

2013 Carers Advisory Council

Annual Compliance Report

Letter to Minister from Chair

To the Honourable Minister Anthony Simpson, MLA, Minister for Local Government; Community Services; Seniors and Volunteering; Youth

Dear Minister Simpson

It gives me great pleasure to present the 2013 Carers Advisory Council's Annual Compliance Report for your consideration and tabling in Parliament, as required under Section 10 of the Carers Recognition Act 2004.

The Report summarises the major activities undertaken by the Council over the past financial year in promoting the role and interests of carers in our State. It also provides an overview of:

*the work of organisations required to demonstrate their compliance with the Carers Recognition Act 2004, and
the work of the Mental Health Commission which is not covered by the Act and deserves special commendation for voluntarily reporting its compliance.*

It is pleasing to note the continued improvements across all relevant service providers. Increasingly, the valuable role played by carers in our society has become publicly recognised and better supported by the organisations with whom they come into contact.

Yours faithfully



*Mary Deschamp
Chair
Carers Advisory Council*

Carers Advisory Council Members 1 July 2012 - 30 June 2013

Ms Mary Deschamp - Chairperson

Mr Charlie Rook OAM - Deputy Chairperson

Ms Karena Sherriff

Ms Fiona Cameron

Ms Glennys Marsdon

Ms Lyneve Cannon

Mr Ian Gorton

Ms Mary Linder

Ms Melissa Webb (Retired)

Ms Kristine McConnell (Retired)

Mr Atul Garg (Retired)

Mrs Shirley Fitzthum (Retired)

Table of Contents

Item	Page
Introduction	
Purpose of Carers Advisory Council	
Year in Review	
Purpose of the Annual Compliance Report	
Contributors	
Method of Reporting	
Council Ethics	
Measures of Compliance	
Closing the Performance Loop	

Introduction

Purpose of Carers Advisory Council

The Carers Advisory Council (the Council) advises the Minister with responsibility for the *Carers Recognition Act 2004* (the Act) on relevant issues for carers in Western Australia and provides an annual report on the compliance of reporting organisations with the Act and the Carers Charter.

Over 10 per cent of Western Australia's population provides unpaid care and support to a person with disability, ongoing illness or experiencing frail age. Carers are a growing proportion of the population worthy of recognition because of the critical social role they play and the fact they save the government - and therefore taxpayers - billions of dollars per year.¹

Year in Review

In addition to the normal cycle of Council operations, key initiatives undertaken this year include:

Sharing Healthy Conversations Project

The Council, in conjunction with the Ministerial Advisory Council on Disability, hosted the Sharing Healthy Conversations event and online survey which explored the importance of effective communication practices between individuals with a disability, carers and health professionals.

Participation in WA Carers Conference 2012

The Council, along with the Department for Local Government and Communities, was a major sponsor of the WA Carers Conference 2012. The Council participated in the organising committee, hosted a stand and attended and participated in various sessions throughout the Conference.

Representation at various community events

Council members attended various community events to gather information about

Method of Reporting

All reporting organisations and services interacting with carers and funded by the MHC and WA Health supply a report to the Council by 30 September each year

Disability Services Commission

General Comments

As in recent years, the Disability Services Commission (the Commission) demonstrated full and comprehensive compliance with the Act and the Carers Charter. Respect for the rights of carers is embedded in the culture and operations of the Commission. Carers participate actively in the development, implementation and review of the Commission's strategic directions and operational programs.

