

5 Jurisdiction methods for managing ‘need’

5.1 Introduction

Chapter 5 examines methods for managing ‘need’ in each jurisdiction and the information available from these processes. Information in this chapter is drawn from material provided by funding departments in response to the Jurisdiction Survey (Appendix 2). Information gathered from peak discussions, relating to methods of managing need, is presented in Chapters 4 and 7.

Section 5.2 discusses the main jurisdiction-wide method used in each jurisdiction to manage expressed need, Section 5.3 then presents analysis of what these processes tell us about need and unmet need and Section 5.4 provides a brief summary and discussion of the main issues raised in the chapter.

5.2 How jurisdictions manage ‘need’

Target group of CSDA-funded services

The CSDA target group is defined and discussed in Chapters 1 and 2 and relates to people with specified disabilities that are likely to be permanent and result in substantially reduced capacity in at least one of: self care/management; mobility; or communication. Most policy and program documents provided by jurisdictions refer to the broad target group included in the Disability Services Acts and other relevant legislation (for example, the *Victorian Disability Services Act 1991* and the *Victorian Intellectually Disabled Persons Services Act 1986*), with which the CSDA target group is broadly aligned¹.

Most programs also have further eligibility criteria but these are generally very broad and still relate to the CSDA definition of disability.

Most jurisdictions continue to grapple with historical funding practices, which tended to focus on the needs of people with intellectual disability and on service models such as institutional care. This means that many of the current client population of CSDA-funded services have been receiving services for many years and are not necessarily representative of the newer client population.

¹ The *Queensland Disability Services Act 1992* refers to substantially reduced capacity for communication, social interaction, learning or mobility; the *South Australian Disability Services Act 1993* refers to reduced capacity for social interaction, communication, learning, mobility, decision making or self care; the *Commonwealth Disability Services Act 1986*, the *Australian Capital Territory Disability Services Act 1991* and the *Victorian Disability Services Act 1991* refer to substantially reduced capacity of the person for communication, learning or mobility.

Planning models

Many jurisdictions have regional or State-based planning models to plan around *potential* need for support (see Box 5.1 for examples). These models provide the information essential to planning the distribution and funding of new and existing services. Generally, their purpose is to promote equity in distribution of resources, that is, they often focus on comparative need.

Box 5.1: Examples of jurisdiction planning methods

New South Wales

Funding objectives are determined through a two-tier planning model. This model has been developed to facilitate equitable resource distribution to meet the identified needs of population groups, rather than focusing on programs. The model is applied in determining priorities for distribution of resources, which are not otherwise targeted to meet specific budget or system reform initiatives.

- *Regional Planning Framework and Plans: Regional Planning Officers in each of the Department's six regions work with service providers, service users, carers and local interest groups to establish local needs and priorities and to make annual recommendations for priority targeting of resources.*
- *Population Group Planning (PGP) statistical data model: PGP determines resource distribution on indicators such as current service supply, population demographics and identified needs, including those of particular groups such as non-English-speaking background, Aboriginal and Torres Strait Islander, and rural and remote populations.*

Victoria

The Victorian Policy and Funding Plan identifies target groups and criteria for priority of access to services for all service specifications or types. Estimates of the potential target group or 'client profile' are developed using disability (or synthetic) estimates based on the ABS Survey of Disability, Ageing and Carers and the Population Census. These data are adjusted for client profile factors such as Victorian population size and structure (e.g. age composition), socioeconomic disadvantage across regions, characteristics and service user patterns of existing clients (based on the Commonwealth/State Disability Agreement Minimum Data Set collection), and the current service provider environment.

Source: Jurisdiction Survey response for New South Wales; DisAbility Services Policy and Funding Plan 2001–02, Department of Human Services, Victoria 2001.

Developments in funding and assessment models

Significant work has been undertaken in most jurisdictions in relation to funding and assessment methods. Examples are presented in Box 5.2 for Victoria and Queensland. These examples mostly relate to methods for managing the needs of people who have been accepted into the CSDA service system.

The focus of this chapter is on methods for managing 'unmet need', specifically *expressed* need for support via processes such as needs registers and application processes.

Box 5.2 Examples of recent developments in funding and assessment models

Victoria

Significant re-development work is under way to shift the disability support system from funding of 'places' in specific service types to provision of individualised support packages to promote community inclusion and self-determination of people with a disability. This will involve the consolidation of a number of service activities into broadly two types of individualised support packages, namely Community Support Packages (day program and community participation) and Personal Support Packages (for personal and accommodation support).

The development of these packages will be underpinned and based on broad individual whole-of-life plans, as well as developing individualised support delivery. The new Individualised Funding and Support Framework focuses on working in partnership with people with a disability and their families to identify their needs and aspirations, plans the support for their choice of lifestyle, coordinates support from both formal and informal networks and provides ongoing monitoring and review of the implementation of the individual's package of support. The new framework will also shift the current crisis-driven focus of case management to one of proactive early intervention and targeting people at major life transitions such as transition from early childhood to school, young adults leaving school and people moving from home to supported accommodation options.

Whilst the new framework will provide person-centred, needs-based assessment and planning, a project to develop a mechanism to integrate assessment, planning, priority determination and resource allocation for clients will be undertaken in 2002.

Queensland

Disability Services Queensland (DSQ) has recently commenced a major 18-month project on funding reform. The project aims to:

- *address the viability of non-government organisations to ensure that reliable infrastructure exists to deliver services;*
- *develop a funding framework to accurately forecast future demand and cost models of support;*
- *develop a program framework to provide a coherent and consistent approach to DSQ's funding programs;*

The outputs of this project may include new or revised service and funding models, an assessment of the quantum of funding needed in the long term, revised service level agreements (contracts) and a 'life stages' model of support.

