

Embedding Human Rights

Annual Report 2019-20



ADA
Australia
*Your aged and
disability advocates*



Contents

About ADA Australia.....	3
What we do	4
Chairperson's Report	5
CEO's Report	6
Organisational Structure	8
Board Members	9
Advocacy Services	11
Human Rights Service	12
Elder Abuse Advocacy	13
Establishing ADA Law	13
Case Studies	14
Aged Care Advocacy	16
Disability Advocacy	18
Advocating for Diverse Needs	20
Aboriginal and Torres Strait Islander Disability Network of Queensland	22
Communications & Resource Development	25
Embedding Human Rights	27
Corporate Services	30
2019/20 Financial Snapshot	31
Glossary of Terms	33



OUR MISSION

To enable people to be heard, informed, and exercise their rights

OUR VISION

Our vision is to give vulnerable people a voice

OUR VALUES

Respect: We show respect for the wellbeing of our clients and their communities.

Collaboration: We work with clients and value our partnerships to deliver the best possible outcomes at individual and systemic levels.

Empowerment: We provide our clients with a wide range of services including information, advocacy, education and training to support their own skills.

Creativity: We embrace professionally creative approaches, working with individuals on individual issues, to achieve the best results for clients. We embrace all cultures, special needs, sexual orientation and gender identity.

About ADA Australia



**ADA
Australia**
*Your aged and
disability advocates*

Aged and Disability Advocacy (ADA) Australia is a not-for-profit, independent, community-based advocacy and education service with nearing 30 years' experience in supporting and improving the wellbeing of older people and people with disability in Queensland.

With headquarters in Brisbane and advocates in Cairns, Townsville, Rockhampton, Bundaberg, Sunshine Coast, Toowoomba and the Gold Coast, ADA Australia provides advocacy services to older people and people with disability in metropolitan, regional, rural and remote Queensland.

Our mission 'to enable people to be heard, informed, and exercise their rights' is achieved through provision of accurate information, education and valuable individual advocacy support across a range of programs that have a consumer directed focus.

ADA Australia is a member of the Older Persons Advocacy Network (OPAN) funded through the Australian Government's National Aged Care Advocacy Program (NACAP) to deliver individual advocacy, information and education services to older people (and their representatives) who receive or are eligible to receive, Australian Government funded aged care services.

ADA Australia provides disability advocacy funded through the Queensland Government Department of Communities, Disability Services and Seniors, and the Australian Government's National Disability Advocacy Program (NDAP). This financial year ADA Australia undertook a new disability advocacy service, providing advocacy support to help people with disability to participate in the Disability Royal Commission into Violence Abuse Neglect and Exploitation, funded through NDAP.

ADA Australia operates a Human Rights Advocacy Service. The program is funded by the Department of Justice and Attorney-General and the Commonwealth Government, and supports people with a cognitive impairment or whose capacity is questioned with guardianship, administration and Enduring Power of Attorney matters, including support before the Queensland Civil and Administrative Tribunal (QCAT). It also provides support for older people living in aged care who are experiencing, or are at risk of elder abuse, either by a family member, service provider or attorney. During 2019-20 ADA Australia undertook the process for the Human Rights Advocacy Service to become a recognised Community Legal Service to commence operations from August 2020.

ADA Australia also hosts the Aboriginal & Torres Strait Islander Disability Network of Queensland (ATSIDNQ), a network of Aboriginal and Torres Strait Islander people with disabilities and their families and carers. ATSIDNQ provides a culturally safe space for its members to connect and share stories, issues and information, and contribute to the conversation about disability.

Our services are free, independent, confidential, consumer-directed and reflective of our core values of respect, collaboration, empowerment and creativity.

What We Do

ADA Australia provides information and resources, education and individual advocacy support to vulnerable Queenslanders across a range of programs that have a consumer-directed focus.

AGED CARE ADVOCACY AND EDUCATION



Advocacy support for people receiving or seeking to access Commonwealth government-funded aged care services who have issues with accessing services, or are experiencing service provision and care related problems including for:

- Commonwealth Home Support Program (CHSP)
- Home Care Packages (HCP)
- Residential Aged Care Facilities (RACF)
- Commonwealth Continuity of Support (CoS) Program
- Commonwealth funded dementia services
- Flexible care services

Free education and information sessions on rights and advocacy services are available to residents and staff of residential aged care facilities, home care recipients and services and community groups.

Aged Care Navigator trial

The Aged Care Navigator service provides information, education and practical support to older people to access aged care services in the home or in residential aged care.

It has been under trial in 2019-20 in the Wide Bay region and Brisbane South, supported by the Brisbane South Primary Health Network.

Fee for service workshops

MHWise - mental health training for community and residential care staff to support care for older people experiencing mental illness or mental health decline.

DISABILITY ADVOCACY



Information, referrals or individual advocacy support to people with disability who are experiencing issues with support services, including support with the NDIS access and planning processes, and discrimination or unfair treatment.

Disability Royal Commission

Advocacy support to help people with disability to participate in the Disability Royal Commission, including support to make a submission and referral to counselling and legal services as required.

HUMAN RIGHTS ADVOCACY



Individual advocacy support for people with cognitive impairments or whose capacity is in question with guardianship, administration and Enduring Power of Attorney matters, including support before the Queensland Civil and Administrative Tribunal (QCAT).

Elder abuse advocacy

Information and individual advocacy support for older people living in residential care who are experiencing or are at risk of elder abuse, including from Enduring Powers of Attorney, or informal decision makers, carers or friends.

Fee for service workshops

Individual and group-based training sessions on "Understanding Decision Making" to help people understand the intricacies of guardianship and administration issues, including Health Decision Making training.

ABORIGINAL AND TORRES STRAIT ISLANDER DISABILITY NETWORK OF QUEENSLAND (ATSIDNQ)



Supporting a network of Aboriginal and Torres Strait Islander people with disability, and their families and carers to connect, share and speak up about issues that matter most to them. Membership is free and is supported by a Network team of ADA Australia advocates.

ATSIDNQ, is also part of a partnership participating in the NDIS Targeted Outreach Project which is helping more Aboriginal and Torres Strait Islander Queenslanders with disability to join the NDIS.



