

# **community options**

## **Annual Report**

**2008 - 2009**

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## 2008 –2009 Board of Governance

Chairperson:	Michelle McGrath
Treasurer:	Peter Bacon
Public Officer:	Glenda Richards
Committee Members:	John Barlow Anne-Marie Dickson Kay Little
Executive Director	Brian Corley
<b><u>AUDITOR</u></b>	Walter Turnbull
<b>STAFF</b>	
Client Services Manager	Penny Hall
Quality Manager	Ia Svintradze Melanie Coleman
Community Options Coordination	Donna Clancy Nada Matijevic Esther Cutts Gerard Sandi Pooja Bhattarai Melanie Judd Anne Sheldon Michelle Cross Pauline Willenberg Peta Milne Dympna McLaughlin
Post Hospital Support Program	Joy Dizon Meg Jepsen Darlene Hobbs Ranjini Narayan Katherine O’Hagan
Administration Officers	Kerry Crimmins Sandra McMullen Helen Trevean Tegan McGrath Mindge Zhao

## Chairperson and Executive Director's Report

The common theme running through our reports over the past few years has been one of change and this year is no exception. In the past twelve months the Board has focussed on ensuring the new structure and management team is fully operational and supported. We have maintained our commitment to continuous quality improvement and we have seen a major investment in new information management systems that will significantly change and improve the way we record and store client and financial information. These changes will continue to be rolled out over the next few years and over time will create more integrated information systems across the organisation.

During the year we received a significant increase in funding under the Home and Community Care Program. This funding allowed us to further expand our Post Hospital Support Services to meet demand as well as allow additional clients to transit to long term support arrangements. We have also developed and implemented new care planning protocols in relation to clients receiving a case management service from Community Options.

In the course of the year we have reviewed our role as an auspice for Individual Support Packages and have worked with a number of ISP clients to assist them to move to new more sustainable support arrangements, while maintaining our core commitment to providing the highest quality support and case management service to people with disabilities.

A major initiative during the year was the establishment of a quality review framework to monitor the performance of our provider agencies. This framework will allow us to ensure that we meet our obligations under our funding agreement and help us to maintain the highest quality of support services to our clients.

As part of our commitment to continually review and improve our management structure we have made several important changes during the year. Firstly we reduced our client service team structure to two teams, one focussing on our case management and brokerage services and the other team focussing on our post hospital service delivery. In addition, we moved to formally establish an administration team which reports directly to the quality manager.

Over the next twelve months we anticipate a period of relative stability in our organisational structure as we work to ensure all of our systems are fully operational and integrated.

After focussing on organisational matters for the past few years we will refocus on improving our client service delivery over the coming months. It is always a challenge in getting the balance right between looking after the organisation and making sure we do not lose or primary focus on the people and families we support.

As always thanks to our staff who continue to provide exceptional support and service to our clients. Also thanks to our provider agencies who work in partnership with us to delivery the best possible support services and to our funding bodies with whom we

have positive and constructive relationships. Also many thanks to our Board members who have made such a major contribution to the reform process within Community Options and who play such a crucial role in supporting people within our community.

Michelle McGrath  
Chairperson

Brian Corley  
Executive Director

## Client Services Report July 2008 to June 2009

The close of the 2008/09 financial year saw the fine tuning that was inevitable following the previous year's major changes to the organisational structure. The most significant fine tuning was moving from a three team client services structure to two teams for client services and one administration. As with all good plans on paper, it became evident very quickly that the programs were naturally falling into two distinct program areas with the vital backup of the administrative staff. The three teams are now known as the Post Hospital Support Program Team, the Case Management/Co-ordination Team and the Administration (Admin) Team.

The Post Hospital Team consists of Continuity of Care Program (COCP), Transitional Support Program (TSP) and The Domestic Assistance Support Program (DAS). Whilst the COCP and TSP are the two post hospital programs, it was decided that the DAS program would align within that team as it is a low level support program, albeit with a high number of clients, and the co-ordinator would be a good extra resource to assist within the team as staff took leave.

The Case Management/Co-ordination team now consists of the Community Options /Linkages Program, Individual Support Packages, Community Support Options Program, Flexible Family Support, Respite Links and the Flexible Respite Program. Although at first glance this team looks large with the number of programs, it contains three of the smaller programs in the organisation.

The third team has now become known as the Admin team. The staff in this team provides the essential administrative support that is required on a daily basis to ensure the smooth running of the organisation.

