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**Abstract**

In an interesting introduction to this paper, Richard Bruggerman cautions us to remember that 'while there are few doubts that economic theory works, ... it is only a part of the story in understanding human motivation or the workings of society'. He warns against seeing the service-brokerage model (which he refers to as 'Options Co-ordination') as perfect, and argues that safeguards need to be put in place to ensure people with disabilities not only get access to appropriate services but are provided with opportunities for citizenship, i.e. the gauge for success should be positive outcomes for people with disabilities. In addition, he poses a series of assumptions which have been made about Options Co-ordination, and questions the validity of these assumptions. Bruggerman presents issues that he believes need to be dealt with if the Options Co-ordination model is to achieve its goal. **Keywords: Individualisation, Attitudes**

## Pitfalls for Purchasers and Providers

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### Richard Bruggerman

The discipline of economics is founded on a number of building blocks, one of them being that people are consumers and that satisfaction or happiness will increase as consumption of goods and services increases. The more we consume, the more satisfied we become and, obviously, we will seek to enhance our opportunities to consume. Selling our labour for the highest possible price hence promotes our capacity to consume. On this and the other building blocks of the discipline, we have developed an "economic view" of the world, flowing from which is a current body of thought described as "economic rationalism". This currently seems to be the driving force in the Australian community.

However, the "economic view" of the world is but one part of the picture and we need to recognise that other things motivate people. These motivations have been most eloquently described recently by Professor Eva Cox in her notion of "social capital" which espouses the view that satisfaction can be achieved, not only from consumption, but through our social interactions and, indeed, through public service in the wider sense of the word. I would ask, if it is not unreasonable that in 20 years' time we might remember the more satisfying of two events that occurred on the one day, what might we remember purchasing a \$200 outfit or assisting a group of other people to return a pod of beached pilot whales to deeper water. While there are few doubts that economic theory works, we must always remember that it is only a part of the story in understanding human motivation or the workings of society.

We therefore need to ensure that, within the disability sector, we do not accept that the market forces which underpin the current purchaser / provider model are the be-all and end-all. If we do, we will treat people with disabilities as consumers rather than citizens. In deed, the term "consumer" is one that we should use with significant care in the disability sector lest we believe that, with the consumption of a service, all issues facing people with disabilities are resolved. Far from adding to our lives, services are the things that bring us back to square one. They might eliminate pain - they rarely by themselves bring happiness. Happiness comes from our relationships, our sense of belonging, our capacity to contribute and the pursuit of our special interests.

Professor Henry Mintzberg of McGill University, Montreal has suggested that there are four states that all people fulfil within a sovereign nation - we are customers, clients, citizens and subjects - and the challenge for societies and their governments is to get the balance right. Mintzberg has pointed out the difficulties in communist bloc countries where the balance swung too much towards the concept of people being subjects. He sees the recent changes in those countries not as a triumph for capitalism (an extension of consumerism), but a triumph of balance. Inherent in the concept of "citizen" is the notion of a contract - taking from our society and giving to our society. Senator Cheryl Kernot is in no doubt that these views are leading us to consider the Australian people as consumers rather than citizens.

Interestingly, Professor Peter Singer has suggested the ultimate economic test that might be applied to newborn babies with disabilities where, in line with his argument for “preference utilitarianism”, he invites us to consider whether there is any real difference in killing a deformed foetus and allowing a disabled neonate to die. This seems to negate the Judeo-Christian view of the intrinsic worth of human life and applies a human balance sheet approach. Although Singer has suggested that this might be limited to infants up to three months of age, once that premise has been accepted, why would it not apply to adults with disabilities, people who are aged or people who consume resources in our correctional facilities; indeed anyone who is a negative entry on the national balance sheet? I can see it now, "The Office of Assessment of Economic Worth" and its appeal mechanisms eventually spitting you out of the end of its conveyor belt, your organs harvested in a last effort to repay your debt to society before you are vitamised "Soylent Green" style into fish food. Of course, these policies and practices are not new and their actual implementation in Nazi Germany is graphically described in two books, "By Trust Betrayed" by Hugh Gallagher and "Racial Hygiene" by Robert Proctor. Stripping away the economic rhetoric, people with intellectual disability became "useless mouths to feed" and, using a form of preference utilitarianism, they could be eliminated - which they were. Are we not now seeing the thin edge of that particular wedge being driven into Australian society through the euthanasia debate?