Source: Jurisdiction Survey responses for Victoria and Queensland.

Needs registers and other application processes

There is variation across jurisdictions in the mechanisms used to manage and record expressed need and unmet need. Methods include full registers, partial registers, annual application cycles and local or service-based application processes. Table 5.1 summarises some important aspects of the *main* jurisdiction-wide or holistic methods currently used in each jurisdiction to manage need and unmet need. The issues and implications of the material presented in Table 5.1 are discussed in Section 5.3.

Table 5.1: Jurisdiction-wide method for managing need and unmet need in each State/Territory

	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
NSW	Service Access System (SAS) Commenced September 2000	People with a disability as defined under the <i>Disability Services Act 1993</i> who have identified risk factors and whose needs are unable to be met by attempting to access services provided under the Disability Services Program.	All CSDA service types	Not provided	SAS looks at whether the individual's current situation places: <ul style="list-style-type: none"> • them at significant risk; • their current support arrangements at risk; or • their current level of independence at risk. 	Those people who are assessed as eligible to be provided with support under the SAS are referred to support planners to have a support plan developed. The plan identifies the types of supports that would alleviate the risk factors for the individual and their carer(s).
Victoria	Service Needs Register (SNR) Commenced 1996	People who are eligible for services under the <i>Intellectually Disabled Persons Services Act 1986</i> or eligible for services under the <i>Disability Services Act 1991</i> .	Accommodation support and community access (day activity support)	The SNR application form includes, for example, client demographics, carer details, support needs and services requested. A number of assessment tools including Support Need Assessment and Inventory of Client and Agency Planning have been developed or adopted to enable grouping of clients with similar support needs and resource banding. Whilst these assessment tools can be used as objective and reliable benchmarking tools, they cannot be used as the only mechanism to determine the level of funding required by the individual as they do not account for individual needs or the formal or informal support network established.	The SNR application includes an Application for Consideration of Urgency. Applicants are asked to tick any of nine possible factors: <ul style="list-style-type: none"> • homelessness • recent death of primary care-giver • violence or abuse • age and/or health of primary carer • physical demands of caring for someone with high/complex support needs • significant skill loss impacting on applicant's current care/living arrangements • imminent family breakdown • current care/living arrangements placing the applicant and/or others at risk of abuse or significant harm (financial, physical, emotional) • significant family stresses such as the number of dependents. 	When a vacancy arises, Department of Human Services regional staff consider all urgent applications on the SNR and identify a list of clients compatible with the vacancy profile. In most cases, a shortlist of clients ranging from three to seven is developed and presented to the Vacancy Coordination Panel. The client who is considered most suitable for the vacancy and is the most urgent is allocated the vacancy.

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	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
Qld	Registration, Application and Funding database Commenced November 1998 (formerly known as the Registration of Need database)	People with a disability who are aged 0–65 years, a resident of Queensland, and who need support.	All CSDA service types including flexible packages and individualised approaches under the Adult Lifestyle Support Program, Family Support Program and Post School Services.	The Registration, Application and Funding database and the application forms for programs included in the database (e.g. Adult Lifestyle Support) incorporate the majority of CSDA MDS data items.	<p>Priority rating is based on the following criteria:</p> <ul style="list-style-type: none"> • violence, abuse or neglect • no carer, age/health of primary carer, capacity of carer • person is homeless or has temporary accommodation in a respite facility or alternative emergency accommodation or is inappropriately placed in institutional care (or will be) • an impoverished environment resulting in significant deterioration of abilities. <p>Three other indicators are considered:</p> <ul style="list-style-type: none"> • involvement in criminal justice system • identified need for development or maintenance of the carer's ability to support the person with a disability • an identified need for significant development and improvement in the person's cognitive, physical, behavioural, social and communication abilities. <p>The priority rating is then weighted based on the number of critical indicators and the immediacy of the risk to the person.</p>	Regional priority panels operate across a number of DSQ programs as a means of prioritising individuals applying for support in a fair, equitable and transparent manner. Priority panels comprise both departmental and community representatives with a range of skills and expertise in supporting people with disabilities. Panel members consider the information supplied by each eligible individual against key criteria to determine a priority rating. Outcomes of the priority determination process directly inform the support and funding decisions made by the Department.

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Table 5.1 (continued): Jurisdiction-wide method for managing need and unmet need in each State/Territory

	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
WA	Combined Application Process (CAP) Commenced October 2000	The person with a disability must: have a significant long-term disability; be in need of ongoing help or supervision; be in receipt of, or eligible for, the Disability Support Pension or the Carers Allowance unless the child has formally been assessed as having an intellectual disability; and be under the age of 60 when they first apply for services.	Accommodation support Community access (Alternatives to employment (AEP)) Community support (Intensive family support (IFS) packages —individual support packages where funding is allocated to families either through LAC or agencies depending upon the individual's choice)	The CAP form includes individual and carer information (demographics, supports needed, risk factors (e.g. risk of abuse), current supports; proposed use of funding), i.e. the CAP incorporates the majority of CSDA MDS data items. The Estimate of Requirement for Staff Support Instrument is used in certain circumstances to ensure that funding levels are consistent across people with similar support needs. The Inventory of Client and Agency Planning is currently being investigated for this purpose (see Tasmania).	Applicants are prioritised by Priority Panels and Options Panels using the information provided in the CAP form (i.e. on risks, current supports etc.).	Priority Panel and Options Panel. New applications are considered every 3 months (CAP form). If the person is allocated to AEP they meet with Disability Services Commission staff for a meeting called an Individual Needs Assessment (to determine appropriate level of funding and ways it can be utilised). If the person is allocated to IFS they will be contacted by their service provider (or LAC) to finalise a service/funding plan for consideration by the Commission. An appropriate funding level will then be determined. If the person is allocated to Accommodation Support they will also be contacted via their service provider (or LAC) to finalise a service/funding plan for consideration by the Commission. If the total amount sought is greater than \$30,000, a comparative assessment form, known as the Estimate of Requirement for Staff Support Instrument will also be completed to ensure that the total funding does not exceed maximum levels set for others with similar support characteristics.

