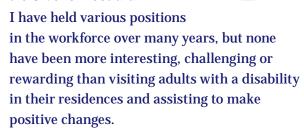
Figure 4: Three-year comparison of data for visitable services for adults with a disability

	2004-2005	2005-2006	2006–2007
Number of services	962	1,156	1,014*
Number of residents	4,910	5,076	5,373
Number of visits	2,175	1,704	2,201
Number of issues reported	1,969	1,630	2,154
Average number of issues per service	2.0	1.4	2.1
Number of issues unable to be resolved (%)	n/a	79 (5%)	103 (5%)
Number ongoing (%)	n/a	654 (40%)	941 (44%)
Number closed (%)	n/a	133 (8%)	158 (7%)
Number resolved (%)	966 (49%)	764 (47%)	952 (44%)

^{*} This number does not include licensed boarding houses. Please refer to the section *Outcomes* for Residents — services for people in licensed boarding houses

Official Community Visitor message

By Joan Andrews, Official Community Visitor, Medal of the Order of Australia



I visit services in the New England area, including some in remote areas of NSW. I visit people with a disability of varying ages, from young adults to those who are quite aged. Each person is a unique individual with very different support needs as a result of their different disabilities. As a result, each person needs activities and stimulation which enable them to learn various skills. This can be a challenge for services in country areas where there is often limited choice of formal programs and activities, and limited resources to assist residents.

Another key issue for country services is meeting the health needs of residents. Access to medical and allied health professionals in rural areas can be difficult where there may be limited service options and the need to travel for health or specialist services. This can also affect service staff who may need professional assistance and guidance to care for the health of residents. I have seen situations where long waiting lists and a lack of local clinicians and specialists creates particular difficulties for residents.

Compatibility of residents is another key challenge for services to manage. Some services work hard to investigate alternatives and liaise with other service providers to find the best accommodation placement for those residents who find it difficult to live together.

The challenge I face is completing my visiting within the time available. I enjoy talking with residents and hearing their views about what they like and don't like and spending time with those less able to speak for themselves. I sometimes find it hard to leave on time. I hold the thought that "caring" should also be part of the Visitor role.

I also particularly value the opportunity to raise issues with the Minister and consider that making representations to government bodies and Ministers is an important part of my role on behalf of residents.

Major issues by subject, number and percentage

Issue 1: Meeting individual needs — 367 (17%) Visitors identified 367 cases where services had not developed any plans to guide staff in supporting residents or where plans existed but were inadequately implemented or reviewed. Visitors reported that services addressed or resolved 163 (44%) of these issues of concern and that they continue to monitor services' action about 176 (48%) issues.

Individual planning for residents with a disability is a critical aspect of service delivery. It is through such planning that services are able to provide quality care to residents by meeting their needs and providing them with opportunities to develop. Throughout the life of the Official Community Visitor scheme, individual planning has consistently been the issue of concern that has most often been identified by Visitors. Visitors encounter many instances of effective individual planning by services for many residents with a disability. However, Visitors remain concerned that, in 2006–07, as in previous years, inadequacies in planning for residents continues to be the most frequently reported issue, and that only 44% of these issues were resolved.

Issue 2: Environment and facilities — 255 (12%) Visitors identified 255 concerns about the quality and state of disrepair of disability accommodation, and about accommodation environments which were sterile in character and not home-like. Visitors reported that services resolved 116 (45%) of these issues. Visitors will continue to monitor 97 (38%) of these issues.

Issue 3: Behaviour management — 193 (9%) The behaviour of some people with a disability can present significant challenges to services and staff because of the safety risks for the resident, other residents and staff. People

with a disability often display 'challenging behaviours' because they are unable to communicate their wishes and feelings in other ways, or as a result of mental health or other medical problems.

Residents whose behaviours are difficult or challenging are dependent on services and service staff assisting them to manage their behaviours. Services should have good systems and practices in place for individual and behavioural planning, and related systems for staff training and support, and incident response and management.

