

ACT Disability, Aged and Carer Advocacy Service

Annual Report

2015-16

ACT Disability, Aged and Carer Advocacy Service Inc.
ABN 15 750 251 576
Suite104, Block C, Canberra Technology Park, Phillip Ave, Watson
PO Box 144 Dickson ACT 2602
Ph: (02) 6242 5060 Fx: (02) 6242 5063 TTY: 133 677 (NRS)
Email: adacas@adacas.org.au
Web: www.adacas.org.au

ADACAS VISION

A world in which everyone may exercise their rights and responsibilities, lead lives of value and dignity and pursue their dreams.

ADACAS MISSION

To assert, promote and protect the rights and potential of people with disabilities, people who are older and people who are caregivers

GUIDING PRINCIPLES

Integrity: *Ethical practice and authenticity*

Social Justice: *All people have equal opportunity to create better life chances*

Pursuit of Excellence: *We understand what we do and why we do it, how we can improve*

Reflective Practice: *Introspection and learning from experience*



Some years ago ADACAS worked alongside the Buckman family for a lift to be installed at the Turner Primary School, so that their daughter with disabilities was able to access all parts of the school.



Our advocacy ceased when the Department of Education gave approval for the lift. In late 2015 we were delighted to attend the lift opening event at the school along with the Buckman family.

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ADACAS's People

ADACAS Board

	Meetings attended
Chairperson:	
Stephen Still	7/7
Treasurer:	
Kim Stewart	5/7
Public Officer:	
Coleen Box	3/7
Other members:	
Dominic Cookman	5/7
Sean Fitzgerald	2*/7
Alana Fraser	4/7
Diana Nasr	6/7
Kym Duggan	5/7

*leave of absence granted

ADACAS Staff

CEO/ Secretary:

Fiona May

Disability/Mental Health Programs:

Christina Pascoe (Disability Manager from Dec 15)

Ivette Gonzalez (to Oct 15)

Roger Munson

Lauren O'Brien

Timothy O'Hare

Michelle Peruzzi

Hermannee Perry (to Jun 16)

Grieg Chapman (from Feb 16)

Older Persons Programs:

Sonia Di Mezza (Deputy CEO)

Gwendoline Davies

Karl Schaffarczyk

Projects:

SDM Link & Learn

Katrina Rea

Tina Dowse (from Oct 15)

Younger People in Nursing Homes

Jeneatte Ruse

Administration:

Deshawn Wattanatassi (Business Manager)

Kristy Capper

Debbie Hale (from Jan 16)

Clinical Supervision Consultants

Elizabeth Done

Tamarisk Jakobson

Patrick McEvoy

Fiona Hall

Kandie Allen-Kelly

Kim Vella

IT Consultant

Sennell Pty Ltd

Database Consultant

Rohan Mitchell (1024 Pty Ltd)

Project Partners

Julia Farr Purple Orange

ImagineMore

Summer Foundation

"I am so grateful for help from ADACAS in getting the services I need, and continue to need, especially over Christmas."

Chairperson's Report

Stephen Still

2015-2016 has been an important year for ADACAS. ADACAS has maintained strong performance in meeting the needs of our clients and our funding organisations. However, uncertainty and change remain constants in the advocacy sector, as governments review the funding programmes that the advocacy sector has relied on, and the National Disability Insurance Scheme continues its rollout.

It was timely, therefore, that ADACAS reviewed its strategic direction and developed a new three-year Strategic Plan for the period 2015-18. A key element of this has been finding new ways to serve our clients, reflected in the Board's decision to commence providing NDIS Support Coordination in accordance with advocacy principles. This will ensure that individuals utilizing the NDIS can access our services to ensure that they achieve the best outcomes from their NDIS plans. It also provides a clear pathway for ADACAS to continue its mission to help people with disability live empowered and fulfilled lives irrespective of the outcomes of reviews of block-funded advocacy programmes.

To support the significant business changes already underway, and the ones we can anticipate for the future, the ADACAS Board decided during the year to establish two new subcommittees of the Board. The Strategic

Change Subcommittee supports the Board in the implementation of ADACAS' change agenda. The Finance, Audit and Risk Subcommittee supports the Board in respect of financial matters, audit, compliance and risk management—critical issues in any environment, but particularly in a period of change. The Subcommittees have also allowed the Board to draw on the expertise of a range of governance specialists, including Cassandra Webeck (who sits on both subcommittees) and John Sands (FAR). The work of these new volunteers has already been invaluable in informing our planning.

The success of ADACAS over the past 25 years has been the sum of the contributions of all of those involved with the organization—my colleagues on the ADACAS Board and its subcommittees, our CEO, Fiona May, and, most importantly, the ADACAS staff, who provide such critical assistance to some of the most vulnerable members of the Canberra community. I am immensely proud of the work of ADACAS, and I am confident that, working together, we can build on our success to help people with a disability, older persons, and their carers well into the future.

"While I was seeking support and advice with ADACAS, I was pleased by the calm and understanding demeanor of my advocate. The way she handled herself on several different occasions, on the phone, in writing and in person was an excellent model for me. Because of her flexibility, patience and eagerness to help, I feel more prepared to stand up and advocate for myself."

CEO Report

Fiona May

2016 marks the 25th Anniversary of the establishment of ADACAS. The first Committee of Management met for the first time in January 1991 under the leadership of Maurice Sexton with Margaret Spalding leading a small staff team. Since 1991 ADACAS has provided individual advocacy to over 7000 clients and information and advice to many thousands more. We have delivered many education and information sessions, and undertaken systemic advocacy on a wide range of issues that affect people with disability, frail older people and their carers. In 1991 ADACAS had a nine person committee and three staff, in 2016 we have a Board of eight and a staff of 14. In its first year ADACAS had 278 requests for assistance (advocacy, education and information), in 2016 ADACAS undertook 538 individual advocacy cases and responded to an additional 355 requests for information and advice and delivered 111 education sessions equaling over 1000 instances of service.

We have marked our 25th year with a series of events that shine a light on the important work that we do. In March we partnered with the Summer Foundation to deliver a forum on responding to younger people with complex health needs. The forum brought together people from the ACT health system, the NDIS and community sector to consider issues that face this group and the difference that the NDIS will make to ensuring that they are able to live valued lives in the community and avoid inappropriate entry to aged care. In June we presented our Speaking Up workshop and were delighted to do so in partnership with the ACT Human Rights Commission, hosted by the Commonwealth Ombudsman. It was an opportunity to showcase the work of ADACAS and discuss the important role that advocacy and complaints mechanisms have in ensuring that people can have their voice heard and their needs met. We welcomed Minister for Disability, Chris Bourke and Human Rights Commissioner Graeme Innes to our panel of speakers. In September we again partnered

to deliver a forum – this time with Mental Health Australia on the topic of Supported Decision Making for people with psychosocial disability. Each of these events has been an opportunity to acknowledge the work of ADACAS advocates over the past 25 years and demonstrate our commitment to addressing the wider issues that underpin our work.

Partnering with others has been a deliberate feature of our 25th anniversary celebrations and is also a strategy that carries into other parts of our work. We completed our final year of providing workshops to assist people to prepare for the NDIS through our very successful partnership with JFA Purple Orange and Imagine More. We have been very pleased to partner with the Summer Foundation for a project this year. Through their funding we have been able to dedicate an advocate to reach out to and work with each person aged under 65 currently living in ACT residential aged care to enable them to enter the NDIS. This is a small but important group of people living with complex disability who have too often been excluded from the community. You can read more about this project later in this report. Another area of increasing collaboration is with other advocacy services. We have established the Older Persons Advocacy Network and begun to collaborate on policy and systemic issues affecting older people with the changes to the aged care system. We anticipate that we may work even more closely together in the future as aged advocacy funding changes occur. We have also continued to be an active member of the Disability Advocacy Network of Australia (DANA) as our expertise and experience with the NDIS is sought out by other advocacy organisations.

Our new three year strategic plan commenced during the year. We took the opportunity to refresh our vision and mission statements as well as set ourselves a series of key strategies which will position ADACAS well for the future. The NDIS has introduced

considerable uncertainty for advocacy funding and we continue to wait and see what the full impact of that might be. Our strategic plan responds to that uncertainty by identifying other ways in which advocacy can be funded and delivered. In particular it is clear that advocacy is one activity that NDIS funded Support Coordinators are expected to do. ADACAS has developed an advocacy model of support coordination and has commenced working with a number of clients who have recognised that this model meets their needs. We are carefully developing this new aspect of our service to ensure that advocacy principles continue to guide everything that we do and that our advocacy remains robustly independent of other disability services.