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	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
SA	Options Coordination Planning Process Commenced 1996	Each Options Coordination agency focuses on people from particular disability groups (e.g. Sensory Options Coordination only assists people with a sensory disability and complex needs). Some Options Coordination agencies have particular age restrictions to their eligibility criteria (e.g. the Crippled Children's Association Options Coordination agency only assists children under 18 years of age with a physical or neurological disability or an acquired brain injury)	May vary slightly across the five Options Coordination agencies but tends to cover all CSDA service types.	Options Coordination framework and policy guidelines agencies. No assessment tools were provided.	Priority of access guidelines state that the following should be considered in prioritising eligible applicants: <ul style="list-style-type: none"> abilities (e.g. physical, behavioural/social, cognitive and communication); other factors (e.g. non-English-speaking background; Aboriginal or Torres Strait Islander descent; age of person with disability; financial disadvantage); situation (e.g. homelessness; no carer; involvement in the criminal justice system; social or physical isolation; no access to services; dependent child(ren); health, capacity or age of carer; impoverished environment) 	Where a vacancy arises in a funded service that matches a client's assessed needs, the client will be offered the vacancy before a new resource allocation. Options Coordination agencies are responsible for establishing needs, matching them to vacancies and purchasing services (as per the Options Planning Process principles and Options Coordination and Purchasing Client Supports Policy).
Tasmania	Statewide register of unmet need Commenced 1999–00 (although similar format statewide information from 1996–97)	All clients on the register have already been assessed as being eligible for services. They may already be receiving some services funded by the Tasmanian department.	All service types	Day Options support is based on the Inventory of Client and Agency Planning tool, which scores the client's ability to perform a variety of self care and independent living functions. The tool does not map directly to funding levels as it provides support hours ranges.	Not provided	Not provided
ACT	Operates a partial register based on submissions received at any time.	Not provided	All service types	Not applicable	Three-level priority rating system	Not provided

(continued)

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	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
NT	An unmet needs funding round was conducted in 2000-01. The details of applicants who applied for unmet need funding in 2000-01 were entered onto the Department of Health and Community Services Community Care Information System.	People with disabilities, their families and/or service providers were encouraged to complete applications for new or additional funding. If the applicant identified as being Aboriginal or Torres Strait Islander s/he had to be aged under 50 years at the time of onset of the disability. If non-Indigenous the applicant had to be aged under 65 years at the onset of the disability.	All service types	The application for funding form asks individuals about their current situation and support and what is required to assist them to be able to live the lifestyle of their choice. Availability of this funding was consumer-focused allowing for the first time people with disabilities, their families and guardians to apply for funding on their own behalf.	<p>Priority rating is based on the following critical indicators:</p> <ul style="list-style-type: none"> • Current living and support arrangements including homeless and without support; living in temporary accommodation; will be inappropriately incarcerated, institutionalised or removed from family and/or community. • Risk or harm including abuse, violence, exploitation or neglect; deterioration in functioning and/or wellbeing. • Carer circumstances including: high and/or complex support needs of the person with disability; ageing carer; ill-health or stress of carer; sole carer; caring for more than one dependent person. 	An independent panel was appointed with the specific task of assessing and prioritising applications. Panel members were provided with training to undertake this task. The panel included people with disabilities, a representative from a peak disability organisation, a remote area service provider and a senior Departmental officer. In considering each application the panel members were not provided with the applicant's name or residential address to ensure impartiality and confidentiality. The panel prioritised each application against strict criteria and made no recommendations regarding funding allocations.

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	Name of method and commencement date	Who is eligible for inclusion on register/application or submission process?	Which service types does the register/application or submission process cover?	What does the form/assessment look like (plus any tools referred to)?	How is urgency/priority established?	What is the vacancy coordination process?
Common-wealth	Employment Assistance for People with Disabilities Database—Centrelink referrals system Commenced 1 May 1998	From 1 May 1998 Centrelink became responsible for assessing and referring all eligible job seekers to appropriate employment assistance services.	Disability employment services (i.e. open employment and supported employment) and access to rehabilitation services (not CSDA-funded) and Job Network.	Centrelink staff primarily use the Work Ability Tables, or WATs, in the process of referring job seekers to disability employment services, versus other services. A minority of job seekers may have completed the Job Seeker Classification Instrument as a precursor to the WATs.	Service providers manage priority of access. Eligibility guidelines require priority to be given to people aged 15–24 who can work a minimum of 8 hours per week. 'When a consumer reaches a service provider, they may be rejected if there is insufficient funding or if the service provider considers the consumer does not have sufficient work capacity or that the service cannot offer the appropriate type of assistance. These consumers are encouraged to try another service, including gaining another referral from Centrelink. The Centrelink process is one of streaming between services, with service providers actually determining final eligibility.'	Not applicable (there is no vacancy coordination for open and supported employment). Vacancy coordination does not apply in the same sense as for State/Territory services types as all eligible job seekers are referred for assistance and service providers then manage priority of access.

Source: Jurisdiction Surveys, follow up and program guidelines (where available).