All that I have wanted to do in this rambling introduction is to invite you to treat with caution the siren song of the economic rationalists. Who knows onto what rocks they beckon us?

In this paper, I will investigate the notion that we are dealing not only with consumers, but with citizens, and that we need to set in place safeguards and arrangements so that people with disabilities are treated not only as the consumers of the services that we provide, but are also given opportunities to enjoy their citizenship. I also want us to develop safeguards against one of the unintended effects of Options Co-ordination - that people with disabilities consume the services that purchasers purchase on their behalf from providers and that perhaps the funding and service agreement which documents it, defines the relationship and the limit to what happens. It has never been thus for, indeed, services have always gone beyond treating their clients as mere consumers and have striven to provide their clients with the opportunities for citizenship. We must ensure that this never changes in the future.

First, let me state that I fully accept the model being developed in South Australia. It has many advantages and I agree with its direction. Indeed, well before it became the policy of the current Government, I have been on record in stating that this is a desirable direction. For some time, I have been using the example of the "Australian Hamburger Commission" to demonstrate that some end-funded organisations have often treated clients with disdain, making them captives of care and ensuring that they remain low person on the totem pole.

In future, providers, be they Government, non-Government or for-profit, can rightly have no expectation that they will receive their funding for all time. Rather, their funding will depend upon the people they serve (or Options Co-ordinators on their behalf) choosing to continue to purchase services from them. A very desirable next

step would be to enable the person receiving the service (or their parent, friend or advocate) to make this decision themselves, although I concede that it will be some time before that is the norm rather than the exception. There seems to be an assumption that providers would not accept such a system, however, I believe that many organisations would welcome the opportunity to develop and prosper on the basis of providing good services to people with intellectual disability. That is, after all, the same principle whereby David Jones, the Ford Motor Company and the corner delicatessen measure their success and it is timely to bring that same culture and practice to our field.

In South Australia, The Intellectual Disability Services Council (IDSC) has in three instances removed funding from existing service providers because they were not meeting the needs of their clients. One of those was an IDSC service where, despite long-term attempts to resolve problems, we failed. The best thing that we could do for our clients and their families was to give them the choice of transferring that service to another organisation. They chose Catholic Family Services and everyone is extremely happy with the service that is now purchased on their behalf from that organisation. Hence, the funder /purchaser/ provider arrangements can be a valuable tool in ensuring that people with intellectual disability and their families have some additional power in the system. Let me hasten to add, it is only a little more power; I do not believe that people with disabilities will be empowered until we finally have the courage to give them the funding with the fewest strings as possible attached. However, in examining the new and emerging system, I am reminded of Newton's Third Law – that “to every action there is an equal and opposite reaction” - and would suggest that, if there are some good things that a new system puts in place, you are almost guaranteed to have some bad, unintended reactions. At the present time, some of these are being expressed in terms of assumptions and I would like to pose some of these assumptions to see how we might deal with them.

The first assumption seems to be that this is the first time that services will have been focused on individuals and their specific needs. This is patently not the case. In effect, Options Co-ordination, as it has been developed, does little more than formalise the mechanisms that have been in place for over a decade. As such, it will better deal with equity and rationalising scarce resources. However, I failed to hear the word "rights" mentioned because, as I will argue later, this is not a rights model; it is an individual model which indeed might work against collective effort, interdependence and mutual support. It focuses on how those who get something get it; it deals very little on how we support the large number of people who get nothing. Interestingly, as described, the model is essentially about the division of the funding, purchasing and providing functions, rather than about the way in which people with disabilities will be supported. I wonder whether the division itself will be the gauge of success rather than outcomes to people with disabilities. I do not recall it mentioning the quest of people with disabilities for their citizenship through opportunities and support.

The second assumption emanating from the current model is that the purchaser (Options Co-ordinators) will know exactly what service to purchase. They will plan the service and then present a plan to providers, asking them to tender to undertake the service and then make choices based on their best assessment of cost, quality and client choice. However, let us look more closely at this assumption.