ADACAS has once again undergone a full quality accreditation audit as a requirement of our National Disability Advocacy Program funding. For the first time this audit assessed us against the National Standards for Disability Services which have replaced the previous standards. The outcome of the audit was an unqualified endorsement of the high standard of our work and accreditation

for another three year period. Client feedback continues to be strongly positive and is reported in more detail elsewhere in this report.

Two staff left ADACAS during the year and four new staff joined us. It was particularly exciting to expand our supported decision making team.

The NDIS trial in the ACT is almost complete but the full extent of the change that it brings is still not clear. Similarly aged care reform is underway and its impact on demand for advocacy is not yet fully known. In this uncertain environment ADACAS staff have continued to work hard on providing independent advocacy to their clients, ensuring that their voice is heard and needs are met. The ADACAS team has demonstrated their capacity to continue to deliver for their clients in an environment of uncertainty, complexity and moving goal posts. 2017 is likely to continue to challenge us with the pace of change but thanks to our committed staff, I am confident that ADACAS will continue to excel and serve our clients well.



Speaking Up Forum, Part of our 25th Anniversary celebrations, with Tim O'Hare, Chris Bourke, Graeme Inness, Fiona May and Colin Neave

ADACAS at a Glance

Individual Advocacy	
total number of advocacy hours	9,783
total number of people assisted	446
total cases	538
new cases	280
cases continuing from 2014-15	258
closed cases	263

Inquiries	
total number of inquiries	355

2015-16 was once again, a busy year for the ADACAS team. We have seen an increase in both advocacy clients and advocacy cases. The number of hours of advocacy provided to this larger group of clients was lower than last year, reflecting a period of staff absence and vacancy that took some months to fill. Despite those gaps, we once again exceeded the targets set for us by our funding bodies. ADACAS was not able to meet all of the demand for advocacy during the year, when this happens we seek to refer to other community supports or provide advice and information that enables the person to self-advocate.

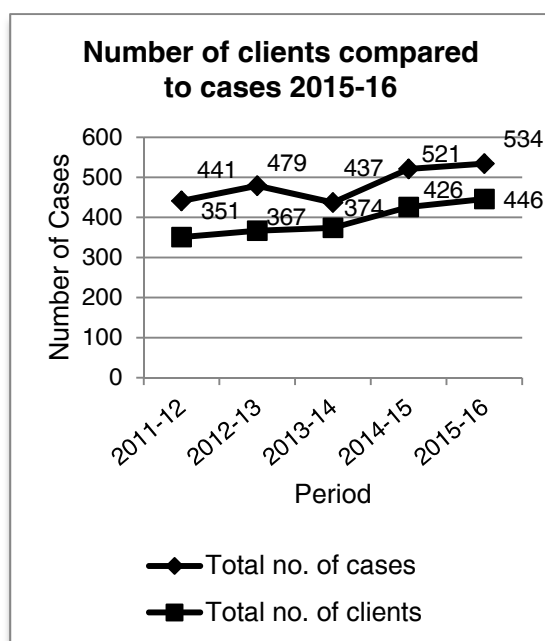


Figure 1.0

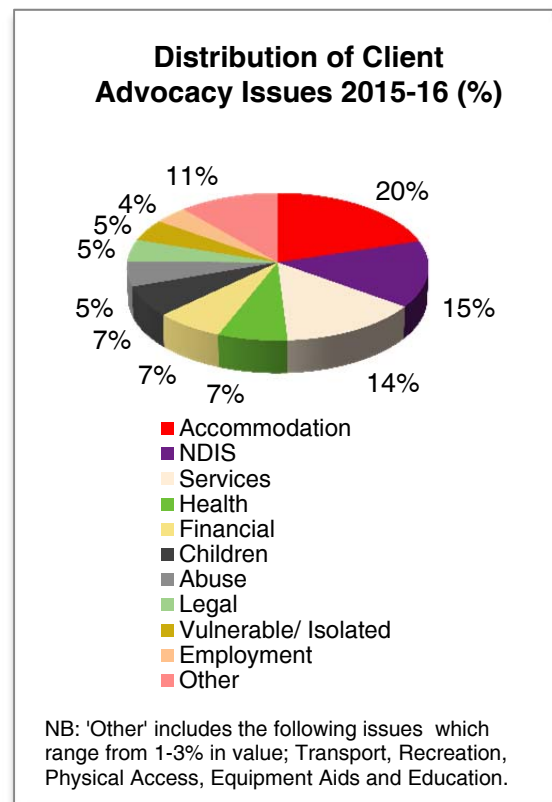


Figure 1.1

Figure 1.1 shows the distribution of advocacy issues across all of our cases. In the past accommodation and services have always held the top spots and accounted for at least a third of our work. Last year the NDIS entered the top 10 advocacy issues, this year it is at number 2 which represents a significant shift in focus of our work. Typically people who have been receiving advocacy on another issue also seek our support for their entry to the NDIS. Our experience shows that support with NDIS enables other issues in the person's life to also progress. We anticipate that NDIS will continue to be a major portion of our work in the coming years as well.

"I have recommended ADACAS to others in Canberra."

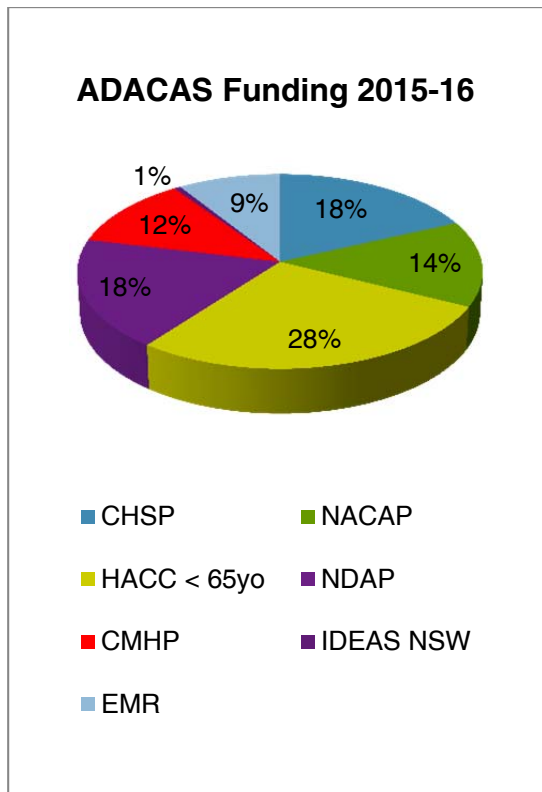


Figure 1.2

"I will forever be grateful for the help and support I received from ADACAS. The staff were wonderful and without the ongoing help I've received, I wouldn't be where I am today."

"I received excellent support and advice from ADACAS throughout the past 3 years while I was EPOA for my mother. The highly complex nature of her case demanded extensive involvement by my ADACAS advocate and I am indebted to you for your exceptional advice and advocacy support."

"The ADACAS ladies were very good, they 'listened'."

"I would like to sincerely thank you, for a wonderful job and help with my problem relating to my sister"

Funding Received

ADACAS has continued to have ongoing funding across its advocacy funding streams, although we are advised that several of these programs may change in the coming year. Our older persons work continues to account for about one third of our income with disability related funding streams accounting for the remainder.

Commonwealth Home Support Program (CHSP) - this service is supported by funding from the Australian Government

National Aged Care Advocacy Program (NACAP) — an Australian Government Initiative.

Home and Community Care Program for Younger People (HACC < 65yo) — provided with the assistance of the ACT Government

ADACAS is part of the Australian network of disability advocacy services funded by the Australian Government.

Mental Health Consumer Advocacy Program (CMHP) — ACT Health.

IDEAS Disability Advocacy Brokerage Program (IDEAS NSW).

External Merits Review Support Program (EMR) — An Australian Government Initiative

In addition to our ongoing programs, we undertook \$264,154 in project work, comprising an extension to our Capacity Building workshop training, significant training in supported decision making, and a range of smaller contracts for consultations, facilitation, easy English and organisational growth. In addition ADACAS earned over \$90,000 through fee for service work (primarily training).

NDIS Capacity Building Project — funded by the Community Services Directorate through the ACT NDIS Taskforce

SDM Link & Learn funded by the Community Services Directorate through the ACT NDIS Taskforce.

