Disability Support Services

Strategic Plan

2014 to 2018

Disabled people and their families are supported to live the lives they choose



Citation: Ministry of Health. 2015. *Disability Support Services Strategic Plan* 2014 to 2018. Wellington: Ministry of Health.

Published in June 2015 by the Ministry of Health PO Box 5013, Wellington 6145, New Zealand

> ISBN: 978-0478-44820-7 (online) HP 6195

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Introduction

Vision statement

Disabled people and their families are supported to live the lives they choose.

Guiding principles

This Strategic Plan reflects Disability Support Services' (DSS) commitment to the United Nations Convention on the Rights of Persons with Disabilities 2008, which aims to 'promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity'.

The following principles guided development of this Strategic Plan.

1. All disabled people are treated equitably and with dignity and respect.

We protect the human rights of all people with disabilities. This Plan recognises and respects the abilities and contributions of disabled people.

Equitable access to support and services is provided to disabled people regardless of their location, gender or race.

2. Disabled people and their whānau/families have choice, control and flexibility over the support in their lives.

This principle affirms the individual autonomy, independence, capability and aspirations of disabled people to make their own choices and recognises their role as citizens. We also acknowledge the important role that whānau/families, carers, friends and others play in the lives of disabled people. We offer these people choice, control and flexibility in the way they provide support.

3. Support is accessible, innovative, culturally responsive and person-directed.

This principle recognises the importance of the wellbeing of disabled people. We support providers, carers and others who provide support to:

- offer high-quality, accessible, innovative and culturally responsive services that are tailored to the individual's needs and goals
- understand and meet the needs of M\u00e4ori disabled and their wh\u00e4nau. This includes understanding M\u00e4ori disabled in the context of their disability, wh\u00e4nau, hap\u00fc, iwi, communities and cultural preferences, and placing these concepts at the centre of service planning and delivery
- understand and meet the needs of Pasifika disabled and their aiga/families. This includes understanding Pasifika disabled in the context of their disability, aiga/family, communities and cultural preferences, and placing these concepts at the centre of service planning and delivery.

4. Collaboration and relationships improve outcomes for disabled people.

Collaboration with disabled people, disabled people's organisations, communities, other government agencies and key stakeholders in the service development and implementation process is vital to the success of this plan. We provide people with a disability with the opportunity to be actively involved in the development and implementation of policies and programmes. We recognise and value the important relationships between disabled people, their whānau/families, carers, friends and others who provide support.

5. Early intervention is critical to achieve improved outcomes for disabled children and whānau/families.

We invest early in whānau/families, to support them to be aspirational for their disabled child, to build community and natural support and to enable disabled children to enjoy the same level of independence as their non-disabled peers.

6. Planning and decision-making are supported by evidence, information collection, analysis and ongoing review.

We support strategic planning with regular review of progress toward achieving our vision and goals. Our decisions are evidence-based and supported by relevant quality information.

7. The disability support system is sustainable and affordable.

We recognise the importance of maintaining the sustainability and affordability of services. We use government funding efficiently and effectively, making strategic decisions about what support we fund and what services we develop. This principle features strongly in our decision making.

Disability support in New Zealand

The disability sector

The Ministry of Health, through DSS, is one of a number of government agencies that provide funding to support disabled people in New Zealand, including:

- the Ministries of Social Development (including Child, Youth and Family), Education, Transport and Business, Innovation and Employment
- the Accident Compensation Corporation (ACC)
- the Department of Internal Affairs
- · Housing New Zealand Corporation
- district health boards (DHBs).

Five key government agencies protect the rights of disabled people, or monitor progress to improve their lives:

- the Office of the Health and Disability Commissioner
- the Office for Disability Issues
- the Human Rights Commission
- · the Office of the Ombudsman
- · New Zealand Police.

The 'voice' of disabled people and their whānau/families is represented by a number of well-established consumer forums, including the New Zealand Convention Coalition Monitoring Group and various Disabled Persons Organisations. The development of the new Disability Action Plan was facilitated and published by the Office of Disability Issues in collaboration with seven national Disabled Persons Organisations (Disabled Persons Assembly New Zealand, People First New Zealand, Deaf Aotearoa, Blind Citizens New Zealand, Balance NZ, Deafblind New Zealand and Ngati Kāpo) and with key government agencies (including DSS).

Disability Support Services facilitates forums through which disabled people and stakeholders can discuss issues and opportunities. It uses this process to inform policy advice to government, formulate strategic and annual plans and purchase disability support services.