It is highly unlikely that all Options Co-ordinators will have had experience in managing, or even understanding the workings of, accommodation services and it is almost certain that the prescription the Options Co-ordinator develops will need some modification by the agencies that have had long experience in providing these types of services. For example, in 1995/96, the funds obtained through the Efficiency Dividend were to be applied to accommodation services for some people with intellectual disability. We found that, in developing the services to meet their needs, a combination of staff from IDSC Community Teams and accommodation services needed to work together to ensure that the planned services were coherent and viable.

In examining this assumption, I want to ask you to consider the analogy of purchasing a sound system. If you were going to buy a sound system, you may have some idea about what you want to purchase. You might know that you want something that plays compact discs, can receive AM and FM frequencies and can be operated by remote control. You would probably also have a view about the amount of money that you wanted to spend. As the purchaser, however, you know nothing about technical specifications or indeed some of the other details that might assist you to come to a decision. What occurs in the purchasing process? The provider, i.e. the salesman, will tell you about the attributes of Model X, the efficiencies of Model Y and the overall superiority of Model Z. In this process, he will try to move you towards one of the more expensive models but it will be he, rather than you, who has the information. In an article in *The Bulletin*, "Surviving the Techno-Babble", Harvey Graham has described how totally disempowering this information imbalance can be for purchasers of motor vehicles.

*Then there's Tiptronic, Steptronic, Sensonic, Servotronic and Parktronic, not to mention traction control, yaw and stability control. One optic flicker of ignorance at any of these terms and the game's up. The pinstriped consultant will have you instantly in his grasp, smug in the certainty that you can be relentlessly pursued with Techno babble until, crying for mercy, you sign on the dotted line in a final desperate bid to recover your self-esteem.*

I believe that the same analogy will apply to our field of endeavour. As we enhance the purchaser/ provider model we will abandon the rigid view that the quantity of service to be purchased will be decided by the "purchaser". The value of input from providers will be recognised and sought. We also need to remember that some of that input might be after the event when we find that there are problems relating to an individual's not coping with separation from his/her family and that more resources or alternative programs are necessary. The assumption that an Options Co-ordinator, who has probably had nothing to do with operating an accommodation service, will be an informed purchaser is naive. It is also highly likely, and has already been demonstrated, that some people with disabilities and their families will have had very clear views about the provider they want and will come to the Options Co-ordinator with a very fixed view about the provider of their choice. And why shouldn't they if they have found an alliance with which they are happy? This reflects the Western Australian model where people can align themselves to a provider agency that advocates on their behalf, obviating much of the mechanistic work of Options Co-ordinators.

Second, there is an assumption that all types of services might lend themselves to tendering. In some areas, this would be highly inappropriate and at its worst might see people with intellectual disability being tendered. However, again, this is at odds with the experience in the private sector. When I worked at Chrysler Australia Ltd in the 1960s and 70s, Chrysler depended upon a number of suppliers (i.e. "providers", in our jargon). The most significant of these was W.H. Wylie, a company which made some very complicated components through a process called "sintering". Given the nature of this process and the lead-up time that would be required for any other competitor to move into that area, Chrysler did not have a policy of re-tendering but, rather, developed a long-term partnering arrangement with W.H. Wylie (in fact, later on, they bought the company) which included examining its cost structures and involvement in industrial negotiations.

Imagine a situation in which we have become so market-driven that we constantly retendered services. Agency X, which had the service this year, loses it to Agency Y, which, has it for three years and, in turn, loses it to Agency Z. Staff come, staff go. How would this be helpful to our clients? Is it not through continuity and the knowledge of individual clients that our services offer their greatest benefits? The relationship between clients and workers has a value on which it is very hard to put a dollar figure. It is indeed Eva Cox's social capital which economic rationalists seem so intent to deny. Were we to create constant turnover of organisations and staff involved in the lives of individuals to achieve benchmark prices, it would damage people. Rather, we should be developing a model that ensures that organisations are assisted to do better and not punished for their shortcomings.

The third assumption is that, where there is demand for a product (in our case, "demand" means need backed up by the funds to fulfil that need), the market will produce suppliers. When this has been put to the test, i.e. where market forces have driven service development, the results have, to date, been poor. Over the years, in fact, good services have, in the main, been developed through the ongoing collaboration and development work of parent groups and IDSC, and many organisations, including Housing Connexion, Community Living Project, Individual Supported Accommodation Service, Community Accommodation for the Intellectually Disabled and Tenancy Support, came about through such local service development. In Western Australia, a report by Deloitte Touche Tohmatsu into contracting out has found that there is no provider market available to undertake the work that will flow from the transfer of services from the Government sector or the new demand created by the \$40.4 million in new funding that the Western Australian Government is making available over the next five years. The Western Australian Government has seen the need to invest significant resources in developing a viable provider band and is not leaving this to the vagaries of market forces. Neither should we and I am pleased to report that we look forward to working with the sector on new models and ways of supporting people with intellectual disability.

