prepare accordingly.

Others said it would be wonderful if the housing system could use the data to prepare their infrastructure to provide timely responses to housing needs.

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**action:**

Data collected is used to collate up to date information on services required.

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**action:**

Local communities and mainstream services have access to up to date information on people's needs

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*"I am lucky to have good connections and are actively involved, but the number of emails and piles of mail I have in my house can be overwhelming. It would be great to have one central storage/ filing system"*

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Consultation participant, Villa Maria  
(My Time Group)

# 6

*the tool is relevant to all users*

People with a disability, their family and others should be able to use the tool.

The tool needs to be relevant to people with a disability, their families, and other people in their life if it is to address the needs of all people with a disability. Our consultations demonstrated that parents of children with a disability need a tool like this so that both they and their children can benefit from the information and resources provided. Examples raised in consultations of how the tool could help families of people with a disability included parents whose personal goal was to go back to work. They should be able to use the tool to find how they can access childcare for their children.

It's particularly important that the tool is relevant to the family of a person with a disability where they are a child or unable to independently plan for their own lives. To ensure that people with a disability benefit from the tool through their families' engagement, the tool must adapt its questions when being used by families or others. One mother of a boy with a disability said that she also wanted to be able to plan taking into account the needs of his sister who doesn't have a disability, as the mother didn't want her daughter to be responsible for her son's care as they got older.

However people with a disability consulted said that the tool needs to increase its focus on their independent lives and less on the needs of the family as they develop, and remind parents that as their children grow it's important that they take on a more independent role. This was shown when a mother said that she didn't trust her son to make appropriate life choices, and the tool should remind parents that they need to take calculated risks and provide their children with the space to grow their independence. This transition from family to a young person with a disability would also allow for continuity of teenage and young adult plans, instead of requiring them to start the process from scratch.

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**action:**

The tool needs to include resources relevant to the families of people with a disability and others in their lives

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**action:**

The tool must adapt the focus of its questions in response to the kind of user and the life stage of the person with a disability

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**action:**

The tool must be able to transition from the family to the person with a disability

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*“I want to be able to take risks and go out like any other young person, sometimes my parents don't think I should, I don't want them interfering with my plan”*

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Consultation participant, YDAS

# 7

*the tool must be inclusive*

Consultations with indigenous and culturally and linguistically diverse (CALD) groups supported the tool adapting to their demographic and providing them with targeted information and resources. Some communities suggested they should be able to connect with others from their background using the tool, and that particular information about their culture and disability be accessible. This could include community specific, mainstream or disability services that are only available for people of a specific background, such as indigenous co-operatives.

The tool needs to use terminology that is reflective of different cultural world views. One indigenous elder talked about the discomfort indigenous parents experience when 'disability' language is used to describe their children's needs. Participants approved of the tool's use of needs-based rather than diagnostic-based language. It is important to consult with people from diverse communities when developing targeted information, so that indigenous and CALD communities do not feel alienated. Clearly if the needs of diverse communities are not taken into account, community members will be unlikely to engage and access vital support via DisabilityCare Australia.

It is important that the tool is inclusive of other users who may experience disadvantage or discrimination such as Lesbian, Gay, Bisexual, Trans and Intersex (LCBTI) people with a disability. The issue of stigma attached to sexual orientation from service providers, carers and other people with a disability was raised. It was suggested that a filter which would provide connections to others in similar situations and information about LGBTI friendly services would be helpful. Resources and information that specifically support LGBTI people with a disability should be included in the tool.

.....  
**action:**

The tool must allow for indigenous, culturally and linguistically diverse, and LGBTI users to indicate this demographic information as part of their personal profile

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**action:**

The tool must provide resources and information specific to living with a disability in various cultures or as an LGBTI individual

.....  
**action:**

The tool should be able to recommend resources ranked well for their cultural or LGBTI sensitivity and inclusiveness

.....  
**action:**

Information specific to certain cultures or LGBTI communities must be written in collaboration or consultation with people from those communities

.....  
**action:**

Users should be able to connect with other users from the same cultural background or LGBTI community

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*“I know many families who would not use this as it would not be seen as appropriate in their culture – the language would need to be sensitive and they will need lots of encouragement”*

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Consultation participant, EDAC WA

# 8

*the tool is useful regardless of your eligibility for DCA*

Consultations and findings from research made it clear that there is a lot of confusion around eligibility for DisabilityCare (DCA). However, it was equally clear that the functions of the tool should be useful to a person with a disability and their family regardless of whether they are eligible for DisabilityCare funding or not. The need for a plan and the resources and information provided by the tool, are likely to increase where the user is ineligible for DCA. They will need to be well informed and adopt creative ways to access assistance, discover what is most affordable and seek alternate ways to address their needs.

The need for assistance to identify and secure alternate funding sources was a great concern for parents of young children with a disability, as they often deal with many varying funding streams based on disparate eligibility criteria. While DisabilityCare may streamline what funding is available, it is still likely that users will want to use the planning tool to consider their eligibility for DisabilityCare and other funding sources such as education support.

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**action:**

The tool will provide information on DisabilityCare and alternate funding sources, including eligibility and relevant dates

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**action:**

Funding information should be provided after setting goals so as not to discourage users who are ineligible for DisabilityCare funding

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**action:**

Users should be able to immediately access funding information when desired

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*“Being new to the world of disability I have no idea what I am entitled to. I spend hours searching and the best information I get is from other parents – I never know where to go or what to ask for...I wouldn’t have known what early intervention was or why it is important for my child...some health professionals are useful, but parents have been, by far the best source of information.”*

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Consultation participant, parent of a young child at Noah’s Ark Early Intervention VIC

# Key benefits

How does the  
tool help you  
plan?

# How does the tool help you plan?

## The tool must use self-directed planning

Self-directed planning has been advocated in Australia and is considered best practice here and overseas. It is particularly appropriate to the needs-based funding model of DisabilityCare. This method was widely supported by the groups consulted and was especially useful for those who don't fit the medical model of disability.

It is a way of planning that empowers users to determine their own support needs and places an expectation on service providers to respond appropriately.

**It assists people to think about what they need and why and provides ideas and direction on how and where to find support. In doing so, the process provides the rationale to secure funding.**

Self-directed planning is a process that allows people with a disability and their families to be the driving force in identifying what they want and need in life.

**The tool's structure means that the user first considers themselves, their attributes and what's important to them, and then decides what goals they wish to achieve, before finally considering what they need to achieve these goals.**

## You shouldn't feel constrained while planning

Professional planners consulted for the Project considered it essential to empower users so they do not feel constrained by the planning process. Users should identify what they want in life, not merely what others think they should be planning for. The tool will encourage users to also think beyond the information that it contains and incorporate other ideas and resources to enhance their planning and goal setting.

### action:

**All suggested resources and information can be supplemented by an 'other' category where users can input their own information and resources**

## You can be supported while planning

The tool allows users to request different levels of support. Those who want the tool to provide a high level of support can answer additional questions and be directed to supportive resources.