This year Visitors identified 193 issues of concern about services either not developing or not implementing relevant behavioural plans, or not adequately assessing resident needs or behaviours to inform their planning. Visitors reported that services resolved only 81 (42%) of these concerns and are continuing to take action about another 92 (48%) concerns.



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 $[\]ensuremath{^*}$ indicates that the identity of the resident has been changed

Summary of activities and outcomes

Visiting services

During 2006–07, there were 1,230 visitable services, a decrease in the number of services from 2005–06. The number of children and young people, and people with a disability visited during the year went from 6,632 in 2005–06 to 6,582 in 2006–07. There was a slight decrease in numbers of residents, mainly in boarding houses and OOHC. There was an increase in the number of adults with a disability residing in services.

However, Visitors increased their visits and activity hours during this period. The total number of hours of activity increased from 7,239 in 2005–06 to 9,507 in 2006–07, an increase of 31%. This reflects the increased workload undertaken by newer Visitors. With the future expansion of the OOHC and disability sectors, through the funding enhancements for DoCS and DADHC, the challenge will be to manage available visitor resources to meet the needs of residents.

This year, the recurrent budget for the visiting scheme was \$790,915.

The Ombudsman allocates most services two visits per annum. The allocation of visits is higher to services for children and young people, and to services with many residents,



such as large, congregate care institutions and boarding houses.

Residents of 216 (18%) services had no access to a Visitor during 2006–07, primarily because there were insufficient Visitor numbers to visit all services. This is a significant improvement over 2005–06 when 438 services did not have a Visitor. Recruitment in 2007–08 will further reduce the number of services without a Visitor and should also increase activity hours. The residents and services that were unable to be visited in 2006–07 will be prioritised for visiting in 2007–08.

(See figure 6, over page.)

Figure 5: Number of visits made by Visitors

Target	Number of Services		Number of Residents		Number of Activity Hours		Number of Visits					
Group	04/05	05/06	06/07	04/05	05/06	06/07	04/05	05/06	06 /07	04/05	05/06	06/07
Children & Young People	119	96	107	263	246	213	1,231	921	1,040	363	414	370
Children & Young People with Disability	47	42	41	159	144	133	506	422	481	162	134	142
Children, young people & adults with a disability	26	22	18	236	125	71	340	316	180	76	109	54
Adult with Disability (including Boarding Houses)	1,019	1,211	1,064	5,880	6,117	6,165	7,673	5,580	7,806	2,463	1,971	2,598
Total	1,211	1,371	1,230	6,538	6,632	6,582	9,750	7,239	9,507	3,064	2,628	3,164

Identifying and resolving issues

How Visitors facilitate the resolution of service issues

After every visit, Visitors provide a brief written report to service staff or management identifying issues and concerns affecting residents in a visitable service. When Visitors identify significant concerns about the safety, care or welfare of residents, they generally discuss these with service management at the end of a visit.

Visitors encourage services to resolve concerns quickly, at the local level, and facilitate action to address simple issues of concern. More complex problems can take longer to resolve. Visitors cannot compel services to act on their concerns. However, services have obligations under CS-CRAMA to address complaints and concerns about services quickly at the local level. Visitors monitor the response by services to identified concerns by seeking feedback

from residents, service staff, families, advocates and other relevant stakeholders.

Parents, advocates or staff may also contact Visitors or the Ombudsman's office to discuss their concerns about a visitable service. Such contacts are acted on by Visitors, or sometimes handled through the Ombudsman's complaints or other functions.

Visitor reports are recorded in the Ombudsman's Visitable Services database. During 2006–07, Visitors reported 2,898 new concerns about the conduct of visitable services in NSW. This is an average of 2.4 concerns per service, up from 1.8 concerns per service in 2005–06.