The fourth assumption is that market forces will cause some rationalisation in the sector and that such a rationalisation is a good thing. We have certainly seen this in other sectors where there has been a shake-out of businesses (David Jones owns John Martins, Myer owns Coles). It has been put to me that, in four or five years' time,

there may be three or four large providers in the sector and that this would be a desirable outcome. However, I believe that such a result would be very inappropriate and damaging. In business there are often three or four large providers who might dominate a particular market but there are often small businesses which continue to be viable. One only has to look at the small dress shops that dot arterial roads and which do extremely well, providing easily accessible service, often to elderly people and often based on a long-term personal knowledge of their customers and their requirements. We might ask, why are they still in business? Why haven't they been rationalised and brought within the ambit of the large cartels? They survive because they have something valuable to offer.

Also, there seems to be an assumption that the values which have underpinned the Commonwealth and State Disability Services Acts, documents such as the IDSC Constitution and the philosophies of many non-Government organisations will automatically flow, as if by ideological osmosis, into the sector. This is an assumption that is not borne out by the reality of some of the market-generated providers, some of which provide low-quality, congregate-style services that, in my view, do more harm than good.

In the corporate world, it has never been assumed that changes of culture and values emerge through some form of osmosis. More often, these are the subject of intensive strategies within a company to ensure that prevailing values are put in place. It is my belief that the lives of people with intellectual disability will be enhanced only when we can be assured that the people providing services to them are both extremely well-trained in what they do and also believe in the intrinsic worth of the people they serve. It may sound trite but, unfortunately, the people whom we have to dismiss from time to time for assault, theft, etc on people with intellectual disability remind us that these values require vigorous development, implementation and monitoring. I believe that these values have largely been present in the non-Government agencies. I am not so confident that they will be found in all for-profit organisations, particularly when the profit motive rears its head.

Finally, there seems to be a naive assumption that all the unintended effects and perversions which we might imagine won't occur. Let me assure you that perversions have always occurred and, unless safeguarded against, always will. Let me list what might be some of the potential perversions. Perhaps you might keep the list and you can give me a score in five years' time. You might even be able to add to it.

- Co-operation and collaboration will decrease as we keep our cards to our chests to assume our place in the system - we will protect our competitive edge.
- The power placed in the hands of Options Co-ordinators will produce a real or perceived tyranny of the purchaser, the reaction to which will be coalitions of providers and consumers. This is, incidentally, already happening.
- Voluntary effort, both at the level of organisations and staff, will decrease as purchasers pay the full cost of services. As people with disabilities are now the clients (and responsibility) of the purchasing organisation, the previous ethos of

providers doing a bit more for their clients (without new resources) will be lost. This is already happening.

- Innovation and risk-taking will be too dangerous for providers to contemplate, although these have added significantly to our service system in the past.
- We will cease to stand by people with disabilities, particularly if we are unable to allocate the resources their assessments justify.
- Those who are driven by self-interest will find fertile ground for take-overs, amalgamations and aggrandisement.
- We'll talk the talk and walk the walk. The lexicon of economists and the markets will replace "rights", "justice", "development" and the other words that were a part of our previous philosophy. This is certainly already happening.

How might we ensure that these assumptions don't become fact?

First, the system needs to have diversity. There should be a mix of large and small agencies, agencies that provide services in local communities and those that provide statewide services. There should be a mix of Government, non-Government and for-profit organisations. There should be specialist organisations and those that provide more generalist services. There should be services that are specific to intellectual disability and others ranging across disability. There also needs to be a place for small, unique services that meet particular needs and where the costs are often reduced by the voluntary effort of staff and board members.