Client Feedback

Last year we reported for the first time on our new client feedback system that enable us to measure the outcomes of the advocacy that we provide to individuals. Clients are asked to respond to seven questions when their advocacy commences and again when advocacy concludes. The change in responses to these questions indicates where advocacy has made a difference. The data shows compelling evidence that after advocacy clients are more likely to agree with statements about their goals, their decision making, respect, rights, access to service, quality of service and interaction in the community.

In addition as I move around the community interacting with people with disability, family members, service providers and others, I hear time and again personal stories of how valued advocacy support is and grave concern about the availability of advocacy to people who need it.

In addition to this outcomes data we also seek client feedback on their satisfaction with the service they receive from ADACAS. We ask 6 questions about the quality of our service including timeliness, respect, professionalism, privacy, complaints and recommending ADACAS to others. In all cases, responses this year were extremely positive with more than 80% of clients strongly agreeing with each statement, when those that agree are included this equals 97% or more for all questions.

Client feedback is also a feature of the National Standards for Disability Services. We are audited against these standards by an external auditor. This year during our audit against these standards the auditor was very impressed with the high satisfaction and rating that clients shared with them during that process.

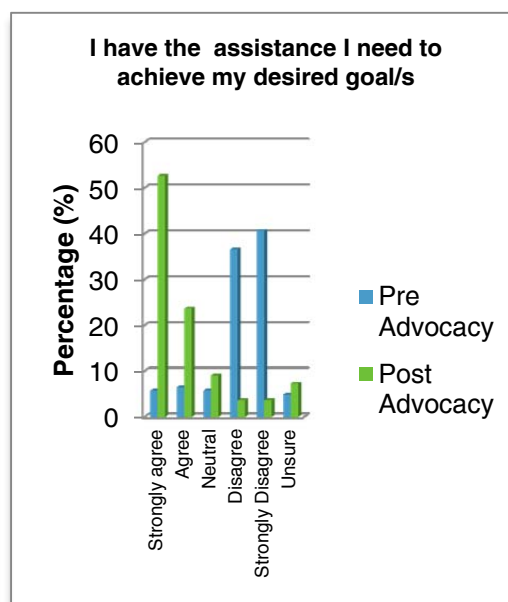
Clients also provide qualitative feedback. Comments can be seen throughout this annual report and include:

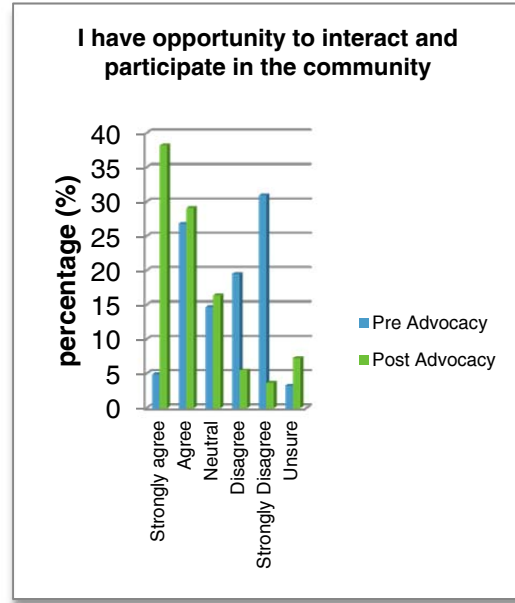
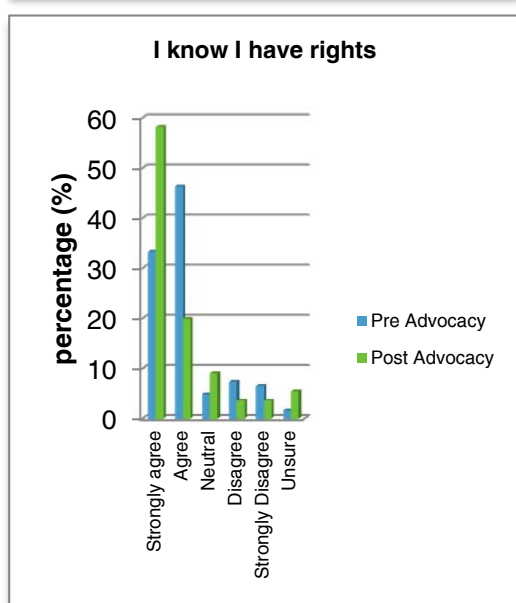
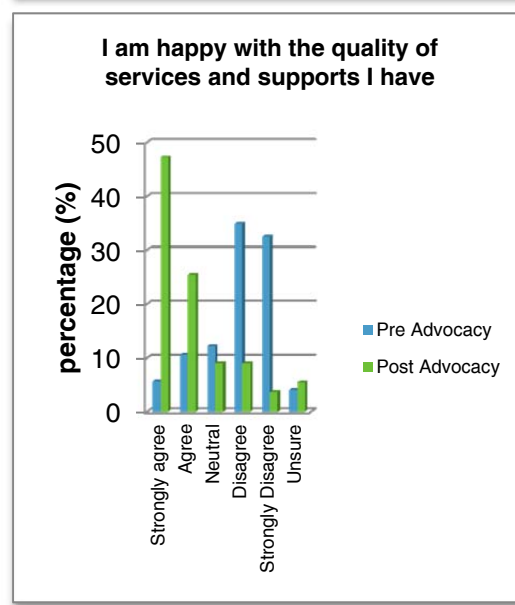
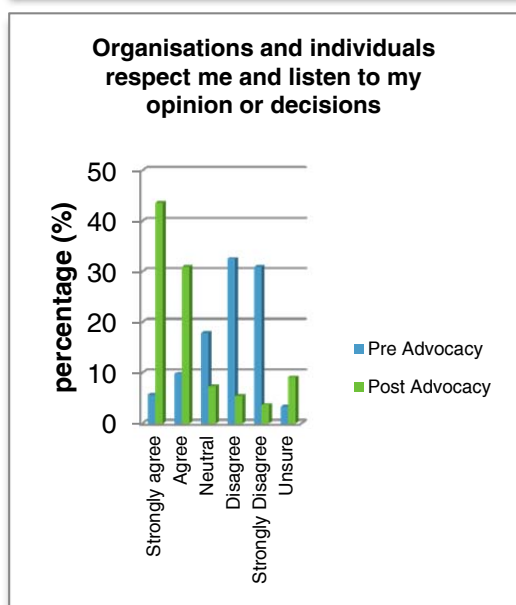
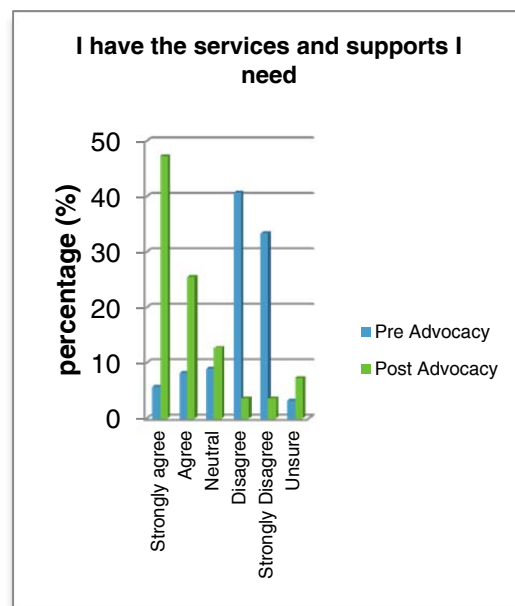
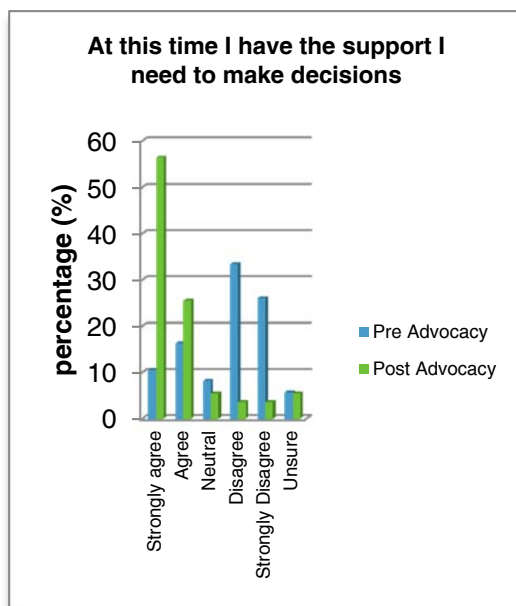
"I couldn't speak more highly of my advocate helping and working with our family. He was so professional, kind and caring at all times."