Chairperson's Report



When I was appointed Chair in late 2019, I imagined a very different 2020 for our organisation. As a frontline response agency for older people and people with disability, it was essential that ADA Australia remain accessible to support our clients as the COVID-19 pandemic impacted almost every aspect of our lives. Our team stood up and stepped up, and I could not be more proud of all we have achieved.

When I was appointed Chair in late 2019, I imagined a very different 2020 for our organisation. As a frontline response agency for older people and people with disability, it was essential that ADA Australia remain accessible to support our clients as the COVID-19 pandemic impacted almost every aspect of our lives. Our team stood up and stepped up, and I could not be more proud of all we have achieved.

While the pandemic impacted almost every aspect of our operations, we stayed true to our vision and mission, commencing a three-year Strategic Plan that builds on our strong foundations and sets stretch targets to ensure we remain relevant in a changing world.

As both a member of the Older Persons Advocacy Network and a standalone advocacy service, we were an active contributor to the Royal Commission into Aged Care Quality and Safety and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. We steadfastly called for human rights reforms to address injustice. This contribution to the national discourse on 21st-century human services is core to our advocacy work and we will continue to champion the rights of older people and people with a disability.

To this end, we expanded our service offering and reach, creating ADA Law, a new human rights advocacy service which has been recognised as a Community Legal Centre. ADA Law is the realisation of a long-held strategic ambition and enables us to provide vital support for Queenslanders with impaired capacity.

Our revenue streams for existing services remained strong and we secured additional funding from the National Disability Advocacy Program to provide advocacy

support to people with disability to enable them to participate and be heard at the Disability Royal Commission. We also won funding to deliver several key resource packages to address information gaps across seniors issues, supporting financial decisions, self-advocacy and mental health law.

In responding to COVID-19, we strengthened the bonds between members of the Older Persons Advocacy Network. The nine state and territory service delivery organisations came together to ensure the rights of older people were upheld and that people could access clear information and support. ADA Australia advocates assisted their interstate colleagues in New South Wales and Victoria to manage unprecedented demand for advocacy support due to COVID-19 outbreaks.

I acknowledge the hardships and heartbreaks that many individuals and families have experienced in 2020. On behalf of ADA Australia, I pay my respects to those who lost their lives and extend my condolences to all who have lost loved ones during the pandemic. We are mindful of the need to remain response ready.

In closing, I wish to acknowledge the outstanding contribution of my predecessor Richard Olley, who chaired our Board for five years, also serving as an inaugural director on the Board of the Older Persons Advocacy Network. Thanks to Richard's stewardship, we are in great shape as we enter a new decade. I thank my ADA Australia Board colleagues for so generously giving of their time, expertise and experience. I sincerely appreciate your commitment to empowering vulnerable Australians to have their voices heard.

My heartfelt thanks to CEO Geoff Rowe, Company Secretary Kathy Chandler and



While the pandemic impacted almost every aspect of our operations, we stayed true to our vision and mission, commencing a three-year Strategic Plan that builds on our strong foundations and sets stretch targets to ensure we remain relevant in a changing world.

the dedicated ADA Australia team, whose unwavering commitment to supporting our clients - even in the most challenging and uncertain times - continues to inspire and impress me. It is a privilege to be part of your achievements.

Whatever 2021 brings, we stand ready to advocate for those who need us and advance the rights of older people and people with a disability.

Liz Kearins
Chair



CEO's Report



Reflecting on ADA Australia's activities during 2019-20, it is difficult for it not to be clouded completely by the events of 2020. It is an understatement to say that 2020 has been a challenging time for us all. Fire, devastation and flooding to large parts of the country early in the year were closely followed by an even greater threat to vulnerable people around the globe from COVID-19.

However, this Annual Report has been an opportunity for us to review 2019-20 in its entirety, and to acknowledge our accomplishments, and to look at how we have managed the challenges, both old and new.

I invite you to read through the report to learn more about our delivery of advocacy services to older people and people with disability across Queensland, our systemic advocacy activity and key strategic projects for the year.

To start the year, we were delighted to co-host the successful 6th National Elder Abuse Conference (NEAC) themed "Rock the Boat" in July. Although much of the work and planning for the Conference occurred, and was reported in 2018-19, the event garnered great media attention for the issue of elder abuse, with a total audience reach of almost one million. It also really saw the start of a greater national response to the prevention of elder abuse throughout 2019-20.

Moving on from NEAC, ADA Australia has continued to advocate for a human rights based approach across the design and delivery of aged care and disability services, reflecting the title of this year's report, 'Embedding Human Rights'.

In October, we saw a key outcome from our partnership with Human Rights Watch, with release of the report "Fading Away" How Aged Care Facilities in Australia Chemically Restrain Older People with Dementia. ADA Australia had identified and supported clients to contribute their experiences of chemical restraint to this research. The launch event at Parliament House in Canberra attracted significant media coverage, bringing much needed attention to this issue and supporting efforts by us to advocate to the Australian Government to ban the use of chemical restraint in the aged care system.

Our efforts also resulted in a Parliamentary Joint Committee on Human Rights Inquiry

into Quality of Care Amendment (Minimising the Use of Restraints) Principles 2019, in which I had the opportunity to appear. While the Principles were an attempt to address the issue of chemical restraint, it did not prohibit it, or set out any penalties for aged care facilities that continue to engage in the practice.

Throughout the year, ADA Australia, as a member of the Older Persons Advocacy Network (OPAN), continued to closely follow and participate in the Royal Commission into Aged Care Quality and Safety. In August I appeared as an expert witness before the Royal Commission at its Brisbane hearing into the regulation of aged care where I put forward our views about the need for a human rights framework and the importance of improving access to independent advocacy.

I was encouraged to see the subsequent Royal Commission Interim Report, released in October 2019, recognised the role and



At a time when accessing aged and disability advocacy was more important than ever, ADA Australia continued to remain accessible to those who needed support.

need for increased advocacy services, along with the very clear message – we need to do better as a country to care for older members of our community.

In 2019-20 we also welcomed the introduction of the Queensland Human Rights Act 2019 and the national Charter of Aged Care Rights both of which will help to embed human rights across the delivery of

all public services in Queensland and in the aged care sector respectively.

Looking at our strategic projects in 2019-20, ADA Australia undertook the extensive process for our human rights advocacy service to become a recognised Community Legal Centre, giving us the capacity to provide legal advice and representation when people are facing guardianship and administration matters. The service, ADA Law, will maximise our offerings for these clients and is the culmination of many years of work and planning. I congratulate all involved.