5.3 What do these processes tell us about need and unmet need?

Data limitations

Limited data were initially provided from jurisdictions in response to the Jurisdiction Survey (see Appendix 2) in relation to registers, waiting lists or application processes. In an effort to obtain information in a comparable format, the AIHW then sought the following information from all jurisdictions:

Numbers of people on the register/waiting list or making fairly 'centralised' applications as at:

- 30 June 2000; and
- 30 June 2001;

(or over specified relevant time periods).

Characteristics of people on the list at 30 June 2000 and 30 June 2001 as well as characteristics of people coming off the lists in 2000–01:

- age and sex
- disability groups
- support needs
- what they say they need (what list they are on/what they applied for)
- carer age (other details?)
- indigenous status
- priority rating (of the jurisdiction – with interpretation if not already sent to AIHW)
- what services the person received (if anything) (that is, to estimate total number of people who were on the list prior to July 2000 and started receiving services in 2000–01).

Some information was received from nearly all jurisdictions in response to this request. Only Queensland was able to provide all of the information in the requested format.

Table 5.1 reveals that, for a number of reasons, it is not possible to simply pool data provided from the various jurisdictions in relation to their main jurisdiction-wide method for managing need in order to indicate *unmet need* in the broad service type areas at a national level. These reasons include:

- **Registration/application processes and their scope vary.** Queensland has a full register for all service types funded under the CSDA. That is, access to any service funded by Disability Services Queensland must be obtained via the Disability Services Queensland (DSQ) Register and associated Registration, Application and Funding database. New South Wales, Victoria, Western Australia, South Australia and Tasmania have established processes for registering need for certain service types. The Northern Territory ran a submission process for unmet needs funding in 2000–01. The Australian Capital Territory has a partial register that records applications from service providers for additional funds. The Commonwealth, through Centrelink, has records of all people referred by Centrelink to specialist disability employment services (that is, supported or open employment services).

- **Eligibility for inclusion on the 'lists' (or to apply for funding) varies.** In Tasmania, a person has already been assessed as eligible for service before they are included on the statewide register of unmet need. In the Commonwealth process, applicants referred to disability employment services by Centrelink have already been assessed for eligibility for a CSDA employment service via the Work Ability Tables (if ineligible for disability employment services, applicants are referred to other suitable services such as the Job Network). In New South Wales, only people with a disability defined under the Disability Services Act who have identified risk factors *and* whose needs are unable to be met by attempting to access services provided under the Disability Services Program are eligible for inclusion on the Service Access System database.

Data from Queensland and the Northern Territory include people who have been or may be at some point judged as ineligible for CSDA services. Ineligible people also appear to be included on the main 'list' in the remaining jurisdictions with available data in this area (that is, New South Wales, Victoria, and the Australian Capital Territory).

Thus, the data provided by Tasmania and New South Wales from their main registration or application process include a restricted number of applicants compared with the available data from other jurisdictions. The Commonwealth data presented are different from other jurisdictions as they represent only those jobseekers referred for disability employment assistance (following eligibility assessment using the Working Ability Tables (WATs)) and do not include those jobseekers who were referred to other services such as Job Network. In this sense, these figures also represent a restricted number of applicants, compared with available data from other jurisdictions (that is, applicants on some State/Territory registers may eventually be judged as being ineligible for CSDA services but eligible for other services such as HACC).

- **Assessment processes vary.** A range of assessment tools is used within jurisdictions, depending on factors such as service type and agency preference. Apart from the application forms developed by jurisdictions, it appears rare for jurisdictions to recommend the use of particular assessment tools across the sector. For example, the following assessment tools were the only ones referred to in response to the Jurisdiction Survey:
 - the Inventory of Client and Agency Planning (ICAP), used for day options in Tasmania to provide a score around clients' ability to perform a variety of self care and independent living functions (the tool does not map directly to funding levels as it does not relate to an actual number of hours of support required but rather a range of hours);
 - the Estimate of Requirement for Staff Support Instrument (ERSSI), used in Western Australia as part of the process of estimating accommodation support costs (Western Australia is also investigating the ICAP);
 - the Support Needs Assessment and the ICAP, used in relation to some individualised packages in Victoria (for people eligible under the *Intellectually Disabled Persons Services Act 1986* only) to enable grouping of clients with similar support needs and resource banding;
 - the WATS, used by Centrelink on behalf of the Commonwealth, to determine which jobseekers are referred to specialist disability employment services; and
 - the Disability Pre-employment Instrument and the Disability Maintenance Instrument used by the Commonwealth (in conjunction with the Job Seeker

Classification Instrument administered by Centrelink) in the Case Based Funding Trial for employment services, to determine funding levels.

The tools mentioned are generally designed for use in quite specific circumstances. They are often used by funding departments to enable grouping of clients with similar support needs to ensure that clients with similar needs receive similar levels of funding.

There is therefore little standardisation across jurisdictions in assessment tools or application processes, except where CSDA MDS data items are included in application forms. The practice of including CSDA MDS data items in application forms varies across jurisdictions but appears to be considered most important in Queensland and Western Australia.

- **Methods for prioritising applicants and managing vacancies vary.** Many application forms advise applicants that eligibility alone will not ensure access to services, that is, that access to services also depends on priority or urgency of need. All jurisdictions have established mechanisms for prioritising applicants, generally based on urgency of need rather than need alone. Criteria used to establish urgency are very similar across the country and generally include factors such as: age or health risks to the primary carer; homelessness; risk of abuse or neglect; risk of diminishing abilities due to an unsatisfactory environment; and contact with the criminal justice system. Most jurisdictions use a system of priority committees or panels, usually at a regional level, to establish priority (for example, Queensland, Victoria, New South Wales, Tasmania and Western Australia).