"My advocate's warmth and energy were great boost to me, and she had positive, practical ideas. Most of all I welcomed her presence at meetings with my providers and beauracrats. She let me speak for myself and occasionally added things that were helpful. At the end I felt stronger and validated."

Staff at ADACAS were most helpful and supportive.

Figure 1.3. Client Outcomes:





Human Rights and Advocacy

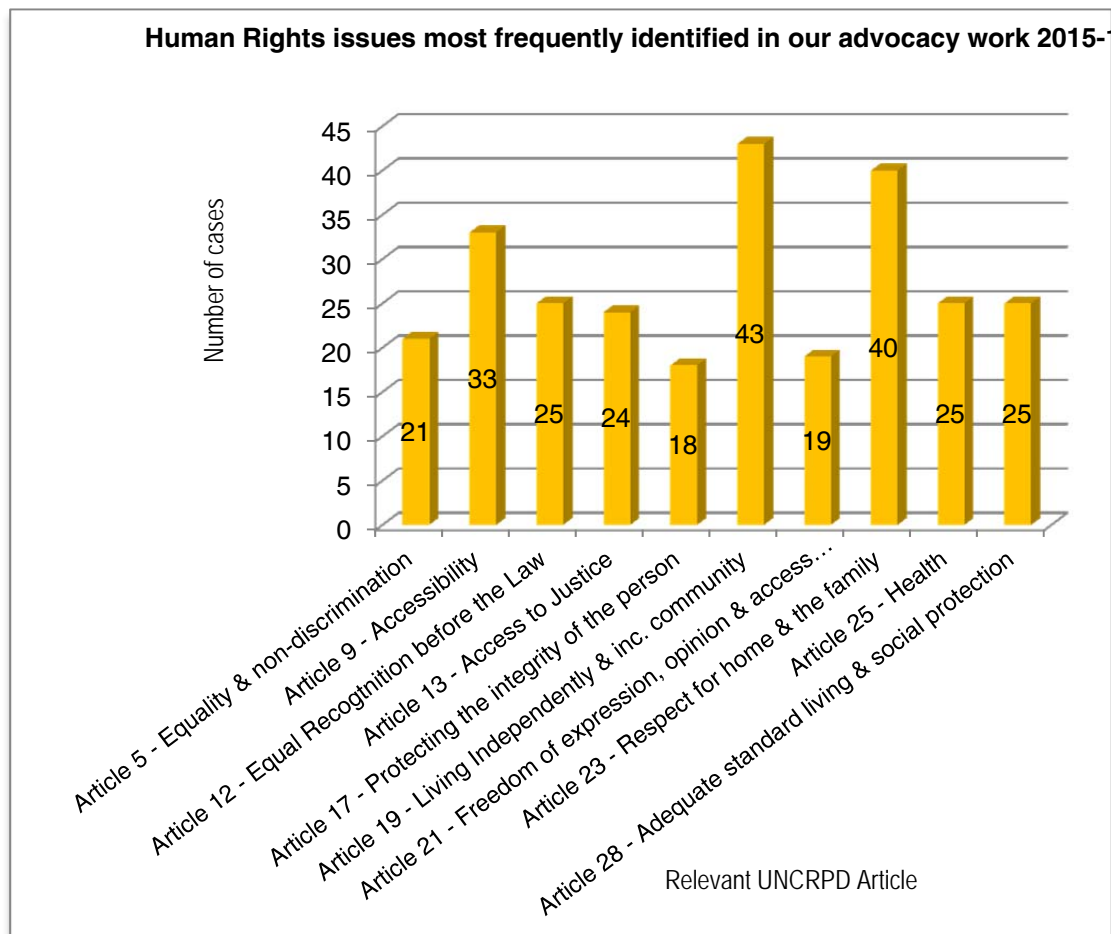


Figure 1.4

Another initiative we commenced last year, was to collect information about which articles of the United Nations Convention on the Rights of People with Disabilities are engaged by the advocacy cases we have. This year the top three issues are Article 19: living independently and being included in the community, Article 23: respect for home and the family, and Article 9: Accessibility. Followed by Article 28: Adequate standard of living and social protection and Article 12: equal recognition before the law. Article 23 did not make it into the list of top 10 last year, yet ranks second this year which is an interesting shift. The relative increase in

prominence of Article 12 aligns with our strong interest in supported decision making and the systemic work we have been undertaking on this topic. A key element of our systemic work was contributing to a review of ACT Guardianship legislation which has come about in response to the need to reflect Article 12 in Australian laws. We will continue to watch with interest as we gather this data again over the next 12 months.

Advocacy for People with Disability

Total Number of clients (HACC YP)	187
Total Number of cases (HACC YP)	227
Total Number of clients (NDAP)	61
Total Number of cases (NDAP)	71
Total Number of clients (IDEAS)	6
Total Number of cases (IDEAS)	7
Total Disability Advocacy clients	254
Total Disability Advocacy cases	305

This past year has been particularly busy for the disability team with not only staffing changes, including the appointment of a new External Merits Review manager half way through the year, but also an increase in the number and complexity of cases. During the year we gained an additional 46 clients and 53 cases from last year's results. A significant jump in case/client numbers was witnessed in the HACC Younger People funding, which perhaps may be explained by stronger uptake of support for NDIS related issues, as more people over the year were assisted with support from the NDIS.

Our team of advocates has continued to demonstrate their dedication and commitment to both ADACAS and their clients. Their professionalism over the past year has been reflected in our first audit under the National Standards for Disability Services, where our advocates achieved an outstanding client satisfaction rating of 9.6 out of a possible 10.

The NDIS is now in the final stages of roll out across the ACT. Our advocates continue to support our clients to self-advocate or, where necessary, assist our clients with NDIS matters. We are finding there is a growing need of support with access requests.

Our advocates are also learning to focus and hone their advocacy skills in the new role of ADACAS Support Coordinator. Although the NDIA does not fund individual advocacy it does provide participants with support from

a Support Coordinator, and ADACAS has registered the organisation with the NDIS to provide support in this role. ADACAS Support Coordination seeks to reduce marginalisation and devaluation of the participant and to build the person's capacity for independence, control and choice over the services they receive. We are committed to providing support coordination to people who would value an advocacy model in their particular circumstances.

Once again, our work to provide advocacy to people in the Capital region of NSW was only a very small part of our activity over the year. It will be interesting to reflect how this may change with the National Disability Insurance Scheme (NDIS) rollout in the region over the coming year.

ADACAS contributed a submission and gave evidence at a hearing relating to the senate inquiry into People with Disabilities in Institutional Settings. Our evidence related to the abuse that some of our clients have experienced in institutional settings and the need for the government to provide better protection to some of our most vulnerable citizens.

We were also busy providing input into a range of different policy and review processes through our systemic advocacy funding. Highlights include continuing involvement in the Inquiry into Younger Persons in Nursing Homes, ACT Mental Health and Wellbeing Framework, Restorative Justice Forum and Network, Disability Employment Framework Consultation and the NDS 2nd Implementation Plan Comments. We have been active participants in various forums including the Forum on Child Sexual Assault, Disability and the Justice System and our 25th anniversary events.

Below are some case studies from our advocates. The case studies have been de-identified to protect the privacy of our clients.

Strengthening Self-Advocacy Skills – Dianne

Dianne approached ADACAS with a concern regarding a service quality issue. She explained that she was to have been receiving help from this service, but that since the initial meetings some months back, her calls were no longer being returned, and that her concerns were not being acted upon. Dianne felt that there was a significant mismatch between what she had been promised and the level of support she was receiving and explained that she wanted two things: to switch service provider, but also to lodge a complaint against the current provider. It was for this second task that she was seeking advocacy assistance. Dianne had never lodged a complaint before and was unsure as to the best approach to take. The advocate discussed Dianne's concerns with her as well as the service providers' internal procedures for lodging a complaint. With support from the advocate Dianne drafted the complaint letter and edited it to ensure that both her complaints and her desired outcomes from the complaints process were clearly stated. Dianne lodged the finalised letter herself and, with some guidance from the advocate, participated in the subsequent complaint resolution process with the service. The outcome of the process was that Dianne received a letter of apology from the service, acknowledgement of where the systems, policies and procedures had failed, as well as an undertaking that in the future no other client would face similar problems. Dianne was very happy with this outcome, and told her advocate that she was relieved that this outcome would result in better service provision for herself and other clients. She told the advocate that she felt more comfortable about her ability to self-advocate and was confident that she could do this by herself if a similar situation arose in the future.