Another highlight was the announcement of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and funding for advocacy and counselling services. Subsequently we commenced a new service providing advocacy support to help people with disability in Rockhampton and Gold Coast areas to participate and be heard in the Disability Royal Commission.

In March, things changed quickly for everyone with COVID-19 reaching pandemic proportions. I would like to take this opportunity to extend my condolences to those who lost loved ones during the pandemic.

At a time when accessing aged and disability advocacy was more important than ever, ADA Australia continued to remain accessible to those who needed support. Our team was able to quickly establish home-based systems and operate as normal from home, providing support remotely via phone and video conferencing. I would like to thank the entire ADA Australia team for their unwavering professionalism during this time.



Demand for advocacy services increased significantly from the previous financial year - some of which can be attributed to COVID-19.

With the presence of COVID-19 in some aged care facilities and the changing Health Directives, we saw that the reaction by some service providers was to impose strict visitor and movement restrictions on residents, which had significant impacts on their wellbeing. While we knew that this was well-meaning and for the safety of residents, we needed to find a balance between residents' rights and risk.

Looking back on 2019-20, it has been a difficult year, however, I am proud of how our organisation has adapted to continue to provide advocacy support to vulnerable Queenslanders, the sheer volume of work we have achieved and the significant work we have undertaken in systemic advocacy to drive change in the areas of elder abuse, chemical restraint and aged care reform.

We are now looking forward with hope to the final reports and recommendations from both Royal Commissions. It is still my sincere wish that government commits to full-implementation of all



It has been a difficult year, however, I am proud of how our organisation has adapted to continue to provide advocacy support to vulnerable Queenslanders, the sheer volume of work we have achieved and the significant work we have undertaken in systemic advocacy to drive change in the areas of elder abuse, chemical restraint and aged care reform.

As a member of OPAN, we were actively involved in the development of the Aged Care Visitor Access Code, which provided a nationally consistent approach to ensure aged care residents could continue to receive visitors, while minimising the risk of COVID-19. We also worked collaboratively with OPAN to develop a range of information resources to assist service providers with communication, and to assist older people know their rights and access support during COVID-19.

recommendations regarding improved access to an adequately resourced advocacy system and that any reform is underpinned by a human-rights based approach.

I trust this report provides a clear summary of our year in 2019-20. Thank you for your interest.

Geoff Rowe
CEO





Organisational Structure



Board Members



LIZ KEARINS

Chair – Elected to Board 2012

Cert Journalism, DipBusStud, FAIM, MAHRI, MPRIA

Liz Kearins is an experienced senior executive, board director and consultant, with expertise in culture change, strategy, engagement, and communication. Her diverse background spans the management consultancy, utilities, healthcare, local government, environment, tourism, and media sectors.

Liz has a strong track record in leading organisation-wide strategy, engagement and culture change to achieve superior performance. She is also known for her work in stakeholder and community engagement; in particular her passion for involving communities in decisions about the issues that matter to them.

As director of her own business, Engagiosity, Liz holds associate roles as a Senior Consultant with Actrua Performance Cultures, and Program Director – Change, Communication & Culture with LeadershipHQ and McDonald Inc. She also serves on the Board of Australia's Older Persons Advocacy Network (OPAN).

Liz is a Fellow of the Institute of Managers and Leaders, a certified Change Management Practitioner, and a member of the Australian HR Institute, the Public Relations Institute of Australia and the International Association of Public Participation.



PAUL JOHNSON

Deputy Chair – Elected to Board 2014

BSocSc (HumServ), DipBus(Frontline Mgt), Cert IV TAA

Paul's career in the ageing industry has spanned two states, over two decades and across the spectra of service provider, industry adviser and public servant. With qualifications in human services, training and management, Paul is passionate about exceptional customer service, redefining ageing, and enjoying life. Paul is currently the Chief Opportunity Officer at BallyCara where he provides leadership in strategy, communications, business growth and service excellence. Paul actively engages with key stakeholders across Australia and continues to contribute to national policy development and reform of Australia's aged care system through his involvement with Leading Aged Services Australia. Paul chairs ADA Australia's Quality & Compliance sub-committee.



IAN EDWARDS

Treasurer – Elected to Board 2015

MHA BBUS (HRM), Assoc Dip Bus (Mgt)

Ian has over 30 years' experience in health and education sectors, including holding positions at Griffith University and various Queensland Health Units (Central Area Health Service, Health Service Directorate, Princess Alexandra Hospital and Organisational Improvement Unit). He has also contributed to a number of commissioned reports, publications and conferences. Ian is currently the Director for Health Services Management On-line and Graduate Certificate in Health Informatics at Griffith University, and is responsible for managing these programs.



DAN O'SULLIVAN

Director – Elected to Board 2009

BBus (HA), MACHSM, Commissioner for Declarations

Dan has more than 30 years' experience in the Commonwealth Government, particularly in aged and community care, as well as previously holding positions at Wesley Mission and Blue Care. He is currently a Project Director with the Capital and Asset Services Branch of Queensland Health.





STEPHANIE GALLAGHER

Director – Elected to Board 2017

MHA, BBus (HRM), AssocDip Bus (Mgt)

Stephanie has acted for Queensland Health (QH) and other health industry clients over the length of her career, which spans more than 20 years. Her experience includes acting in; matters arising from the public and private health sectors as both a solicitor and barrister, in an advisory capacity, in relation to and appearing on behalf of QH to defend claims, in litigation and before regulatory bodies and tribunals.

For more than 15 years she sat as a member of institutional ethics committees of tertiary hospitals.

Her extensive experience in the regulation of health professionals was recognised when she was asked by the Minister for Health to chair the interim Medical Board (in Queensland) upon his dissolution of the existing Board (in Queensland).

Her experience and expertise extends to matters of health service management. Her Master in Health Administration enables her to bring additional insight into advising clients in relation to matters involving the legal implications arising from clinical service delivery, policy and procedure and matters of public health and clinical governance.



JENNIFER POWUER

Director – Elected to Board 2017

B Occ Thy, GAICD

Jennifer has extensive senior executive experience in the government (Commonwealth and State) and non-government health and social services sector and since 2002 this experience has been supplemented with interest in corporate governance and Board roles.

