



Evaluation Report

Local Government NSW Aged and Disability Forum

The Portside Centre, Sydney

16 March 2018

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One-Page Summary

Who Gave Feedback?

- 28 (41%) of registered attendees (69) completed a Survey after the event
- 43 Councils were represented by the 69 registered attendees.

We learned that current concerns clustered around two areas:

1. *Reform related decisions*

- Remain or exit direct service provision after 2020?
- If developing new models of service delivery, what's the 'End Game'?
How long to remain a provider? Until what happens?
- Have specialist or generalist community development positions after 2020?
- How to engage upper management in grasping the strategic nature of the decisions needed?
- How to inform upper management of the potential impacts on Community Strategic Plans (CSPs) and Resourcing Strategies).

2. *Post reform 'core business'*

- DIAPs: sharing implementation learnings; gaining ownership; culture change; resourcing internal stakeholders.
- Fundamental rethinks: what is the role of council in informing community of local services? Role of council in *sector* development, inter-agency forums etc? What does 'community development' work look like in the 'new world'?
- Competitive market impacts: New policies needed on "private providers" / "NGOs in competition" and venue / hall hire; Seniors Festivals; forums; community information sessions; service promotions; lobbying of Councillors; new conflicts of interest emerging etc.

Suggestions for Future LGNSW Support

- Advocate on the longer-term implications for councils and DIAPs and our obligations under the Disability Inclusion Act.
- Forge closer liaison between policy makers and LGNSW.
- Resources and benchmarking activities; facilitated forum targeted for Disability Inclusion Officers to come together to workshop DIAP plan implementation.
- Gather evidence to support argument for generalist v specialist workers.
- Help identify what functions that used to be those of the ADO will now be "inactive" or that local councils will not be able to perform.
- Forum for LG NDIS providers to exchange information.
- Develop a template to assist us to brief council on the effect of Sector Support and other relevant reforms.
- Templates to assist us create our scenario planning briefing paper to GM's and Councillors
- Help ADOs to think more strategically and long-term about their roles.
- A topic for this year's Local Gov. Conference: Role of community services in local government.
- Information/ training on the outcomes measurement framework Templates.
- Draft model guidelines on how Aged & Disability Officers might deal with 'for profit' service providers.

1. Introduction

1.1 Overview, Objectives and Agenda

- A one-day forum bringing together local council ageing and disability staff and sector support officers. Funded by the Commonwealth Department of Health and NSW Family and Community Services.
- Objectives:
 - Inform, support and share information on how best to navigate the new era of market driven community services.
 - Provide an opportunity to develop strategies for councils' role in service delivery in the light of current aged and disability care reforms.
- Agenda

| Time | Topic | Presenter |
|---------------|--|--------------------------------------|
| 10.15 – 10.45 | Updates – What's happening | Chris Maclean |
| 10.45 – 11.30 | Setting the scene for your discussions today (a framework) | Facilitator – Jenny Bray |
| 11.30 – 12.30 | Scenario Planning Sessions | Facilitator – Jenny Bray |
| 12.30 - 1.00 | Networking LUNCH What are other councils doing? Informal information share | All |
| 1.00 – 2.00 | Scenario Planning (cont) | Facilitator – Jenny Bray |
| 2.00 – 2.30 | Community Development – What is council's end game? | Facilitator – Jenny Bray |
| 2.30 – 3.00 | Measuring Outcomes | Louisa McKay, YMCA NSW |
| 3.00 – 3.30 | Key Messages to Internal Council Stakeholders | Facilitator – Jenny Bray |
| 3.30 – 3.45 | Be Connected – a digital world for all | Jess Wilson – Good Things Foundation |
| 3.45 – 4.00 | Summary and priority actions | Jenny Bray |
| 4.00 – 5.00 | Informal networking – OPTIONAL | All invited |

1.2 Attendees

- 69 participants from 43 councils, with one not-for-profit (Royal Rehabilitation Board Member)
- Aged services 10
- Disability services 10
- Aged & Disability 26 (includes 5 management positions)
- Community Development 18 (includes 4 management positions and 1 CALD)
- Sector Support & Development 3
- Social Policy 2

2. Current Situation: Community / Sector Development (non-output)

2.1 Range of Positions of Councils across NSW

- A 2017 survey by LGNSW found that of 21 current providers of aged care, only 4 had decided to remain as providers after 2020. Three (3) had decided to exit service provision, and a majority (14) were still considering the options.
- The Forum provided further detail behind these results:
 - Some will remain and monitor financial viability of the service.
 - Newly amalgamated councils are restructuring at same time that aged and disability reforms are occurring. Councils have opportunity to completely rethink its role in aged and disability services. Whilst ageing and disability issues are important, these councils are also resolving many other details arising from the process of amalgamation.
 - Other councils are considering CHSP budgets in differing ways, either grouping moneys from various CHSP contracts together and resourcing from there, or separating out CHSP money from other sources.
- Some attendees said there “is a lack of information to support recommendations to council.” Many attendees from councils still considering options said they would appreciate the assistance of LGNSW to inform upper management of the issues.
- Difference between councils having “generalist” community worker/s or “aged and/or disability” specific workers. A majority felt that specialist workers were more effective, although at least one representative said their council worked well with workers being generalist. See a “loss of knowledge and expertise” as Ageing and Disability roles become more generalist.