During 2006–07, services resolved 1,222 (42%) matters of concern. Visitors were continuing to monitor the action being taken by services about 1,255 (43%) concerns at the end of the year. Visitors reported that, during

2006–07, there were 225 concerns (8%) where services made genuine attempts but were unable to resolve matters. Visitors closed 196 (7%) concerns during the year, usually because the circumstances of residents or services had changed, resulting in the identified concern no longer being relevant.

Visitors will sometimes refer concerns to other relevant agencies. This may include referring residents and their families for legal advice or to advocacy services and referring child protection matters to the DoCS Helpline.

Coordinated action by Visitors and the NSW Ombudsman to address service issues
In addition to facilitating and monitoring the resolution of issues by services at the local level, Visitors may refer serious, urgent or systemic issues of concern to the NSW Ombudsman for complaint or other action.

The Ombudsman assists Visitors with concerns they may have. For example, the Ombudsman may take up individual and systemic concerns reported by Visitors and conduct inquiries about the impact of these concerns on residents. During 2006–07, in

response to concerns identified and reported by Visitors, the Ombudsman:

- handled 22 complaints
- provided detailed phone advice and information to Visitors regarding over 84 complex service issues
- provided seminars for Visitors on current issues of service provision. These sessions were in response to Visitor requests and focussed on areas such as the complaints processes and local resolution, identification and reporting of abuse in care, and standards in practice
- on six occasions worked with Visitors to present education and training on both the role of the Ombudsman and Visitors for residents, staff and management in licensed boarding houses
- allocated more than 310 targeted visiting hours, in addition to the normal visiting allocations, so that Visitors could follow up specific issues concerning residents
- accompanied Visitors to more than 20 meetings with senior managers of services to assist in negotiating the resolution of issues.

Figure 6: Issues reported by Visitors 2006–2007

Target Group of Services	Total number of visitable services	Number of issues reported	Average issues reported per service	Number of ongoing issues (%)	Number of issues unresolved (%)	Number of issues closed (%)	Number of issues resolved (%)
Children and young people	107	377	3.5	150 (40%)	67 (18%)	27 (7%)	133 (35%)
Children and young people with a disability	41	106	2.6	64 (60%)	14 (13%)	8 (8%)	20 (19%)
Children, young people and adults with a disability	18	115	6.4	48 (42%)	14 (12%)	0 (0)	53 (46%)
Adults with a disability	1,064	2,300	2.2	993 (43%)	130 (6%)	161 (7%)	1,016 (44%)
Total	1,230	2,898	2.4	1255 (43%)	225 (8%)	196 (7%)	1,222 (42%)

Additional Support to Visitors

During 2006–07, the Ombudsman also
provided additional support to Visitors,
involving:

- organising a Visitor conference in May 2007 for training, development and networking purposes
- conducting training for Visitors about issues and initiatives affecting visitable services including: briefings from DoCS about initiatives within OOHC; licensing activities concerning boarding houses; DADHC's Integrated Monitoring Framework for monitoring funded non-government services; complaints handling; guardianship and financial management through the Office of the Public Guardian; and record keeping in residential services. Over 600 hours were allocated for this purpose
- conducting sector specific meetings to provide forums for discussions of sector issues, to assist Visitors and the Ombudsman's office to identify trends and patterns of systemic and individual service issues
- consulting regularly with Visitors through the five regional groups and the Official Community Visitor/ NSW Ombudsman Consultation Group
- attending over 60 regional and consultation meetings, service visits, service related matters, training and development with Visitors
- providing over 1,200 phone contacts with Visitors. Over 200 of these contacts were related to matters concerning service provision for residents
- regular information bulletins for Visitors on developments in the visitable services sector, good practice ideas and initiatives, and referral services and other relevant, available resources.