As Chief Executive Officer of Mental Illness Fellowship Queensland, Jennifer navigated a merger with Richmond Fellowship Queensland (RFQ) and June 2019 saw the merger transition and associated projects completed. Presently Jennifer is Deputy Chair, Checkup, a not for profit, non-government organisation assisting communities to address health inequities.



Advocacy Services

ADA Australia's delivery of advocacy support services has almost doubled in 2019-20 from 1,431 cases in 2018-19 to 2,839 cases. This increase in advocacy services can be attributed to broadening our role in disability advocacy, participating in the Aged Care System Navigator trial and increased demand from users of aged care.

The brief from Queensland State Government changed to include general disability advocacy following the cessation of the Queensland Community Care Program (QCC). In addition, we can now report a full year of disability advocacy delivered under the National Disability Advocacy Program (NDAP) and this includes advocacy support services for the Disability Royal Commission, which is a new work area.

The Aged Care System Navigator program trial has picked up much momentum, following further establishment and promotion of the service, including appointment of a staff position in the Wide Bay region.

From March to end June 2019, 107 of total cases were COVID-19 related issues.

19-20 SNAPSHOT



5,576

Number of intakes



5,877

Number of consumers receiving education



272

Number of education sessions



1,308

Number of aged care staff receiving education

TOTAL CASES

2018-19

1,431

2019-20

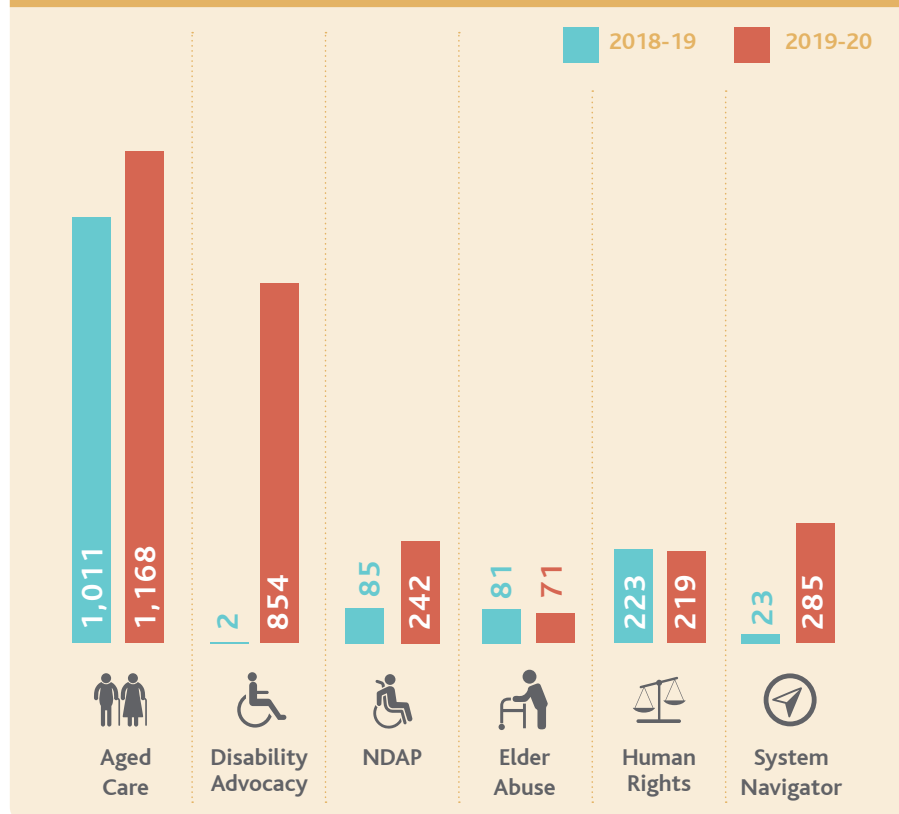
2,839

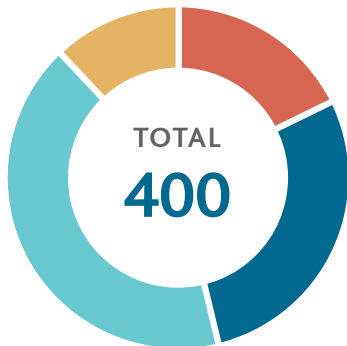


98%

increase in case numbers

CASES BY PROGRAM AREA





CASE TYPE



71

Elder Abuse

(funded by Older Person's
Advocacy Network)



110

Disability Advocacy – Decision Support



170

Legal Assistance Support



49

Mental Health Review Tribunal

(funded by Legal
Aid Queensland)

Human Rights Service

The Human Rights Service (HRS) had a strong year of casework. We have seen an increase in delivery of assistance to people whose decision making capacity is being questioned before the Queensland Civil and Administrative Tribunal (QCAT), along with increasing numbers supporting people to negotiate with their formal decision makers, such as the Public Trustee of Queensland or the Office of the Public Guardian, or their attorney.

Many of our clients are referred from other parties, such as family members, QCAT, Public Guardian or Public Trustee, who have concerns that the adult whose decision making is being questioned, is either not being listened to or not being provided adequate support. Once a person is referred to the HRS and the person themselves agrees to our involvement, then we only communicate with them and to whoever they direct us to communicate with.

During the year, the team developed MH Law Qld, an online resource which has been widely used and well received by the sector, particularly by the Independent Patient Rights Advisors. They advise mental health consumers of their mental health rights, and possibly are asked by consumers for information or assistance on other legal topics as well. The HRS was able to complete this resource with the assistance of Queensland Advocacy Incorporated (QAI).

Throughout the year, the HRS participated in the development of new Advance Health Directive and Enduring Powers of Attorney documents, along with Capacity Assessment Guidelines. These new reforms are part of broader reforms that will come into effect in late 2020. As a result, we hope to see that people are more included in important decisions that impact on their life. These reforms were overseen by the Department of Justice and Attorney-General.

The HRS participated in numerous submissions, including making submissions to the Parliamentary Joint Committee on Human Rights regarding the regulation of chemical and physical restraints introduced in mid-2019. The HRS also partnered with

We hope to see that people are more included in important decisions that impact on their life.

Human Rights Watch regarding the launch of their report "Fading Away – How Aged Care Facilities in Australia Chemically Restrain Older People with Dementia", in Canberra in October 2019.