The disability workforce comprises disability service providers, unions, carers, whānau/families and others who provide ongoing support. The Ministry supports the workforce in a variety of ways, including through various strategic plans (see Strategic context of this Plan below), provider forums and meetings.

Disability Support Services

Disability Support Services is responsible for the planning and funding of disability support services. It purchases support and services for people (generally under 65 years of age)¹ with a long-term physical, intellectual and/or sensory impairment that require ongoing support. The disability needs to be likely to continue for at least six months and to limit the person's ability to function independently.

Disability Support Services also funds support for people with:

- some neurological conditions that result in permanent disabilities
- some developmental disabilities in children and young people, such as autism
- physical, intellectual or sensory disability that co-exists with a health condition and/or injury.

Disability Support Services is responsible for effectively managing the National Disability Support Services appropriation.² The Government allocates this appropriation funding of approximately \$1.1 billion per year. Disability Support Services purchases support through almost 1500 contracts with approximately 975 service providers.

Disability Support Services provides funding to approximately 32,000 people,³ facilitated by needs assessment and service coordination (NASC) organisations. Additionally, DSS provides funding for environmental support services (support for people with a vision impairment, hearing loss or requiring equipment and modification services) for more than 50,000 eligible people across all age groups and all causes of long-term disabilities (except those caused by accidental injury).

¹ Although eligibility for most disability support services is for people aged under 65, people already in services before the age of 65 will remain in those services until their age related needs become greater than their disability needs. Equipment is provided to all eligible people regardless of age. District Health Boards provide supports for people with a disability who are over 65 and those aged 50–65 with similar support needs.

² The Treasury defines Appropriations as: 'the basis on which Parliament authorises the executive government to incur expenses a capital expenditure': see www.treasury.govt.nz/publications/guidance/planning/appropriations

³ Sourced from *Report on Demographics of Clients using Disability Support Services in September 2013.* This report provides demographic information about the disabled people using the majority of disability support services funded by the Ministry of Health: home and community support, community residential services, supported living services, and respite and carer support. The report (and therefore associated figures) excludes disabled people using the following services: equipment and modifications, behaviour support, child development and assessment, treatment and rehabilitation.

Support and services DSS funds include home help, assistance with personal cares and supported living in group homes, as well as the provision of equipment (such as wheelchairs) and modifications to housing and vehicles. Disability Support Services also funds breaks for carers, and support for disabled people to live with other people of their choice.

Disability Support Services contracts disability information advisory services to provide independent information and advice to disabled people, their whānau/families, aiga, caregivers, providers and the general public. Disability Information Advisory Services provide advice on Ministry and non-Ministry-funded support and services, how to find support through a range of condition-specific groups, how to find NASC organisations and other information related to specific disabilities.

The Ministry funds NASC organisations to work with disabled people to: identify their strengths and support needs; outline Ministry-funded support and services; and determine their eligibility through a needs assessment process, and then to allocate and coordinate Ministry-funded support and services.

Disability Support Services also provides individualised funding for home and community support services, enabling disabled people to directly manage the funding they have been allocated. People who receive such funding may engage their own support workers or directly employ their own support providers and managing all aspects of the support they receive. The Enabling Good Lives (EGL) project (a partnership between government agencies and the disability sector) and the New Model for Supporting Disabled People (developed by DSS and the disability sector) are enhancing the flexibility of this funding (see 'Disability Support Services' strategic direction' below for further information on EGL and the New Model).

Demographic analysis

In Statistics New Zealand's 2013 New Zealand Disability Survey, an estimated 1,062,000 people⁴ living in New Zealand (approximately 24%) identified themselves as having a disability.⁵ The definition of disability used for the survey differs to the DSS definition, and therefore the populations cannot be directly compared.

Key facts on disability in New Zealand from the 2013 New Zealand Disability Survey⁶

- Of the 1.1 million people who identified as having a disability, there was a relatively even split between male (49%) and female respondents (51%) who identified as having a disability.
- Disability rates varied by ethnicity: 26 percent of the Māori population has a disability, 25 percent of the European population has a disability, 19 percent of the Pasifika population has a disability and 13 percent of the Asian population has a disability.
- Of the 1.1 million people who identified as having a disability, 692,000 (65%) were under the age of 65. The percentage of people with a disability increased with age, from 11 percent for children aged less than 15 years to 28 percent for adults between 45 and 64 years of age and 59% for adults aged 65 years and over.