There is no doubt that dealing with such a diverse system is difficult for funders and purchasers than if there were, say, three or four large providers. However, the developmental tensions that occur through diversity are the pain of a solution rather than the pain of a problem. Some readers would be aware of the difficulties that we experienced in South Australia in developing Funding & Services Agreements in the 1995/96 financial year and the tension that was engendered. It would be foolish to see that tension as negative because the result has been Funding & Services Agreements in 1996/97 which, in my view, are better. Furthermore, IDSC has too much venture capital invested in these agencies and their structures and expertise constitute too great an asset to dismantle.

We also need to remember that much of the innovation that has occurred in the sector over the last decade has come through this diversity and much of it through the smaller, newer agencies which were developed with a particular vision in mind. Diversity is an important part of the Australian landscape generally and it is being implemented through such policies as multi-culturalism where there is recognition that difference is important and should be valued. It would be a very poor thing if this were eradicated from our system. It must flourish.

Second, it is important that we develop a partnering relationship. Many aspects of the funder/ purchaser/ provider system dwell on the competitive nature of human beings and the advantages of competition. There is no doubt that we are all competitive to a



greater or lesser degree, however, it is equally important to remember that we all share a joint purpose. Long-term relationships, based on trust, the recognition of the skills and expertise of others will all benefit our clients. There are people in our sector who see Government and all its agencies as evil. That is a most unhelpful stance and fails to recognise that good and bad reside in human beings rather than organisations. The partnering arrangements that we have developed over the last decade are important and need to be enhanced after what has been a period of some erosion of that relationship.

Third, the system needs to support innovation. In doing this, it needs to ensure that we do this in our partnership model and that we jointly look at ways in which problems can be investigated, researched and overcome. There are recent examples of this in the HOST Scheme and the Intensive Family Intervention Service. Many partners helped gather the data and initiate the models which have been successfully implemented by IDSC.

However, I believe that we need a strong research and development capacity within the intellectual disability field and that all agencies should have opportunities for innovation and service development.

Next, we need to recognise the specific nature of intellectual disability and its needs. The services that we provide need to be developmentally-orientated as well as providing support. Our goal should always be to support independence and to assist people to adapt to their disabilities. It would be wrong of the sector to continue to support people to do things which, in time, they might learn to do for themselves because independence is a goal in itself and something for which we should be striving. However, we must remember that many of our clients will require long-term, ongoing services and for some, independence might be very limited.

We must also realise that there will be a need for “last resort” services, some of which will be very intensive and which will often be lifelong and from an early age. Many people with intellectual disability and their families have requested that a specific focus on intellectual disability be maintained and I believe that we must have a mechanism for ensuring backstop services which are seen and treated as an integral part of the service system.

We need to work on a culture of continual improvement, support for bottom-up developments that build on the strengths and expertise of all staff within the sector, be they purchasers, providers or funders. In the past, we have been insular and have often wanted to be the font of all information and expertise.

We need to deal better with such matters as duty of care. You may be aware that IDSC has started circulating information bulletins which bring to the attention of staff within IDSC and non-Government agencies issues of concern and importance to the sector. We will also need to develop a capacity for trouble-shooting and ensuring that we recognise and manage the risks inherent in providing the services that we do. I don't need to remind anyone of how difficult it is to manage risk, particularly when we are committed to giving people the greatest degree of personal freedom. We must

support each other when things go wrong rather than rejoicing in the misfortune of others. Remember, it may be our turn next.

Furthermore, there is a need for ongoing advocacy for people with intellectual disability. Despite the existence of many advocacy agencies, advocacy occurs at every level of the system. Service providers advocate and good case management/ options co-ordination will continue to focus on advocacy for individuals and families. Within IDSC, the Board has been involved in advocacy and leadership on behalf of people with intellectual disability. IDSC's current structure was implemented in 1993 to support the advocacy efforts, ensuring that advocacy is focused, strategic and supports the efforts of staff at the coalface. The work that IDSC has recently undertaken in the Towards Normalisation Project, which will see people with intellectual disability receiving better treatment in the criminal justice system, is but one example. We also need to ensure that our advocacy efforts support each other and are not used as weapons against each other.