The HRS was successful in securing funding for the next five years, through a combination of State and Commonwealth government funding.



Elder Abuse Advocacy

The Human Rights Service (HRS) Elder Abuse Advocate covers the greater Brisbane area from Caboolture to Redlands and out to Ipswich. They provide advocacy support to people residing in Aged Care who have concerns about the actions of their decision makers, often attorneys.

Clients may be seeking information about their finances or wanting to re-establish contact with their friends. Many people find that they are subject to social abuse, in that they are denied contact with friends visiting or phone contact (this was the case pre-COVID-19).

The Elder Abuse Advocate finds that attorneys can be very restrictive, not allowing the person to have visits out of the facility or to remain in contact with former friends. Often aged care facilities consider that if a person has lost ability to make their own decisions, then their attorney has the right to take complete control, without any consultation with the older person at all.

Clients seek information such as how to revoke their attorney, who can complete a capacity assessment or how to have their QCAT appointed decision maker reviewed.

The HRS participated throughout the year in the Elder Abuse Response panel, which is an initiative of Elder Abuse Prevention Unit and Social Workers from the Gold Coast University Hospital and Health Service.

ADA Law

In January 2019, the Human Rights Service (HRS) completed an application to become a member of Community Legal Centres Queensland (CLCQ). With the demands of preparing and hosting the National Elder Abuse Conference 2019, planning to become a CLCQ member was put on hold for 2019.

The HRS then consulted with similar services in NSW, and multi-program services in Queensland, to assist in planning to step-up to deliver strengthened legal advocacy services for clients of the HRS. The establishment of an improved database made a number of steps easier, along with a more flexible phone system and most especially the announcement of the five-year funding by the Attorney-General.

ADA Australia acknowledges the support provided by CLCQ as we sought to ensure that we were putting in place the right policies and procedures so that our client group could receive the services they required to have their views, wishes and preferences heard.

The newly established Community Legal Centre, ADA Law, commenced operation in August 2020 supporting older people and people with a disability in their decision making.



CASE STUDY**Having your voice heard in hospital****ISSUE**

Maree is an 81 year old woman living in Brisbane. Following a fall at home, she was taken to hospital. Whilst she was undergoing rehabilitation, she had another fall and required surgery. Following surgery, she had a chest infection.

The hospital assessed Maree for capacity to make decisions about her money, however, Maree was not told what the assessment was about. She thought it was about being assessed for a home care package for extra help at home.

SOLUTION

The Human Rights Service (HRS) received a referral from QCAT and contacted Maree to see if she wanted support.

Maree agreed indicating that she wanted to attend the hearing.

Meanwhile her son and daughter were approached by the hospital to apply to the Queensland Civil and Administrative Tribunal (QCAT) to become Maree's financial administrators and guardians.

No one told Maree about the application or the hearing or included her in her discharge planning.

Maree knew she needed longer rehabilitation as she was unable to mobilise safely following the surgery. She also agreed to have increased home care services.

OUTCOME

The Tribunal decided that as Maree was involved in her own care and future decisions that there was currently no need for a guardian. Maree was agreeable to attend respite care to give her a chance to improve her walking. Maree agreed that it would be useful to appoint her children as her attorneys for financial matters to start immediately, as although she could demonstrate her capacity for financial matters, her ability to pay her bills was now restricted by her health condition (Maree had not mastered online banking). The application to the Tribunal was dismissed.

Perhaps a family meeting before the application was made to explain the situation to all the parties could have occurred to reduce the stress of Maree going to a hearing.

CASE STUDY

Elder Abuse

ISSUE

Simon is an older man who had been admitted to hospital as his alcohol use had become out of control, resulting in him being disorientated and in poor general health. Prior to this admission Simon had been diagnosed with terminal cancer, on the backdrop of a PTSD history relating to his service in the Vietnam War. His wife of 55 years had passed away less than 2 years ago.

After a short period in hospital where he had withdrawn from alcohol use and was now aware of its impact on his overall wellbeing, he agreed to transfer to residential aged care, on a trial or respite basis. His daughter, Mary, was his Enduring Power of Attorney (EPOA) and with medical reports regarding impaired capacity (inability to make his own decisions) she was able to arrange the transfer and payment of fees from his pension at the aged care facility.

Within weeks of arrival Simon determined that residential aged care was

not for him, and he sought to return to his own home. Simon became distant from his daughter as she refused to discuss the possibility of change and would not engage with Simon or the facility in any meaningful way. Eventually she stopped having any contact at all.

Simon felt abandoned and tricked by his attorney, but with his regaining and improving capacity was able to identify appropriate supports he would need at home, as well as those services he already had in place that his daughter had terminated. Simon constantly referred to his daughter's conduct as elder abuse, questioning why she would not discuss anything with him, or would not show him bank statements, and told the hospital and aged care facility that he did not have any support networks, when in actual fact he had a strong network, including the Department of Veterans' Affairs (DVA) agencies and neighbours. Simon also had a son Peter,



who had been estranged from Mary for many years, and he noted that Mary had attempted to restrict Peter's access to Simon as well.

The aged care facility were aware of Simon's distress and made a referral to ADA Australia's Human Rights Service (HRS) for assistance.

Simon sought help from the HRS to return home and reinstate his services. Initially he wished to retain his EPOA.

SOLUTION

It was recognised that the attorney had peace of mind knowing Simon was in a safe environment, but she did not appreciate how psychologically and emotionally harmful it was to Simon, and their relationship.

Simon did not have access to any funds and due to his questioned capacity was not able to find a solicitor who would be willing to take instructions from him. Even if Simon could access his funds, he was a DVA pensioner, who owned his own modest home, with very limited savings. Simon would need the assistance of a community legal centre, and particularly one that would conduct a visit to him, as he had no means of transport. Simon's access to justice was severely impeded, as is commonly the case.

Initially the HRS assisted Simon to communicate with the attorney, aiming for reconciliation of the relationship and mediation of the issues and provided information about available additional supports to ensure Simon lives as well as

possible, in the remaining time he had left, in a setting of his choice.

Unfortunately, the attorney refused to engage and would not respond to any approaches.

Simon became more and more desperate, realising his time was running out, his most recent prognosis was less than 6 months.