2.2 What’s happening with Disability Inclusion Action Plans?

- All councils have DIAPs in place. There is a range between those that have developed ‘ownership’ and are progressing with cross-departmental implementation and melding the DIAP into the integrated reporting framework and those that are not there yet. Most of the DIAPs are driven by, or implemented by, community development staff – not owned by council.
- For councils yet to experience the ‘cultural shift’, departmental staff are seeing the DIAP tasks as “workflows on their own” and not as part of a cultural shift of building inclusion into systems and processes.
- Some councils are seeing a cultural shift in their councils: more ownership of inclusion across departments. City of Sydney is on the second DIAP and are finding this shift.
- Critical success factor is buy-in from management to give the DIAP financial support. Works well when the GM is on board. Needs an executive sponsor.
- Some are finding the DIAP implementation means staff from all Departments come to Sector Support or community development staff to ask how to do things - an added part to the role.
- Increased need for communication on all levels to enable DIAP implementation. Some councils are forming cross department working parties to implement the DIAP (e.g. Liverpool).
- Range of experience on how helpful the Access Committee is. Some find the committee a good resource, others find the committee has different views on success.
- Amalgamated councils: DIAP implementation is slow as amalgamation takes a lot of time.
- Ryde and Hunters Hill DIAP – engaging with Business First to maximize resources.
- Some Councils are not yet ready to incorporate the DIAP into Integrated Reporting. Lack of ownership by the senior management / GM. No resourcing.

- Innovative: Lift and Change (Shoalhaven); Disability artwork on tiles (Georges River Council)

2.3 What's happening with Ageing Strategies?

- Mostly driven by community development and/or Aged and Disability Workers.
- Aligning Aged and Disability Worker to the Community Strategic Plan (and some not to the Commonwealth agenda and activity plans).
- For-profits are emerging in community information expos and Seniors Festivals. Asking to be in Council Directories.
- Strategy out of date and don't know how it will be renewed once SSD money is withdrawn.
- Undecided on how to go ahead with this.
- Tweed has a working group that is working very well.
- Shoalhaven is moving to a community development model.

2.4 Councils Promoting Services or Holding Forums / Inter-agencies

- Market driven model is presenting a new challenge. Council can't be seen to prefer one provider over another.
- Aged and disability workers are getting for-profit provider emails in the inbox every day.
- Councils have traditionally not promoted for profit services. Forums and inter-agencies mostly not-for-profit. Now private providers are coming to council to ask them to promote their service with "community information". Forums have more for profits attending and using them as marketing events - to promote or gather intelligence. "Who is advocating for citizens" now that providers have a stronger need for self-interest (gaining market share)?
- Some councils have developed a Policy or Terms of Reference for forums or whether and how to promote services (E.g. Burwood – Interagency Terms of Reference; Inner West – developing a policy regarding council's position on private providers). Woollahra Council has a Policy not to support for profit services.
- NDIS advice is that we need to include private providers at forums and Inter-agencies.
- Some areas are finding the Forums are no longer relevant. Drop in attendance. Individualised funding means providers can't justify the expense of sending workers to forums. The old NGO/HACC Services are no longer providers. There is much less collaboration.
- Dynamics in the forums are changing. Less information sharing.
- Expectation from residents that we provide information about local services, regardless of MAC and NDIS processes.

2.5 Emerging issues

- Attendees said the practical difference between **sector** support and development and **community** development is becoming more apparent. If or when sector support funding ceases, attendees posed the question of what is or should be the role of councils in supporting a sector which is soon to be an open, **competitive market**?
- "The Commonwealth misses the point of wellness and reablement. The view is rehab oriented, not the Local Government model of inclusion and connected communities – Working with community building activities; connecting people to local groups; community education, information and referral."
- My Aged Care (MAC) doesn't give the person any sense of what is available in the community – which discounts wellness and reablement from an wholistic view.
- Some councils are going through Third Party Verification – either modified or full TPV.
- There is a "need for a consistent definition of Inclusion imbedded within the Disability Inclusion Act. There is an emerging view that councils should be a provider of affordable

activities – wanting councils to fill the gaps when services lose funding. If anything, when councils lose SSD money, there will be less available at Local Government level.

- Advocacy funding is being withdrawn – LGNSW and councils advocating for it to be kept.
- Concern about how to develop new and innovative service models due to loss of funding models. Some councils are “business as usual” and delaying the decisions until 2020.
- There are new issues emerging from carers. More requests from them to learn about the reforms, what are the new services out there, and plans for NDIS.
- Carers anxiety about services losing funding for respite and social support. Carers target group is adding to Aged and Disability worker’s work load.
- Confusion over who council should partner with in a market driven model. E.g. Who do we lease buildings to for nominal rent prices?
- There are reports of for-profit services approaching Councillors to respond to their request for endorsing their products. There is a flow on effect for staff.
- Some Councillors are in the sector and are now from services that are in a market driven context. What does this mean for conflicts of interest and the Code of Conduct?
- Need for new policies around service promotion; seniors’ festivals; expos; inter-agencies; reconsidering the Code of Conduct with regards to links or contacts between Councillors and providers; community information sessions where “guest speaker” is a provider in a market driven context, or providers turning up to community information sessions to directly market to community members in council premises (may give the impression council supports those providers).

3. Current Situation: Council as Provider (output)

Councils currently providing services are split across the three options: Stay, exit, or haven't yet decided.