Referral to Appropriate Services – Richard

Richard is a 59 year old man living with a brain injury that he had acquired in a suicide attempt. He lives with bipolar and depression.

Richard's relations with family broke down, and due to being charged by the police with an offence was unable to return to his family home. He had no income or accommodation, was refused bail and transported to prison, despite not entering a plea and no conviction being made against him. He was imprisoned solely due to a lack of appropriate housing available to him. Ordinarily, the charge would have led to an option of bail being made available. Richards' family members wanted Richard to remain at the prison as they felt that the prison would provide him with a secure and structured environment where he could receive treatment for his mental health conditions. Richard did not want to remain at the prison but wanted to be able to live in the community.

The advocate was able to speak up on behalf of Richard and give a voice to his express wishes and, in doing so, highlighted the fact that institutions are not environments in which people thrive. By bringing together a range of stakeholders, the advocate was able to achieve positive outcomes for Richard and identify immediate short term and sustainable long term accommodation as well as NDIS funding for him.

Living with Mental Health Issues - Cynthia

Cynthia was admitted into the hospital in February 2016 with a respiratory tract infection that resulted in complications, a tracheotomy and eventually a permanent condition. Cynthia lived in the stroke unit of a hospital. She had Phelan McDermid Syndrome, which causes developmental delay, could not communicate verbally, incontinence, is PEG fed, uses a wheelchair and sleeps in a specialized bed. There were no feasible housing options available for this client, and thus she was forced to live indefinitely in hospital.

Cynthia and her guardian initially requested ADACAS to provide an advocate to help her to transition into the community as she no longer had anywhere to live outside the hospital: her family could not look after her as she required around the clock care. Cynthia also needed some specialized equipment, as a result of the tracheotomy. The advocate supported Cynthia at numerous meetings until ACT Health eventually agreed to purchase equipment, including humidifiers and suction. As Cynthia had not been happy with the service provider who had originally supported her, the guardian requested ADACAS to provide Support Coordination.

As Cynthia's Support Coordinator, the advocate prepared a submission for priority housing to the Priority Social Housing

scheme. She applied for Specialised Disability Accommodation (SDA) under the NDIS. At present the advocate is preparing a review of Cynthia's NDIS plan so that SDA funding can be made available to her and so that she can access supported accommodation with around the clock support, including medical personnel. Pending the NDIS review Cynthia, with the help of her advocate, has been able to access companionship support (including support with reading, going to the movies, having her nails painted, brushing her hair etcetera) while she remains in hospital. These supports improve Cynthia's quality of life while she is still required to live in hospital and have been well received by Cynthia, her guardian and the hospital staff.



Jenny Macklin MP speaking at ADACAS event for International Day for People with Disabilities December 2015

My son has settled well into College. Staff have been mostly supportive of his disability. He has approached the staff on a few occasions and successfully negotiated for support for exam times and doing research. Thank you for your support.

External Merits Review Support

ADACAS continues to earn its reputation around the ACT for the depth of NDIS knowledge. We are often asked to provide advice on NDIS matters and continue to receive referrals from other services..

We continue to network closely with NDIA staff and with the disability sector in the final stages of the NDIS rollout in the ACT. Included in our networking efforts, we are having regular meetings with key NDIA employees which enable us to raise concerns around process, quality and safeguards.

ADACAS is continuing its work in fostering self-advocacy and providing information to participants and prospective participants. However, despite ongoing promotion by ADACAS, we continue to be concerned about how well people are understanding the review processes and their rights to appeal.

ADACAS provides education and information sessions about NDIS, and its review processes. We have also aired a radio ad on local radio throughout the year to draw attention to the availability of support for people unhappy with NDIS decisions.

This year we have experienced an increase in External Merit Review (EMR) cases and have restructured to share the EMR Support Officer role across an additional advocate, which will assist ADACAS to continue providing a high quality service to our clients.

Appealing an NDIA Decision – Mario

As part of their NDIS plan, a young person was assessed by a speech pathologist who recommended a particular piece of assistive technology. The NDIS declined to fund the equipment. The decision to decline the device was based on whether or not the support represents value for money in that the costs of the support are reasonable relative to the benefits to be achieved and the cost of alternative supports. An internal review of the decision took many months but did not change the original decision. This

was communicated to the client a week before Christmas. The family was from a culturally and linguistically diverse background and experienced a number of family issues over the Christmas period. The speech pathologist involved in the case contacted ADACAS and requested support for the family. However, by the time ADACAS was contacted the 28 day period for appealing the decision had lapsed. The advocate applied for an extension of time with the Administrative Appeals Tribunal, explaining that the family had been experiencing numerous personal challenges and also pointing out the lengthy period of time that the NDIA had taken to undertake the internal review. The advocate assisted the family to prepare a statement to the tribunal, about the difficulties that they had been experiencing and that they had not received much information about how to review a NDIA decision.

The young persons plan expired during this process so the request for an extension of time to appeal was declined. The advocate helped the client to lodge another internal review request. As part of the internal review the NDIA requested and organized an independent speech pathologist to assess the effectiveness of the device that had been requested. The independent speech pathologist supported the original speech pathologist's recommendation for the device. The NDIA accordingly decided to fund the device. The young person now has the communication device and is beginning to use it, much to the families delight.

Through this process ADACAS has gained valuable insight into the processes of the NDIA and the AAT, which has served to greatly benefit our clients.

My advocate "successfully circumvented the NDIS in order to get justice for me. He did a good job and I am happy with the result. Thank you!"

Community Mental Health Program

Total Number of clients (CMHP)	61
Total Number of cases (CMHP)	73

ADACAS supports mental health consumers through funding received from the Community Mental Health Program. This year we provided advocacy to 61 clients living with mental health issues including clients who required advocacy support so that they could receive support with attending hearings at the Psychiatric Treatment Order Tribunal.

Through regular staff training sessions, ADACAS ensures our staff are up to date with the latest legislation. On 1 March 2016, the ACT's new Mental Health Act 2015 came into effect, giving those in the ACT living with a mental illness, or their carers and family members, greater opportunity to contribute to decisions on their treatment, care and support. This new Act, which replaces the Mental Health (Care and Treatment) Act 1994, creates a fresh approach to service delivery and brings the ACT's mental health legislation in line with the United Nations Convention on the Rights of People with a Disability and the ACT Human Rights Act 2004.

ADACAS also continues to raise awareness of consumer rights throughout the mental health sector especially in regards to promoting the changes in the new Act. We have been active in a number of education, networking and linking meetings including, Mental Health Services, Mental Health Community Coalition, the Mental Health in Multicultural Australia Consumers' and Carers' project, National Mental Health Consumers' and Carers' Forum and continuing with our regular visits to the Adult Mental Health Unit.

Requesting a Change of Psychiatrist – Brian
Brian had been a client of ADACAS for the two years, receiving assistance to attend and

have a voice at his Psychiatric Treatment Order (PTO) hearings. Brian was experiencing issues with his psychiatrist at ACT Community Mental Health for a number of years but his concerns were not being taken seriously; he was not feeling comfortable with speaking to his psychiatrist or receiving treatment from him. Brian found a psychiatrist at another mental health service whom he preferred. Brian had approached his psychiatrist at ACT Community Mental Health and asked if he could change psychiatrists and see the one at the community centre for the PTO. The ACT Community Mental Health psychiatrist, who said that Brian had to continue to see his assigned psychiatrist for the duration of the PTO, denied this request.

Brian approached his advocate and requested help. The advocate helped Brian with writing a complaint letter to ACT Health Consumer Feedback. He raised in his letter the dissatisfaction he experienced with the ACT Community Mental Health psychiatrist and the aspects of his interaction with the psychiatrist that had made him feel uncomfortable. As a result of the complaint a response was received from the Executive Director, acknowledging his complaint and approving his transfer from ACT Community Mental Health to the psychiatrist at the community service for his Psychiatric Treatment Order. Brian was still under the Chief Psychiatrist in accordance with the conditions of the PTO but could see the specialist of his choice. Brian was satisfied with this outcome.

"Overall my experience with ADACAS has been very good, I learned many skills (like how to write in a way that does not offend and in a respectful manner) that are helping me be my own advocate."