Simon determined that he would need to revoke his EPOA, and become his own decision maker.

Given there was medical evidence about impaired capacity, the HRS worked with Simon to obtain a medical review of his capacity, relevant to both the legal question of capacity to revoke and make new EPOAs and also the functional capacity to manage at home with supports.

The aged care facility doctors agreed to conduct assessments, and these supported his assertion of capacity.

The HRS assisted Simon to complete a new EPOA appointing his son Peter, and suggested terms in the new EPOA limiting the powers Peter had to operate under. The new EPOA required a loss of capacity before financial decision making could operate.

OUTCOME

Now the issue is solved because Simon is legally recognised as his own decision maker. With the assistance of his network he was able to return to his own home.

The HRS assisted him to re-establish his home care services, his Centrelink records, his GP, and his bank.

Simon valued the assistance the HRS gave him as he felt he was listened to and was able to avoid further elder abuse. Without the HRS's assistance, Simon would have remained at the facility until his passing.

Aged Care Services

Our aged care advocacy service has continued to experience increased demand throughout the last financial year, providing individual advocacy to 1,168 older people with aged care issues across Queensland.

ADA Australia has been part of the Department of Health and Older Persons Advocacy Network's (OPAN) "Advocates as Agents" project, where advocates are able to access the older person's My Aged Care portal in order to provide a more effective and efficient service to people requiring support throughout their aged care journey. Advocates have found this to be a significant improvement in the advocacy support they are able to provide.

Within the home care space ADA Australia has seen significant issues for consumers in accessing Home Care Package funds to meet their individual needs. This relates to accessing an appropriate funding package as well as concerns that an individual's needs do not neatly fall within an identified service type. The concern is that Home Care packages are not truly meeting the

The concern is that Home Care packages are not truly meeting the requirements of 'choice and control' the consumer should receive in relation to their home care services.

requirements of 'choice and control' the consumer should receive in relation to their home care services. In addition, another common issue this year has been supporting clients to find alternative care providers when their current provider has indicated that they will withdraw services.

Commonwealth Home Support Program services continue to be limited in a number of regions across Queensland, including Brisbane, and clients are just not able to access the care and support they require within this program. Shortages exist regarding access to lawn mowing and home maintenance services as well as domestic assistance.

In relation to residential aged care advocates

have supported clients with a range of issues, and the latter half of the financial year saw the beginning of impacts of COVID-19 on residents. One of the main concerns raised was visitor restrictions resulting in limited contact for families and residents. This impacted significantly on residents' mental health and emotional wellbeing and families raised concerns around the welfare of their loved ones. This time also highlighted the significant contribution families have in supporting their family member in residential aged care with many assisting with daily living activities as well as providing social support.

In response to the significant impact visitor restrictions had on residents, ADA Australia worked with OPAN and other consumer peaks and aged care providers to develop the Industry Code for Visiting Residential Aged Care Homes During COVID-19 to ensure

visitation rights continued to be met throughout this period.

Our aged care advocacy services contributed significantly to the Aged Care Royal Commission this year by highlighting the lack of human rights in the structure of aged care services and how they are delivered, including the challenges aged care recipients from a diverse background face, and the need for services to align to their individual needs

and provide an inclusive service. We also highlighted the unique issues faced by aged care recipients during this COVID-19 period.

The use of restrictive practices has been highlighted as a major issue in residential care with both physical and chemical restraints being used to manage behavioral concerns related to dementia and mental illness. Whilst changes to the Aged Care Quality of Care Principles were introduced to address this issue, we have still seen significant impacts regarding the use of restraint in residential aged care facilities. We have been involved in cases including aged care facilities lowering beds almost to the floor due to falls risk so as not to use bed

INTAKE SERVICES

It has been a year of change as we have consolidated our intake advocacy services to respond to the growing demand for advocacy support across the state, and additional disability advocacy. We have increased our team numbers, enhanced our processes and developed our staff to provide a further accessible, professional and timely service. The team has undertaken 5,576 intakes this year with 2,839 requiring further support from an advocate.



5,576
intakes



2,839
required further
support (Cases)

rails. This is still causing issues for residents as the beds are often too low for people to get out of. Also restricting the use of walkers or wheelchairs in dining rooms has resulted in residents eating alone in their rooms. Another issue is the lack of communication tools and assistive technology to help residents express their needs and wishes.

ADA Australia's Human Rights Service has taken an active role in systemic advocacy for human rights regarding the regulation and overuse of chemical and physical restraint.

The Aged Care Navigator Trial

The Aged Care Navigator trial commenced in January 2019 as an 18-month pilot, and in April 2020, was extended for a further 12 months until June 2021. As part of the trial ADA Australia is providing information and support throughout the Wide Bay and South Brisbane regions, working in partnership with COTA Australia and Brisbane South Primary Health Network. We also have worked closely with other trial sites.

The aim of the trial is to provide information and support to help older people, their families, friends and carers understand and navigate the aged care system. This includes promoting awareness of the range of services potentially available and supporting people to access these services. Activities include:

- Distribution of information
- Delivering information sessions
- Individual support
- Communication and engagement activities

In Wide Bay, a staff member has been assigned to the project, and an Information Hub established. Promotional material has also been provided to community network organisations.