Data available from jurisdictions

A selection of the data provided by jurisdictions in response to the above information request is presented in Tables 5.2, 5.3 and 5.4. Some caution should be exercised in comparing the data provided from each jurisdiction as the process, scope and eligibility arrangements for each process vary widely (see above and Table 5.1). In addition, some jurisdictions expressed concern about using waiting list data to indicate unmet need (for example, the Northern Territory was concerned that not all potential applicants such as people living in rural areas and Indigenous people had access to the unmet needs funding process). Finally not all people on registers are necessarily eligible for CSDA-funded services and not all people who need support will apply for inclusion on registers.

With these data limitations in mind, the following tables are presented to illustrate both the type of information that is currently available from unmet need registration and application processes and the type of information that could be available if consistent methods for managing need were employed across jurisdictions. Jurisdiction-specific data from Table 5.4 are extrapolated to the Australian population in the process of 'triangulating' estimates of unmet need developed using other data sources (see Chapter 7).

Numbers of applicants

Table 5.2 presents available data on the number of people included in the jurisdiction's main register or application process at 30 June 2000 and 30 June 2001, along with the number and percentage of people that were moved off the 'list' in this period. The table reveals the following:

- Baseline information about the number of people on 'lists' at 30 June 2000 (that is, prior to the injection of 'unmet needs' funding) is only available for Victoria, Queensland and one South Australian Options Coordination agency. Information is not available for other

jurisdictions either because the main method is a relatively new phenomenon or because data are not routinely available from their current systems in the requested format.

- Substantially more information was available in relation to people on 'lists' at 30 June 2001. The number of people on the lists varies widely across jurisdictions.
- About half the jurisdictions were able to provide some information on the number of people moved off the 'list' in 2000–01. It is difficult to comment with confidence on the proportion of people moved off lists during 2000–01 as there are definitional differences across States. For example, in Queensland and the Northern Territory, the number of people removed from the list in 2000–01 only includes people who were assessed as eligible and received funding. In Victoria, in addition to these people, a small number of those moved off the list may have withdrawn from the list due to change in circumstances, moving, death or inappropriate assessment, etc. The New South Wales figure of 523 applicants moved off the list in 2000–01 is not included in the table as it specifically includes all those judged as eligible, rather than those who had received funding at 30 June 2001. Finally, it should be noted that people who are 'moved off a list' are not necessarily having all of their needs for formal service being met (that is, in the Northern Territory, although a person received some service in 2000–01 they may appear on the 'list' in 2001–02).
- Nevertheless, for State/Territory services, the registers or application processes indicate that there were between six and 24 times more people seeking services in 2000–01 than were removed from the list (usually because they were offered a service). While cross-jurisdiction comparisons are not sensible, jurisdiction-specific figures suggest that unmet needs still exist and that long waiting times are likely. This is consistent with the information provided at peak discussions (see Chapter 7) and some additional information provided by jurisdictions. For example, the Victorian response directed the AIHW to a question in the Victorian parliament in October 2001 (VICHANSARD 2001). The official record of the question states that 'for the year ending 30 June 2001, 234 people waiting for a Shared Supported Accommodation place, were removed from the Service Needs Register. These people either received a place in a Shared Supported Accommodation facility or a package of tailored services which met their accommodation needs. People who received a Shared Supported Accommodation place or package of tailored service waited an average of 810 days. One person was relocated from an institutional to a community-based option'.
- Data from the Commonwealth registration process for employment services indicate that people who apply to Centrelink for employment assistance *and* who are subsequently referred to specialist disability employment services are very likely to receive a service (around 80%). This is at least partly because people who are referred to specialist disability employment services have already undergone a streaming process in order to obtain that referral (that is, their eligibility has been assessed via the Job Seeker Classification Instrument, Work Ability Tables and involvement of a Centrelink Disability Officer or Disability and Carer Team member).

Priority ratings of applicants

Table 5.3 provides details of the priority ratings for applicants on 'lists' at June 2001. It is clear that stringent priority criteria apply in all States and Territories, relating to the risk of immediate family or informal support systems breaking down. These strict priority criteria appear to be designed to lower the expectations of applicants and/or to genuinely reflect a

system that can only deal with the most urgent cases. The data presented in Table 5.3 show that, for example:

- 29% of people on the Queensland Registration, Application and Funding database are rated as being priority 1 (the highest rating, requiring immediate intervention);
- 42% of people on the South Australian Adult Physical and Neurological Options Coordination database have priority 1 (the highest rating, indicating immediate and high risk);
- 36% of people on the South Australian Intellectual Disability Services Council Options Coordination database are rated as having urgent priority (the highest rating); and
- 65% of people on the Victorian Service Needs Register for accommodation support (HomeFirst) are rated as urgent priority (the highest rating).

Where available, priority ratings are also presented for people coming off 'lists' in 2000-01. The data show that:

- in Queensland, of the people coming off the register in 2000-01, 71% (138 from 194 people) had the highest priority rating '1'; and
- in South Australia, the Intellectual Disability Services Council Options Coordination data indicate that, of the people coming off the 'list' in 2000-01, 71% (48 from 68 people) had the highest priority rating 'urgent'.

In both Queensland and South Australia, a person's chance of being moved off the list during the 2000-01 year diminished as their priority rating decreased.

The limited data in Table 5.3 strongly suggest both that there are remaining unmet needs for CSDA services and that these unmet needs are often experienced by people and families who have been judged as having the jurisdiction's highest possible rating (for example, critical, urgent, immediate).