Advocacy for Older Persons

Total Number of clients (HACC OP)	86
Total Number of cases (HACC OP)	106
Total Number of clients (NACAP)	30
Total Number of cases (NACAP)	33
Total Older Persons Clients	116
Total Older Persons Cases	139

The Aged Care Team continued to provide advocacy support during the year to vulnerable elderly people who needed an advocate to have their voices heard. Areas of concern for our clients included the prevalence of elder abuse, particularly with family members abusing enduring powers of attorney for their own financial benefit; service provision standards where the quality of services being received were not of an adequate standard or were insufficient to assist a client to continue living at home independently; supporting the rights of clients who want to continue living at home and not in a residential aged care facility, despite pressure from family, hospitals, service providers; and helping older people living with dementia to have their expressed wishes recognised and followed.

The aged care advocates continue to work together as a team to ensure that the rights of older people are respected and that their wishes to live their lives as they see fit form the basis of decisions made that concern their lives.

The ongoing implementation of My Aged Care and Consumer Directed Care continues to be an area of concern for clients who may not understand how to navigate the system and need advocacy support to assist them. People from culturally linguistically diverse (CALD) backgrounds have experienced particular challenges in this regard, exacerbated by difficulties communicating due to culture and language barriers and reflected in the low uptake of CALD consumers with the My Aged Care program.

ADACAS continued to provide education and outreach to consumers of aged care services, industry staff, carers, families and friends into the rights of older people, ADACAS and the role of advocacy in the lives of older people. In addition we are providing education on prevention of elder abuse; and cross-cultural communication for consumers from culturally and linguistically diverse languages. One elder abuse prevention training session was delivered to a group of elderly Spanish speakers in Spanish, by an aged care advocate. We are exploring the possibility of providing relevant training to consumers of different cultural/ethnic backgrounds in relevant community languages. Given the high level of professionalism in training ADACAS continues to be regularly approached to provide professional training to industry staff and was able to secure funding from one residential aged care provider to provide induction and ongoing training in elder abuse awareness training to professional carers. We continue to provide education and training to various stakeholders including the CIT, aged care professionals; and various ethno specific groups.

Our outreach takes place for residents in all aged care facilities located throughout the ACT. The objective is to connect with residents and provide them with information about ADACAS, their rights and how advocacy can support. This is one mechanism whereby the most vulnerable older people can have the opportunity to meet and seek support and assistance from an advocate.

ADACAS has been active in representing the interests of older people via vigorous systemic advocacy work as well as active participation in networking and outreach opportunities and events. Including:

- submitting our clients' experiences to the National Inquiry into Employment Discrimination;
- participating in the Council on the Ageing Roundtable discussion on Elder Abuse; participating in the World Elder Abuse Awareness Day network; and the Elder Abuse Prevention Network;
- manning a stall at the Planning Future Pathways Expo; and the Council on the Ageing Seniors' Expo;
- attending the ACT Agency Liaison Group quarterly meeting;
- representation by the CEO on the ACT Ministerial Advisory Council on Ageing;
- participation in the Older Persons' Advocacy Network;
- radio interviews regarding the issue of elder abuse;
- giving evidence on elder abuse at estimate's hearings subsequent to the announcement of the ACT budget.

It has been a very productive year for the Aged Care Team, with many clients assisted to access their rights.

Lack of Guardian Support – Jane

The advocate responded to a Friday afternoon call from an elderly woman, Jane, who was in distress, stating that she had no food in her fridge or money. She claimed that her guardian had refused to come to her assistance or provide her with money for groceries. The advocate contacted the Red Cross and managed to organise a food parcel to be delivered to Jane, before the weekend. On Monday morning Jane contacted ADACAS to thank the advocate, stating that a Red Cross employee had come to her house and given her some money so that she could buy some food.

A few months later the manager of a residential aged care facility contacted the advocate requesting that she come to the facility to meet Jane, who had been admitted to that particular facility. She had fallen and hurt herself and was having respite at the facility so that she could access rehabilitation in order to regain her strength and mobility.

The advocate went to meet Jane. She learned that Jane's relationship with her guardian had deteriorated. Her guardian had organised a meeting with the medical staff of the nursing home with the intention of having Jane permanently admitted into the home. Jane did not want to live in a nursing home, but preferred to return to her own home. Her guardian had informed the staff that he wanted to go to the tribunal and request that his guardianship over Jane be revoked, as he no longer had any interest in being responsible for her.

The advocate represented Jane's wishes to the guardian impressing on him that a decision about her future should not be made before the guardianship orders were reviewed.

A request for guardianship review was submitted and the advocate attended the tribunal hearing with Jane. The tribunal member accepted the guardian's request to withdraw his guardianship. The tribunal appointed the Public Advocate to provide guardianship over Jane. The member asked the advocate if she had something she wished to say during the hearing. The advocate told the tribunal member that it was her client's wish to return to her own home living with her little dog and that this was Jane's expressed wish, as communicated to her advocate.

The member and the public guardian agreed to this course of action. Jane was able to return home, with support services so that she could be reunited with her little dog.

"When I met my advocate I was so happy that she spoke up for me and made a big difference as she told the medical team that I did not want to go into a nursing home and we made them understand I was going home. I want to thank her for always being there to support me."

Supported Decision Making

Supported decision making (SDM) during the year was best characterised by growth and learning through project work and fee for service training.

Link and Learn Supported Decision Making

ADACAS has been undertaking the Supported Decision Making Link and Learn action research project, funded by Disability ACT and the NDIA since September 2015. Project Officer Tina Dowse joined Link and Learn in October, bringing with her a background in rights and training, particularly with people with intellectual disability. Tina is working with the SDM Project Coordinator, Kate Rea.

Link and Learn has been designed to embed supported decision making across the ACT through, SDM training and mentoring with a diverse range of stakeholders. This includes people with impaired decision making ability aged 18 – 65, their families, friends and carers. The training covers awareness raising, skill building and relationship development and is delivered as a train the trainer model - so that participants can share what they have learnt with others. The project design is testing a universal model for the delivery of SDM. This recognises that everyone in our community has a role in SDM – as decision makers and supporters. Professional development training enables us to build skills and awareness with service providers, professionals, educators and the business community. In addition to the training the project provides mentoring for SDM including working with a small group of people who need more intensive support to establish a support relationship, or who have complex decisions and immediate support needs.

Link and Learn will run until September 2017, and has so far has enabled awareness raising with a very broad range of stakeholders, to recognise the ways in which decision support already takes place in our

community, learn more about what is needed for decision support to be available when and where it is needed and delivered in a way that suits the needs of different decision makers. To date, it is clear that responses to SDM need to be adaptive and diverse. For some decisions and decision makers, the recognition that comes with formalised support is invaluable and necessary, for others more informal support may be more accessible, practical or personally preferable.

The project will continue to ask questions of what supports people need to make decisions under the NDIS, to exercise capacity with support under the new Mental Health ACT, the relationships between SDM, advocacy and guardianship, what people need to establish effective sustainable decision support in their lives, and responses to social isolation to ensure it is not a barrier to decision making.

SDM and the Implementation of the New Mental Health Act

ADACAS was contracted by Mental Health Justice Health Drug and Alcohol services to deliver SDM training, on a fee for service basis, as part of their workforce development for the new Mental Health (Treatment and Care) Act 2015, which was implemented on 1 March 2016. 286 clinicians attended the one-day training, which was developed and delivered by Kate Rea.

ADACAS continues to maintain interest in the implementation of the new Act, supporting two clients at PTO reviews. The new Act gives people the right to exercise decision-making capacity, with assistance as needed. ADACAS has been asking clinicians to describe the decision support they have given during the assessment of decision-making capacity.

Kate Rea also presented on decision support within the new Act at information sessions with the Mental Health Community Coalition and the Mental Health Consumer Network.

National Supported Decision-Making Framework

Following the recommendations of the National Supported Decision Making Network ADACAS has been engaged, with other stakeholders, in creating a proposal for the development of a national framework for SDM. The purpose of the framework is realising the goal of ensuring that supported decision making is available to those who need it in accordance with the UN Convention on the Rights of People with Disability (UNCRPD.) ADACAS has written to premiers and chief ministers in all jurisdictions, to garner support for the development of the national framework.

SDM, Psychosocial Disability and the NDIS,

ADACAS has completed research and recommendations for a project commissioned by Mental Health Australia. The report, Supported Decision Making, Psychosocial Disability and the NDIS has been released and is available on the ADACAS website.

Easy English

ADACAS has undertaken fee for service Easy English writing for Advocacy Tasmania, Deloitte, and SHFTPAC.

Digital Innovation Reference Group

Kate Rea has joined the Digital Innovation Reference group, auspiced by the NDIA.

