

Future Communities – Area Advisory Groups

Role of Advocacy Services

Area Advisory Groups

The Future Communities, Reform Implementation Unit Fact Sheet on Area Advisory Groups describes their role as follows:

As part of the Reforms to the Child and Family Service System and Disability Services system, the Department of Health and Human Services (DHHS), Community Sector Organisations (CSO), families and individuals with disabilities will share governance of the new way of delivering services.

A State wide Advisory Group will be established. This group will look at how services are delivered across the state. Information from the Area Advisory Groups will be presented at this meeting to plan services that meet client needs. Area Advisory groups will be established in the South East, South West, North and North West to support coordination of services in Disability, Child Youth and Family Services (DCYFS) at the Area level.

It is expected that vulnerable children, young people and families and people with disabilities, their families and carers will have better access to services which meet their needs if the planning of these services occurs jointly between the Department and the Community sector at an Area level.

Area Advisory Groups will make sure that the service system responds to local needs that are based on an understanding of the community needs.

The Area Advisory Groups will:

- *Provide strategic advice to DHHS on key issues for vulnerable children, young people and families and people with disabilities, their families and carers in their local area;*
- *Provide a key means of communication and consultation between DHHS and the Community Sector and vulnerable children, young people and families and people with disabilities, their families and carers;*
- *Promote the needs of vulnerable children, young people and families and people with disabilities, their families and carers in the area strategy development, community strengthening activity and government policy i.e. closeness to the community will provide the capacity to reflect community needs in service system development and planning;*
- *Engage vulnerable children, young people and families and people with disabilities, their families and carers in decision making or consolidating information from other consultative activity across the area; and*
- *Promote information sharing and collaboration amongst service providers.*

The Area Advisory Group has an open membership that means that all funded organisations in the DCYFS program can be on the Group as well as staff from DCYFS and staff from other DHHS programs that provide services in the local area.

The Area Advisory Group will be co-chaired by the Area Director and a Community Sector provider representative (nominated by the Group).

At the beginning because this is a new group and a new way of doing business it will meet monthly.

Role of Advocacy Services

As part of the reform process Advocacy Tasmania Inc and Speak Out have each been funded for one advocate's position to assist people with disabilities through the reform process.

One function is to assist people with disabilities to participate in the Area Advisory Groups (AAGs). Specifically the function is described as:

*"Representation on the Area Advisory Groups on a state-wide and area level. Representation on these groups will ensure that people with disabilities have a voice, and that their needs, wishes and concerns around the reform process are considered. The role of the advocates in this process would be to coordinate the process for including people with disabilities in this forum. Advocacy Tasmania Inc will be responsible for coordination this function."*¹

It is important to emphasise that the role of advocacy is to **facilitate and coordinate a process** by which people with disabilities participate in the AAGs and not that advocacy will speak for people.

Another function, which complements the AAG participation support role is to assist in communication with people with disabilities about the reform process.

Specifically this function is described as:

*"Communication to people with disabilities regarding the reform; provide an independent communication function with clients with disabilities who will be affected by the reform process. This will include developing plain English and compic written materials as key messages around the reform and its implications need to be communicated."*²

This document describes initial thinking from Advocacy Tasmania Inc (ATI) and Speak Out (SO) on how the AAG support function might be achieved.

1. Funding Agreement variation schedule 5A Advocacy Tasmania Inc and Disability Services

2. Funding Agreement variation schedule 5A Speak Out Association and Disability Services

Conceptualising Consumer Participation

The Department of Health and Human Services (DHHS) is presently developing a Consumer Engagement Strategy. In the consultation paper “Your care, your say”, one way of conceptualising types of consumer participation is described:
(see table 1)

Table 1: Participation types, their aims and commitments³

| <i>Participation Type</i> | <i>Public engagement goal</i> | <i>We aim to</i> |
|---------------------------|---|---|
| <i>Inform</i> | To provide the public with balanced and objective information to help them understand the problem, alternatives, opportunities and/or solutions | Keep you informed about things that are important to you |
| <i>Consult</i> | To work directly with the public throughout to ensure their concerns and aspirations are understood and considered | Work with you to ensure your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision |
| <i>Partnership</i> | To partner with the public in each aspect of the decision including developing alternatives and identifying the preferred solution | |
| <i>Delegation</i> | To give the public control for making decisions within specific guidelines | Authorise you to make decisions in specific situations, which we will then implement |
| <i>Control</i> | To place final decision-making in the hands of the public | Implement what you decide |

3. DHHS “Your care, your say” p 12

This framework provides a useful way of considering how ATI and SO will go about coordinating the involvement of people with disabilities in the AAG. Some people will only wish to be informed of the work of the AAG and/or provide them with information. Others will want to be consulted on issues of importance to them. Some individuals and consumer groups will wish to work in partnership with the Department and service providers through the AAG while others will wish to assume a level of decision making responsibility through membership of the Statewide Advisory Group.