3.1 Reasons for Councils to Remain as Service Provider

- Council provides non-partisan option.
- Community expectation that Council should be the first point of call for low level help.
- No alternate providers, particularly in rural areas (thin market).
- Community trust.
- Council is seen as a non-partisan and non-religious provider. Gives a different choice in the market.
- Recognition of the value of extra social capital benefits offered by Council being a provider (integrating with active / positive ageing and other Council services / functions).
- Advantages of economies of scale (e.g. can use back of house functions of IT, HR, Finance).
- Put a business case to council. Include reviews / research.
- We became NDIS provider for continuity.
- Community survey confirmed the community expectation that council would remain a provider (Eurobodalla) especially in transport and social support.
- Decision to transition to Home Care Packages to continue being a provider (Eurobodalla and Mid Coast)

3.2 Reasons for Councils Not to Remain as Service Provider

- Is not financially viable. High unit costing. Inadequate NDIS pricing framework.
- Loss of funding triggered a review of council's role in service provision.
- Concern about the volunteer base – numbers are hard to recruit and retain.
- Risk of staff – casualisation, pay rates, career perception.
- Service provision in market driven model is not seen as being “the business that councils are in”. Not a council activity.
- There are alternate providers in the area and therefore no need for council to be a provider.
- Councils don't like doing things across LGAs. Stay within their LGA jurisdiction. Flexible service provision requires going broader.
- Blacktown has no intention to continue as a provider. See the council role as “enablers”, sector support. Access workers (14%), PWD / Multicultural (41%) works with Ability Linkers.
- Transport provision is difficult. Problem with crossing LGA borders and being able to provide time flexibility. Are also levels of legislation to satisfy, and variety of types: bus, Uber, Taxi, Community Transport.

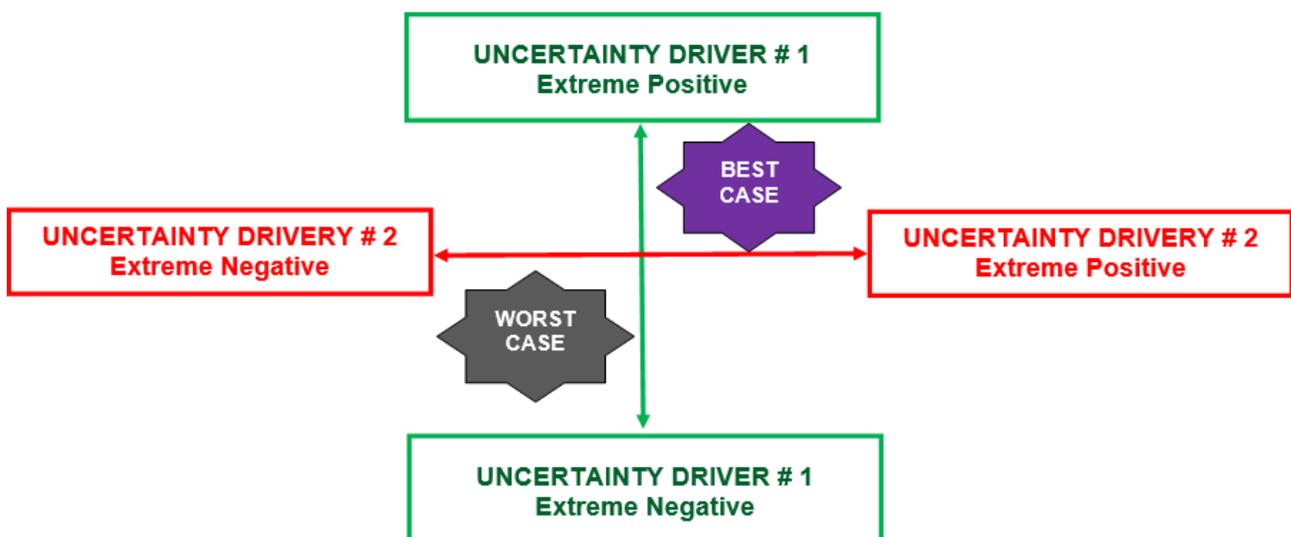
3.3 Still Considering Options

- Still testing unit costing (NDIS). Any decision to go forward must be cost neutral to council.
- Many of the councils still considering options intend to stay until 2020 and then to consider options. It is unknown if these councils are currently developing new service models for after 2020.
- Small number are deciding whether to become a Home Care Package provider.

4. Scenario Planning

- Many survey respondents indicated that councils are yet to make firm decisions due to a lack of certainty about the future.
- Scenario planning is used when the strategic planning context (or service model planning context) has significant uncertainties.
- Facilitator Jenny Bray provided the following template and gave a brief presentation on Scenario Planning, specifically a scenario identification method called the “scenario matrix”.
- The matrix is based on two key drivers of uncertainty, which are represented on X and Y axes showing an extreme positive option and an extreme negative option. The four quadrants then generate four distinct scenarios – a “best case”; “worst case” and two other options between those.