There will be tips on how to plan at every stage and assistance to troubleshoot what isn't working. Users may also learn from the experiences of others in similar circumstances and what resources they might consider using.

Users' familiarity with disability supports and confidence with planning will vary and require the tool to offer varying layers of complexity from introductory information through to advanced concepts.

Consultations highlighted the fact that people initially feel challenged by the process of planning and setting goals.

There was widespread support for direction at this stage to ensure that people do not feel overwhelmed by all of the options available.

### action:

**Ensure there are appropriate tips and resources available to help those who need and/or have never created a plan in the past**

### action:

**The human resource element is vital to the role of Local Area Coordinators and will be the key to creating a successful plan for some people**

*"I just want to be able to speak to someone who will listen and guide me through..I have spent far too much time muddling through on my own"*

Consultation participant, Endeavour Brisbane

## The information you provide must be

### confidential and secure

In several consultations people said that they wouldn't use the tool unless there was a guarantee against unauthorised use, the DisabilityCare and other organisations having access to their private and personal details. This is an understandable privacy concern given that the tool will contain particularly personal information, even though such information will assist their planning. Users should have complete control over the information they input to the tool, to ensure that privacy is guaranteed. If an entity does have access to certain information contained in a plan, this should be formally identified and consented to, in accordance with legal requirements.

### action:

**All information provided must be secured by a password protected user account**

### action:

**Other users can only view an account with the user's permission**

### action:

**Where an organisation or government will automatically have access to information this should be declared openly**

*"I am sure security settings would be available. We use them all the time when we are using banking systems"*

Consultation participant, ACD NSW

## Key benefits

# How does the tool help you plan? cont.

### You should be able to find both mainstream and disability-specific resources

Inclusion in the whole of society is an underpinning right acknowledged in DisabilityCare, so it is important that mainstream services are incorporated into the tool. Users should be encouraged to think creatively about the many different resources they can use to achieve their goals. Sometimes mainstream services are perfectly able to meet the needs of a person with a disability, like the example one parent gave where their child with a disability was quickly and easily supported in going on a skiing trip with their family. The tool should provide information/links to both mainstream and disability-specific services based on the information the user enters. An example is that if a person wants to access work then their local job access, seek etc would display. What also should display if required is information about what specialist supports are available.

Both users and services benefit from mainstream services meeting the needs of people with a disability.

Some of the people consulted also suggested that the ability of mainstream services to meet the needs of people with a disability be recorded. One person detailed their experience of visiting a restaurant that stated it 'catered for people with a disability' but did nothing of the sort. Such an experience could be shared via a feedback function similar to trip advisor where people could rate the services, supports and activities they use.

#### action:

The tool should incorporate mainstream resources and information on how to access these

#### action:

Mainstream services should be encouraged to engage with the tool

#### action:

The tool should indicate to users when resources are not able to cater to their disability or needs

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*“I want employers to know it is not that difficult to cater for my needs in fact there is not a lot they have to do. I already have all the adaptive technology that is required for me to be a fully engaged employee”*

Consultation participant, BCA

*“I am a mum with a disability I just want support getting my daughter to school, no one seems to be able to help me with this.”*

Consultation participant, SCIA

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### You can find information and resources most relevant to your needs

The tool will combine demographic information from the user's profile, the life areas selected, and their preferences in terms of cost, proximity and other areas to determine which information and resources are most relevant. This will assist in educating users about living with a disability in circumstances similar to their own and let users know how to access necessary resources.

As the tool is designed as a do-it-yourself process, users may want information on the type of tasks specific professionals offer (therapists, brokers, financial intermediaries). The tool will provide this information so that users can choose the right type of support to meet their needs.

#### action:

The information should be filtered using different key words e.g location, disability type, age etc and relevant resources, services and information should appear.

#### action:

Easy navigation tool whereby people can save the resources they find and discard any that are not relevant, thus reducing information overload.

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*“I have had access to resource information and when I have gone to contact them to access the service they have huge waiting lists. Can we make sure that we are not building unrealistic expectations. Any failure will lower people's already poor experience with the system”*

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Consultation participant, ACD NSW

## Key benefits

# How does the tool help you plan? cont.

### You should be able to connect with others

#### in similar circumstances

Users should be able to get support from other users who have similar circumstances or goals, and to build support groups using this tool. Consultations suggested this is useful for culturally diverse communities where many would be more comfortable seeking assistance from those who share their experiences. Other consultations also suggested that this would help add a human element which some people thought was lacking due to the tool's do-it-yourself focus. People consulted spoke of the luck they had in raising their child with a disability and acquiring the support then needed however it is unacceptable to have to rely on luck to find and secure the right support.

If they so choose people using the tool can connect with others, by creating another source of information and growing their knowledge through a wide variety of shared opinions. People concerned with privacy were assured that such a feature would be restricted by user permissions.

#### action:

Users should have the option to connect online with other users in similar circumstances through their planning journey e.g. when setting goals

#### action:

The tool should provide or link to forums for groups to discuss issues relevant to them

---

*“Thank goodness that English is my first language. I am well educated assertive and I live where I live... I really don't know how others get by or get the information they need...the system shouldn't be based on luck”*

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Consultation participant, ACD NSW

### You should be able to interact with service providers,

#### funding sources and government agencies

Some consultation groups saw a vast potential for more efficient interaction with their service providers, government agencies and funding sources using this tool. They suggested these organisations also have accounts with which they could access a user's information and add their own information with the user's permission. This could include service providers suggesting additional goals to a user storing health related information and reports thus reducing paper and misplaced documentation. The tool would provide capacity to submit information and plans online, and to generate acknowledgement of receiving documents. Those consulted felt that all service providers should be encouraged to interact in this way and as a result increase customer satisfaction.

#### action:

Allow for service provider/government organisation accounts which can access certain information with the user's permission, and allow users to see who has accessed their plan and when

#### action:

Enable commentary on user plans by these organisations

### You should be kept up-to-date with new resources

#### and information

Several people consulted asked how they could be alerted to changing external circumstances that could impact on their plan. This is particularly likely when a legislative change occurs – several groups had barely heard of the DisabilityCare (formerly NDIS) reforms prior to participating in consultations, and many more failed to understand the implications. Another source of concern was changes to program eligibility for various funding sources with little or no notice given to people who rely on them. Conversely it can be luck rather than by design that people become aware of new programs. Currently case managers or peers are often the sources of news but it is adhoc whereas the tool will regularly provide up to date and targeted information.

