

# Disability Support Services e-newsletter

No. 66 August 2017

ISSN 2253-1386

## From Toni Atkinson Group Manager Disability Support Services



**Welcome to our mid-year newsletter.**

The DSS team has been busy over the last couple of months, working hard to ensure we are well placed for the introduction of the pay equity settlement for our disability support workers. This significant settlement sees a country-wide increase in disability support workers' pay and recognises the value these workers add to the lives of people with a disability. We are excited to be able to deliver this new funding across the health sector.

The system transformation co-design process undertaken earlier in the year was an enjoyable experience. It was great to consult with sector colleagues (disabled people, family members, providers and other agencies) on how we can make the system better for its users. There was great energy and commitment over the two months of the co-design process, and I look forward to the next steps of the system transformation work.

We were also pleased to land *Transforming Respite* – the Ministry of Health's new respite strategy. I would like to thank everyone from the health sector who helped us develop this strategy – your feedback and willingness to share your stories helped us focus on where we needed to make changes.

The Community Residential Strategy and the Whāia Te Ao Mārama (Māori Disability Action Plan) refresh have also been out for consultation over the past month or so, and we are now working through the feedback to finalise these documents. Again I want to thank all of you who provided input and considerable time and energy to get these strategies over the line.

Our focus over the new financial year will be to make sure we are able to progress the strategies while looking forward to the system transformation work and discussing options for what support might look like in the future. We welcome you on this journey with us.

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## Christchurch

**Joanna Martino: EGL Lead, Ministry of Health**

**Christchurch's Enabling Good Lives (EGL) team are amazed at how this year is racing by. It has been a busy quarter, following up with schools to capture young people who might not have been referred and ensuring that these later referrals have a good start to their EGL journey.**

Our independent facilitators have been super busy supporting our participants with self-directed planning, making connections and activating participants' individual budgets. The collaboration between the facilitators, LifeLinks Needs Assessment and Service Coordination (NASC) and providers is supporting great outcomes as young people create the 'Good Lives' of their choosing. Our young participants are linked into many mainstream community groups, performing their music, making local connections with people in their communities, completing their studies, planning their next steps and managing their own budgets. There has been nearly 100 percent uptake of independent facilitation by this year's participants.

Our facilitators are also exploring local opportunities for community development by visiting Christchurch and surrounding community centres to share the EGL principles and vision and explain what we do. This also enables teams to build and share resources and has resulted in invitations from and connections with various networks.

As I leave the Ministry of Health, I wish everyone well and remain excited by the transformation of the disability system, which will be based on the EGL vision, principles and approach.



Independent facilitators

## Waikato

**Initial planning for the EGL Waikato demonstration clearly emphasised the importance of engaging with Māori. A report was recently conducted to describe the EGL Waikato approach to working with Māori.**

### The approach

The leadership group made a clear decision to ensure that disabled Māori and their whānau could access the demonstration. The original co-design plan identified working with disabled Māori and their whānau as one of the four important action areas of the demonstration. A Māori action plan was developed, with the following clear goals and strategies.





- Connectors/Tūhono are skilled, committed and responsive to Māori.
- Information is provided to disabled Māori and their whānau in an appropriate and timely manner.
- Connectors/Tūhono and EGL Waikato develop strong relationships with hapū, iwi, Māori organisations and Māori provider networks across Waikato.
- EGL Waikato ensures disabled Māori can access EGL so that EGL outcomes benefit Māori and their whānau.
- Disabled Māori leadership is promoted and supported.

## Actions that worked well

Working in ways consistent with tikanga was important. We focussed on developing good relationships and processes.

Having a clear intention and an action plan with deliverables and targets was an advantage – all actions in the plan were completed.

Early on, we ensured that we included the voices of disabled Māori, whānau and Māori providers in our leadership group. A key local kaumātua, Tame Pokaia, was approached and generously offered to support the demonstration. In addition, two of the five Connector/Tūhono staff appointed were Māori. This brought extensive local connections, experience, knowledge and credibility to the team. We also worked to connect with Māori networks and disabled Māori and their whānau across the Waikato region. As a result, many disabled Māori taking part in the demonstration have been supported to develop leadership in their lives.