Service types or supports requested by applicants

Table 5.4 details the type of service requested by applicants on the main jurisdiction-wide 'list' at 30 June 2001. The table shows that in most cases data cannot be used to indicate unmet need in each of the broad CSDA service type categories at a jurisdiction level. This is because needs are not described consistently across jurisdictions, nor in terms of CSDA MDS service types. Although data are incomplete or missing for some jurisdictions, the table suggests that there are substantial levels of need in most of the major service type areas, particularly accommodation support and community access.

The data in Table 5.4 should not be compared across jurisdictions for the reasons outlined above. However, the data are used in Chapter 7 to compare with other estimates of unmet need for specific service types. This is achieved by extrapolating jurisdiction-specific figures for the number of people requesting a specific service type to the entire Australian population.

Table 5.2: Main jurisdiction-wide method for managing need: people on 'lists' and people moved off 'lists' 2000, 2001 – available data

State/Territory	People on list at 30 June 2000	People on list at 30 June 2001	People moved off the list in 2000–01 ^(a)	% of people moved off list/all people on list at 30 June 2001
NSW (SAS)	Not applicable ^(b)	1,470	— ^(c)	—
Vic (SNR)	3,567	4,381	764	17%
Qld (Registration, Application and Funding database)	4,153 ^(d)	4,589 ^(d)	194 ^(e)	4%
WA (CAP)	Not applicable	Not applicable	Not applicable	Not applicable
SA (Options Coordination)^(f)				
<i>Sensory Options Coordination</i>	<i>No register</i>	<i>No register</i>	<i>No register</i>	<i>Not available</i>
<i>Adult Physical and Neurological Options Coordination^(g)</i>	<i>Not provided</i>	310	<i>Not provided</i>	<i>Not available</i>
<i>Brain Injury Options Coordination^(h)</i>	97	24	<i>Not provided</i>	<i>Not available</i>
<i>Crippled Children's Association Options Coordination⁽ⁱ⁾</i>	<i>Not provided</i>	57	<i>Not provided</i>	<i>Not available</i>
<i>Intellectual Disability Services Council</i>	<i>Not provided</i>	495	68	14%
<i>Total available data</i>	<i>Not available</i>	886 ^(l)	<i>Not available</i>	<i>Not available</i>
Tas (statewide unmet needs register)	Not provided	Not provided	Not provided	Not available
ACT (unadvertised application process)	Not provided	29	Not provided	Not available
NT (advertised application process)	Not applicable	359	53 ^(k)	15%
Commonwealth (Centrelink data)				
<i>Open employment</i>	<i>Not provided</i>	16,413 ^(l)	13,074 ^(m)	80%
<i>Supported employment</i>	<i>Not provided</i>	2,206 ^(l)	1,806 ⁽ⁿ⁾	82%

(a) It is not always clear from information provided if people moved off lists have actually received services yet or have only formally been judged as eligible and high priority.

(b) The New South Wales mechanism for recording unmet need (SAS) had not commenced operation at June 2000.

(c) 523 applicants had been assessed as eligible at 30 June 2001. By 18 December 2001, 147 Support Plans had been approved and quality assured. In most cases an endorsed Support Plan is required before supports can be purchased. Data are limited as Support Plans only began to be developed and returned to SAS in September 2001 (New South Wales Jurisdiction Survey response).

(d) Total unfunded applicants on the Registration, Application and Funding database.

(e) Funded people coming off lists refers to those unfunded individuals who were registered prior to June 2000, who then received funding during 2000–01. It does not include those individuals who registered during 2000–01 who also received funding.

(f) Options Coordination agencies do not have a centralised registration or application process. Data are presented for the five Options Coordination agencies separately, where available.

Table 5.2 notes (continued)

- (g) Adult Physical and Neurological Options Coordination data are for August 2001, rather than June 2001.
- (h) Brain Injury Options Coordination data are for October 2001, rather than June 2001. The figures are for Priority 1 clients only and do not include a number of people in hospitals, aged care homes and institutions who have high support needs and are inappropriately placed. The number also does not include a number of people awaiting the availability of shared accommodation in the community with the support hours attached. These people are currently living with family who provide a large degree of support.
- (i) Crippled Children's Association Options Coordination data are the remaining clients on the unmet needs register following allocation of 2000–01 unmet needs funding.
- (j) Note that this total does not include data from all five Options Coordination agencies.
- (k) 79 people were assessed as eligible for support but only 53 received funding in 2000–01 and moved to an active care phase.
- (l) Referrals to Centrelink for open employment and supported employment in 2000–01.
- (m) Of the customers whose referrals to open employment were not accepted by 30 June 2001, 2,249 (14%) were outstanding and 1,090 (7%) were not accepted (by the service provider). Of those not accepted 396 (36%) were not accepted because there was 'no vacancy'. However, some customers have more than one referral and while one of their referrals may not be successful because of 'no vacancy' they may have been accepted by another service. This could mean that the number of 'no vacancies' is overestimated. Referrals marked 'outstanding' may include consumers who will ultimately be accepted.
- (n) Of the customers whose referrals to supported employment were not accepted by 30 June 2001, 312 (14%) were outstanding and 88 (4%) were not accepted (by the service provider). Of those not accepted 28 (32%) were not accepted because there was 'no vacancy'. However, some customers have more than one referral and while one of their referrals may not be successful because of 'no vacancy' they may have been accepted by another service. This could mean that the number of 'no vacancies' is overestimated. Referrals marked 'outstanding' may include consumers who will ultimately be accepted.

Note: The processes used in each jurisdiction to register need (or unmet need) vary in terms of who is eligible to be included on the list, which service types the list is used to manage demand for, the comprehensiveness of the approach etc. See Table 5.1, summarising the main methods used in each jurisdiction, for accompanying detail.

Source: Jurisdiction Survey responses and additional information requested from jurisdictions.