⁴ Disability Survey: 2013 Key facts: www.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_HOTP2013.aspx

⁵ The survey specifies: 'disability is defined as long-term limitation (resulting from impairment) in a person's ability to carry out daily activities. The limitations identified were self-reported or reported on behalf of the disabled person by their parent or primary caregiver': see www.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_HOTP2013/Commentary.aspx

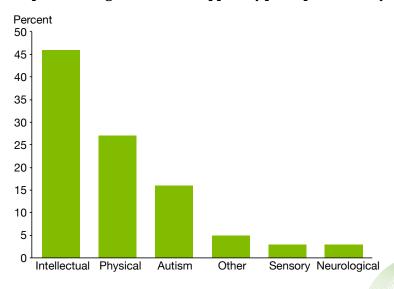
⁶ Disability Survey: 2013 Key Facts: www.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_HOTP2013.aspx

- For people over the age of 15, a physical impairment was the most commonly reported disability (14% of the New Zealand population, or 632,000 people, reported such an impairment). Sensory impairments were reported by an estimated 484,000 people. This represents 11 percent of the New Zealand population and 44% of all people identifying as disabled.
- Forty-two percent of adults reported that their impairment was as a result of a disease or illness. Thirty-four percent reported that their impairment was as a result of an accident or injuries (these individuals are supported by ACC). Thirty-four percent reported that the cause of one or more of their impairments was a result of ageing. This increased to 53 percent of adults aged 65 years or over (these individuals are often supported by DHBs).
- Approximately 53 percent of all people who identified as having a disability reported multiple impairments.

Key facts on disability from DSS client demographics

- The ethnicity of disabled people receiving NASC facilitated support from DSS is as follows: 69 percent European/Other, 16 percent Māori, 6 percent Pacific, 5 percent Asian and 4 percent undefined.⁷
- More males (56%) than females (44%) receive support from DSS.
- The following figure shows the disabilities of people receiving support from DSS.

People receiving DSS-funded support by principal disability type



 $^{7\ \} Disability Survey: 2013\ Key\ facts: www.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_HOTP2013.aspx$

Strategic context of this Plan

Disability Support Services can only achieve its vision for disability support services in New Zealand through collaboration with providers, other agencies, disabled people's organisations and disabled people themselves, all of whom have their own plans and goals.

Disability Support Services developed this Plan with input and guidance from stakeholders, to ensure it reflects a shared vision and the Government's priorities.

The following sections outline the strategies and commitments that have guided the development of this Plan.

United Nations Convention on the Rights of Persons with Disabilities 2008

The purpose of the United Nations Convention on the Rights of Persons with Disabilities 2008 is to 'promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity'.

The Convention clarifies the role of governments of countries party to the Convention to ensure that disabled people enjoy human rights on an equal basis with others. It sets out 50 articles stating the rights of disabled people, covering all aspects of economic, social, political, legal and cultural life.⁸

Disability Support Services is committed to ensuring all its activity is underpinned by the principles and responsibilities set out in the Convention.

New Zealand Disability Strategy 2001 – Making a World of Difference: Whakanui Oranga

The New Zealand Disability Strategy 2001 – Making a World of Difference: Whakanui Oranga⁹ with a vision to 'change New Zealand from a disabling to an inclusive society'. The strategy recognises the importance of a meaningful partnership between government agencies, communities and disabled people. It sets out 15 objectives, supported by a number of actions:

- 1. Encourage and educate for a non-disabling society
- 2. Ensure rights for disabled people
- 3. Provide the best education for disabled people

⁸ www.un.org/disabilities/default.asp?id=223

⁹ First published by the Ministry of Health in April 2001. Recommendations written by the Disability Strategy sector reference group. Republished by the Office for Disability Issues in June 2003. For more information visit the Office for Disability website: www.odi.govt.nz/resources/publications/new-zealand-disability-strategy.html

- 4. Provide opportunities in employment and economic development for disabled people
- 5. Foster leadership by disabled people
- 6. Foster an aware and responsive public service
- 7. Create long-term support systems centred on the individual
- 8. Support quality living in the community for disabled people
- 9. Support lifestyle choices, recreation and culture for disabled people
- 10. Collect and use relevant information about disabled people and disability issues
- 11. Promote participation of disabled Māori
- 12. Promote participation of disabled Pacific peoples
- 13. Enable disabled children and youth to lead full and active lives
- 14. Promote participation of disabled women in order to improve their quality of life
- 15. Value families, whānau and people providing ongoing support.