We believe the move towards a pure Options Co-ordination model, if indeed it is desirable, should be taken with caution and a willingness to revise early views of how it might work. Currently, staff within IDSC's Community Teams integrate "Options Co-ordination" into their comprehensive and developmental case management approach. In doing this, they also provide a lot of essential support and, at times, backstop services. They counsel people, provide programs, group programs and, before any of these are removed from the role of our community teams, we need to ensure that they are replaced elsewhere in the system. At the same time, we need to ensure that they are not so disaggregated that people with intellectual disability and their families are burdened by more complex support arrangements, having too many "workers" in their lives or discontinuous supports. IDSC will be undertaking workforce audits and analyses of the benefits and costs of such changes.

We must further ensure that we minimise failures where the risk is manageable. The failure of a contract is not just a simple matter that can be resolved by re-tendering. The effects on the individual(s) involved are profound and already we have had examples where better planning and preparation and, more importantly, a willingness on the part of all involved to listen and value the skills of others could have produced much better outcomes. Might I even suggest that pride has driven us to positions that have been damaging to our clients.

As contract performance becomes more and more important, I believe that agencies will rightly not want to take the risky clients, those with complex needs or who present a high probability of failure. Too much failure and you might lose your "Preferred Provider" status. So we might play it safe, provide that little more restraint rather than take a calculated risk and, in the process, we might reinstitutionalise people through the new funding model.

What will this mean for IDSC's community services and our accommodation services?

There has been some debate about the involvement of Options Co-ordinators with people who are receiving services from accommodation agencies. My personal view

is that they should be involved only if they add value. I can see little advantage in, for example, each person in Minda or Strathmont Centre, having an Options Co-ordinator. What value would that add to the life of the individual? Does it not raise the potential for conflict? Imagine if tomorrow an Options Co-ordinator lobbed into Minda and told a client or their family that he/she was there to plan their services for the future. I think you could understand that would cause nothing but apprehension. Both Minda and Strathmont Centre, with the support of their respective Boards, implemented significant reforms to the great benefit of their residents and I am to be convinced that the input of Options Co-ordinators would have added value to those processes. I am very doubtful, for example, whether the presence of an Options Co-ordinator for each client in the Minda reform would have convinced one of those people to be involved in anything other than a Minda service.

I believe that Options Co-ordinators should not have a primary responsibility for monitoring standards. There is no doubt that anyone who visits a service and sees things that are inappropriate has a duty to report them, both to the organisation providing the service and, if needs be, to their own organisation. However, to suggest that Options Co-ordinators will be the enforcers of standards is ludicrous and short-sighted. It would be a sure way to develop conflict between agencies and Options Co-ordinators and people with intellectual disability would become the victims in these disputes.

Again, I believe that the relationship will work best when there is trust that agencies who have been contracted to provide services to people with intellectual disability are able to get on with their task. I believe there should be occasional reviews of services to investigate how services might be enhanced. We might even consider some form of accreditation or enhanced accreditation which would give the organisations some status in such areas as undertaking pilot projects or innovative work. Perhaps a form of peer review could be put in place to achieve this I believe that Options Co-ordinators and accommodation providers should work together to the benefit of clients, particularly in other life domains where the needs of individuals have not been fully met. That is precisely what has occurred in the past and we need to continue that relationship where Options Co-ordinators can not only be supportive in finding other options for individuals but can work with accommodation services when there are particular problems, e.g. behaviour matters.

What I have described is a return to the more positive working relationships between IDSC's community services staff and non-Government organisations that have existed for over a decade and which have seriously eroded over the last two years. The relationships that should not be polluted by Options Co-ordinators being the monitors of standards of organisations. I think that it is an inherent conflict of interest that will work against the interest of people with intellectual disability.

What of IDSC's accommodation services? I mentioned earlier that there is a need for diversity. There is no doubt that, in South Australia, there will continue to be the need for backstop services, particularly for those people with complex needs. In the past, Strathmont Centre has provided that service. Many people have seen Strathmont Centre as Brand X and, indeed, IDSC has recently been working with various stakeholders to look at the future directions of Strathmont Centre. However, there is

no doubt that there will continue to be a need for a backstop service and it is my view that this is best provided by a Government agency. Often, such back stopping has to occur without the provision of additional resources and it is always very comforting to be able to ring Dale Hassam to inform him that he needs to take on board the person who has most recently hit the system and needs support and that he's not getting additional funds for it.