The Waikato evaluation was co-designed locally, and a local Māori evaluator was contracted to assist. One of the six key evaluation questions related specifically to Māori and their whānau. The evaluation found that disabled Māori were well represented and early adopters of EGL Waikato.

## Areas for improvement

The leadership group recognised that they could have started connecting with Māori earlier: while they were willing, they were also uncertain about where to start. The size of the co-design workload also contributed to action being slower to begin.

While disabled Māori leadership has been promoted and supported in the demonstration, this effort has generally focussed on individuals and their whānau. We held two successful gatherings for Māori participants to meet and share their experiences. However, more hui opportunities could have been created.

The leadership group believes we are only just beginning to provide adequate support for Māori providers to develop a range of local hosting options for disabled Māori.

**Contact: [Kate.Cosgriff001@msd.govt.nz](mailto:Kate.Cosgriff001@msd.govt.nz)**

# DSS system transformation

**The high-level design to transform the disability support system has been shared with the sector in a Cabinet paper.**

A co-design group, including disabled people, family/whānau, disability representatives and officials, worked intensively between April and June to create the framework. The framework differs from the current system in a number of ways.

- It takes an **explicit social investment approach**, which means investing early to ensure better long-term outcomes.
- It aims to transform the existing system (rather than adding a new layer).
- It is across government and will enable disabled people and their families/whānau to receive seamless government disability support.



Participants at the final co-design workshop.

It builds on what we have learned from the EGL demonstrations in Waikato and Christchurch and innovative practices from New Zealand and overseas and will include:

- an information hub with a number of ways to make contact and be contacted
- capability funding for disabled people and their families/whānau to build their skills
- a new funding model that reduces assessment and provides opportunities for investment, as well as increasing choice and control
- supports to expand peer and family/whānau networks
- an easy-to-use information collection tool that tracks how things are going for disabled people, their families/whānau, providers and the system
- a personal information profile managed by disabled people and their families/whānau
- a monitoring approach that reduces compliance and is proportionate to the amount of funding people receive
- national and local governance groups with disabled people and family/whānau representatives.

There is still a lot to do before the framework is rolled out in MidCentral\* on 1 July 2018. The team will be working on the detailed design of the system, creating the Enabling Good Lives team, gathering data on costs and outcomes, testing the design's effectiveness, establishing and working with the MidCentral leadership group and engaging with the local disability community.

There is no change to contracts at this stage, and the team is committed to working with NASCs, DIAS, providers and service organisations so disabled people and their families/whānau have the supports they need. Every part of the system seems engaged with and excited about this work!

If you are interested in taking part in the detailed design phase, please contact us at [STfeedback@moh.govt.nz](mailto:STfeedback@moh.govt.nz)

**Contact: Sacha O'Dea, Programme Lead, Ministry of Health**

\*The MidCentral area includes Palmerston North, Horowhenua, Manawatu, Otaki and Tararua districts.

## Pay equity settlement rolls out

**Most of New Zealand's eligible care and support workers have now received their first pay under the new minimum wage rates guaranteed by the Care and Support Worker (Pay Equity) Settlement Bill.**

The Government announced the \$2 billion settlement on 18 April 2017 to redress the systemic undervaluation of 55,000 care and support workers in New Zealand's aged and disability residential care and home and community support services.

The settlement also supports increased qualifications and reduced turnover in the sector, which will result in better care for New Zealanders.

From 1 July, eligible workers received a pay rise of between 15 and 50 percent, depending on their qualifications and/or experience. Workers on the minimum wage of \$15.75 per hour moved to at least \$19 per hour – a 21 percent pay rise. This will result in increases to their take-home pay of at least \$100 a week, or more than \$5,000 a year.

See the care and support workers pay equity settlement page on the Ministry of Health website [www.health.govt.nz/new-zealand-health-system/care-and-support-workers-pay-equity-settlement](http://www.health.govt.nz/new-zealand-health-system/care-and-support-workers-pay-equity-settlement) for more information.