Social Services Committee: Inquiry into the Quality of Care and Service Provision for People with Disabilities

The Government initiated the Social Services Committee's Inquiry into the Quality of Care and Service Provision for People with Disabilities in 2006 following concerns about support services for disabled people. In September 2008, the Committee presented a report and recommendations to the House of Representatives. Of Government reviewed these recommendations and in its response refined them into the following themes:

- · enhancing leadership and accountability structures
- improving advocacy and complaints processes
- improving the monitoring of services
- improving the way people access information and support
- ensuring services fill identified gaps, are age-appropriate and enhance consumer choice
- developing a disability sector workforce strategy.

Disability Support Services has since undertaken a range of actions to address these recommendations, including a focus on providing disabled people with increased choice, control and flexibility, as well as the development of the New Model for Supporting Disabled People. Work continues.

Disability Action Plan 2014–2018: Cross-Government Priorities to Make a Difference

The *Disability Action Plan 2014–2018: Cross-Government Priorities to Make a Difference* is a cross-government plan that aims to ensure that 'all New Zealanders experience equal rights of citizenship'. The drafting of this plan was led by the Office of Disability Issues through a collaborative process involving Disabled Persons Organisations and key government agencies. The Ministerial Committee on Disability Issues approved the Plan in April 2014.¹¹

¹⁰www.parliament.nz/en-nz/pb/sc/documents/reports/48DBSCH_SCR4194_1/inquiry-into-the-quality-of-care-and-service-provision

¹¹ http://www.odi.govt.nz/what-we-do/ministerial-committee-on-disability-issues/disability-action-plan

The plan sets out four result areas:

- · Increase employment and economic opportunities
- Ensure personal safety
- Transform the disability support system
- Promote access in the community.

The New Zealand Carers' Strategy Action Plan for 2014–2018

The Ministry of Social Development's *New Zealand Carers' Strategy Action Plan for 2014–2018* 'recognises the immense contribution of whānau, aiga and carers to New Zealand. Its purpose is to improve support for carers'.¹²

The five priorities of the Strategy are (in priority order):

- enable whānau, aiga, family and carers to take a break
- protect the health and wellbeing of whānau, aiga, family and carers
- · provide information whānau, aiga, family and carers need
- improve pathways to paid employment for carers and support for whānau, aiga, family and carers to balance their work, life and caring roles
- increase awareness and understanding of the carer's role.

The Ministry of Social Development has developed a four-year action plan to support the strategy.

Whāia Te Ao Mārama: The Māori Disability Action Plan for Disability Support Services 2012 to 2017

The Māori Disability Leadership Group facilitated the Ministry of Health developed the vision, kaupapa, guiding principles and priority areas of *Whāia Te Ao Mārama: The Māori Disability Action Plan for Disability Support Services 2012 to 2017*¹³ in collaboration with Māori disabled and key stakeholders. The Plan aims to enable Māori disabled and their whānau to attain a quality life that meets their aspirations.

The four priorities of Whāia Te Ao Mārama are:

- · improved outcomes for Māori disabled
- · better support for whānau
- good partnerships with Māori
- · responsive disability services for Māori.

¹² http://www.msd.govt.nz/about-msd-and-our-work/work-programmes/policy-development/carers-strategy 13 www.health.govt.nz/publication/whaia-te-ao-marama-maori-disability-action-plan-disability-support-services-2012-2017

Faiva Ora: National Pasifika Disability Plan 2014–2016

The Ministry of Health's *Faiva Ora: National Pasifika Disability Plan 2014–2016*¹⁴ outlines priority actions to support Pasifika disabled people and their families. *Faiva Ora* aims to improve service access rates, service responsiveness and support services for family members and carers of Pasifika disabled people, and to enhance the capability of the workforce to address their needs. The Plan was developed and will be implemented in partnership with Pasifika disabled people and communities, disability support services and government agencies.

Faiva Ora has three objectives:

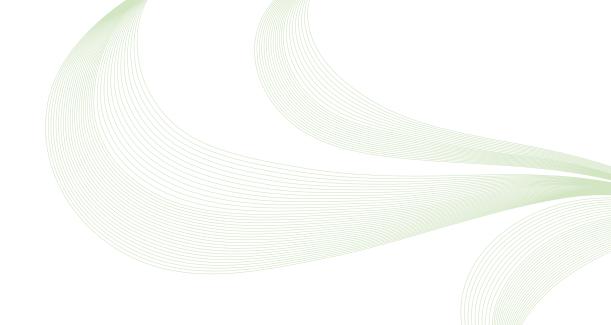
- Pasifika people are aware of, understand and know how to access disability services
- disability support services meet the needs of Pasifika service users
- family members and carers of Pasifika disabled people are supported to provide effective care.