Exercising Greater Decision Making Capacity – Gerald

Gerald, a client living in supported accommodation, had been living under a guardianship order since becoming an adult. Gerald was unhappy with the guardian he had and wanted to change. In discussing the matter with Gerald and his carers it became clear to the advocate that his capacity for decision-making had never been assessed. The advocate discussed this issue with the public guardian and suggested that Gerald was capable of making decisions with support. Gerald had an active circle of support to assist him to make decisions. ADACAS was able to provide support for him via the SDM Link and Lean project to help facilitate this and to ensure that decisions that were made affecting his life centred on Gerard's express wish. The advocate worked with Gerard to take the matter to the tribunal and, with the support of the public guardian, have the guardianship order revoked. The tribunal found that while Gerald had an impaired capacity to make decisions he had the supports in place so no longer need a guardian.



SDM Link & Learn Training Resources

The NDIS Young People in Nursing Homes Connections Project



25th Anniversary forum with Summer Foundation's Joanna Stewart.

Across Australia, an estimated 6200 people under the age of 65 currently live in residential aged care facilities, where the average age is 84. In the ACT region, there are more than sixty people living in residential aged care facilities under the age of 65. Many are socially isolated and have been forgotten. In the majority of cases nursing homes are inappropriate places for younger people to live as they focus on end of life care and do not have the resources to provide everything younger people need.

Research indicates that most of these young people in nursing homes were unaware of their eligibility for support through the NDIS. The NDIS Connections Project was initiated to ensure young people in nursing homes did not miss this opportunity.

ADACAS was delighted to deliver the project in the ACT through a partnership with the Summer Foundation. The Summer Foundation was established in 2006. Its mission is to resolve the need for young people to live in nursing homes.

The project involved contacting every young person living in ACT residential aged care and providing support so that they could enter the NDIS. There were a number of

challenges including the quality of the data about how many people were involved and making connection with family guardians, many of who live interstate.

Each person had a story. Simply hearing their stories proved both compelling and emotional. Before entering the nursing homes these families had endured many months sometimes years of caring for their loved one at home. Many spoke about the hardships, trauma and lack of support leading up to the decision to enter a nursing home. The majority recognised that there were no other choices for these young people. They had somehow come to terms with the fact that the person could not be cared for at home and therefore no longer participate in life beyond the nursing home.

Careful work was required to properly present the hope that the NDIS represents. Community participation, social activity, therapies, assistive technology were all things that these young people were missing out on and could be funded by entering the NDIA even if they could not move out of a nursing home.

Through lots of persistence and patience with the NDIA we have achieved very positive outcomes for these young people. They will now be able to reconnect with community, have suitable equipment and once again enjoy those simple things we all take for granted.

The ACT experience has contributed to the work the Summer Foundation is undertaking to provide advice about how to ensure all younger people in nursing homes, across Australia are supported to access the NDIS. The needs of this group for support to apply and prepare for the NDIS are significant.

"I'm very grateful for all the help you have given me."

ADACAS Financial Report 2015-16

Board Report

Statement of Comprehensive Income

Statement of Financial Position

Statement of Cash Flows

Notes to and forming part of the Financial Statements

Board's Declaration

Audit Report to Members

"I am very grateful for the help I received."

"At the start I wished things could have proceeded faster but clearly the service is very much in demand. In responding to the survey as I have, I hope I have supported ADACAS in its continued operation and funding."



Raspberry filled, sponge cake to celebrate ADACAS's 25th Anniversary

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
BOARD'S REPORT

Your board members submit the financial report of ACT Disability, Aged and Carer Advocacy Service Incorporated for the financial year ended 30 June 2016.

Board Members

The names of board members throughout the year and at the date of this report are:

Stephen Still (Chairperson)
Kim Stewart (Treasurer)
Dominic Cookman
Sean Fitzgerald
Alana Fraser
Diana Nasr
Kym Duggan
Coleen Box (Public Officer)

Principal Activities

The principal activities of the association during the financial year were: promoting and protecting the rights of people with disabilities, of people who are ageing, and of those who care for them.

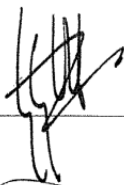
Significant Changes

No significant change in the nature of these activities occurred during the year.

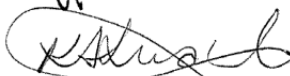
Operating Result

The surplus for the 2016 financial year amounted to \$74,346.

Signed in accordance with a resolution of the Board.



Stephen Still (Chairperson)



Kim Stewart (Treasurer)

Dated this 25th day of October 2016

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED

ABN: 15 750 251 576

**STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30 JUNE 2016**

	Note	2016	2015
		\$	\$
INCOME			
National Disability Advocacy Program		199,023	199,672
Disability ACT (SDM Grant)		100,000	103,669
Home & Community Care (net of c/f amount)		527,415	485,994
National Aged Care Advocacy Program		154,524	152,391
Mental Health Consumer Advocacy		126,572	118,951
Disability ACT Grant		-	1,091
External Merits Review and Development		98,000	118,000
Link and Learn		85,824	-
Summer Foundation		46,000	-
ACT Business Investment Package		5,330	-
Interest received		9,677	10,280
Membership Income/Donations		1,578	559
Co-ordination of Supports		17,761	-
IDEAS Inc Brokerage		6,229	5,833
Contribution for Motor Vehicles		18,165	20,448
Comm Serv Dir Arts ACT		-	6,365
Profit on Disposal of Assets		-	425
Other ADACAS Income		77,486	52,701
		<u>1,473,584</u>	<u>1,276,379</u>
EXPENDITURE			
Advertising and Promotion		13,540	7,252
AGM, meetings & conferences		16,112	6,477
Audit Fees		2,150	2,000
Consultant Fees		41,018	41,221
Depreciation		22,691	22,846
Equipment Purchase & Maintenance		11,623	8,666
Insurance		15,429	12,424
Loss on Disposal of Assets		4,106	750
Motor Vehicle, travel & mileage		49,470	52,524
Office supplies/stationery & general expenses		32,240	15,211
Prof fees/governance/memberships		10,624	4,096
Rent		46,686	46,545
Salaries & staff benefits		950,385	858,965
Staff development/support supervision		26,662	29,216
Staff leave provisions		27,948	30,205
Superannuation		91,156	80,126
System monitoring & development		18,225	17,227
Telephone/computer and internet		19,172	21,137
		<u>1,399,238</u>	<u>1,256,887</u>
Net current year surplus		<u>74,346</u>	<u>19,492</u>
RETAINED SURPLUS AT THE BEGINNING OF THE FINANCIAL YEAR		<u>262,819</u>	<u>250,467</u>
Prior period adjustment		-	(7,140)
RETAINED SURPLUS AT THE END OF THE FINANCIAL YEAR		<u><u>337,165</u></u>	<u><u>262,819</u></u>

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2016

	Note	2016 \$	2015 \$
ASSETS			
CURRENT ASSETS			
Cash on hand	2	406,194	271,372
Accounts receivable and other debtors	3	48,214	54,326
TOTAL CURRENT ASSETS		<u>454,408</u>	<u>325,698</u>
NON-CURRENT ASSETS			
Property, plant and equipment	4	97,959	65,546
Leasehold Improvements	4	7,194	7,245
TOTAL NON-CURRENT ASSETS		<u>105,153</u>	<u>72,791</u>
TOTAL ASSETS		<u>559,561</u>	<u>398,489</u>
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	5	66,489	51,516
Employee provisions		84,334	68,305
Unexpended grants		71,573	12,320
TOTAL CURRENT LIABILITIES		<u>222,396</u>	<u>132,141</u>
NON-CURRENT LIABILITIES			
Provisions	6	-	3,529
TOTAL NON-CURRENT LIABILITIES		<u>-</u>	<u>3,529</u>
TOTAL LIABILITIES		<u>222,396</u>	<u>135,670</u>
NET ASSETS		<u>337,165</u>	<u>262,819</u>
MEMBERS' FUNDS			
Accumulated Surplus		<u>337,165</u>	<u>262,819</u>
TOTAL MEMBERS' FUNDS		<u>337,165</u>	<u>262,819</u>

The accompanying notes form part of these financial statements.

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2016

	Note	2016 \$	2015 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Operating Income		1,830,080	1,377,142
Interest Income		9,677	10,280
Payments to suppliers and employees		(1,645,776)	(1,404,068)
Net cash provided by/(used in) operating activities	8	193,981	(16,646)
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from sale of property, plant and equipment		10,436	7,500
Purchase of property, plant and equipment		(69,595)	(11,884)
Net cash provided by/(used in) investing activities		(59,159)	(4,384)
Net increase/(decrease) in cash held		134,822	(21,030)
Cash on hand at beginning of financial year		271,372	292,402
Cash on hand at end of financial year	2	406,194	271,372

The accompanying notes form part of these financial statements.