#### action:

The tool will provide relevant notifications or email updates with changes and new resources

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*“The best source of information for me has always been other people in a similar situation. It has been great for me, it helps me toss around ideas and filter information”*

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Consultation participant,  
Diversity and Disability VIC

# Key outcomes Your plan

# Your plan

## Your plan should be a universal plan across

### all life domains

This plan can combat the need for many people to create multiple plans specific to each service-provider, government agency or funding source. Currently people often need to provide the same information over and over, every time they wish to access a new resource, even when it is information that is unlikely to change – [a woman discussing her disability used the metaphor of losing an arm and having to prove that it hadn't grown back in order to access resources.](#)

The universal plan also streamlines the goals planned for and steps to achieve them into one document over which the user has control. In contrast, one parent said her son was currently only 10 and already had 5 plans, and that she didn't want to imagine how many plans he would have when he was 25. This also fits into the DisabilityCare philosophy that service providers are no longer able to expect people with a disability to be content with what the service provider already provides, but instead service providers must adapt their services to the needs of users. This should include compatibility with plan created by the tool.

### action:

All service providers, government agencies and funding sources should adapt their existing forms to take in the information provided by the planning tool and accept these plans without needing to repeat this information

### action:

Users should be able to give service providers access to any and all parts of their plan

*“I have so many plans, I feel like I need a Personal Assistant to keep them updated for me”*

*“It would be great if I don't have to get the doctor to sign off on everything I ask for – taxi card, companion card etc – this could be done once... let's face it, there has not been a miracle cure for my disability”*

Consultation participant, Endeavour Brisbane

## Your plan should be a living document

This plan should be a living document that evolves and is constantly referred to and adapted by the user. Circumstances in a person's life will often change, and users should be encouraged to return to the tool periodically to review their circumstances.

In consultations people asked that the review process easily direct users to the most relevant planning stage as there may be many reasons that a user might wish to review their plan. Users wanted to be able to change the plan when their child developed a new skill or suffered a setback, or when they wished to use a different resource due to problems with their current service provider.

Users should also be encouraged to keep track of their progress against their plan. Several consultations raised the possibility of people creating a plan but not having the motivation or natural supports to keep following the goals and steps that they had set out to achieve. They felt there should be some sort of monitoring by the tool that would let people know when a deadline they had set was approaching and when it had passed, and which let them know how many steps they had achieved and how many they hadn't. It was also recommended that users who were having difficulty with their progress be encouraged to seek assistance from a disability support organisation or professional planner to prevent from slipping through the cracks. They acknowledged that this should not be done in a way that punished those users for their lack of progress.

### action:

The tool should allow users to easily return to and alter relevant parts of their plan based on the way in which their circumstances have changed

### action:

Users should be encouraged to update their plan when they have met achievements so the tool can keep an accurate record of their progress

### action:

The tool should remind users with notifications or via email when deadlines are approaching or their progress has slipped, and recommend support for keeping to their plan

## Your plan cont.

### Your plan should be able to cover all aspects of life

Currently people often plan for specific areas of life, which leads to people who are already time-poor having to complete many tedious plans. Families consulted asked why there couldn't be one plan that incorporated all areas of their lives, which is what this tool should aim to do. People in consultations talked about how they didn't just want to plan around, for example, personal care only because personal care isn't something that occurs in isolation. People also didn't want to be restricted to education and personal care plans – they wanted to be able to incorporate these aspects in a more holistic way so that they could plan for activities such as going on a holiday or living independently from their parents. When the whole of a person's life is considered, resources and the funding allocated to them can be thought about in a more efficient and cost-effective way.

#### action:

The tool should encourage users to plan for multiple goals in any and all areas of their life and to think about how these goals and the resources attached are related

#### action:

The tool has categories that ensures people think of aspects of life – categories such as health, work, learning, transport, home, fun and social, being connected, money, personal support or other.

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*“When my son was born I didn't think I was ever going to work again – my career was really important to me – if it wasn't for a therapist who came to my house and the childcare my daughter attended encouraging me to send him to childcare, that could access funding to include him... I would have never returned to work”*

Consultation participant, Noah's Ark

*“It would be a little bit depressing if you entered fun category and nothing appeared”*

Consultation participant, YDAS

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### Your plan should cover and adapt to each

#### stage of your life

For many people with a disability, it is important that as they develop they are able to take on a more active and empowered role in their life, which often means living independently, and being able to plan for the long term when their natural supports such as parents may no longer be around. This means that the tool needs to encourage users to consider their preparedness for independent living, and encourage them and their families to think about the supports they will need into the future. One mother said that she hadn't updated her will in years, had no family around, and didn't know what would happen to their son if she and her husband were gone as they are the only ones who know his preferences and unique qualities and needs. The tool must be able to plan for long term goals as well as more immediate ones, and for such difficult transitions.

For families of people with a disability, adapting to each stage of life is essential when the resources and funding available change quickly with their child's age, and accessing these resources requires planning months in advance. Consultations held with parents of children in early intervention revealed that some education related funding needed to be applied for months in advance. One parent spoke of the guilt and dis-empowerment she had felt when she discovered resources that her child could have been eligible for if she'd known to apply for them at an earlier date. Others said for the tool to help them they needed to be warned about such upcoming opportunities with enough time for them to effectively access them.

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#### action:

Users with a disability should be encouraged to consider their preparedness for life transitions such as changing family circumstances and other natural supports

#### action:

The tool needs to encourage both long term and short term planning and provide information on how to prioritise these different goals

#### action:

The tool should provide updates based on age and date as to upcoming deadlines for relevant resources and funding

# How the Lifelong Assist tool links with the DisabilityCare vision

Effective planning has the potential to help facilitate the increased levels of economic independence and social participation that DisabilityCare hopes to achieve. The planning tool, informed by the key principles of self-determination, efficiency, effectiveness and sustainability, will align with, and enhance the wider reform objectives of DisabilityCare in the following ways:

- As a tool designed for use by consumers to develop individualised plans, thereby encouraging greater choice and control over services accessed, the Lifelong Assist tool will help foster a culture of independence and build the confidence and competence of consumers in both the transition to, and the navigation of, the new DisabilityCare system;
- By using the assessment process, and resulting resource allocation conducted under DisabilityCare as a starting point, the tool will allow for a more holistic appraisal of individual support needs and life aspirations. The aim is to prompt consumers and carers to consider a wide range of both clinical and non-clinical services, including mainstream services, informal support and services that may not necessarily be funded under DisabilityCare, such as social activities, or alternative therapies;
- The planning process will seek to address individual preferences and strike the right balance between harnessing the energy and commitment of informal supports and accessing formal (funded) supports when required. The involvement of families in the planning process will help ensure that family carers are better sustained and supported in their caring role;
- The tool will encourage consideration of a range of different ways to manage support, from the employment of intermediaries to act on an individual's behalf, to completely self-directed funding, or a combination of approaches. The tool will be designed to accommodate the fact that people may need differing levels of support to plan and make decisions;
- When done well, and with the right input, planning can help identify the degree of community readiness, both at a practical and attitudinal level, for the enhanced participation envisaged by the reforms. This is where recommendations relating to the role of the DSOs have particular relevance;
- The tool can be used to estimate need over the life course, taking into account differing requirements as circumstances change. In doing so it can redirect attention from short-term costs to long-term outcomes. Good planning can ensure there is adequate attention given to investment in early intervention services, and in supports such as home modifications or the timely provision of appropriate aids and equipment;
- The tool could incorporate, in one package, a range of resources to assist a person to make and manage their own care arrangements including forms for seeking funding, hiring workers and acquitting funds etc.;
- As an aid that assists a consumer to participate in the market economy created by DisabilityCare, it has the potential to help drive greater innovation, flexibility, and efficiency in the disability service sector, thereby improving value for money. Forward planning can be used to identify gaps in service provision, inform systemic change, and raise awareness;
- The tool will incorporate internal checks to ensure resulting plans are realistic and affordable;
- There is also the potential for the planning process, in clarifying needs and aspirations, to assist consumers who wish to appeal resource allocation decisions of DisabilityCare.
- The tool will provide peer support opportunities for users in similar circumstances, to learn from their shared experiences.