Disability Workforce Action Plan 2013-2016

The Ministry of Health's *Disability Workforce Action Plan 2013–2016*¹⁵ outlines priority actions to ensure that a well-trained, skilled and competent disability workforce provides quality services for disabled people in New Zealand. This Plan was informed through available research information and sector intelligence, consultation with stakeholders and guidance from a workforce reference group. It builds on the previous disability workforce action plan.

The five objectives of the Workforce Action Plan are to:

- increase the skills of the disability workforce (regulated and non-regulated)
- increase the skills of people with disabilities
- improve learning opportunities for carers and family/whānau who support people with disabilities
- · improve information about the disability workforce
- improve integration to support disability workforce development.



¹⁴ www.health.govt.nz/our-work/disability-services/disability-projects-and-programmes/faiva-ora-national-pasifika-disability-plan

¹⁵ www.health.govt.nz/our-work/disability-services/disability-projects-and-programmes/disability-workforce

Disability Support Services' strategic direction

Disability Support Services is committed to transforming the disability support system and increasing disabled people's choice, control and flexibility regarding the support they receive.

Disability Support Services continues to focus on improvements that remove restrictions that limit people's ability to live the life they want. This includes improvements in the areas of individualised funding, information and assistance and supported self-assessment.

The New Model for Supporting Disabled People and Enabling Good Lives

The Ministry of Health's New Model for Supporting Disabled People is nearing the end of its demonstration period. The purpose of the New Model has been to offer disabled people more choice, control and flexibility regarding the support they receive and the lives they lead, and to test new elements of the disability support system.

Elements of the New Model including local area coordination, supported self-assessment, enhanced individualised funding and choice in community living continue to be trialled in the Bay of Plenty, Waikato and Auckland. At the conclusion of the trial period, evaluation will provide an informed base for incorporating the New Model into future service development, including EGL.

Enabling Good Lives is a broader initiative involving the Ministries of Education, Health and Social Development. There are two three-year EGL demonstrations – one in Christchurch and one in Waikato. The demonstrations pool government funding and resources to provide disabled people with the freedom and support to plan their own good life and fund it from one personal budget. The Ministries have jointly designed the project alongside disabled people, families and service providers. ACC is also supporting the approach. The demonstration in Christchurch initially focused on school leavers with high disability support needs. It will expand over its demonstration period. The Waikato demonstration is currently in the planning phase.

Together the New Model and EGL are informing the transformation the disability support system. They address long-standing concerns related to:

- government resource allocation, purchasing and service delivery arrangements that may unreasonably limit people's ability to live the lives they want
- the system's primary focus on government-funded support specifically for disabled people, and neglect of non-government support and mainstream government services (such as health and education services available to everyone)

• complex cross-government arrangements that make disabled people's lives (and those of their whānau/families) more difficult than necessary and limit their choices.

Enabling Good Lives is based on eight principles to improve the quality of life for disabled people:

- Self-determination: disabled people are in control of their lives.
- Beginning early: invest early in families and whānau to support them to be aspirational for their disabled child, to build community and natural supports and to support disabled children to become independent.
- Person-centred: disabled people have supports that are tailored to their individual needs and goals, and that take a whole life approach.
- Ordinary life outcomes: disabled people are supported to live an everyday life in everyday places; and are regarded as citizens with opportunities for learning, employment, having a home and family, and social participation like others at similar stages of life.
- Mainstream first: disabled people are supported to access mainstream services before specialist disability services.
- Mana enhancing: the abilities and contributions of disabled people and their families are recognised and respected.
- Easy to use: disabled people have supports that are simple to use and flexible.
- Relationship building: relationships between disabled people, their whānau and community are built and strengthened.

Putting People First: A Review of Disability Support Services Performance and Quality Management Processes for Purchased Provider Services

In 2013 a ministerial independent review panel was established to review the effectiveness of the current disability support services performance and quality management processes within the Ministry of Health.

In November 2013 the panel presented its findings to the Minister of Health.¹⁷ The review contained 36 recommendations aimed at improving systems, processes and tools to ensure the safety and wellbeing of people with disabilities. Disability Support Services is committed to addressing these recommendations, including through specific actions within this Plan.

The review provided an excellent platform upon which the Ministry and the disability sector – both consumers and providers – can work together to achieve better quality of life outcomes for disabled people. The review guides the direction and activity of the disability sector over the next few years. It supports DSS and the sector to keep people with disabilities at the forefront, and ensure the voices of disabled people are heard, with particular reference to decision-making and issues of safety.