Table 5.3: Main jurisdiction-wide method for managing need: priority ratings for applicants on 'lists' at June 2001 and coming off lists in 2000-01 – available data

	Priority rating	Applicants with specified priority rating at June 2001	Applicants with specified rating coming off the list in 2000-01
NSW	Not available	Not available	Not available
Victoria^(a)	U = Urgent H = High L = Low	Day activities (ATSS—Adult Training and Support Service) U = 82% H = 16% L = 2%	Not available
		Accommodation support (SSA—Shared Supported Accommodation) U = 33% H = 20% L = 47%	Not available
		Accommodation support (HomeFirst) U = 65% H = 22% L = 13%	Not available
Qld	1 = people in extremely critical and urgent need who require some form of immediate intervention for there to be any likelihood of the situation improving. 2 = people who are very likely to be in this situation in the near future. 3 = people who have a potential risk of experiencing critical and urgent need in the longer term. 4 = people with acknowledged need for support that will enhance their general quality of life. I = Ineligible N = Not rated W = Withdrawn	1 = 1,347 (29%) 2 = 694 (15%) 3 = 1,312 (29%) 4 = 922 (20%) I = 191 (4%) N = 121 (3%) W = 2 (0%)	1 = 138 (71%) 2 = 38 (20%) 3 = 12 (6%) 4 = 6 (3%) I = 0 N = 0 W = 0

(continued)

Table 5.3 (continued): Main jurisdiction-wide method for managing need: priority ratings for applicants on 'lists' at June 2001 and coming off lists in 2000-01 – available data

	Priority rating	Applicants with specified priority rating at June 2001	Applicants with specified priority rating off the list in 2000-01
WA	Not applicable	Not applicable	Not applicable
SA			
<i>Sensory Options Coordination</i>	Not available	Not available	Not available
<i>Adult Physical and Neurological Options Coordination</i> ^(b)	Crisis = needs immediate response 1 = Immediate and high risk in any of the six specified areas. ^(c) 2 = High to moderate risk in the near future in areas 1-6, and/or immediate need for development of maintenance of carer's ability to support the person with the disability. 3 = Potential moderate to low risk in the long term in areas 1-6 and/or a (future) need for development and improvement in cognitive, physical, behavioural, social, communication abilities. 4 = Enhancement of general quality of life.	Crisis = 0 1 = 131 (42%) 2 = 140 (45%) 3 = 34 (11%) 4 = 5 (2%)	Not available
<i>Brain Injury Options Coordination</i>		Not available	Not available
<i>Crippled Children's Association Options Coordination</i>		Not available	Not available
<i>Intellectual Disability Services Council</i>	U = Urgent I = Immediate P = Planned L = Low priority	U = 180 (36%) I = 176 (36%) P = 104 (21%) L = 34 (7%)	U = 48 (71%) I = 9 (13%) P = 10 (15%) L = 1 (1%)

(continued)

Table 5.3 (continued): Main jurisdiction-wide method for managing need: priority ratings for applicants on ‘lists’ at June 2001 and coming off lists in 2000–01 – available data

	Priority rating	Applicants with specified priority rating at June 2001	Applicants with specified priority rating off the list in 2000–01
Tasmania	Not available	Not available	Not available
ACT	<p>1 = urgent/critical/political (harm/homelessness almost certain if not implemented, crisis)</p> <p>2 = important (potential for crisis/harm/homelessness in next 12 months or significant level of unmet need causing significant restriction to wellbeing or lifestyle)</p> <p>3 = desirable (adding to current services, will not cause harm if not implemented)</p>	<p>1 = 13 (72%)</p> <p>1–2 = 1 (6%)</p> <p>2 = 4 (22%)</p> <p>3 = 0 (0%)</p>	Not available
NT	<p>1 = immediate—experiencing situation now</p> <p>2 = short term—likely to experience situation within next 12 months</p> <p>3 = long term—likely to experience situation in next 12 months or more</p> <p>4 = all other applications</p> <p>No priority</p> <p>All priority 1 applications are then assessed on their capacity to cope with their overall situation without funding support.</p> <p>A = none</p> <p>B = minimal</p> <p>C = some</p> <p>D = sufficient</p> <p>E = significant</p>	<p>1A = 20 (6%)</p> <p>1B = 36 (10%)</p> <p>1C = 56 (16%)</p> <p>1D = 16 (4%)</p> <p>1E = 7 (2%)</p> <p>2 = 88 (25%)</p> <p>3 = 43 (12%)</p> <p>4 = 89 (25%)</p> <p>No priority = 4 (1%)</p>	Not provided
Commonwealth	Not available	Not available	Not available

(a) Percentages are of current referrals to the Service Needs Register (i.e. at February 2002).

(b) Adult Physical and Neurological Options Coordination data are for August 2001, rather than June 2001.

(c) Immediate and high risk in any of the following areas: safety to others (particularly carer); health of self or others (particularly carer); breakdown of family; physical or emotional abuse; institutionalisation; and deterioration of cognitive, physical, behavioural, communication abilities.

Source: Jurisdiction Survey responses and additional information requested from jurisdictions.