WIDE BAY

Individual support



220
people

Information sessions & presentations



13
presentations



906
attendees

SOUTH BRISBANE

Individual support



65
people

Information sessions & presentations

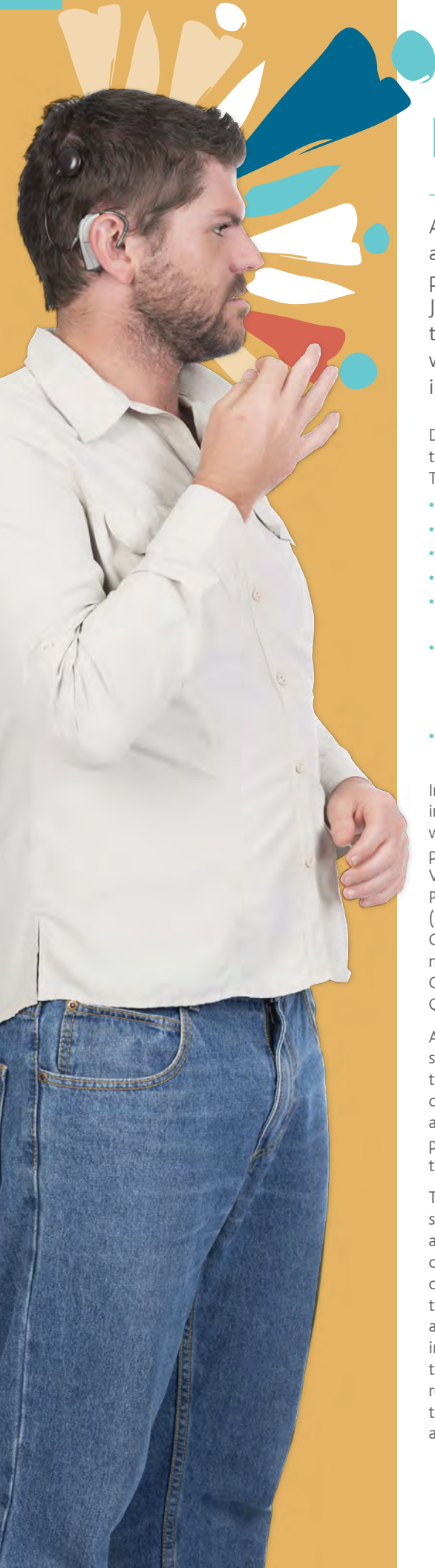


30
presentations



1745
attendees





Disability Advocacy

ADA Australia's disability advocacy services grew significantly in 2019-20. In addition to providing the National Disability Advocacy Program (NDAP) to people with disability in the Gold Coast and Central Queensland areas, from July 2019 a change in state government funding has seen the expansion of the service to delivery throughout the state for any person with disability who is 65 years or under. This saw the number of disability advocacy cases increase exponentially in 2019-20.

Disability advocates assist people to protect their rights across a broad range of life areas. This may include support in the areas of:

- Service Provision
- Assistance with government agencies
- Accessing and using services or supports
- Decision making
- People being unfairly treated or discriminated against
- National Disability Insurance Scheme (NDIS) access, planning and reviews and NDIS-related services (excluding NDIS Appeals)
- Assisting people to exercise their rights and freedoms.

In November 2019 we were also successful in securing NDAP funding to support people with disability and their supporters to participate in the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission) over the next three years in the Gold Coast and Central Queensland regions.

Additional funding has seen an expansion in the team with all aged care advocates now also providing disability advocacy. This has required changes to our processes and procedures and investment in the professional development of staff.

There has been a significant increase in the state-wide demand for disability advocacy and the level of complexity of cases continues to be extremely high. Some cases continue for over twelve months before the identified issue can be resolved and advocates frequently put over eighty hours into a single case. This severely impacts on the disability advocacy services' capacity to respond to all requests. ADA Australia tries to adhere to a one issue per client process as the service is not funded to provide

permanent support. This process also ensures that others who might be waiting will be allocated to an advocate sooner. Lack of referral options particularly for social work support and case management continue to impact on the service. The introduction of the NDIS has seen these services rapidly diminished and clients turning more to advocacy to fulfil this need. Sourcing appropriate referral pathways has become increasingly difficult for advocates.

The COVID-19 pandemic has seen a further increase in the intensity and complexity of disability advocacy work across the state. Advocacy support has had to be flexible and innovative in order to achieve support continuity. A lack of communication from support services appeared to cause increased levels of confusion, anxiety and became quite overwhelming for many people with disability. Numerous clients cancelled vital

daily services due to fear of COVID-19 transmission.

Disability advocates continue to spend a large portion of their time supporting people to gain access to or resolve issues with the NDIS and Centrelink payments.

CASE NUMBERS

 1096

In 2020 ADA Australia, together with the Aboriginal and Torres Strait Islander Disability Network of Queensland (ATSIDNQ), have partnered with Queenslanders with Disability Network and the Queensland Council of Social Services to deliver the Targeted Outreach Project. This project supports access for people with disability in regional and metro centres across the state to the Queensland Government Assessment and Referral Team who provide individualised support to assist people meet access requirements for the NDIS.

Other common issues requiring disability advocacy support include:

- Thin markets in regional areas

impacting on choice and control for participants and at times resulting in poor quality service

- Intersection of disability, health and aged care services creating gaps in service provision for people with a disability
- Issues accessing required equipment/assistive technology
- Housing/homelessness issues - wait times for housing causing people's issues to become more urgent and complex
- Supported Independent Living (SIL) Arrangements and negotiating with service providers whilst still exercising client choice.

- Meaningful inclusion into education and employment participation.

Prior to COVID-19 restrictions, NDAP and Disability Royal Commission advocates visited a range of regional towns and communities to inform people about the Royal Commission and the options for participation. These regional visits will re-commence once restrictions have eased. During COVID-19 restrictions the Disability Royal Commission team worked collaboratively with ATSIDNQ to develop short information videos featuring ATSIDNQ champions discussing Royal Commission participation, including one video in Auslan.

Strategies that have been used to advocate for systemic changes include:

- Delivery of community education sessions
- Input into policy reform submissions
- Participation in the Disability Royal Commission
- Meetings with Government Departments and Ministers

- Collaboration with other advocacy services
- Participation in roundtables, forums, interagency meetings and other discussions.

The disability advocacy service continues to spend a considerable amount of time developing community networks and informing a wide range of government and non-government services and the community in general, of the existence of the service and the supports it provides. This work continues to be crucial for the ongoing maintenance of the service's presence within local communities.

With the assistance of federal funding we were also able to develop and produce a new 'Speak-Up' self-advocacy resource. This resource is available free to people with disability, services within the sector and the general community.

The NDAP service participated in its second external audit in June and achieved compliance against the requirements of the National Standards for Disability Services and ISO 9001:2015.

The COVID-19 pandemic has seen a further increase in the intensity and complexity of disability advocacy work across the state. Advocacy support has had to be flexible and innovative in order to achieve support continuity.



19-20 SNAPSHOT



121
People from
Aboriginal & Torres
Strait Islander
Communities



3
Care Leavers



276
CALD backgrounds



38
Veterans



1,249
People who live
rurally or remotely



3
Parents separated
from their children
by forced adoption
or removal



20
People who are
homeless or at risk
of homelessness

Advocating for Diverse Needs

A challenge for any organisation is ensuring that the cultural diversity of its staff reflects that of Queensland's population.