Fig.13: Scenario Matrix – Key Uncertainty Drivers



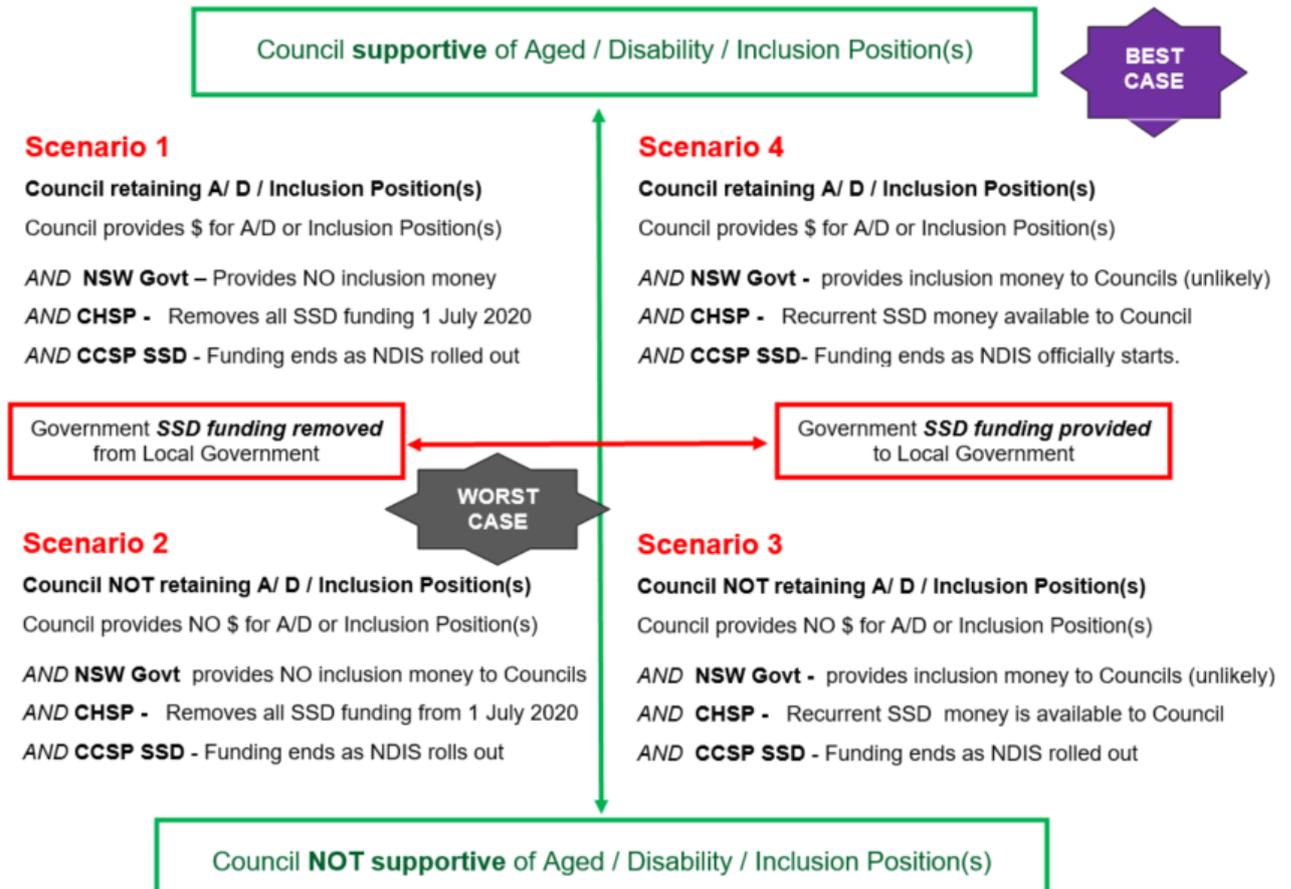
- The implications of each scenario are considered and populated so that readers can quickly see a “story” of that scenario and imagine the alternative futures that each describe.
- When using the model in full, rather than only describing the “end states” of each scenario, an “influence diagram” is generated, identifying the strategic issues behind each.¹ This provides a clearer picture of the factors and trends influencing possible outcomes, and their interrelationships. The trends are linked to the uncertainties (e.g. a trend could be “scalability of workforce via casualisation” which is linked to both “removal of block funding” and “uncertain market share of service users”.
- Once the scenarios are generated and the influencing factors (and relationships) are established, options for each scenario can be generated.
- In the Forum presentation and activity, attendees only considered the likely end-states or outcomes of each scenario, essentially describing a position of “status quo” in the context of each uncertainty becoming a certainty (that is either positive or negative).

¹ van der Heijden, K., Bradfield, R., Burt, G., Cairns, G. and Wright, G. (2002): The Sixth Sense – Accelerating Organizational Learning with Scenarios, John Wiley & Sons: Chichester, 2002.

4.1 Community Development / Sector Development Scenarios

The following uncertainty drivers were offered for Community / Sector Support positions. The uncertainty drivers are resource based. This is based on results of the LGNSW Survey which identified staff saw resource constraints / changes and council likelihood of self-funding community / sector development as the greatest factors of uncertainty *for them*. The questions offered with the matrix were designed to enable staff to consider the impacts on factors relevant to council functions and Community Strategic Plans. It was hoped this would assist staff to clarify risks and opportunities to present to senior staff and ultimately to Council.

Fig.14: Scenario Matrix – Community Development / Sector Development (non-output)



| Questions to consider for each scenario | |
|--|--|
| <p>Aged and/ or Disability / Inclusion Workers</p> <ul style="list-style-type: none"> • Impact on older people and/or people with disability living in your LGA? • Impact on the functions of council? • Impact on forums / networks / other? • Impact on vulnerable groups? • Other vital impacts? • What options does council have? | <p>SSDOs or Regional Non-Output Workers</p> <ul style="list-style-type: none"> • Impact on the functions of council? • Impact on forums / networks / other? • Impact on council's access to information from or about older people or people with disability? • Impact on vulnerable groups? • What options does council have? |

4.1.1 Scenario 1 – Second Best Case Scenario (non-outputs)

- Council no longer limited by govt funding agreements & deliverables etc.
- Opportunity / requirement for council to reconsider what is council's core business with regards to ageing and disability (within the context of the Disability Inclusion Act, 2014).
- Potential for council to transition A&D role to generalist role. Would lead to loss of knowledge, expertise and networks at exactly the time that the expected gaps resulting from NDIS and CHSP service provision will approach council for advocacy and/or “inclusive activities” and/or council run services. Generalist staff less likely to know how to assist with specific requests from individuals and groups.
- Community services competing for budget with other council departments. Possibility?
- Likely to see more people “falling through the gaps” and coming to council for assistance. Community or other levels of Government may see council as having a role in providing services to this group.
- Council funding for services continues, enables:
 - implementation of DIAP and ageing strategies
 - maintain community engagement via all activities of aged / disability workers – provides more stakeholder engagement, enriches consultations and community strategic plans
 - continued positive reputation for council for being a visible presence for seniors, people with disability and carers.