Assessment

The Commission's self-assessment rating is *Well Developed*, the highest rating available, on all four areas of:

Understanding the Carers Charter: Activities and strategies for ensuring that staff are aware of and understand the Carers Charter and carers are treated with dignity and respect (e.g. staff training and awareness training) - *Well developed*

Policies and plans relating to receiving input from carers: Activities demonstrating the inclusion of carers/representative bodies in the development of policies and organisational plans that affect carers and their caring role (e.g. consultations, extracts of plans and policies, relevant initiatives with carers) - *Well developed*

Carers' views: Activities illustrating inclusion of the views and needs of carers when assessing, planning, delivering and reviewing services that impact .1(c)-1.n asse9.42 .7

Engagement of carers in policy/program development and delivery - The high level of carer involvement in Commission decision-making at both a

Organisations funded by the Commission are required to have complaints management processes in place and are comprehensively evaluated every three to four years. This evaluation includes asking carers about their concerns. In addition, the Commission conducts six-monthly seminars for funded organisations, including a presentation on complaints management and organisations' responsibilities under the Act. Moreover, an annual carers' survey is conducted. The 2013 survey indicated that 81 per cent of carers were aware of their right to complain, however 84 per cent indicated they had nothing to complain about.

28 formal complaints were lodged with the Commission in 2012-13. Of those, 21 were lodged by a family member and eight related to the family member's rights under the Act and Charter. All were resolved. Information about the complaints process is widely available and accessible in different formats.

Staff Training - The Commission has comprehensive and longstanding practices in place to ensure new and existing staff, together with funded organisations, are well educated on carer issues and their perspectives. The Commission's Consumer Liaison Officer delivers much of the training, but many sessions involve direct engagement with carers. For example, a panel of carers delivers sessions at orientation workshops for all new Local Area Coordinators. Other training, such as 'Caring Together', is delivered online. See page 40 of the Commission's 2012-2013 Annual Report for 'Family and carers support - Three years at a glance' www.disability.wa.gov.au/about-the-commission/about-the-commission1/corporate-publications/. The Commission also continues to make widespread use of its website - both Intranet and Internet - to ensure that the needs of carers are clearly conveyed to all stakeholders.

In addition, during 2012-13, some targeted training was conducted. Two sessions on supporting working carers were presented by Carers WA to Commission staff and managers, and over 500 carers, family members and professionals attended a series of workshops on technologies and strategies for supporting people living with Autism.

Future Directions

WACHS is currently participating in a periodic review survey including this new standard for the first time.

WACHS Consumer Engagement Guidelines have recently been developed and are awaiting Executive endorsement. Carers as consumers are integral to these guidelines.

The *Healthier Country Communities Plan* states up-front that “Our aim is to put the needs of our patients and their carers first in all that we do”. The Plan goes on to say that WACHS staff will “work closely with other health providers and our country communities to deliver high quality, accessible and safe services for everyone, closer to home where possible” and “work with the community in the planning, design, review and evaluation of country health services and facilities.”

In residential and community care service provision, carers and family are included in care planning and meetings. This requirement is included in manuals and service guidelines.

Consumer or community members of District Health Advisory Councils and forums are expected to “...talk with health service consumers, carers, and community members and groups about important health issues” and “present the views and opinions of consumers, carers and community members to the WACHS Governing Councils.”

In all WACHS sites, mechanisms are in place to allow carers to access complaints forms to improve service delivery (e.g. when carers lodge complaints they are asked what could be done to improve the situation and avoid a repetition of the event).

All WACHS' contracts with Non-Govern

North Metropolitan Health Service

General Comments

The North Metropolitan Health Service (NMHS) is the largest health service in the

regularly runs carers' groups. In the treatment of mental illness in the Aboriginal community, a whole of family approach is taken. Neurosciences have trained carers in the use of alternative communication devices (e.g. iPads). Carer contact stickers have been implemented to enable staff to readily identify patients who have carer involvement in their care.

Osborne Park Hospital - Patient/carer education was expanded from one Rehabilitation and Aged Care ward to all three wards. The Hospital's 'Welcome' poster was updated to include reference to carers. The pharmacy introduced a new patient/carer satisfaction audit to gauge the level of satisfaction with pharmacy services, and discharge medication counselling is now always conducted in the presence of carers. Data collated by Carers WA on behalf of the Hospital shows a 23 per cent increase in the number of interactions between staff and Carers WA (including in-service education) and a 16 per cent increase in the number of carers identified and supported with information packs.