ATI and SO will work together to create opportunities for people with disabilities to be involved in these different participation types.

Options for Participation

A range of options need to be created. It is particularly important to keep in mind that the mechanisms developed will need to reflect the wide diversity of those with disabilities. The needs of different individuals, groups and cohorts are widely disparate. These different needs and perspectives will need to be reflected at all levels of information, participation and decision-making. Possibilities include:

Inform

| | |
|------------|---|
| Newsletter | A regular advocacy produced newsletter to consumers and consumer organisations about the AAGs – current issues and activities. It would include contact details for people wanting to communicate with the local AAG |
| Website | An advocacy web page devoted to keeping consumers informed of AAG activities which can include an online contact form |
| Meetings | Advocates respond to one off requests to meet with a consumer or consumer group to discuss AAG activities and issues in their region. May be particularly valuable when advocates are visiting more remote parts of the state |

Consult

In addition to the above mentioned options

| | |
|--------------|---|
| Surveys | Conduct surveys on specific issues which are the subject of AAG deliberations or on other issues identified by people with disabilities |
| Focus Groups | Conduct focus groups on specific issues which are |

the subject of AAG deliberations or on other issues identified by people with disabilities

Area Consumer Reference Groups

Establish consumer reference groups in each region. These would meet prior to each AAG meeting bringing together individual consumers, consumer organisations and consumer reps from provider organisations to discuss issues of importance to consumers in that region. This would also provide another mechanism for informing consumers of AAG activities and priorities. In addition it would serve a key role in coordinating and communicating the views of consumers to its AAG.

ATI will take the lead role in the South East and South West and SO in the North and North West with facilitating Consumer Reference Groups

Partnership

Consumer participation on AAGs

Consumers attend AAG meetings

Advocates support consumers to participate in AAG meetings where necessary

Delegation

Consumer Participation on SAG

While at this point in time DHHS consider the State Advisory Group (SAG) to be an internal, high level, departmental decision making group, the potential for people with disabilities to be directly represented on the SAG should be considered.

Capacity-building

In order to develop the capacity of people with disabilities to participate meaningfully in these various processes opportunities for consumer training will also need to be provided. This would include knowledge and skill development in the areas of leadership, representation, self advocacy and systems advocacy. While some training and support is already provided by both SO and ATI what is needed goes beyond the existing activities, capacity and resources of these agencies.

Inclusiveness and quality assurance – a formal Visitor program

As noted above, groups or cohorts of those with disabilities are diverse and disparate. None of the mechanisms outlined above will **ensure** that **all** such groups and individuals are included or represented in these processes. For many, it is likely that social isolation or isolation on the basis of

severe and profound disability may preclude any knowledge or participation **except by chance**. Mechanisms need to be developed to ensure that the needs and wishes of this group of people are also considered by AAGs. See box below for discussion of one possible option

A Disability Visitors Scheme

One possibility that could provide the perspective of people with severe and profound disabilities in a meaningful way would be to consider Disability Visitors Scheme for Tasmania. It has long been suggested that a formal statutory Visitor program, such as exists in some other states and countries, would ensure that these particularly vulnerable groups and or individuals were not overlooked. In Queensland, for example, such systems operate on the basis of 'visitable sites' and or 'visitable individuals' with respect both to those with disabilities and to children in care. The Tasmanian LIP program reflected similar principles.

Information from a formal systematic process would both provide assurance and information on consumer needs to the AAGs and beyond, and provide a means to ensure at least some exchange in the other direction. This would go a considerable way to ensuring there is no avoidable gap, either with respect to participation or with respect to service needs, with respect to groups or individuals who may otherwise remain hidden, invisible. Both Tasmanian and international experience suggests such vulnerable and powerless groups are those most likely to experience unacceptable and avoidable abuse and neglect, without appropriate and specific protective measures. An important role of the AAG's/SAG will be to ensure that there are no such avoidable gaps. To do so, they need an appropriate mechanism.

Where to from here

Representatives from Advocacy Tasmania (ATI) and Speak Out (SO) have participated in the first two AAG meetings in each of the regions.

To date the meetings have been attended by government representatives and service providers.

Three of the regions, North West, South East and South West have adopted the larger group format, while the Northern region has decided to have a small group of nominated members.

ATI and SO have conducted a survey to identify service providers who would be interested in passing on information to clients. The next survey will be sent to people with disabilities to find out if they want to be involved in the AAG's and how they want to be involved.

Advocacy Tasmania Inc.
Speak Out Association