# Disability Support Organisations and Local Area Co-ordinators

**Efficient Disability Support Organisations and the personnel in local communities will be a crucial to the successful implementation of this planning tool and the new DisabilityCare system. They will have essential roles such as providing education, information, coaching and capacity building, support with planning, and community connections.**

The Productivity Commission in its 2011 report *Disability Care and Support* outlined the concept of Disability Support Organisations and Local Area Co-ordinators.

*The Commission envisages a role for a new form of organisation, 'disability support organisations' (DSOs) that would offer people brokering services; management services (such as dealing with the administrative aspects of self-directed funding, were a person to go down that route); assistance in developing the skills and confidence to practically exercise choice; personal planning services; and orientation supports for people who are suddenly faced with the unfamiliar world of severe disability.*

*Thus, the principal role of a DSO would be to act as an agent for a person with a disability on a range of matters, including in relation to the implementation of that person's package of services from the NDIS. It is a role separate to that of a LAC but complementary to it.*

(Productivity Commission Report -Disability Care and Support, 2011, p414)

Most disability funding in Australia is currently dispensed through non-government organisations, with much of this provided through block funding. As such, and despite providers' best intentions to put the individual at the centre of provision, the key determinant is currently government. Services are provided within government-prescribed service definitions, thereby inhibiting individual innovation.

DSOs will provide support to people with a disability and their families, building their knowledge and skills to take full advantage of available mainstream and disability services and informal supports. It will be imperative that DSOs operate independently of disability services providing direct care; for example therapy, personal care or respite activities. In so doing, the temptation for service providers currently offering planning and direct care to maintain this dual role, is eliminated. The conflict of interest that exists when providers continually guide people into their own established services without consideration of a person's right to choice, flexibility and self-determination is driven by provider-interest. Not only was conflict of interest a key determinant in the Productivity Commission's recommendation for the development of DSOs but the separation of roles between DSOs and service providers will assist in upholding the principles of individual choice and control, enshrined in the DCA legislation.

The DSO and its personnel will operate within a framework that is responsive, working to understand what people with a disability and their families want and need, assisting them to gather relevant information, presenting options and acting on decisions made.

Keeping life on track is the greatest challenge facing people who through unforeseen circumstances acquire a disability or families who have a child born with a disability. Keeping life on track is also the key to avoiding the pitfalls that slowly but surely over time draw them into a disability world disconnected from universal services, isolated from family and friends with little or no participation in their local community.

People aren't disability-centric when they start out on their journey, but eventually they become sucked into a [disability vortex](#). The 'informal supports' often mentioned in policy documents, are extremely difficult to develop and sustain once disability becomes front and centre of life - day in day out.

Remaining on track is the only way to avoid this dependence and isolation and unless DCA is structured correctly, people's hopes, dreams and goals will never be realised.

Children will continue to live their lives overly dependent on disability supports and develop into adults who will become passive recipients of care. Parents will unnecessarily end up on a life trajectory quite different from what they anticipated, unable to pursue their hopes and dreams and the broader community will not make the attitudinal shift to be more inclusive of all citizens.

DSOs will adopt a "keep life on track" approach to supporting people with a disability and their families. Working together to identify and build informal supports and local connections that are more aligned with an atypical lifestyle, will avoid the isolation that undue involvement of disability specific support can create. People with a disability do not always need to be surrounded exclusively by paid support. DSOs will pursue alternative options to ensure connections to local communities are as strong as possible.

## Key Attributes of the DSO

A DSO would be a 'stand-alone' entity and it would know its local community well. It may have other service affiliations. The organisation may probably be small, as it would have made the election to become a DSO and thereby happy to relinquish any direct service delivery roles it might have previously offered. It could be either a generalist or a specialist. It might work with any person who walked in the door, and/or it would have expertise in a particular area. An example of the latter might be that it had extensive knowledge of ASD or epilepsy, such that people/families with those conditions would get the sense of comfort that comes from being 'understood'. The organisation would need to be officially recognised by the DCA in some explicit way e.g by being registered, gaining accreditation, etc.

Income earned by the organisation could come through a variety of approaches, although it is important that part of the income should be 'at risk' in order to focus the organisation on explicitly meeting needs and desires of those that seek support. Thus, the organisation might be block funded and/or receive monies on a fee-for-service basis and so not has to stifle innovation and the desire to deliver. In some circumstance there may be extra funding given (e.g. if the organisation worked in a highly specialised field or had been asked to work in a 'thin market' area by the DCA). The organisation might also derive some income by undertaking specific, short term community development project work, funded by the DCA or mainstream entities.

The organisation could also support outreach workers (using current technology) in rural, regional or other 'thin market' locations.

### Market Analysis – Demand and Supply

DSOs will be in a strong position to analyse the marketplace for quality, flexibility and affordability. Utilising data generated via individuals they support can then be available to others to assist in making informed decisions about the services that will best suit their needs.

On the supply side, DisabilityCare is expected to generate a sustainable, diverse, person-centred and responsive disability service system by providing incentives to providers who will be sufficiently robust and capable of operating in a more consumer/demand-driven environment rather than a program-based welfare/charity model.

The business of DSOs will be – with the help of family and or significant others – to support people with a disability to understand their values and vision and to provide the means and information needed to move towards those goals throughout their lives.

*To achieve, DSOs and their personnel will have to have the ability to:*

- *Leverage knowledge capital - ideas, innovations, skills*
- *Build social capital - networks with community, government and business.*
- *Support capital development and support system by building material capital - revenue, assets, infrastructure.*

DSOs have the opportunity to redefine the market and support people in finding the assistance they need beyond the traditional disability service system.

For the people living with a disability, having their values and life choices respected by others is of the utmost importance. While they should always be the driver when making decisions about their lives, at times assistance from a DSO professional would be helpful.

Understanding the needs, goals and preferences of people with a disability and their families, gauging what success looks like and identifying and accessing available supports will be a key role of DSO's.