**Contact:** [Joanna\\_Martin@moh.govt.nz](mailto:Joanna_Martin@moh.govt.nz)

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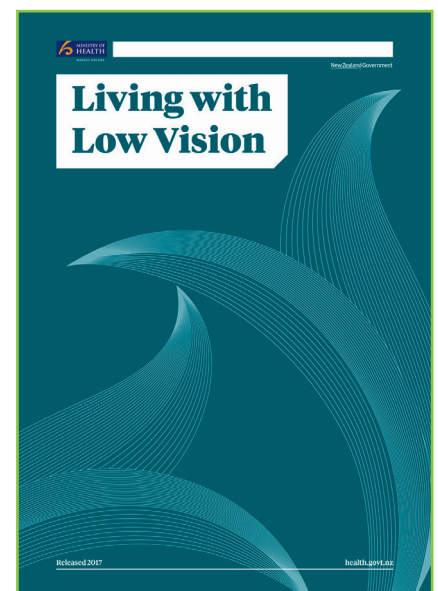
## Information now available for people with low vision

**The Ministry of Health has produced a new *Living with Low Vision* guide for people experiencing reduced or low vision.**

The guide provides information about managing daily tasks, types of equipment that may help, as well as low vision rehabilitation options. Losing vision doesn't mean giving up your usual activities, but it can mean finding new ways of doing them.

It's estimated that around 54,000 New Zealanders live with low vision and blindness. Low vision is sight loss, reduced vision or vision loss that cannot be corrected or improved by glasses, medicine or surgery. It makes everyday tasks difficult.

People with low vision may lose their perception of depth, making it difficult to identify the position of steps, for example. Their peripheral vision may be reduced, making them more prone to bumping into things. Their central vision could be blocked by spots, which makes it hard to identify landmarks or obstacles. They may lose their ability to see contrast so they cannot see a hole in a pavement or a kerb at the edge of a street. People with low vision can also have difficulty reading and writing, identifying faces or seeing at a distance.



The publication sets out a number of practical ways people can manage their daily tasks including clever ways of using lighting, contrast and inexpensive aids and devices. Inexpensive aids and devices include large-print books, large-numbered clocks and different-coloured measuring cups. There is also a range of computerised or electronic equipment that can help, including large-print keyboards, speech recognition software and electronic magnifiers.

The guide includes contact details for organisations that can help. It is available in both audio and print from the Ministry of Health website at: [www.health.govt.nz/publication/living-low-vision](http://www.health.govt.nz/publication/living-low-vision)

**Contact: Marianne Linton, Development Manager, (04) 496 2201**

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## DSS provider invoice rejections

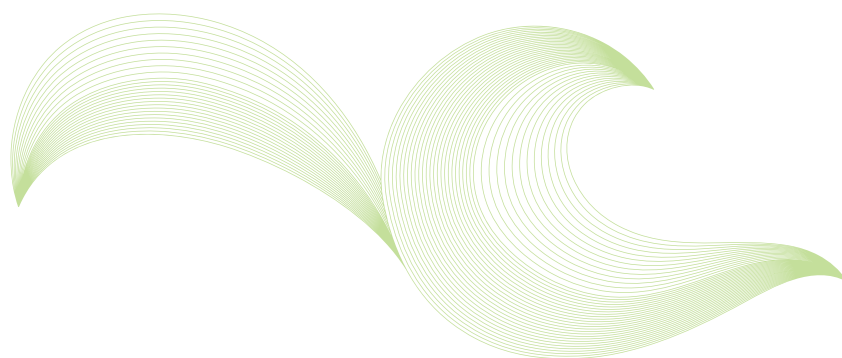
**Over the last few months, we have noticed an increase in provider invoice rejections. There are four things to check if your payment invoices are being rejected.**

1. Do you have a valid service authorisation from the NASC that gives you the authority to invoice for the services you have provided?
2. Are the services you are invoicing for within the service period detailed in your service authorisation?
3. Have you already been paid (on a previous invoice) for the services being invoiced?
4. Have you invoiced (and been paid) for more support than is detailed in your service authorisation?

If you believe there is an issue with your service authorisation details, please contact the NASC. If changes need to be made, the NASC will generate a new service authorisation.

If you have any queries about this process, or about any invoice rejection, please contact your Contract Relationship Manager.

**Contact: Christy Richards, Contract Relationship Manager, (04) 816 3436**



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# Celebrating providers who do great work

**If you provide a DSS-funded service and you want others to know how your service makes a difference, please tell us about it.**

Once again, to mark the International Day of Persons with Disabilities on 3 December 2017, DSS will be publishing a special edition newsletter showcasing providers' innovative practices.