Promoting the scheme

- Ombudsman staff presented information sessions to community service agencies, peak bodies and other community, public and private sector agencies
- presented targeted information sessions in Chatswood, Parramatta, Bathurst, Newcastle, Tweed Heads and Wollongong to more than 180 potential candidates for recruitment of new Visitors
- handled calls from service staff and families who had queries about the scheme or wanted to contact a Visitor
- distributed to all visitable services and relevant community, public and private sector agencies the booklet 'A Voice for People in Care: Answering your Questions about the Official Community Visitor Scheme'.

Improving the effectiveness of the scheme
Continuous improvement activities aimed at
enhancing the effectiveness of the scheme
are based on consulting with Visitors and
reviewing performance. Improvement
activities included:

- providing induction, training and mentoring for three new Visitors in December 2006
- focussing training and development on identified practice issues for Visitors
- developing the first stage of best practice guidelines for Visitors by Visitors
- developing the framework for a new reporting and classification system based on an external review
- commissioning a sector specific external review of the system for identifying, classifying and reporting on service issues of concern
- reviewing and improving the scheme's database.

Regional Focus

Metropolitan Sydney — North

Official Community Visitor message

By Elizabeth Rhodes, Official Community Visitor

ial

North Metropolitan

Sydney (Met North) covers a relatively small geographical area from the Northern Beaches to the lower Blue Mountains. It also has the largest number of services of any regional group within the scheme. These services range from out-of-home care placements, to group homes and large residential facilities. There are some boarding houses but during the last 12 months, we have seen two of them close.

We started the year with six members, and two new Visitors, Michelle Hayter and Graham McCartney, joined us in January.

One issue that Visitors have been monitoring in Met North is the reconfiguration of a number of DADHC group homes, including the proposed client mix and compatibility of clients, and the consultation process underpinning plans to move residents between homes. A number of families have contacted Visitors with their concerns for family members, questions about the proposed moves and their rights in this process. Most queries are able to be resolved locally but we also suggested that families contact the Ombudsman for further advice. Visitors will continue to monitor the reconfiguration process and the impact on clients.

In the non-government sector, several services are undertaking a range of initiatives to support their ageing clients. One example is a reduction in hours or days that clients attend employment or day services and emphasis on a three day 'working week' with more time



for leisure activities — that is, the clients are 'semi retired'. Visitors will continue to monitor this trend to ensure that quality leisure time is offered to these clients in place of their work/day options programs.

A positive example of DADHC's work is the introduction of the ICABS (Inclusive Communication and Behaviour Support) program in the large residential centres. There are now a number of positive programs that have been designed for individuals to enhance their quality of life. The enthusiasm that staff are displaying and the positive behaviour of clients using the resources developed for this program is worth reporting. The nongovernment sector is now implementing the ICABS program. Visitors hope that DADHC group home staff in Met North will also have an opportunity to develop resources and skills to better support their clients.

Figure 7: OCV identified issues — Sydney Metropolitan North

Target Group of Services	Total number of visitable services	Number of issues identified	Key Issues
Children and young people	45	233	Meeting Individual Needs Liaison with other agencies Entry and Exit
Children and young people with a disability	20	129	Meeting Individual Needs Education and Occupation Environment and Facilities
Adults with a disability	372	965	Meeting Individual Needs Environment and Facilities Nutrition, Health and Hygiene
Total	437	1,327	

OCV Profiles



Liz Rhodes

- visits children and young people, people with a disability, and boarding houses in Sydney
- experience in criminal justice, mental health, negotiation and child protection investigation
- training in organisational planning and alternative dispute resolution.



Rhondda Shaw

- visits children and young people, and children with a disability across Sydney
- · experience in child protection, adoption and accommodation services
- degrees and training in social work, social science and conflict resolution.



Gary Kiely

- · visits adults with a disability in western and northern Sydney
- experience in disability.



Megan Jones

- visits people with a disability in northern Sydney
- experience in service management in disability, health and children's services, and direct work experience in both disability and education
- degrees in clinical psychology, special education, management and fine arts.