Better public services

The work of DSS continues to focus on delivering better public services within existing funding levels. This is a key priority for the Government, and entails a strong focus on achieving results that make a difference to New Zealanders. The Government has identified ten desired results under the 'Better public services' goal, across five result areas:

- Result 1: Reducing long-term welfare dependence
- Results 2-4: Supporting vulnerable children
- Results 5-6: Boosting skills and employment

17 www.health.govt.nz/publication/review-disability-support-services

- Results 7–8: Reducing crime
- Results 9–10: Improving interaction with government.

This Plan addresses these key result areas as follows.

• Supporting vulnerable children: The Ministry is working closely with the Ministries of Social Development; Business, Innovation and Employment; and Education, and the Police, on the three results that contribute to supporting vulnerable children: increase participation in quality early childhood education; increase infant immunisation rates and reduce the incidents of rheumatic fever; and reduce the number of assaults on children. Disability Support Services continues to contribute to the implementation of the Vulnerable Children's Action Plan and the Vulnerable Children's Bill.

We will work with Child, Youth and Family to ensure operational guidelines reflect changes from the Vulnerable Children's Bill. We will also contribute to a review of the processes for disabled children who are (or are likely to be) subject to care under the Children, Young Persons and their Families Act 1989. This review will establish whether they are being treated equitably, and in their best interests and, if not, we will support advice on changes to legislation, operational policy, and monitoring and enforcement.

• Improving interaction with government: Disability Support Services plans to review its procurement and contract management processes and service specifications so that they include a greater focus on measuring outcomes for disabled people. Disability Support Services will work with disabled people and providers to carry out this review. It will also streamline the contract management process, reduce the numbers of contracts and review provider reporting requirements.



Action Plan

1 Improved outcomes for disabled people and their whānau/families

- 1.1 We will ensure disabled people have choice and control over their support/services.
- 1.1.1 We will implement initiatives that focus on supporting people's ability to live the life they want. This will include continued implementation of the New Model and supporting the EGL initiative in Christchurch and Waikato.

We will continue to work with the Ministries of Education and Social Development, ACC, disabled people's organisations, disabled people, whānau/families, carers, friends, and people who provide ongoing support to improve the lives of disabled people. We will make improvements in the following areas.

Information and assistance

- a. Local area coordinators and EGL navigators who walk alongside disabled people to assist them in working out what their 'good life' looks like and how they can achieve it. Building community networks for people is an important aspect of these roles.
- b. Person-directed planning: one plan, owned by the disabled person and their whānau/family, identifies 'a good life' and informs all other plans and assessments (eg, school transition).

Individualised funding and self-assessment

- c. Creation of personal budgets through a funding allocation tool and supported self-assessment.
- d. Providing disabled people with increased choice and control over how individual funding is spent by supporting purchasing decisions through the purchasing guidelines (enhanced individualised funding) and making support more flexible (eg, choice in community living).

Capacity and capability development

- e. Engaging the Christchurch and Waikato communities to encourage an inclusive and accessible recovery and rebuild for disabled Cantabrians following the Canterbury earthquakes, and to build relationships between disabled people, whānau/families and communities.
- f. Work with providers to develop a more collaborative approach to the way that support and services are provided to disabled people and their whānau/families.
- g. Collaborative work with schools in Christchurch to improve outcomes for students with disabilities and to improve the transition from school to independence.

System design and accountability

- h. Clear and reciprocal lines of accountability between participants and funders in the EGL demonstration, focusing on safeguarding individuals both when they make informal support arrangements and when they employ staff directly.
- i. Continuing transformation of the disability support system following the New Model, and advice and recommendations on system changes. In the short term, this will support the EGL demonstration, and in the longer term, it will assist the wider transformation of the system.

- 1.1.2 We will evaluate learning from the EGL Christchurch demonstration in 2014/15, and consider in 2015/16 improved processes that are culturally responsive, strength-based and holistic; that involve whānau/families (whānau ora principles); and that are integrated.
- 1.1.3 We will increase the coordination, integration and accessibility of information for disabled people and whānau/families. Specifically:
 - a. We will ensure information is available in formats appropriate to the different needs of disabled people. We will ensure all web material meets the new web content standards for accessibility and usability.
 - b. We will improve the quality and availability of information, including information on how to access support and services. We will improve information on the Ministry of Health's website, and ensure information is available in other key places.