There have been many benefits to streamlining into three teams, but the major benefit is that the staff resources within each team can respond quickly to assist clients and their family member's and other service providers when team members are on leave or away from the office. It has become increasingly evident that as the staff numbers increase and subsequently more clients are supported that it has become essential to have staff available to respond appropriately and in a timely way whilst ensuring that staff can take annual leave, can attend conferences and training and stay away from work when they are unwell. This structure results in the teams having staff cover for each day of the week.

The resulting structure has enabled a strong framework to develop that supports a greater number of clients than the year before and can continue to offer a high quality service.

Key highlights for the year include the commencement of the implementation of the new client information system; establishment of the case management planning process; expansion of the Post Hospital Support Program and the capacity of Community Options Case Management and Brokerage Program to increase client numbers; HACC Program standards audit; and review of the ISP Program.

During the year we provided support to nearly 1900 individuals. A breakdown of client numbers across our programs is included below.

<b>Program</b>	<b>Funding Source<sup>[1]</sup></b>	<b>Clients Supported from July 2008 to June 2009</b>
Community Options/Linkages	HACC	150
Continuity of Care Program	HACC	1077
Domestic Assistance Service	HACC	326
Individual Support Packages	DACT	24
Community Support Options	DACT	12
Flexible Family Support	ACT Health	42
Transitional Support Program	ACT Health	151
Respite Links Program	NRCP	46
Flexible Respite Program	NRCP	49

Community Options has never been busier and as such our commitment to maintain the highest levels of client service provision has never been more important. Over the next twelve months we will be focussing on improving our client service delivery through working with our staff to maintain and enhance their skills and through working with our suppliers to ensure that they continue to offer the highest quality of direct care services.

Penny Hall  
 Deputy Director/ Client Services Manager  
 October 2009

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<sup>[1]</sup> HACC (Home and Community Care)  
 DACT (Disability ACT)  
 ACT Health  
 NRCP (National Respite for Carers)

## Quality Manager's Report

Excellence in community service is the cornerstone of our organisational commitment to continuous quality improvement. Quality of provided services is the result of collective efforts and values of our dedicated staff. We are deeply committed to delivering services that meet and exceed our clients' expectations. It is the goal of our quality management system to ensure the highest possible quality of service adheres with national service standards, contractual obligations, and legislative requirements.

The financial year of 2008/09 for Community Options was marked by continuous improvement in quality of provided services. The year had several developmental milestones, which I would like to briefly summarise in this report.

- Client Data Management System

Community Options has recently received funding for purchase and implementation of a new client data management system, The Care Manager (TCM). TCM is user-friendly software widely used by community based service providers in Australia. The software allows us to integrate documentation of service delivery activities, online referral system and mandatory reporting requirements, such as Commonwealth State/Territory Disability Agreement National Minimum Data Set (CSTDA NMDS), National Respite for Carers Program (NRCP) and Home and Community Care Minimum Data Set (HACC MDS).

The introduction of a new client management system has marked a new stage in the organisational development. The system allows us to improve the effectiveness and efficiency of service planning and delivery to an increasing number of clients. The implementation of the new system has suggested that TCM is gradually becoming an integral part of effective and efficient management practices and provision of high quality services to our clients. The system enables us to improve our accountability to clients, their families, funders and wider community. The software also allows us to plan and manage client services with a significant reduction of paper use, i.e. it helps us implement and monitor environmentally sustainable work practices and minimise our impact on environment. Finally, the software helps us streamline our organisational processes and practices and improve our capacity to better respond to the needs of our clients, their families, and communities we serve.

- Home and Community Care (HACC) National Service Standards: External Appraisal

In autumn 2009, Australian Healthcare Associates (AHA) commissioned by ACT Health conducted assessments of agencies providing HACC services to older people and people with disabilities in the ACT. Community Options was assessed on 31 March 2009. The goal of assessment was to determine the level of organisational compliance with National HACC Service Standards and identify areas for quality improvement. The AHA appraisal team assessed Community Options as being of a "good standard." The external quality assessment provided an opportunity for us to re-examine our organisational practices. The findings of the assessment will also contribute to ongoing quality improvement processes within the organisation.

- Internal Quality Checks

As our quality commitment to clients and communities we serve, we regularly monitor our operational compliance with national service standards, legislative and contractual obligations. Internal quality audit processes enable us to identify any discrepancies between set quality targets and organisational practices. It also assists us to continuously improve our capacity to implement accountable organisational practices and achieve greater client satisfaction.