Table 5.4: Main jurisdiction-wide method of managing need: service types requested by applicants on 'lists' at June 2001 – available data

	Accommodation support	Community support	Community access	Respite	Other	Employment	Total (applicants)
NSW^(e)	303 (supported accommodation) 166 (in-home support)	137 (behaviour support)	—	231 (flexible respite)	89 (transport) 7 (support dependents) 3 (other)	Not applicable	Not provided
Victoria (recommended service type)	3,605 (supported accommodation)	Not applicable	776 (ATSS)	Not applicable	Not applicable	Not applicable	4,381 ^(b)
Qld	2,347 (personal care) 2,770 (household management)	3,143 (recreation)	2,623 (using local facilities and services) 3,427 (community access)	—	—	Not applicable	4,589
WA	Not available	Not available	Not available	Not available	Not available	Not applicable	Not available
SA							
<i>Sensory Options Coordination</i>	Not provided	Not provided	Not provided	Not provided	Not provided	Not applicable	Not provided
<i>Adult Physical and Neurological Options Coordination</i>	164 (personal care) 196 (domestic assistance)	47 (recreation)	10 (day options)	62 (respite)	—	Not applicable	310
<i>Brain Injury Options Coordination</i>	Not provided	Not provided	Not provided	Not provided	Not provided	Not applicable	24
<i>Crippled Children's Association Options Coordination</i>	Not provided	Not provided	Not provided	Not provided	Not provided	Not applicable	57
<i>Intellectual Disability Services Council</i>	375 (accommodation) 59 (day options and accommodation)	—	61 (day options) 59 (day options and accommodation)	—	—	Not applicable	495
Tasmania	Not provided	Not provided	Not provided	Not provided	Not provided	Not applicable	Not provided

(continued)

Table 5.4 (continued): Main jurisdiction-wide method of managing need: service types requested by applicants on 'lists' at June 2001 – available data

	Accommodation support	Community support	Community access	Respite	Other	Employment	Total (applicants)
ACT	9 (supported accommodation) 1 (residential accommodation) 1 (accommodation support)	1 (structured support and case management) 1 (service coordination)	1 (day programs)	2 (respite care) 1 (replacement respite care)		Not applicable	17 ^(b)
NT	30 (supported accommodation only) 97 (combined supported accommodation and community support)	97 (combined supported accommodation and community support)	65 (community access in combination with other supports) 60 (community access only)	123 (respite)		Not applicable	375
Commonwealth	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	16,413 (open employment) 2,206 (supported employment)	18,619

(a) Information on supports requested is not recorded in the SAS database. The information in Table 5.4 was from information provided by New South Wales from SAS eligibility and support plan quality assurance reports (i.e., it relates to a sub-set of total applicants). Information was not provided to show how many applicants the supports information relates to.

(b) This total differs slightly from that provided in Table 5.2.

Note: The number of supports requested may exceed the number of people on lists (where supports are recorded for all people on lists) or be far less than the number of people (where supports are only recorded for approved applicants).

Source: Jurisdiction Survey responses and additional information requested from jurisdictions.

5.4 Summary and discussion

Jurisdiction methods for managing expressed need generally exist alongside planning mechanisms around potential need (usually based on population data) and developments in assessment and funding methods. Only the main method for managing expressed need is discussed in detail in this chapter.

Processes for managing expressed need vary across jurisdictions in terms of the process, scope, application and assessment methods. Across all jurisdictions, except the Commonwealth, there is a theme of managing according to urgency of need rather than need alone. That is, all States/Territories have priority rating systems and generally acknowledge in application processes that there may be more people eligible than will immediately be able to receive services. The Commonwealth, on the other hand, is dealing with a specific service type (employment), and only considers for its service those passing a service eligibility test.

Jurisdictions thus employ different processes for managing expressed need, record the associated data in different ways and have varied capacity for retrieving and collating such data. Some jurisdictions have concerns about the limitations of their available data. Their concerns include that not all people on the lists are necessarily eligible, some people who would be eligible will not be on the list because they have been discouraged, do not have access due to language, or geographical barriers, and so on. In combination, these factors mean that data must be analysed with caution.

Nevertheless, the data from registration lists provide very useful information to support some of the other data sources used in this study. In particular, the data on service types requested by people on the jurisdiction 'lists', when extrapolated to the national level, can be used to 'triangulate' the estimates of remaining shortfalls (see Chapter 7).

It is promising to note that two jurisdictions have incorporated the vast majority of CSDA MDS items into their main registration or application processes (Queensland and Western Australia). If other jurisdictions made more use of the CSDA MDS data set (recently redeveloped by the AIHW in cooperation with the National Disability Administrators), it is possible that registration data could be more readily comparable in future. This could enable jurisdictions to share information relatively easily and allow the regular compilation of national data on unmet need. The development of needs registers and processes in recent years is generally a welcome development and, if coordinated across jurisdictions more closely in future, could provide very useful information on which to base ongoing monitoring of unmet need.

The value in using CSDA MDS data items is particularly notable in relation to the 'support needs' data item. This data item asks agencies to describe the level of support a person requires in a range of life domains, including self care, mobility, communication, interpersonal interactions and relationships, working, education and domestic life. These life domains and the associated scale have been developed to be consistent with the International Classification of Functioning, Disability and Health (ICF) and the ABS Survey of Disability, Ageing and Carers. Previous AIHW work on the CSDA MDS support needs question (commissioned by the National Disability Administrators) found that most assessment tools used in CSDA-funded agencies can be mapped to the life domains described in the ICF, and related to some of the measures in the ABS Survey of Disability, Ageing and Carers. One jurisdiction noted in their response that 'the real issue with costing is assessment of support needs and until there is national consistency in that it will be

difficult to develop a funding formula acceptable to all jurisdictions'. As jurisdictions strive to increase consistency in the way applicants and clients are assessed for services, it should be noted that a consistent framework into which a range of assessment tools can be mapped already exists in the redeveloped CSDA MDS. Support needs information will be available for all CSDA clients in 2003.

In conclusion, the numbers of people on lists, in combination with information about their priority rating and limited information about the priority rating of people actually moved off lists, strongly suggest remaining unmet needs in the sector. This is consistent with peak discussions.