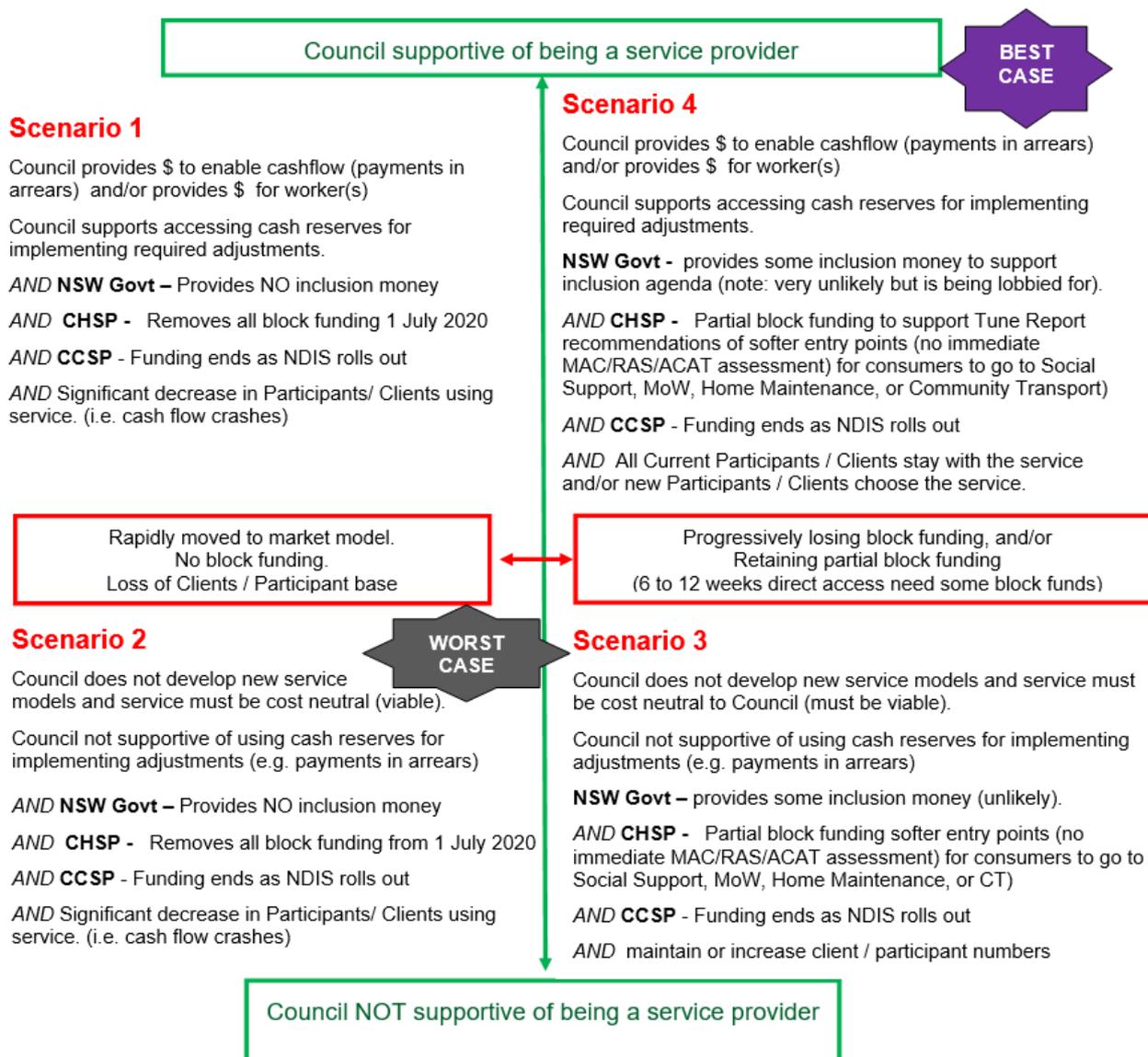
4.1.2 Scenario 2 – Worst Case Scenario (non-outputs)

- Inability to host accessible and ageing friendly events. Need to change/increase fees (e.g. new event funding models).
- Significant impact on Delivery Plan and Operational Plans. E.g. would need a change in community statements as council could not deliver as well on the “inclusive” statements. Loss of internal expertise on inclusion; knowledge; networks – resulting in very significant impact on community engagement among seniors, people with disability and carers.
- Likely to see more people “falling through the gaps” and coming to council for assistance. Unlikely to have the expertise within council to respond.
- Community or other levels of Government may see council as having a role in providing services to this group, but infrastructure to respond will not be readily available.
- Resourcing Strategy would need an urgent review, as there would be a significant impact on council’s ability to deliver on the CSP / DP / OPs and increased community demand.
- Significant impact on ability to deliver on current DIAPs and Ageing Strategies.
- Damage to reputation as council becomes unable to deliver community events or information sessions that it once did. Damage to reputation as DIAPs and Ageing Strategies are unable to be delivered.
- Next DIAP and Ageing Strategies will be more difficult to develop, as council loses the many links to relevant sections of the community. Community engagement and consultations will be less effective.
- Could lead to “cross charging” within departments.