Public Health and Ambulatory Care (PHAC) - Dental Health Services and Wounds West conducted patient satisfaction surveys, including consumers and carers. PHAC is making it easier for carers to lodge complaints by allowing oral and email complaints. Carers WA present sessions on the Carers Charter at all new staff orientations. Patient forms have been revised with carers' interests in mind. PHAC has undertaken a gap analysis on the EQulP National Standard relating to carers and is implementing an action plan to address the gaps identified.

Future Directions

Some NMHS organisations identified areas of future focus:

The Mental Health Service is working to increase carer representation on governance committees across the Adult Program and has established a partnership with Carers WA to facilitate this. Also, strategies are being developed at Area level to promote a culture that is more responsive to, and inclusive of, carers in clinical service delivery.

Sir Charles Gairdner Hospital will soon audit carer engagement in bedside handover and is also planning to provide some assisted parking to carers.

The Women and Newborn Health Service identified a range of initiatives

South Metropolitan Health Service

General Comments

The South Metropolitan Health Service (SMHS) is the fastest growing health service in Western Australia, covering a population of 840 000 people. The SMHS comprises:

Continuing regular evaluation (both internal and external) of Health Service complaints management. Complaints from all sources, including carers, are regularly reported to senior management.

Additional examples of good practice at each of the SMHS hospitals/health Services are outlined below:

Armadale Health Service - Carers WA are now involved in the monthly induction process for all new staff and in the identification of performance

Future Directions

Child and Adolescent Health Service

General Comments

The Child and Adolescent Health Service (CAHS) has significantly improved its compliance in 2012/13. The level of involvement of carers in service planning and program development has been impressive, particularly in respect of the new Perth Children's Hospital and Aboriginal Health. Carers are actively supported and engaged at both an operational and systems level, and the important role of carers in children's health is well understood.

A Chronic Care Coordination Senior Registered Nurse position was created for a two year period to help coordinate services and support for families and carers of children with chronic respiratory disease and a tracheostomy. As a result, various related initiatives are now underway.

CAHS' Consumer and Carer Engagement Policy was finalised during the reporting period (August 2012) and has been progressively implemented since that date. It commits CAHS to ensuring that carers "have an opportunity to participate in the planning, delivery, development and evaluation of healthcare services with due regard to privacy and confidentiality requirements and regulatory frameworks."

A Consumer Advisory Committee has also been established to advise the State Government on improving the experience of patients, their families and carers at Princess Margaret Hospital. Its first meeting was held in June 2013.

Other existing committees and advisory groups continue to give carers a voice (e.g. the Aboriginal Health Advisory Group and the Community, Disability and Carers Advisory Committee). Throughout this past year, there has been a particular focus on consultation for the new Perth Children's Hospital. Carers have helped contribute to decisions about aspects of hospital design (e.g. the removal of interstitial nursing stations) and the selection of hospital furniture and equipment (e.g. parent beds).

CAHS coordinates carers' panel discussions attended by staff from all disciplines, their families and carers. These panels address emerging themes or a specific service area with a view to improving health outcomes. At this stage, no changes have resulted from the panel discussions, but it is anticipated that some will occur as the process develops.

Future Directions

It is pleasing to see that CAHS has recently entered into a partnership with Carers WA to provide networking opportunities and workshops for carers about their rights and available supports. Two workshops have been delivered and other partnerships are being considered to help carers in all facets of their role.

Several in-house education workshops are planned with medical staff to highlight the role of the Liaising Informing and Networking for Carers (LINC) Coordinator and the assistance and support available to carers.

Aged and Continuing Care Directorate

General Comments

99 per cent of HACC service providers reported that they recognise the role of carers in the review and development of services.
93 per cent reported that they had a carer representative on their board of

Department of Health - Funded Services

General Comments

The Department of Health (the Department) contracts a wide range of Not-for-Profit organisations to deliver health services across the State. Reporting on compliance with the Carers' Charter is part of the community service contract for every service having dealings with carers. A total of 50 organisations reported for the year ending June 2013. The reports are collated and summarised by the Community Services Procurement Directorate (CPSD) at the Department.