Siobhan Butler

- visits children and adults with a disability in northern Sydney
- experience in service management for people with a disability, mental health and drug and alcohol issues
- · degrees and training in social science, management and counselling.



Tilly Elderfield

- visits adults with a disability and people in boarding houses in western
 Sydney and the Blue Mountains
- · experience in disability, mental health, and drug and alcohol services
- · degrees in social work and nursing.



Graham McCartney

- · visits adults with a disability in western Sydney
- extensive experience in case management, negotiations, rehabilitation and detention settings
- previous experience working for DADHC.

Michelle Hayter

- · visits adults with a disability in western Sydney
- holds a Bachelor Of Education (Habilitation)
- works as a Regional Disability Liaison Officer with University of Western Sydney.



Regional Focus

Metropolitan Sydney — South

Official Community Visitor message

By Freda Hilson, Official
Community Visitor
The Southern Metropolitan
Regional group met for
the first time in July 2006
and what was immediately
distinctive was that over 70% of group
members were newly appointed visitors. At
this time the members of the group were Beth
Evans, Maree Fenton-Smith, Freda Hilson,
Ula Karas, Kate McKenzie, Donald Sword, and
Lynette Wittig.

With so many new Visitors, the challenge for the group was providing support and an understanding of the role. Common issues we faced were around understanding how to raise concerns with services and the Ombudsman, and raising matters and resolving concerns with departments and non-government services.

The Metro South region is a relatively small geographic area. However, it can be characterised as having a large number of services that are older and more established than other areas. For our regional colleagues, issues of access to services and distance are significant, whereas for our region it is about the environment and facilities. Visitors in the region recognise that the older stock of housing poses challenges for services. However, we will continue to monitor service provision to ensure it meets the changing needs of residents.

While there are disability services and out-ofhome care placements, this area is unique in that a large number of the licensed boarding houses are within this region.



For out-of-home care the issues we raised

primarily focussed on individual need and behaviour. For disability we encountered issues around the provision of blocked respite beds in services. In boarding houses it was on the environment and facilities that residents live in.

Following a number of resignations of visitors in this Region, we have worked to meet the needs of residents and await the outcome of the next recruitment of the Visitors.

Figure 8: OCV Identified Issues — Sydney Metropolitan South

Target Group of Services	Total number of visitable services	Number of issues identified	Key Issues
Children and young people	14	75	Entry and Exit Meeting Individual Needs Behaviour Management
Children and young people with a disability	17	34	Meeting Individual Needs Behaviour Management Environment and Facilities
Adults with a disability	227	250	Environment and Facilities Privacy and Respect Behaviour Management
Total	258	359	

OCV Profiles



Lynette Wittig

- visits people with a disability and people in boarding houses in the West and Orana regions
- experience in disability and child protection, and senior management experience in community services
- training in psychiatric nursing
- · Lynette resigned as a Visitor in June 2007.



Beth Evans

- visits adults with a disability in south-east Sydney
- experience in services, training and education for people with a disability
- degree in social science
- Beth resigned as a Visitor in June 2007.



Maree Fenton-Smith

- visits children and young people, and people with a disability in western and south eastern Sydney
- experience in working with people with a disability in accommodation and support services and adult guardianship
- · degree in social work.



Freda Hilson

- visits adults with a disability and people in boarding houses in west and south-west Sydney
- · extensive experience in disability services
- · degree in social work.



Ula Karas

- visits adults with a disability in west and south-west Sydney
- experience in services for people with a disability, including housing, employment, case management, mental health, advocacy, social planning and community development
- degree in social science with majors in counselling, mediation and community services management.



Kate McKenzie

- visits children and young people in OOHC in Sydney
- experience with children and young people and in education
- · former School Principal.



Donald Sword

- visits adults with a disability and people in boarding houses in innerwestern Sydney
- experience in disability and mental health. Previously an Official Visitor to mental health services
- · degrees in arts and science.