- Program Evaluations

Community Options regularly reviews its programs and services. By the end of 2009/10 financial year, Community Options is planning to complete assessments of all its programs and services. The primary goal of reviews is to assess Community Options programs' performance against set Key Performance Indicators as delineated in funding agreements. The program assessments will cover contractual framework reviews, organisational policy and procedure reviews, operational and client satisfaction performance reviews.

With the assistance of a consultant, Community Options has already conducted the evaluation of Individual Support Packages (ISPs). The evaluation of ISPs included the cost analysis of managing ISPs on behalf of the Disability ACT. As part of the evaluation, we have also conducted comparative assessment of individualised funding arrangements for people with disabilities across a number of Australian States and Territories. The findings of the evaluation will inform recommendations to the Disability ACT and potential changes in the administration of packages.

- Performance Appraisal System based on Key Performance Indicators (KPIs)

In 2008, Community Options revised the performance appraisal system by incorporating Key Performance Indicators (KPIs) for individual positions. The KPIs-based performance appraisal system was trialled in 2008/09 financial year. The KPIs for individual positions served as a baseline against which each staff member was assessed. The results of the pilot appraisal process have suggested that the appraisal system requires additional revisions to establish a clearer link between the organisational strategic objectives, individual job descriptions and KPIs. In 2008/09 financial year, we revised job descriptions in lieu with organisational strategic objectives. Next year, we are planning to revise KPIs for all positions and the performance appraisal instrument. The KPIs-based performance appraisal system will also contribute to the improvement of staff and organisational performance and our ability to efficiently and effectively deliver quality services to our clients, their families and communities.

- External Service Provider Reviews

With the assistance of the external consultant, Community Options has developed the external service provider review process based on a review checklist, which serves as a mechanism to determine that through its supplier organisations Community Options is meeting its contractual and legislative obligations and delivering quality services. The review process was piloted in 2007/08 financial year. In 2008/09 financial year

the review of all commercial agencies delivering services to clients on behalf of Community Options has been completed. The results of reviews have suggested that agency reviews should be conducted on a regular basis and should serve as an opportunity to re-establish close contacts with supplier agencies.

- International Organisation for Standardisation (ISO) Quality Accreditation

In the year of 2007/08, with the assistance of the consultant Community Options revised all its policies and procedures, management structure and organisational practices. In the financial year of 2007/08, Community Options introduced a formal quality management system. The year of 2008/09 was marked by the implementation of the newly adopted quality management system. In the year of 2009/10, we are planning to seek the ISO Quality Accreditation. By the end of the 2009/10 financial year, we are planning to conduct the assessment of Community Options quality management system compliance with ISO quality standards and engage in the formal process of accreditation. The ISO accreditation process will further contribute to the ongoing improvement of quality of provided services.

Ia Svintradze  
Quality Manager  
September 2009

Summary Income and Expenditure Report for 2008/09

<b>Income</b>	<b>2009</b>	<b>2008</b>
	\$	\$
Community Options	2,009,273	1,791,829
Individual Support Packages	1,403,555	1,458,212
Respite Links Program	176,427	181,521
Continuity of Care Program	923,005	859,735
Transitional Support Program	263,626	273,059
Flexible Family Support Program	192,100	192,353
Flexible Respite Program	133,320	132,064
Domestic Assistance Program	622,087	590,425
Building Community Capacity	11,699	11,197
Community Support Options	238,156	273,052
<b>Total Income</b>	<b>5,973,248</b>	<b>5,763,447</b>
<b>Expenditure</b>		
Community Options	1,982,766	1,739,699
Individual Support Packages	1,403,555	1,458,525
Respite Links Program	176,427	182,693
Continuity of Care Program	917,213	858,946
Transitional Support Program	262,710	270,592
Flexible Family Support Program	189,866	192,353
Flexible Respite Program	133,320	132,981
Domestic Assistance Program	618,939	596,774
Building Community Capacity	11,699	11,197
Community Support Options	230,313	270,360
<b>Total Expenditure</b>	<b>5,926,248</b>	<b>5,714,120</b>
<b>Operating Surplus/(Deficit)</b>	<b>46,440</b>	<b>49,327</b>
Opening Accumulated Funds	498,995	449,668
Reserves	50,000	30,000
<b>Total Equity</b>	<b>595,435</b>	<b>528,995</b>