4.2 Councils Output Services (Council as Provider) Scenarios

The following uncertainty drivers were offered for Service Provider positions. The uncertainty drivers are resource based.

Fig.15: Scenario Matrix – Council as Provider (outputs)



Questions to consider for each scenario

Aged Care or NDIS Provider

- Impact on your current clients?
- Impact on the functions of council?
- What other vital impacts?
- If council continues to be a provider, what needs to change?
If council decides not to be a provider, what needs to change?
- What options does council have?

4.2.1 Scenario 2 – Worst Case Scenario (outputs)

- Someone doesn't show up to deliver the service, or someone different shows up. Will have varying impact depending on whether the person (client) is low needs or high needs. Currently there are many people in CHSP (especially council run Social Support groups, Meals and Transport) who have high needs and are not going to MAC for assessment. These clients have high support needs and an abrupt change could lead to very negative outcomes. Negative outcomes could be persons at risk.
- Decrease in service quality would be likely. Change in service delivery context and service culture (or discrepancy between expectations and service delivery) leading to increased complaints to council. Negative PR and damage to council reputation.
- Would need to revisit council policies on cost of venue and who can hire the venues at a reduced community price. Just because a service is not-for-profit only means the service is not providing those profits to shareholders / owners. It could still be that the money is not redirected into additional services in the LGA that the savings are being made (as in, our venues etc). Also, if council does provide community rates to a provider it could be seen to be favouring a provider in the market over others. Could lead to complaints, legal action? and lobbying of Councillors etc.
- If brokering to third parties, what are the insurance and governance implications? What impacts to council?
- Likely to see redundancies and lost or ending contracts that need to be attended to administratively.
- Community buildings operated by council that were paid for by HACC Capital funds. If no longer a service provider, who owns these assets? (e.g. assets over \$5k in all other areas go back to the funder). Need legal advice.
- Increased cost to service users (home modifications and waste management, where council is currently able to assist individuals because of capacity generated by having skills / networks in-house).
- Decrease profile for council in the community. Council will be less relevant to people's everyday lives. This will impact on the ability for council to be as effective in community engagement when consultations are required, particularly with seniors and people with disabilities.
- Residual effects of customers wanting services that no longer exist.
- Loss of networks. Loss of awareness of the service provider landscape (to assist locals to access local supports) and therefore community inclusion. Will impact on Community Strategic Plans that have social cohesion / social inclusion goals.
- Increases in social isolation; increased health issues; increase in risk factors associated with elder abuse.
- Increased burden on local health sector (hospital admissions, GPs, etc.)
- Services to community decreasing significantly until the 'market' can recover.
- Possible industrial issues due to the need to change or cancel contracts, or restructure.
- Future of volunteer workforce, student placements, politically active volunteers lobbying or complaining to council.
- People on job placement (NewStart recipients) could lose social security payments because they no longer have a position with council.

4.2.2 Scenario 2 – Council Options (outputs)

- Stop being a service provider. Community engagement to prepare for this. Exit strategy that includes referring clients to MAC. Develop plans to manage the PR and reputation implications.
- Identify niche service areas in wellness & reablement that maximise the social capital benefits that Council can offer, and intersections between Council's other areas (e.g. libraries, art galleries, community buildings, pools etc).
- Need to redesign volunteer roles to enablement / wellness, will have change management implications. Not all volunteers will be happy to have the model changed (e.g. meals). Will require more coordination of volunteers to have shorter term volunteer placements for reablement. Difficult to do when Councils could be losing experienced staff due to the uncertainties and the need for them to find more secure employment.
- Look at core competencies – what are we doing well? And which of these should we keep doing?
- Identify the decision makers and engage them in the process of identifying scenarios, trends and options.
- Align arguments to the Delivery Program and Operational Plan. Identify what will be at risk in those plans and what may not be. Where exactly the impacts will be seen, to enable planning to mitigate negative consequences.
- Review the likely impacts (or at least questions) around legal consequences and forward those to senior management to include in Risk Assessment processes.