**Although the Lifelong Assist planning tool is designed to be used independently, DSOs will play a key role in its operation. They will carry primary responsibility for the tool's online information population, provide coaching in how to use the tool effectively, analyse data for identifying gaps in support and monitoring service quality and assisting people who require support, to complete/update their funded and unfunded plans online. Creating links between people with a disability and their families and local services and supports**

DSOs will be the knowledge bank and resource base to link planning to support and better connections at the local level. They will be central to creating greater expectations of local community groups and mainstream services to become more inclusive and supportive of people with a disability and their families. It takes time to build trust with key stakeholders – medical and dental professionals, schools, retailers, sport and recreation groups, public services, employers, volunteer and activity groups, etc. DSOs will implement strategies to systematically address areas within local communities that require the greatest assistance to increase genuine participation.

**DSOs will focus on the eight quality of life domains and pinpoint what is needed at a broad level for people with a disability to lead enriched lives:**

#### Interpersonal Relationships

*Connection with people and community- affiliation, affection, friendships, intimacy*

#### Physical Wellbeing

*Health, mobility*

#### Self Determination

*DIY, self- control, choice, personal goals*

#### Social Inclusion

*Natural supports, community readiness, integrated plans*

#### Emotional Well Being

*Safety, stable environments*

#### Material Well Being

*Employment, possessions, economic independence*

#### Personal Development

*Purposeful activities, education, skills development*

#### Rights

*Privacy, your plan*

## Roles of the DSO

### Recommended roles a DSO WILL preform

DSOs will amongst other things:

- Build individual and family awareness of the importance of “keeping life on track”.
- Coach individuals and families in building their personal support network.
- Assist in accessing universal services/activities first, then where appropriate disability specific services and therapeutic interventions
- Engage with health, local government, education, housing, recreation, employment to facilitate more joined-up services providing effective support.

DSOs will operate independently of disability care services – even better, have a workforce who are not disability-centric. They will explore ideas and options with individuals, children and families, free of the conflict of interest inherent in the current disability support structure.

DSOs will include key personnel providing a range of client services. The types of roles included within a DSO will include Local Area Coordinators, Coaches, Peer Support Facilitators, Planners and Care Managers.

### Local Area Coordinators will:

#### Provide Information:

- Information about supports available to everyone whether disability focused or not
- Information about supports provided by disability service providers
- Information about funding through DisabilityCare or within the community

#### Community Connection:

- Help make contact with relevant mainstream services and activity groups in the local area
- Help identify and organise assistance needed to make connections with community groups/activities
- Help access volunteer support networks in the local area
- Recruit volunteers who could become a member of a person with a disability’s support network.

### DSO Quality Service Guarantee:

- Support people in negotiating for service improvements
- Support people in complaining internally about the DSO’s services

### Funded Support Coordinators will:

#### Co-ordinating funded supports:

- Help a person to effectively manage and organise their funding allocation
- Help manage funding arrangement where it does not include same DSO services (e.g. care management)
- Help a person organise their supports.

### Coaches and Peer Support Facilitators will:

#### Coaching and Capacity Building:

- Teach people how to increase their skills in planning, decision making, negotiating the supports needed
- Build support networks, managing support packages and self-advocating.
- Ready mainstream services within local and the broader community by providing them with information they need to make their services and activities fully inclusive

### Planners and Care Managers will:

#### Planning:

- Help people think about, identify and decide what their goals are and how they might achieve them
- Assistance with negotiation of contracts for individual supports
- Aid people to make decisions about what supports are required and where to source them, when they are not eligible for DCA
- Help with one-off discretionary brokerage to get help to avoid reaching a crisis
- Help with the review and redevelopment of plans
- Help exercise individual choice and build independence
  - purchasing equipment, services and therapy
  - choosing workers, managing shifts/rosters
  - financially managing package
  - direct employment

### Roles a DSO would NOT perform:

- Assess a person for eligibility for DisabilityCare funding
- Undertake service provider management
- Provide disability support services
- Independent advocacy

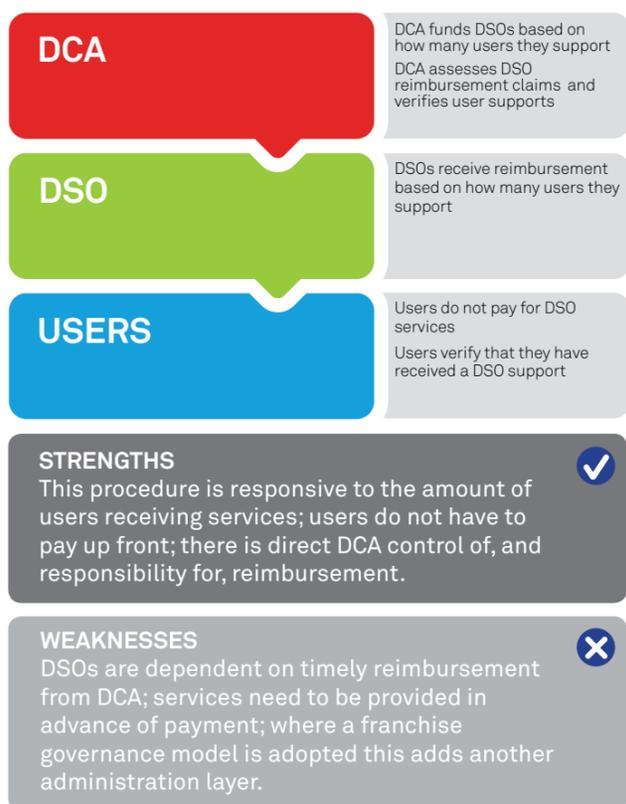
# Disability Support Organisations and Local Area Co-ordinators

## Various Funding Options and for a DSO

The development of DSOs provides an excellent opportunity to explore a variety of governance structures that ultimately could hold the key to enhancing innovation in organisational oversight and operations, as well as consumer ownership/participation. The purpose of presenting the following models is to report on feedback provided via our consultation process and to generate ideas for further investigation.

### 1. Reimbursement

In a reimbursement funding model a DSO provides services to users, and then seeks reimbursement from DCA (or their franchise manager if that governance option is adopted) on the basis of how many users they have assisted and the cost of the services provided. Users do not pay for services up front, although funding may be taken from their DisabilityCare entitlements. Users verify the DSO support they have received so that DCA is able to appropriately reimburse DSOs.



### 2. Block Funding

In a block funding model DSOs are funded on the basis of a periodic application procedure outlining the amount of users anticipated and the kinds of and quality of services they would offer. Users do not pay for services, and funding is received for the period in advance of service provision. This is similar to the way in which many disability services are currently funded in Australia.



### 3. User Pays

In a user pays funding model, each user pays directly and up front for the services of the DSO. There is no DCA oversight of DSO funding.



# Disability Support Organisations and Local Area Co-ordinators

## Various Governance Options and Framework for a DSO

### 1. Not-For-Profit Entity

An organisation that is not operating for the profit or gain of its individual members, whether these gains would have been direct or indirect. Any profit made by the organisation goes back into the operation of the organisation to carry out its purposes and is not distributed to any of its members. This applies both while the organisation is operating and when it winds up.