We are looking for:

- a story or article prepared as a Word document of up to 300 words, describing what you are doing and how it makes a difference
- a photograph (high resolution please) that relates to your work
- confirmation that you have formal permission from your organisation and from any person or people presented in either the story or the photograph.

Please submit your story or article to us by Friday 29 September 2017.

We cannot guarantee that we will be able to include your article or story in the newsletter, but we are always very pleased to receive all stories. We will email you a copy of the newsletter at the time of publication and will also post it on the Ministry of Health's website.

We look forward to hearing about the great work under way in the sector!

**Contact: Cheryll Graham, Senior Advisor, (04) 816 2358**

## DSS sector feedback

# Thank you for your feedback on the refresh of Whāia Te Ao Mārama

The Ministry of Health sent the draft Whāia Te Ao Mārama 2017–2022 (the Māori disability action plan) to key sector stakeholders for their feedback in early June and has now received feedback from a range of disabled people, family/whānau and providers. We are working with the Te Ao Mārama Group, our Māori disability advisory group, to update the document before its release in October 2017.

We are also working with the system transformation team to ensure that the work currently underway on the transformation is linked to the action plan and that it develops support that fits the requirements of our Māori disabled – tangata whaikaha.

**Contact: Lara Penman, Manager Quality, (04) 816 3367**

# We would love your feedback on the review of the Health and Disability Services Standards 2017

The Ministry of Health certifies providers of health and disability services under the Health and Disability Services (Safety) Act 2001 (the Act). Section 24 of the Act requires regular review of the service standards to assess whether existing standards should continue without amendments, be amended or be replaced. The current standards were last revised in 2008, and the next review has begun.

The Ministry has developed a survey, seeking feedback on what changes to the standards are required. The survey ends Friday 25 August 2017.

For more information and a link to the survey, see the Ministry's webpage:

[www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/services-standards](http://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/services-standards)

**Contact: Lara Penman, Manager Quality, (04) 816 3367**

## Upcoming disability events

### DSS provider forums

**DSS will host five provider forums in October/November 2017. All DSS contracted providers are invited to attend a forum.**

Day	Date	Time	Venue	City
Wednesday	25 October 2017	9 am – 4 pm	Jet Park Airport Hotel	Auckland
Thursday	26 October 2017	9 am – 4 pm	Airport Conference Centre	Hamilton
Monday	6 November 2017	9 am – 4 pm	Te Papa	Wellington
Tuesday	7 November 2017	9 am – 4 pm	Sudima Hotel, Airport	Christchurch
Wednesday	8 November 2017	9 am – 4 pm	Dunedin Centre	Dunedin

In response to feedback, this year's forums will provide DSS information updates and our strategic direction and incorporate some workshop sessions to help DSS plan for the future. Agenda and supporting papers will be sent out to those who have registered, closer to the date.

If you wish to attend a forum, please email [susan\\_fernandes@moh.govt.nz](mailto:susan_fernandes@moh.govt.nz) with the following details. Confirmation will be emailed to you within two days of registering.

- Name
- Organisation
- Contact email
- Contact phone
- Forum location (city)
- Requirement for a New Zealand Sign Language interpreter (Note: Interpreters will only be provided on request and with at least three weeks' notice of the need for an interpreter.)
- Any special dietary or other requirements – if so please specify.

**The last date for registration is Wednesday 11 October 2017.**

**Contact: Lara Penman, Manager Quality, (04) 816 3367**



## Transforming Respite

**We were delighted to release the disability respite strategy on 19 July 2017.**

*Transforming Respite* sets the future direction for improving disability respite support. Changes to the respite model will include:

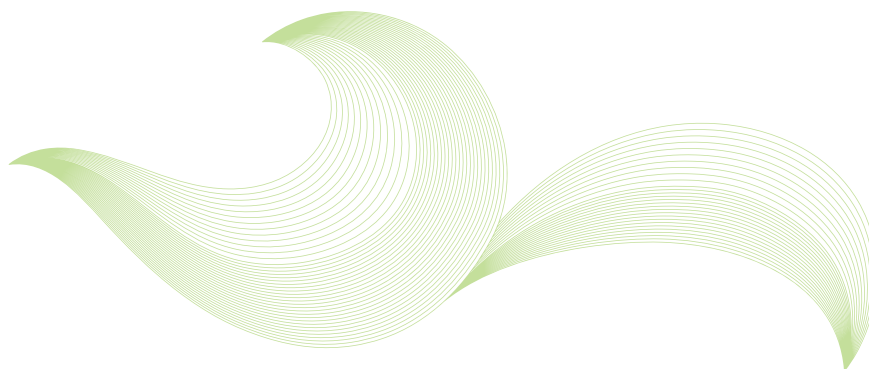
- offering disabled people and their families/whānau a flexible respite budget that they can use to take breaks in the ways that suit them best
- increasing the range of quality respite options available – this includes the development of new and expanded respite services
- recognising the value of respite and taking a lifelong approach to allocation and funding
- making the administration and payment methods easier
- providing better access to information about respite and support to find and use the respite options available.

The strategy responds directly to what disabled people and their families/whānau told us about their aspirations for the future. We are very thankful to those who shared their experiences with us.

To discuss any aspect of the strategy, please email us at [respitestrategy@moh.govt.nz](mailto:respitestrategy@moh.govt.nz)

*Transforming Respite* is available on the Ministry's website: [www.health.govt.nz/publication/transforming-respite-disability-support-services-respite-strategy-2017-2022](http://www.health.govt.nz/publication/transforming-respite-disability-support-services-respite-strategy-2017-2022)

**Contact: Deborah Mills, Development Manager, (04) 816 3956**



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# A perspective on Local Area Coordination

Local Area Coordination (LAC) is the model of independent facilitation with the longest operational history in New Zealand. LAC is based on sound principles that map closely to the principles of EGL, delivering independent assistance and support to disabled people, their families/whānau and communities in the regions of Western and Eastern Bay of Plenty, Lakes (Central North Island), Hutt Valley, Dunedin and Southland.

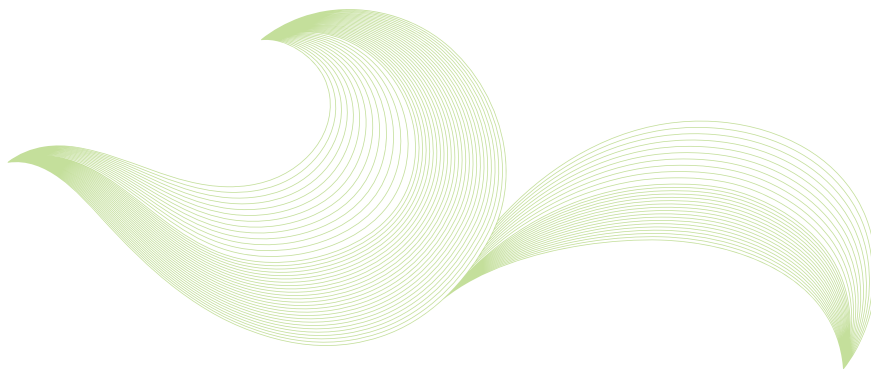
LAC is a connection point on two levels.

- Anyone can contact a LAC for information – there is no criteria for this connection.
- Local Area Coordinators also ‘walk alongside’ a number of individuals and their families/whānau in an ongoing relationship. The nature, extent, longevity, activity and outcomes of this relationally based support varies depending on individual requirements. It moves well beyond connecting people with formal service-related options, as most individuals and their families/whānau understand that much of what the good life has to offer simply cannot be bought.

Local Area Coordinators have been developed, trained, supervised and supported in New Zealand since 2010, and in that time, a lot has been learnt about what will be required of the people who undertake these independent facilitation roles into the future.

There are many examples of how the role and function of LAC has been a catalyst for change within individual and family/whānau lives and also where communities have been positively affected. If you would like to learn more, please contact one of the three organisations leading this work, ImagineBetter (Bay of Plenty and Lakes), LIFE Unlimited (Hutt Valley) or Access Ability (Otago/Southland).

**Contact: Tony Mclean, ImagineBetter, [tony.mclean@imaginebetter.co.nz](mailto:tony.mclean@imaginebetter.co.nz)**



## Contact Disability Support Services

Email: [disability@moh.govt.nz](mailto:disability@moh.govt.nz) Phone: **0800 DSD MOH (0800 373 664)**

Web: [www.health.govt.nz/disability](http://www.health.govt.nz/disability)

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