Performance is varied across this wide range of organisations. On balance, there is a

91 per cent of organisations reported compliance with the requirement that complaints made by careers in relation to service that impact on them and the role of carers must be given due attention and consideration.

68 per cent fully compliant in terms of ensuring carers have the opportunity to provide feedback on their experiences, and

No organisations submitted a self-assessment of 'not compliant'. The reasons given for not being fully compliant were a need to review procedures, the organisation was in the process of collecting carers' feedback for evaluation purposes, the organisation was currently completing a strategic planning process or need to continue Carers Charter training for new and existing staff.

Areas for improvement include the inclusion of carers on Board and Management Committees, including carers in strategic planning processes and including training on the Carers Charter and the role of carers in staff inductions and ongoing training.

Based on the evidence provided, the Department's self-rated assessments are supported by the Council.

Good Practice

Several organisations demonstrated outstanding commitment to carers and provided

The Council also commends the two thirds of organisations who were fully compliant with providing opportunities for carers to give feedback.

The Council noted that there is room for improvement in carer representation on boards and committees with 26 per cent of organisations not compliant and a further 19 per cent only partially compliant, and in the strategic planning processes of many organisations with 14 per cent of organisations not compliant and 8 per cent only partially compliant. It is pleasing that some organisations have identified these issues and are looking to rectify them.

The Council congratulates the many organisations that have demonstrated their strong commitment to partnering with carers to deliver improved services and encourages all organisations to continue supporting their carers.

Mental Health Commission - Funded Health Services

General Comments

The Mental Health Commission (MHC) funds 80 non-government organisations across the State to provide people who experience mental health problems with accessible, high quality services and supports. With 75 per cent of all severe mental illness beginning before the age of 24 years² and some 45 per cent of all Australians likely to suffer mental illness at some point in their lives,³ large numbers of Western Australians are likely to be carers for people with mental health problems.

Since its establishment in March 2010, the MHC has acknowledged carers as an integral part of an effective mental health sector. The MHC is committed to increasing the involvement of carers in the design of policy, planning and service delivery within WA's mental health services and systems.

Assessment

The Commission voluntarily reports on its funded organisations' compliance using a modified reporting template that identifies whether compliance has been achieved or not achieved. This year, 73 per cent of its 80 funded organisations provided data for the assessment - a marginal improvement over 2012 at 71 per cent. The self-assessment for those organisations indicates *Achieved Compliance* in all four areas:

Understanding the Carers Charter: Activities and strategies for ensuring that staff are aware of and understand the Carers Charter and carers are treated with dignity and respect (e.g. staff training and awareness training) - *Achieved Compliance*

Policies and plans relating to receiving input from carers: Activities demonstrating the inclusion of carers/representative bodies in the development of p/TT8bf,w[m1(10, th wi) to 9br(eir a131.(.3d)4.-11]J0[() TDbsio.0007 Tc.08ing

94 per cent of organisations reported compliance with the requirement that complaints made by carers be given due attention and consideration, compared to 86 per cent last year

82 per cent of organisations reported compliance with the requirement that

Conclusion

This is the eighth Compliance report to be presented to Parliament since the inception of the *Carers Recognition Act 2004*. It is most encouraging to note that a review of all eight reports indicates strongly the growth over time of the recognition and inclusion of carers in all reporting agencies.

The data from Table 1 overleaf shows that, of the 16 organisations reporting, eight recorded the same assessments (many of which were Well Developed already) and six recorded improvements.

Even in those organisations reporting the same ratings as last year, advances have been made - organisations reporting 'Well developed' have become even further developed and are either trialling new initiatives or extending and improving existing initiatives).

Council is most encouraged by this trend and commends the Department of Health, the Disability Services Commission and the organisations funded by the Mental Health Commission for their continuing development of the recognition of carers at all levels in these organisations. Council looks forward to continuing to advance carers interests and to working with reporting organisations to continue the development of the recognition of carers.