5. What's your 'end game'?

5.1 Introduction

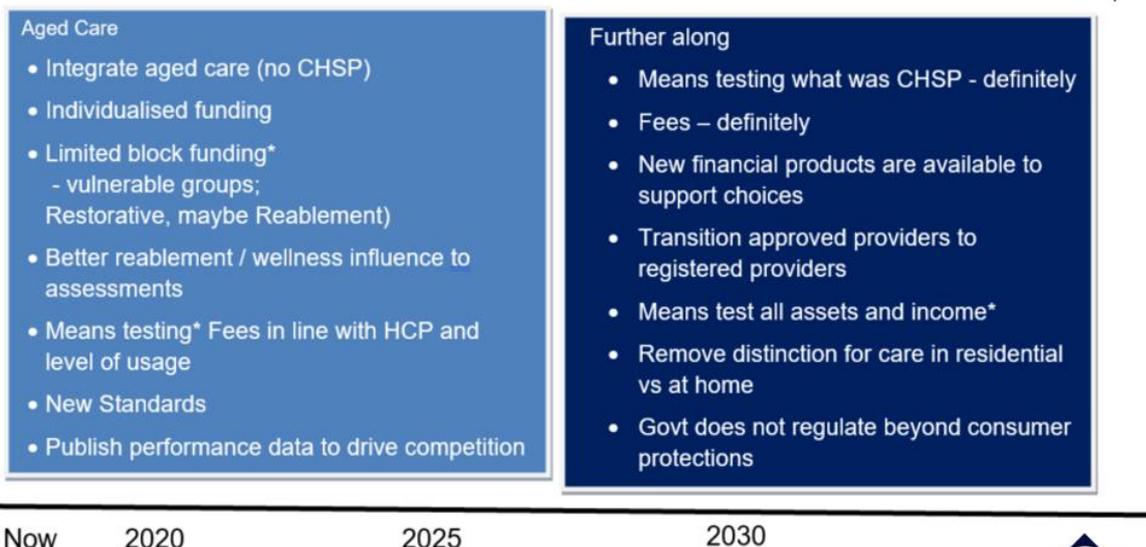
- Jenny Bray presented a short session Inspired by A Gugelev & A Stern (2014) on "WHAT'S YOUR END-GAME?", a project of The Global Development Incubator.
- Gugelev and Stern (2014) wrote about the role of global Not-for-Profit (NFP) agencies, identifying that out of 6 possible long-term NFP outcomes, only ONE involved the NFP "continuing and sustaining the organisation's original services".
- The context of the Gugelev & Stern considerations is shared by NGOs and LGs in Australia: Reaching a viable scale; and structural barriers to ongoing funding.
- As the LGNSW Aged and Disability Forum went over-time in other activities, there was time for only a brief presentation and key questions and ideas around:
 - Are councils or their community service departments planning around resources and enabling community strategic plans to be implemented (more properly the role of Resourcing Strategies); or
 - Are the considerations based on fundamental, medium to long-term questions? Such as:
 - Why is /should council be a service provider, particularly in a competitive market?
 - How long will the conditions for staying a service provider remain?
 - When will council know that point has been reached?
 - Do councils need to plan *now* for the "end game"?
- Participants of the Forum also saw value in these questions with regards to Ageing and Disability Officers and community development work, as well as implications for delivering on Inclusion expectations of State and Commonwealth Governments.

Fig.16: Beyond Transition - Time Line (Aged Care)

We are now facing a permanently dynamic external environment. If planning is only looking at 2020, how long will underlying assumptions and external environment be relevant? In 5 years will the service be viable? How will choices made now affect council relationships in the long term?

Beyond transition?

External environment more dynamic than ever before.



Sources: Tune Report; NACA Paper on Integrated Care at Home; Aged Care Road Map

5.2 Possible “End Games’ for Council Providers?

| End-Game | Characteristics | Core Approach | Potential Future Role |
|-----------------------------|--|---|--|
| Advocacy – Mission based | Identify gaps and advocate via representation to NSW Govt and Commonwealth. | Conduct research. Disseminate knowledge. | Mission achieved, move on to identifying the next gap. |
| Replication | Breakthrough <i>idea or model</i> that is easy to replicate , share, adopt and deliver. | Demonstrate efficacy, define and share a replicable operating and impact model. | Provide to VET or other training centre or sector development agency for ongoing replication of model. |
| Thin Market provider | Commissioned provider delivering in a thin market. | Ensure efficiency checked through benchmarking. | Ongoing provider, or until external environment changes to enable a market to be sustained. |
| Competitive provider | Operating as a market driven entity, within a level of government (like a pool or a gym?) | Demonstrate efficacy and deliver results at sufficient scale. | Ongoing provider, or until external environment changes that sufficiently threatens sustainability/viability of the model. |
| Other? | | | |

Developed by Jenny Bray - Inspired by A Gugelev & A Stern (2014), WHAT’S YOUR END-GAME?
The Global Development Incubator.

6. Where to from here?

6.1 Intention to Attend Another LGNSW Forum

- 25 out of 29 said they would attend another forum
- 4 out of 29 said they are unsure if they would attend another forum

Participants are clustering around two positions which could form the basis for future planning for LGNSW forums and/or training or other resources:

1. Those looking at ongoing “business as usual” community development issues such as the implementation of DIAPs (perhaps council funded positions and staff more secure about their positions in the ‘new world’), and
2. Those more likely to be significantly affected by the removal of block funding and/or removal of SSD funding.

Comments from participants (categorised into the above) were as follows:

1. Ongoing Council business
 - More info on DIAP implementation.
 - How to implement DIAPs. What sector support looks like in the market driven environment.
 - On sharing what works in the DIAPs and what is not working in the DIAPs. The changing role and responsibilities of local councils in service delivery for residents who are ageing and are facing disability issues.
 - I think that the 'generalist role' - as opposed to the 'specialist role' needs thorough investigation, exploration and research. Help with mapping the community, identifying needs for the specific target groups may be helpful.
 - Appreciated other links to further consider different areas.
2. Reform Related Uncertainty
 - More on practical strategies on how to deal with the funding cut. Forming partnerships, transition options.
 - Unpacking some scenario planning for the future of the A&D and CD workers.
 - Continued support regarding options, how best to deal with changes & information sharing from various peaks.
 - New contracts for CHSP, sector support & development in CHSP to 2020, community development in ageing and disability sectors post 2020.
 - Discussions/planning on the way forward with an uncertain future.
 - I would prefer to answer this closer to the event as I can imagine there will be some changes to accommodate before then.
 - Maybe some training on how to start the conversations within own departments. Seemed to be a lack of understanding with internal council processes regarding policy changes etc.
 - We didn't really get to fully cover "The End Game" topic, as we ran out of time - I think that could be really useful to help the ageing and disability officers present to think more strategically and long-term about their roles.
 - What WILL the A&D positions look like in the future market driven sector??? What can Council do to support this - I think LGNSW has a role in following up on this and supporting us in this change as for many of us it is a 'whole new ball game'.