### 2. Community Managed Enterprise

A community managed enterprise operates like a business, produced goods and services for the market, but manages its operations and redirects its surpluses in pursuit of community goals. To this end it is governed by a board of local community leaders.

A community managed enterprise is a revenue-generating business with primarily social objectives whose surpluses are reinvested for that purpose in the business or in the community, rather than being driven by the need to deliver profit to shareholders and owners.



### 3. Co-operative

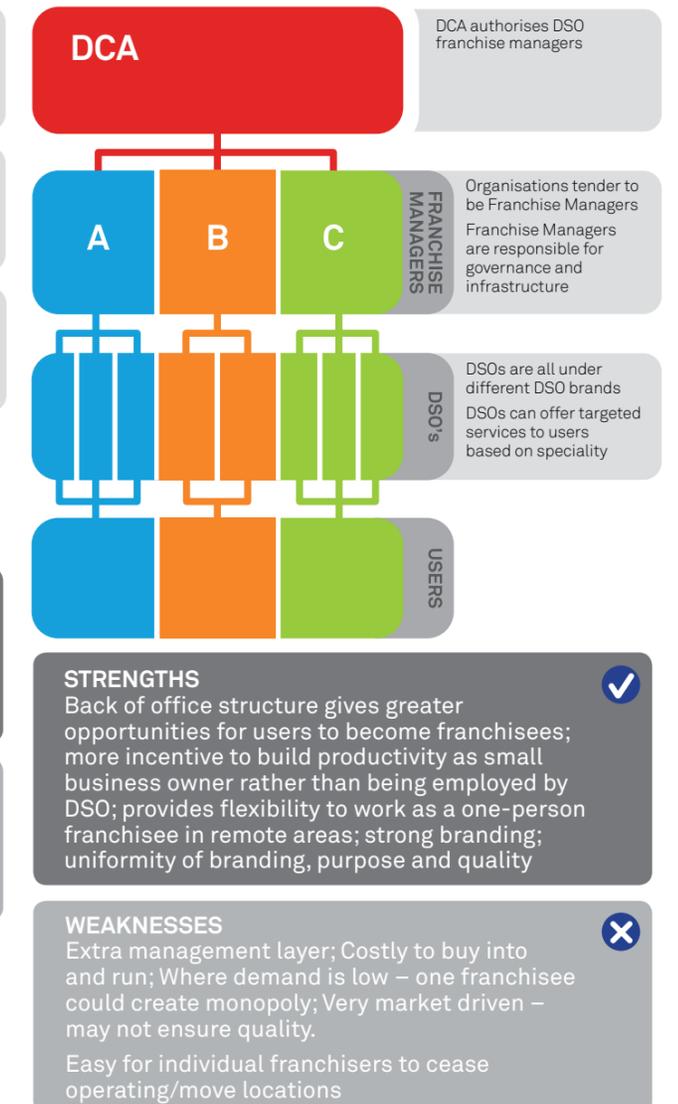
Co-operative businesses are owned and run by and for their members, whether they are customers, employees or residents. As well as giving members an equal say and share of the profits, co-operatives act together to build a better world.

Although they carry out all kinds of business, all co-operative businesses have core things in common. Co-operatives share their profits; they want to trade successfully – they are businesses, not charities.



### 4. Franchise (single or multiple)

A form of business organisation in which a firm which already has a successful product or service (the franchisor) enters into a continuing contractual relationship with another (franchisee) operating under the franchisor's trade name. The franchisee usually pays a one-time franchise fee plus a percentage of sales revenue as royalty, and gains (1) immediate name recognition, (2) tried and tested products, (3) standard building design and décor, (4) detailed techniques in running and promoting the business, (5) training of employees, and (6) ongoing help in promoting and upgrading of the products. The franchisor gains rapid expansion of business and earnings at minimum capital outlay.



## Disability Support Organisations and Local Area Co-ordinators

### Local Area Co-ordinators

Although it is the intention that Local Area Coordinators will operate out of Launch Transition Agencies, there is the opportunity to also consider their role within the structure of Disability Support Organisations.

Key requirements of a LACs will be to mobilise, empower and provide support for people with a disability to enable participation and inclusion in the life of their local and the broader community. They will be charged with the role of improving access to information about relevant services to ensure that the goals a person or family has can be achieved, whether that be access to work, education, health, life support, transport or social activities. They will work out of launch transition agencies and within DSOs in the person's or family's local community, but will need to think about broader access than the local community.

There is an opportunity to recruit Local Area Coordinators from various communities such as the CALD, Indigenous and from a range of disabilities. Evidence shows and throughout consultations it was clear that people respond better to people they connect with and feel understand their situation.

#### Local Area Coordinator Position Description

##### Primary Objective:

- Provide people with a disability, support as requested.
- Facilitate self-direction and/or ongoing support to assist people with a disability to access the services they need to improve and maintain their quality of life support.
- Develop a case plan in conjunction with the person, their family and other supports.
- Provide connections with people with a disability and their families and their local communities.
- Build capacity of mainstream services and local communities to better engage with people with a disability.

##### Core values:

**RESPECT:** We value the inherent dignity and equality of all people regardless of their circumstances.

**JUSTICE:** We value equality of opportunity and consistency of outcome for all.

**COMMITMENT:** We value dedication to meet the challenges that arise

**INTEGRITY:** We value consistency between word and deed.

**ACCOUNTABILITY:** We value the acceptance of personal responsibility.

**CO-OPERATION:** We value working together towards our goals.

##### As a Local Area Coordinator you will:

- Support people with disabilities to live in welcoming and supportive communities
- Provide personalised, flexible and responsive support to assist individuals, families and communities to access accurate and timely information to clarify their goals, strengths and needs
- Operate as a service coordinator (rather than a service provider) and help the person with the disability and their families/carers to plan, select and receive needed supports and services
- Build inclusive communities through partnership and collaboration with individuals and families/carers, local organisations and the broader community.

##### We are looking for a person who can:

- Build relationships with individuals and their families
- Provide personalised, flexible and responsive support to help people to develop their goals and dreams for living a good life
- Have excellent interpersonal and communication skills
- Work in a culturally sensitive way with people from a variety of roles and backgrounds
- Display spirit, passion and energy to make a real difference to lives of people with disabilities.

##### Key Competencies you can demonstrate:

###### Attributes and Aptitudes

- Comprehensive assessment and planning techniques.
- Outstanding ability to support people with a disability to set and reach their goals.
- Effective written and verbal communication skills
- Skills in actively engaging with people who are reluctant to use support services
- Excellent organisational, time management skills, and ability to be self-directed
- Ability to work with challenging people in their homes
- Able to write accurate, thorough and comprehensive reports.
- A creative approach to the design of goals and skill development programs with people with a disability.
- Able to work within complex environments and be outcome focused.
- Ability to accept constructive feedback from supervisors and stakeholders.
- Demonstrate enthusiasm for work and seek opportunities to make quality improvements. Be enthusiastic, committed to work, driven and task focused.
- Ability to work within a multi-disciplinary team environment by sharing information, supporting colleagues and respecting different skills.