1.2 We will safeguard the wellbeing of disabled people.

- 1.2.1 We will implement the recommendations in the *Putting People First* review. Priority actions will focus on the safety, wellbeing and 'voice' of disabled people.
- 1.2.2 We will strengthen links to the Health and Disability Commission's Health and Disability Advocacy Service. This service provides advocates that can provide information, practical support and assist people with making sure their rights are respected.
- 1.2.3 We will increase access to health services and improving health outcomes for disabled people, with a specific focus on people with learning/intellectual disabilities.

1.3 We will focus on early intervention, to improve outcomes for disabled children and whānau/families.

- 1.3.1 We will consider establishing a developmental coordinator function to address the needs of children with disabilities nationally.
- 1.3.2 We will use the findings of the Child Development Services: Stocktake and Needs Analysis to improve services, with a focus on national consistency.
 - Child Development Services are non-medical, multidisciplinary, allied health and community based services. Services focus on early intervention for pre-school children who are not achieving developmental milestones or who have disabilities. The service provides specialist assessment, intervention and management services to ensure good rehabilitation/habilitation results for children who have an intellectual, sensory or physical disability.
- 1.3.3 We will evaluate the Early Intervention Behaviour Support Service.
 - Behaviour Support Services improve the quality of life for people who have challenging behaviour. Challenging behaviour often affects people's relationships and may place the person or others at risk of harm. Services help to improve the person's ability to develop independence and participate in the community.
- 1.3.4 We will increase the availability of the children's Intensive Wraparound Service to support children and their whānau/families across the country as an alternative to residential services for children with disabilities.
- 1.3.5 We will develop and implement flexible and tailored respite options for children, young people and whānau/families requiring a break.

- 1.4 We will improve information collection and analysis to ensure decisions are evidencebased and support improved outcomes for disabled people.
- 1.4.1 We will improve the quality of internal information to support our decision making.
- 1.4.2 We will design and implement a satisfaction survey of users of Ministry-funded disability support services.
- 1.4.3 We will undertake regular demographic analysis of disability support service users.
- 1.4.4 We will improve the collection and analysis of data related to children who are receiving care under the Children, Young Persons, and Their Families Act 1989.
- 1.5 Māori disabled will experience quality of life through whānau/family support and high-quality disability support services.
- 1.5.1 We will implement, monitor and evaluate *Whāia Te Ao Mārama: The Māori Disability Action Plan for Disability Support Services 2012 to 2017.*
- 1.6 Pasifika disabled will experience quality of life through aiga/family support and high-quality disability support services.
- 1.6.1 We will implement, monitor and evaluate Faiva Ora: National Pasifika Disability Plan 2014–2016.
- 2 An improved disability support system to better support disabled people
- 2.1 We will support providers and carers to deliver high-quality, person-directed support and services.
- 2.1.1 We will implement the recommendations in the *Putting People First* review, with a focus on the performance of disability support service providers.
- 2.1.2 We will increase the capability of disability service providers to support disabled people, as follows.
 - a. We will develop and implement effective ways for disabled people and disabled persons organisations to provide feedback (both qualitative and quantitative) safely about the quality of services and support and to monitor, evaluate, and scrutinise and make providers accountable to funders for achieving outcomes.
 - b. We will work to support providers to be responsive to disabled people and provide choice and tailoring of services. Explore how provider performance should be assessed, including through accreditation, provider performance measurement, and contract monitoring systems.
- 2.1.3 We will support NASC organisations to strengthen the processes related to identifying and supporting vulnerable children and adults, with a particular focus on children who may require Child, Youth and Family intervention.
- 2.1.4 We will support the implementation of the *New Zealand Carers' Strategy Action Plan for 2014–2018*, as follows.
 - a. We will develop a range of respite options that give whānau/families greater choice, control and flexibility over the services they receive, and explore the development of an online carer matching service.
 - b. We will develop and deliver a learning and wellbeing resource service to meet the current needs of whānau/family carers and other whānau/family members. The aim of the service will be to enhance the health and wellbeing of disabled people's carers through the provision of information, resources and support.
 - c. We will develop and implement a DSS carers' strategy.

2.2 Service development and system transformation activities will focus on supporting the sector to deliver improved outcomes for disabled people.

- 2.2.1 We will develop a flexible, person-centred system in the following ways.
 - a. We will develop services for people with autism spectrum disorders focused on access to appropriate services nationally.
 - b. We will develop and implement an action plan to reduce the number of younger disabled people (ie, those under 65 years of age) entering aged residential care services.
 - c. We will update the current service specifications to include person-centred outcome measures, allow flexibility and encourage innovation.