6.2 How LGNSW can progress council's position in this era of reform

Ongoing Council Issues:

- We really need to think through the longer-term implications for councils of the DIAP and our obligations under the Disability Inclusion Act. In the roll out of the NDIS and dismantling of State Government disability support I don't think the Commonwealth Government fully appreciates the important role and functions of Local Government in creating accessible and inclusive communities. We are major stakeholders in this world in both infrastructure and community development for inclusion but are not resourced sufficiently to do what we want to do. Nor is there adequate policy and planning emphasis to bring our Executive and Councillors totally on board. Influencing and convincing decision makers to commit to and take action for inclusion needs a top down as well as a bottom up approach. We are getting policy priority directives from State Government about accessible playgrounds and accessible tourism for example but no support to implement.
- Insights from benchmarking activities. Facilitated forum targeted for Disability Inclusion Officers to come together to workshop DIAP plan implementation.
- As we discussed at the Forum, I would be really grateful if LGNSW could be lobbying at a higher level for council's exec management to get behind the DIAP. I am a lowly 'project officer' and it is challenging to get buy-in from upper management - I would appreciate LGNSW's support to keep pushing the importance of DIAP.
- I think what would be really useful from LGNSW would be some resources to help councils implement the DIAPS. There were resources about how to write them but not how to implement. Thanks for organising the day, there were some key themes and thoughts that I will raise here at my council.
- The gathering of evidence to support the argument for generalist v specialist workers would be very useful, as would the templates to assist us create our scenario planning briefing paper to GM's and Clrs. Thanks for your support, it was a very informative session.
- I have asked my colleagues from the area of our council who provide frontline services to their community to contribute to this question. I would like to build a case to provide a social media platform to encourage older people in the community to participate in online forums and also give them access to up to date information on everything that's available to them in the community. Our council believes that a specialist Facebook page for older people is not necessary, that they can use the general council page. It would be interesting to have statistics on what other councils' practices are in this area. Thank you very much for holding the forum - it was really informative, a great help, and quite disturbing in some areas.

Reform Related Issues:

- Is LGNSW able to clarify the Non-Output Partial TPV requirement. My understanding is that partial TPV is still required as completion of funding agreement, even if Council is not staying in. Was differing opinions at forum.
- What would be good is if LGNSW can identify what functions that used to be those of the Ageing and Disability Officer will now be "inactive" or that local councils will not be able to perform. Both My Aged Care and NDIS believe that it will be "business as usual" with the funding cut. Councils should be able to identify exactly what will not be offered by councils when the disability funding is gone by end of June 2018 and aged care in less than 2 years from now.
- Just wondering if there would be value in arranging a separate forum for LG NDIS providers (and maybe same for ageing). Further, I could imagine an alliance or network of LG NDIS providers could be an effective platform for information exchange (about

best practice, developing the unique value proposition for LG as a provider) and as a strong advocacy/influencing group to NDIA and NDS and NSW Govt. Might be good to test if this idea has support across our network and I would be happy to push the idea forward if there was interest.

- I would like to see what other councils are doing/have done with the business case plans with their local councils who have been supportive of the role and acknowledge the work they do.
- Develop a template to assist us to brief council on the effect of Sector Support and other relevant reforms. We are a Council who do not provide direct support and are moving to a generalist CDO model. Assistance to explore best-practice and how to manage the expectations of the community as we move to this model would be appreciated.
- Continue to provide us with stats on which councils are going to continue support and how they are undertaking changes/choosing options in order to be viable Continued advocacy around CHSP social support and transport remaining block funded/partially block funded - so as not to lose the enormous social capital of volunteers, plus retain local jobs Continued advocacy around DIAPs being part of DP/OP and not just Community Care division responsibility Advocate for LG's to have role in capacity building ILC funding - use our local knowledge and connections!
- I feel the role of community services in local government needs to be given a higher profile. e.g. as a topic for this year's Local Gov. Conference - in a newsletter/publication etc. Upper management need awareness as to the issues, impact of funding being cut off and how that affects the community. Thanks.
- Advocate for NSW govt funding for: disability advocacy services; Commonwealth block funding for Meals on Wheels, Home Maintenance and Community Transport; and continued Commonwealth funding of sector support and development positions in local government.
- Continue to lobby government on the need and value of non-output services in local government.
- LGNSW is a major player in implementation of the reforms in aged and disability care locally to the residents and visitors. Forging closer liaison and collaboration between policy makers and LGNSW are essential success factors. Policy makers should also be present in this type of training workshop to gain insight and understanding about implementation issues, as well as ironing out policy mistakes for improvement.
- Continue to advocate for the need of local government positions within the aged and disability sector. Advocate for transparency from government and how they plan to support the community going forward if there is no support from government in the continuation for community support.
- More information or training on the outcomes measurement framework. Templates and guidelines for the scenario planning. Being kept informed on what is occurring with councils across the state in this sector.
- It would be good for LG NSW to draft model guidelines on how council Ageing & Disability staff might deal with 'for profit' service providers. Thanks.