###### Experience/ Knowledge

- Comprehensive understanding of the relevant legislative associated to the position.
- Demonstrated understanding and awareness of theories that enable and facilitate changes in human behaviour.
- Experience in developing person centred plans for people with a disability
- Proven ability to conduct comprehensive safety and wellbeing assessments and assist people to set goals for change.
- Understanding and appreciation of cultural diversity within the community.
- Demonstrated ability to motivate others and act as a change agent through strengths based, person centred practice.
- Provide a developmental service to people with a disability by providing relevant information to people with a disability about the programs;
- Assisting in the establishment and review of goals and a working agreement with people with a disability and their family;
- Assessing and reviewing the needs of people with a disability;

- Engaging in, person centred planning, support and life skills development with people with a disability, according to their goals and immediate needs.
- To report on work done by maintaining appropriate case records and statistics and writing relevant reports within the required time.
- Contributing and informing the case planning process people with a disability in the program;
- Referring people with a disability to other community services as needed;
- Developing and maintaining positive working relationships with other agencies and government departments and the community
- Maintain a dynamic and recursive approach to acquiring knowledge, skills and resources in collaboration with the team.
- Actively participate in training and learning development opportunities as required.

###### Team membership

- Make an active commitment to the development and maintenance of a cohesive multi-disciplinary team and participate in staff meetings, team meetings and staff development
- Participate in regular supervision
- Provide supervision for students on placement
- Participate in an annual performance review
- Participate in action research and the ongoing development of the service model
- Take responsibility for your own learning and development as a professional and a member of the intake team.

##### Qualifications:

###### Essential:

- A relevant tertiary qualification in social work or community development and or experience in local communities or; working with people with a disability
  - Licence to drive a motor vehicle
  - Competency in using the range of Office Computer packages
- This position requires comprehensive assessment, planning and interpersonal skills and experience.

# Conclusion

**A series of disabling barriers were identified, through the Australia wide consultation process, which contribute to the disadvantages experienced by people with a disability:**

**Poorer health outcomes:** data presented suggests that people with a disability experience poorer levels of health than the general population.

**Lower educational achievements:** Children with a disability are less likely to start school than their peers without a disability, and have lower rates of staying and being promoted in schools.

**Less economic participation:** People with a disability are more likely to be unemployed and generally earn less even when employed.

**Higher rates of poverty:** People with a disability thus experience higher rates of poverty than people without a disability.

**Increased dependency and restricted participation:** Reliance on institutional solutions, lack of community living and inadequate services leave people with disabilities isolated and dependent on others.

**Support:** Most support comes from family members or social networks. But exclusive reliance on informal support can have adverse consequences for caregivers, including stress, isolation, and lost socioeconomic opportunities.

The findings of the consultation process have determined that the Lifelong Assist planning tool has the capacity, if further developed, to support essentials services that overcome the sited disabling barriers by:-

- *Assisting individuals transitioning to community living;*
- *Providing access to a range of support and assistance services;*
- *Aiding informal and formal caregivers;*
- *Promoting independence; and*
- *Empowering people with a disability and their family members to effectively participate in a range of activities.*

Unmistakably, planning and linking to appropriate resources whether disability specific or not is fundamental in ensuring success of the DisabilityCare system. Without the appropriate infrastructure DisabilityCare runs the risk of failing to achieve its vision.

For example, if people with a disability are not provided with quality, timely, evidence-based information to inform their choices and are supported to exercise meaningful choice, there is a risk they will simply revert to using services they are already familiar with, regardless of how well the service meets their needs or how happy and satisfied they are.

If people are not empowered to make meaningful choices and not provided with information and resources with which to make them, then the notion of 'choice' becomes empty rhetoric and the system will fail to live up to its potential. Disability Care will then simply become another bureaucratic funding scheme rather than a powerful driver of systemic and cultural change.

**The Lifelong Assist planning tool and its accompanying structure of DSO and LAC has the ability to link this funding to outcomes which facilitate the change envisaged by the recommendations of the Productivity Commission.**

**There is a real opportunity to shift the power balance and achieve quality outcomes for people and the Australian society by:**

- *Increasing mainstream response*
- *Ensuring economic security*
- *Developing personal capacity and community support*
- *Improving learning and skills outcomes*
- *Better health and wellbeing outcomes*

**If people are not enabled to make meaningful choices, informed by appropriate, timely and accessible information, as to how they want to live their lives, then the notion of 'choice' becomes empty rhetoric. Australia's most significant social reform since the establishment of Medicare runs the risk of becoming another bureaucratic funding scheme, rather than a powerful driver of systemic and cultural change.**

# Appendix

Filenames:

ACD\_ConsultationPowerpoint.pptx

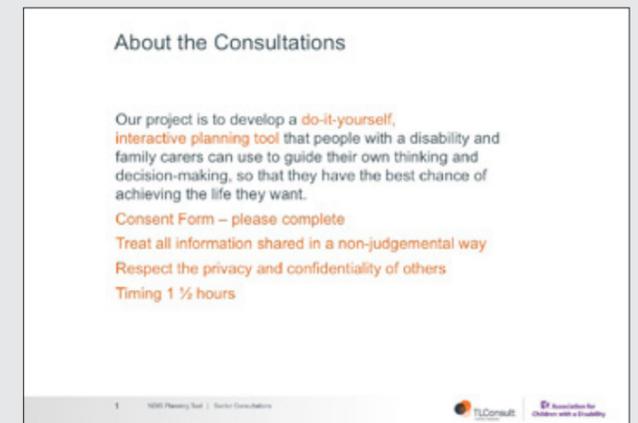
ACD\_ChristianInterview.mp4

*(The above files have been provided as soft copies.*

*Thumbnail images of each slide has been included here for reference.)*



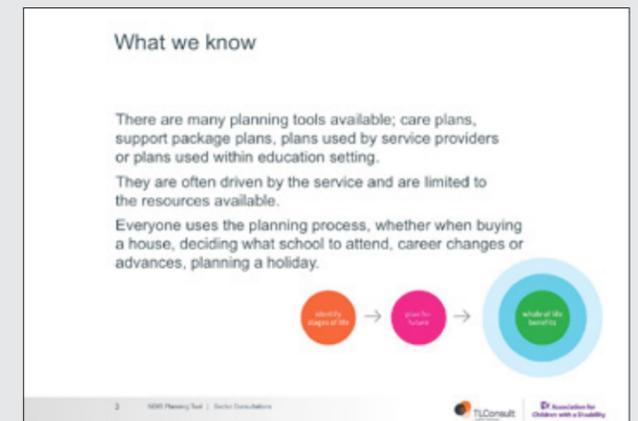
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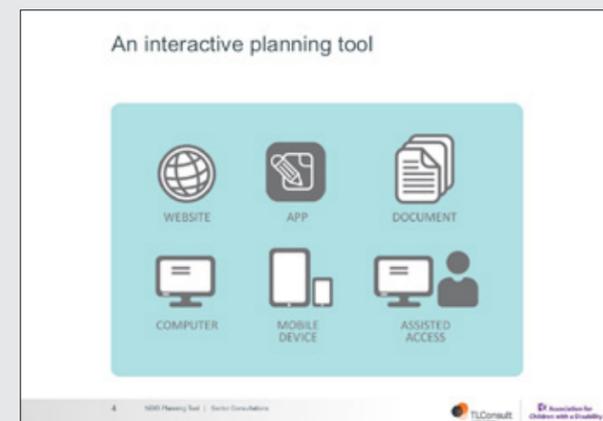
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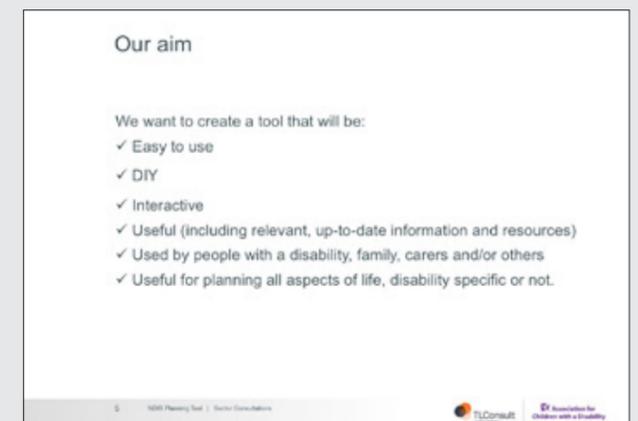
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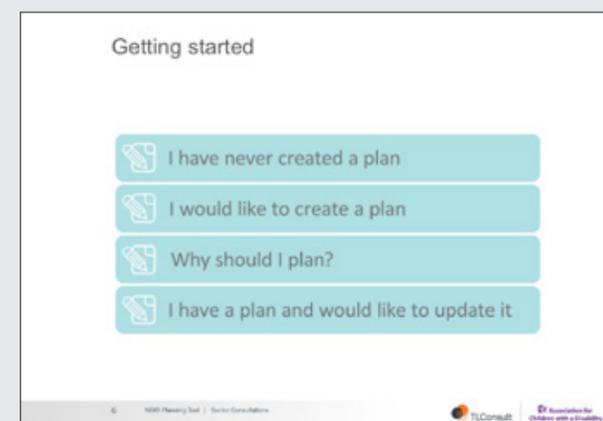
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6



7



### Why Plan

Helps you to identify goals for achieving a better life and the steps you need to take to achieve those goals.  
It helps you think about:

- What is important to you?
- What do you want to change or achieve?
- Who would you choose to help you plan?
- What support and resources you will need?
- How will you manage your support?
- What needs to be done to make it happen?

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### Possible entry points

- I am a person with a disability
- I am a carer
- I am a parent / family member
- Other

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### Example plan for John

I am 23.  
I haven't worked, but I would like to as I want to earn my own money.  
I have done a course at TAFE where I learnt about plants and gardening and I really loved it.  
My support person Dimitri was really helpful, I really liked him. He helped me get work experience at a garden centre  
If I could get a job at that garden centre I would probably need help with catching the bus there.  
I love my parents and my sister and I think Dimitri is great.  
I live at home with Mum and Dad and I love helping them in the garden.

**I would love to find a job where I can garden.**

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### Basic categories of the planning tool

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### 1. Personal Profile

STEP 1

Step 1: Creating my personal profile

Name: John  
Where I live: [City]  
Age: [Age]  
Type of disability (optional): Cognitive impairment  
How I communicate: [Text]  
Personal history: [Text]  
Important people in my life: [Text]  
Qualities: [Text]  
What's important to me: [Text]

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### 2. Dream big and setting goals

STEP 2

This can be long term or short term and is used to encourage people to think about what they want in life. John answered the following questions

- What is working for you at the moment?
- How would you like life to be?
- What would you like to do?
- Why?
- How will this affect your life?
- What isn't working for you at the moment?

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### 3. Defining goals – Consider areas of life

STEP 3

John identified that he would like to get a job in a garden centre. This goal fits into the 'working' area of his life.

working

home, everyday life support, working, learning, money, fun, health, being connected, choice and control, other

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### 4. Achieving my goals

STEP 4

Consider the who, what, where and how. Identify the actions necessary to achieve your goals. The following questions may be posed:

- What can I do by myself?
- What can I do with support of friends and family?
- What can I do with support from mainstream services?
- What can I do with support from disability services/resources?

John identified he could do a range of things by himself but felt he would need help using public transport

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### 4. Achieving my goals (support from Services/Resources)

The tool will use the information you've given it to find the most relevant resources in your area – however, you can always enter others.

What can I do with support from disability services/resources  
Need assistance with using Public Transport

Please show me supports and resources available in my area

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### 5. Funding my goals

STEP 5

John identified he needed support with using Public Transport.  
A list of various service providers who do this and costing appeared.  
John chose the service provider that suited him.  
In some instances support may be given voluntarily, but John could not access this so this part of his plan would need to be funded.

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### 6. Reviewing my plan

STEP 6

The plan can be reviewed at any time. The plan will also be available for regular checks and updates.

Things to consider when reviewing your plan:

- Goal achieved
- Developed a new skill
- Life has changed
- Wanting to develop new goals
- Encountered some barriers
- Change in circumstances

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### Plan for: John

PLAN CREATED: DD Month 2013  
VERSION: 1.0  
PAGE: 1/5

**PERSONAL PROFILE**  
ADDRESS: 1 Address Street, Suburb 9999  
AGE: 23  
NATURE OF DISABILITY: Cognitive impairment

**AIMS/GOALS**  
Find work to earn money so I can move into a share house with my friends. Acquire work experience with local garden centre.

WHAT	HOW	WHEN	WHO	COST	FUNDING	ACHIEVED
Learn the Public transport system to get to work	Vocational Consultant help. The garden centre to ensure appropriate supports for John in the workplace	03-13	John, Support person parents	Wastebait or paid support \$5 hrs x \$5 = \$25	NEED	<input checked="" type="checkbox"/>

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### Feedback

Thank you for your participation.  
Please contact TLC consult with any further feedback. We would love to hear what you have to say.  
Email: [lizkelly@ticonsult.com.au](mailto:lizkelly@ticonsult.com.au)  
Phone: 1300 971 805

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# References and abbreviations

## Abbreviations

**ACD** Association for Children with a Disability

**DSO** Disability Support Organisations

**LAC** Local Area Coordinators

**LLA** Lifelong Assist

**PCP** Person Centred Planning

**PWD** Person with a Disability

**DCA** DisabilityCare Australia

## Articles/reports:

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