2.3 We will improve the way we purchase support.

- 2.3.1 We will implement the recommendations in the *Putting People First* review, with a focus on improving Ministry of Health processes to improve outcomes for disabled people.
- 2.3.2 We will implement a results-based monitoring framework.

2.4 The workforce will add value to the lives of people with disabilities.

2.4.1 We will implement, monitor and evaluate the Disability Workforce Action Plan 2013–2016.

2.5 We will improve the disability capability of the Ministry of Health.

2.5.1 We will implement a work experience programme to employ disabled people within the Ministry of Health.

This programme will have mutual benefits. Work experience is valuable for people seeking their first job, returning to the workforce, looking for a more suitable job or wanting to change careers. Within the Ministry, this programme will instil an increased understanding of disability issues in the workplace.

3 Improved collaboration, communication and consultation

3.1 We will work with other government agencies, disabled people and communities.

- 3.1.1 We will work with disabled people's organisations, other government agencies, service providers and other critical stakeholders to implement the *Disability Action Plan 2014–2018: Cross Government Priorities to Make a Difference*.
- 3.1.2 We will provide sector leadership and foster leadership by disabled people and disabled persons organisations through:
 - a. engagement and co-development on nationally consistent policies, practices and programmes
 - b. providing opportunities to share good practice (eg, through provider and consumer forums).
- 3.1.3 We will support a stocktake of key reports, recommendations and findings on preventing violence towards and abuse and neglect, including the cultural context for disabled Māori and Pasifika.

Disabled persons organisations will lead this stocktake, in consultation with the Ministries of Health and Social Development.

- 3.1.4 We will support the Vulnerable Children's Action Plan by:
 - a. reviewing the operational guidelines and the Memorandum of Understanding between the Ministry of Health (through DSS) and Child, Youth and Family to ensure the documents reflect changes from the Vulnerable Children's Bill
 - b. contributing to inter-departmental review of the current care and support processes for disabled children who are (or are likely to be) subject to care under the Children, Young Persons and their Families Act 1989 to establish whether they are being treated equitably and fairly, and in their best interests and, if not, providing advice on changes to legislation, operational policy, and monitoring and enforcement.
- 3.1.5 We will support the implementation of the Ministry of Health and ACC joint *New Zealand Spinal Cord Impairment Action Plan 2014–2019*, which focuses on the needs of people with a spinal cord impairment and their whānau/families.

3.2 We will make it easier to do business with the Ministry of Health

3.2.1 We will move non-governmental organisations (NGO) contracts onto the streamlined contract framework. This will reduce compliance costs for NGOs and allow the Ministry of Health and NGOs to use data more efficiently to assess results for people receiving DSS funded support.

4 Management of risks to the sustainability of the support system

4.1 We will ensure the disability support system is nationally consistent, fair, transparent and sustainable.

- 4.1.1 We will continue to develop and implement:
 - a. the funding allocation tool and supported self-assessment
 - b. the equipment and modification services prioritisation tool
 - c. DSS pricing models review.

4.2 We will continue to ensure effective and efficient use of government funding within the disability support system by targeting resources where they have the most impact.

- 4.2.1 We will manage ongoing cost growth pressures within Environmental Support Services by:
 - a. continuing to focus on joint procurement opportunities across government agencies
 - b. ensuring equipment and modification service providers follow moderation processes to ensure assessors are prescribing best value for money solutions for disabled people.
 - Environmental Support Services provides support for people with a disability of all age groups. There is increasing demand for these services as people with disabilities in particular, the growing over-65 population increasingly choose to remain in their own home.
- 4.2.2 We will continue to develop a range of options for residential and community living supports that are accessible, sustainable and high-quality, meet required need and better utilise mainstream services, according to the principles of the EGL initiative.
- 4.2.3 We will develop funding models that ensure the sustainability of increased choice, control and flexibility, including individualised funding, and ensure a viable and appropriately funded provider base, including value for money and an outcomes focus.

Conclusion and acknowledgements

Disability Support Services is committed to the achievement of our vision and to a process of transformation of the system that will increase disabled people's choice, control and flexibility over the support in their lives.

We have developed this Plan to ensure we remain on the pathway to achieve this vision. Our vision and this Plan will require the collaboration and the dedication of our own teams, providers, other agencies, disabled people's organisations and disabled people themselves.

We appreciate the input and guidance we have received from our various stakeholders during the development of this plan. Your participation in this process has helped to ensure we maintain a shared commitment to the vision.