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2016

Note 1 Summary of Significant Accounting Policies

This financial report covers ACT Disability, Aged and Carer Advocacy Service Incorporated as an individual entity. ACT Disability, Aged and Carer Advocacy Service Incorporated is an association incorporated in the Australian Capital Territory under the *Associations Incorporation Act 1991* and the *Australian Charities and Not-for-profits Commission Act 2012*.

Basis of Preparation

The financial report is a special purpose financial report that has been prepared in order to satisfy the reporting requirements of the *Associations Incorporation Act 1991* and the *Australian Charities and Not-for-profits Commission Act 2012*. The board has determined that the association is not a reporting entity.

The financial report has been prepared on an accruals basis, is based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

The following significant accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

Income Tax

The Association is a non-profit organisation and is exempt from paying income tax in accordance with Section 50-5 of the *Income Tax Assessment Act 1997*.

Depreciation

The depreciable amount of all fixed assets are depreciated on a diminishing value basis over the useful lives of the assets to the association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable assets are:

Computers	40%
Phone System	20%
Motor Vehicles	22.50%
Air Conditioning	20%

Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO). In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of the cost of acquisition of the asset or as part of an item of expense.

Employee Benefits

Provision is made for the liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements expected to be settled within one year, together with any entitlements arising from wages and salaries, annual leave and long service leave that will be settled after one year, have been measured at their nominal amount.

Note 2 Cash On Hand

	2016	2015
	\$	\$
Cash at Bank	405,950	271,296
Petty Cash	244	76
Total cash on hand	<u>406,194</u>	<u>271,372</u>

Note 3 Trade and Other Receivables

Prepaid Expense	28,751	30,403
Sundry Receivable	13,345	19,221
Bond	6,118	4,702
	<u>48,214</u>	<u>54,326</u>

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2016

Note 4 Property, Plant and Equipment

	2016	2015
	\$	\$
Equipment & Fittings		
At Cost	70,744	48,390
Less: Accumulated depreciation	(27,842)	(30,333)
	<u>42,902</u>	<u>18,057</u>
 Motor Vehicles		
At Cost:	89,158	96,358
Less: Accumulated depreciation	(34,101)	(48,869)
	<u>55,057</u>	<u>47,489</u>
 Total Property, Plant and Equipment	<u>97,959</u>	<u>65,546</u>
 Leasehold Improvement		
At Cost	7,300	7,300
Less: Accumulated depreciation	(106)	(55)
	<u>7,194</u>	<u>7,245</u>

Note 5 Trade and other payables

Business Credit Cards (CBA)	1,193	-
Trade payables and Accruals	41,638	30,590
GST and PAYG payables	23,658	20,926
	<u>66,489</u>	<u>51,516</u>

Note 6 Provisions

Current		
Employee entitlements - annual leave	84,334	68,305
	<u>84,334</u>	<u>68,305</u>
 Non Current		
Employee entitlements - long service leave	-	3,529
	<u>-</u>	<u>3,529</u>

Note 7 Unexpended grants

Link and Learn	36,903	-
ACT NDIS	34,670	-
ACT Health - HACC	-	12,320
	<u>71,573</u>	<u>12,320</u>

Note 8 Cash Flow Information

**Reconciliation of Operating Surplus (Loss)
with Cash Flow from Operations**

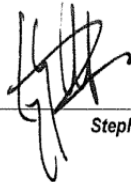
Operating Surplus (loss)	74,346	19,492
Prior Year Adjustment	-	(7,140)
 Add/subtract Non Cash Items		
Depreciation	22,691	22,846
Provision for staff leave entitlements		16,768
(Profit)/Loss on sale of assets	4,107	324
Operating surplus adjusted for non-cash items	<u>101,144</u>	<u>52,290</u>
 Movement in Current Assets and Liabilities		
Decrease/(increase) in Sundry debtors	6,111	(24,634)
Decrease/(increase) in Creditors	27,473	(47,463)
Decrease/(increase) in Unexpended grants	59,253	3,161
Net Cash from Operations	<u>193,981</u>	<u>(16,646)</u>

ACT DISABILITY, AGED AND CARER ADVOCACY SERVICE INCORPORATED
ABN: 15 750 251 576
RESPONSIBLE ENTITIES' DECLARATION

In the opinion of the Board Members of the ACT Disability, Aged and Carer Advocacy Service Incorporated (ADACAS):

- a. the financial statements comprising of the statement of financial position as at 30 June 2016, the statement of comprehensive income and statement of cash flows for the year then ended, notes comprising of the summary of significant accounting policies and other explanatory information give a true and fair view of ADACAS for the year ended 30 June 2016 and comply with the *Associations Incorporation Act 1991* and the *Australian Charities and Not-for-profits Commission Act 2012*; and
- b. at the date of this statement there are reasonable grounds to believe that ADACAS will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of the Board.



Stephen Still (Chairperson)



Kim Stewart (Treasurer)

Dated this 25th day of October 2016

Auditor's Independence Declaration**To the Board Members of ACT Disability, Aged and Carer Advocacy Service Incorporated**

As auditor for the audit of the ACT Disability, Aged and Carer Advocacy Service Inc. for the year ended 30 June 2016, I declare that, to the best of my knowledge and belief, there have been:

- no contraventions of the auditor independence requirements of the *Australian Charities and Not for Profits Commissions Act 2012* in relation to the audit; and
- no contraventions of any applicable code of professional conduct in relation to the audit.

Vincent's Assurance & Risk Advisory

Peter Sheville
Director

25 October 2016

canberra. brisbane. sydney. melbourne. gold coast

Level 7, AMP Tower, 1 Hobart Place, Canberra ACT 2600 t 61.2 6274 3400 f 61.2 6274 3499
GPO Box 680, Canberra ACT 2601 w www.vincent's.com.au

Liability limited by a scheme approved under Professional Standards Legislation other than for acts or omissions of financial services licensees.

assurance & risk advisory | forensic services | insolvency & reconstruction

Independent Auditor's Report

To the members of ACT Disability, Aged and Carer Advocacy Service Incorporated

We have audited the accompanying financial report, being a special purpose financial report, of ACT Disability, Aged and Carer Advocacy Service Incorporated (the association), which comprises the statement of financial position as at 30 June 2016, the statement of comprehensive income and statement of cash flows for the year then ended, notes comprising of the summary of significant accounting policies and other explanatory information.

Responsible Entities' Responsibility for the Financial Report

The board of ACT Disability, Aged and Carer Advocacy Service Incorporated is responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *Australian Charities and Not-for-profits Commission Act 2012*, the *Associations Incorporation Act 1991* and has determined that the basis of preparation described in Note 1 is appropriate to meet the requirements of the association and is appropriate to meet the needs of the members. The board's responsibility also includes such internal control as the board determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the association's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the board, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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Level 7, AMP Tower, 1 Hobart Place, Canberra ACT 2600 t 61.2 6274 3400 f 61.2 6274 3499
GPO Box 680, Canberra ACT 2601 w www.vincents.com.au

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Opinion

In our opinion, because of the existence of the limitation on our assurance over the comparative figures, and the effect of such adjustments, if any, as might have been determined necessary had the limitation not existed, we are unable and do not express an opinion as to whether the comparatives for 2015 and the results of ACT Disability, Aged and Carer Advocacy Service Incorporated's operations for the year ended 2015 are presented fairly in accordance with applicable Accounting Standards and the requirements of the *Associations Incorporation Act 1991* and *Australian Charities and Not-for-profits Commission Act 2012*.

In our opinion

- a) the financial statements of the association for the financial year ended 30 June 2016 are properly drawn up;
 - a. so far as to give a true and fair view of the matters required by subsection 72(2) of the *Associations Incorporation Act 1991* to be dealt with in the accounts for the financial year reported on;
 - b. in accordance with the accounting policies described in Note 1, the provisions of the *Associations Incorporation Act 1991* and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*; and
 - c. in accordance with proper accounting standards.
- b) proper accounting and other records have been kept by the association.

Basis of Accounting

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist ACT Disability, Aged and Carer Advocacy Service Incorporated to meet the requirements of the *Associations Incorporation Act 1991* and the *Australian Charities and Not-for-profits Commission Act 2012*. As a result, the financial report may not be suitable for another purpose.

Vincent's Assurance & Risk Advisory

Peter Sheville
Director

25 October 2016