

## Tasmanian Disability Gateway Model

### Three Main Functions

The Gateway has three main functions in relation to disability services: Intake and Assessment; Active Monitoring; and Local Area Coordination.

#### 1. Intake and Assessment

Provide information to individuals and services contacting the Gateway about both generic and specialist disability services within their local area. This occurs through a tiered approach:

- General enquiries, requests for information;
- Screening Assessment of need but referral to a generic service (e.g. community transport); and
- Targeted Assessment of need referral to specialist disability service (eg accommodation).

When contact is made with the Gateway an initial screening assessment tool is used. This tool assists the Gateway to determine what kind of response/service is required to meet the needs of the client.

If, in completing the initial screening it becomes apparent that a more detailed assessment is needed then the Targeted Assessment for Disability Services is applied. This assessment tool gathers more detailed information about the client, from the client themselves, families, carers and other previous assessments. The tool also determines eligibility for specialist disability services as outlined in the *Disability Services Act 1992*.

#### 2. Active Monitoring

The role of active monitoring in the Gateway is to work with people with disability in a range of ways. This includes:

- Providing needs based contact with self managed clients who do not need coordination on a regular basis but need to know where to call if they have an issue. A good example of this is someone living in private rental accommodation that attends a supported employment service but only requires assistance when the lease agreement is reviewed.

- Maintaining a needs register or Wait List for services. The Gateway maintains regular contact with people on the Wait Lists to monitor their needs and potentially look at interim solutions if the needs increase but a service is still not available. This is anticipated to alleviate crisis responses.
- Providing support to people at key transition points in their lives, such as school leavers, and people transitioning into accommodation or day option placements.

The active monitoring role of the Gateway also includes working with the specialist disability services sector organisations (Accommodation Support, Respite, Community Access, Individual Support) in relation to the capacity of the sector to accept referrals.

This relationship is formalised through Service Agreements to ensure the funded sector provides accurate up to date information to the Gateways.

### 3. Local Area Coordination

The Gateways provide a coordination function for clients in their local areas. This can occur as follows:

- A single session response to people in immediate need;
- Ongoing person-centred planning as a result of the targeted assessment prior to referral to services; and
- Case management to clients who require ongoing support to access and stay connected with services.

The focus of the Gateway is on community clients, that is, individuals with disability who receive minimal support from the specialist service system. Please see Assumptions of the model (below) for further information.

Based on feedback from the focus groups there may be clients that receive a small amount of support from the funded service sector, for example one day a week of a community access service, six hours a week of an Individual Support Package (ISP). These clients may need coordination from the Gateway to secure additional services or to monitor their needs and this is an appropriate function of the Gateway.

## Other Features

### *Brokerage*

The Gateway has access to brokerage funds to provide time limited support and/or crisis intervention where needed. This may occur if access to a funded service is not available, or the client/family requires an immediate service response. An example of this could be a client (living at home with an elderly parent) whose parent is suddenly admitted to hospital. This provides the Gateway with the capacity to fund time limited respite while seeking an ongoing option for the client to meet their needs.

### *Co-located Disability Services Officer*

A co-located Department of Health and Human Services Disability Services Officer is located in each of the Gateways. The function of this role is to provide advice and support to the Gateway where there is lack of clarity around eligibility or complexity of needs and referrals. This person is employed and managed by DHHS and is also a member of the Area Team.

These positions have remained in government as part of Disability, Child, Youth and Family Services.

## Transition to Gateway Services

### *Assumptions of the Model*

The following assumptions were made in the transition from the service coordination model managed by government to the Gateway model as defined in the Operational Framework.

- Clients in the current service system with an ongoing connection to a funded service provider, in particular the accommodation support services, will have their coordination needs met by the funded services and not the Gateway. The Gateway would only become involved if the organisation needed support in moving the client into alternative accommodation – as the Gateway would have knowledge of capacity in the sector.
- Clients in the current service system that have an ISP package and require coordination and/or case management will have this need met through the development of a Unit Price for Case Management and they would purchase this support from the Sector.

- The Gateway does not provide a funding role to the Disability Sector apart from the brokerage aspect. All funding requests from Disability Sector organisations will be made to the government via the Community Partnership Teams. This includes requests for increased funding due to clients' changing needs.
- The Disability Targeted Assessment tool will be made available to the Disability Sector with the expectation that they would use this tool with clients and families to undertake the planning process. Therefore any request to the Gateway or to government Disability Services will be made with a completed Targeted Assessment attached. This includes applications to the Individual Funding Unit.

### *Staff Transition Arrangements*

The Tasmania reform process provided three FTE positions and a range of Working Groups involving the community sector and local Area Office participation. It required careful change management including a detailed communication strategy involving people with disability, families, carers, advocates, government employed staff and community service providers. Additional funding was also provided to advocacy organisations to support clients before and during the change period.

The Tasmanian Government worked with relevant unions to ensure that staff were protected throughout the outsourcing processes. Staff were provided with three options as part of a Heads of Agreement: they could take a Voluntary Targeted Employment Separation Agreement (VTESA), be supported through facilitated employment to the new providers or be redeployed in the State Government.

The table below specifies the options chosen by Disability Services employees affected by the disability reform agenda.

Option	Number
Voluntary Targeted Employment Separation Agreement	80
Facilitated Employment	0
Redeployment	29

Total number of displaced Government employees	109
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The approximate cost of employees opting for a VTESA was \$3.3 million. Of the redeployed staff, all except three have been placed in positions or are in meaningful work.