In the process, IDSC's accommodation services will not get bigger and, indeed, we will be encouraging people to leave us. We have done that with Leveda and our Hills Accommodation Service, which joined with Ngeringa to become Hills Community Options. We are currently working with Interact for them to become a non-Government organisation. This has recently been made a little more difficult by the contracting out arrangements that have been put in place by the Government. However, we intend to allow services to move into other forms of management at the pace of families and the clients themselves and we look forward soon to bidding farewell to Interact as it manages that service itself. As Dale Hassam has explained IDSC's accommodation services have been divided into six units, each will have a Funding & Service Agreement and each will be encouraged to develop an advisory group which might, in time, become a board of a non-Government organisation. Consequently, we don't see IDSC's accommodation services becoming any bigger but we probably see them becoming more focused on people with more complex needs. We see no particular conflict in IDSC undertaking this as we intend to have service contracts with our own units very similar to those that existing with the non-Government agencies and based on the same benchmarks.

Earlier, I noted that a focus on individualised funding might work against the rights of people with disabilities and I want to quote from a recent article in Interaction by Michael Bleasdale, Brendan Crumpton, Ken Hardaker and John Tomlinson titled "The New Millennium and Empowerment of People with Intellectual Disability". In this they warn of the effects of individualised funding approaches. In encouraging us "to look beyond narrow individualistic notions of empowerment" (i.e. such as might be provided by brokerage and similar individual funding programs) they assert:

*There is a growing feeling that a move towards individualised funding is inevitable and, since the few service users and service provider supporters of this approach acknowledge its limited applicability, we can only assume that the funding bodies themselves are driving the move towards brokerage. However, there will be some questions, "How will a choice between one service and no service at all -which is the current reality - serve to empower individuals with disabilities?" The brokerage model should be seen as one option for effective service delivery. It appears to be especially effective in meeting the needs of people who have easily structured support needs such as bathing, dressing and transferral of people with physical disabilities. However, it is also vulnerable to the dictates of Government in respect to funding arrangements. Although it offers the promise that it is capable of giving the service user power over the service provider ... such power is limited.*

Summarising, they indicate that brokerage funding may be a way whereby:

*Individualised funding can be seen as a move to privatisation which means relatively unregulated services competing in a market.*

*Solidarity or interdependence of people with disabilities will be dissipated and, in a free market economy, individuals will be open to exploitation.*

*There will be a marked drop in the ability of services to innovate. Innovation does not come from a marketplace trying to meet consumer needs; innovation comes from co-operative attempts between people who have needs and who use services and those who provide those services to engage in the struggle to make them more appropriate.*

*There is no simple equation of consumer empowerment and the consumer-funded focus approach.*

*The model assumes that a person's support needs are constant and comparable to those of other people in terms of setting funding guidelines on the basis of general benchmarks.*

*The model takes insufficient account of the continued economic viability of services within such an uncertain market.*

Let me then summarise my views. In South Australia, we are implementing the funder /purchaser /provider model. I believe it has many strengths and, rightly applied, will give some additional power to a group of people who have traditionally been powerless. However, we need to remember that in any reform there will be unintended side-effects, some of which will not be positive, and we need to put in safeguards against these. Those safeguards need to assure us that, at the end of the day, we are serving the needs of people with intellectual disability and not a funding model. I believe that we have a history of doing that within the intellectual disability services sector in South Australia and I want to see that continue. The alternative is "Kentucky Fried Accommodation Services " providing exactly the amount of consumer support that we purchase, treating people with intellectual disability as service consumers and not taking into account their need and ability to develop, to belong and to enjoy the benefits of citizenship of their country. If we reach that point, we will certainly have failed.

Finally, we need to remember that the new arrangements are just that - new arrangements. They are not a panacea, although they have been effective in producing efficiencies, they do little to mask the burdens being faced by many families in South Australia whose needs, and indeed sufferings, have been well documented. There is no doubt that significant levels of new funding are required if the circumstances of these many families are to be alleviated. It is pleasing, therefore, that the Minister for Health, the Honourable Dr Michael Armitage, recognises this and has indicated that "as the fiscal situation permits, more resources will be committed by the Government to meeting their needs for support". The challenge for us over the next few years is to integrate the best of the funder/purchaser/ provider model and its competitive culture with the best of the collaborative and partnering arrangements that we have developed over the last decade. If we can do that, we will be able to provide an environment in which we can enable, as Justice Kirby said some years ago, "people to flourish as precious individuals".

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