The importance of employing advocates with the requisite skills and lived experience to advocate on behalf of care recipients from diverse cultures given the complexities that exist at the intersectionality of cultural background, older age, disability, language, lived history of marginalisation, discrimination, stigmatisation cannot be overstated.

Part of the approach for ADA Australia is to wherever possible employ skilled individuals who share aspects of diversity with the populations of people whom we support. Another key element is ensuring that the workforce has access to ongoing professional development to build cultural competence.

This combination provides the best opportunity for our clients to connect with an appropriate advocate who can provide culturally competent and culturally safe support.



Access to Aboriginal and Torres Strait Islander Advocates

ADA Australia is proud to be able to offer older Aboriginal and Torres Strait Islander people and people with disability, the option to receive support from an advocate who identifies with one of these cultures. It is also fortunate that having Indigenous advocates of different genders, increases the likelihood of us being able to offer culturally sensitive and appropriate support.

Disability advocacy

Our Aboriginal and Torres Strait Islander advocates have reflected upon the increasing complexity when supporting a person with disability to access the National Disability Insurance Scheme (NDIS). Indigenous advocates have commonly encountered NDIS applicants who haven't been able to access or navigate the current access and eligibility requirements of the Scheme, and who required more targeted support with this process.

It's not uncommon for advocates to invest considerable time and skill in supporting clients to work through and turn around a negative NDIS access decision, including for those individuals with very apparent disabilities and functional impairments.

Advocates support individuals as they consider the merits of re-engaging with the

NDIS and applying again for access, including helping them deal with emotional stress often caused by the process.

ADA Australia will also continue to work with State Government on the Targeted Outreach Program to assist more people access the NDIS, and to push for the National Disability Insurance Agency to commit more resources to engaging with community.

Advocating for overseas born or people born in Australia to parents from diverse cultural backgrounds

There are some very obvious impediments which stand between Queenslanders with diverse characteristics accessing the care and support to which they're entitled, and a recurring issue is the absence of clear information being freely available in languages other than English, or at their level of English literacy. While government departments and organisations are becoming more adept at producing public information in a range of languages and formats, it is still too often the case that this information doesn't reach the intended audience.

ADA Australia has improved access to information about its services by giving visitors to its website the option to select from over 100 languages other than English, to facilitate their understanding

of materials contained on this site.

Our advocates use professional interpreter services whenever the situation calls for one. Some aged care and disability providers are using family members as substitutes for professional translators and interpreters. This practice presents an unacceptable risk to client privacy and also presumes the family member has the level of literacy required to be able to accurately interpret the information being relayed. For these reasons, advocates have consistently reminded service providers of their obligation to provide professional interpreters.

Advocates also reflect that there is a lack of specialist expertise for older people from diverse backgrounds who have poorly managed mental illness that's linked to trauma and/or persecution which happened earlier in life. Advocates report that such individuals are often re-bounded in and out of hospital acute care as a substitute for trauma-informed support.

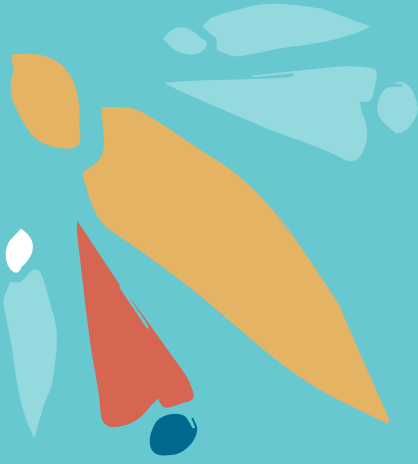
Advocating for people who are Gender Diverse and Same Sex Attracted

ADA Australia recognises that lived experiences of exclusion, discrimination, marginalisation and violence at the hands of individuals and organisations, on the basis of sexual orientation and gender identity has created a need whereby impacted individuals, are discerning about who they seek support from. Contacting an advocacy service and seeking support, which necessarily involves disclosure of personal information may be more difficult and requires appropriate organisational responses which reassure clients of its cultural competence.

To promote culturally informed and culturally safe support ADA Australia has an LGBTIQ+ Working Group comprised of staff who share a commitment to promoting safe access to ADA Australia services for all. Using tools developed by leading LGBTIQ+ provider agencies, the Working Group identify and implement organisational change that promote inclusion. Given the changing nature of its workforce through expansion and staff turnover, organisational awareness and capability remains non-static.

The need for an identified LGBTIQ+ Advocate position is being discussed and considered.





YARNING GROUPS

- Burringilly Respite Centre, Woodridge
- Nalingu Respite Centre, Zillmere
- Galangoor Duwalami Primary Health Care Centres - Maryborough and Hervey Bay

POLICY

- Consultation – Beyond 2020 National Disability Strategy
- Disability Royal Commission
- Survey – Response to COVID-19 Pandemic
- Queensland Productivity Commission
- Inquiry into NDIS Market
- QAIHC – Queensland Aboriginal and Torres Strait Island Health Council

CONSULTATIVE COMMUNITIES

- Domestic and Family Violence, Queensland's Plan to 2020 Domestic Violence Strategy
- Disability Inclusive Disaster Risk Reduction Advisory Group

PROJECTS

- Targeted Outreach Project
- Power of Peers (Information, Linkages and Capacity funding)

Aboriginal and Torres Strait Islander Disability Network of Queensland

ADA Australia has a long history of supporting people in metropolitan, regional, rural, and remote communities, including Aboriginal and Torres Strait Islander Communities. ADA Australia accepted the auspice of the Aboriginal and Torres Strait Islander Disability Network of Queensland (ATSIDNQ) in 2015.



ATSIDNQ staff with Network Champion Aunty Semah Mokak-Wischki

ATSIDNQ offers a culturally safe space for members to connect, share and raise awareness of the issues they are facing. It also gives members the opportunity to celebrate their strengths, share their stories and contribute to the conversation about disability in positive ways.

Over the past twelve months, ATSIDNQ has been a part of a network that has faced challenges and barriers, especially with the COVID-19 pandemic, but has found great solutions in meeting the needs of approximately 1,200 Aboriginal and Torres Strait Islander people with a disability, their carers, families, community and providing support to non-Indigenous service providers. Fantastic relationships have been established through membership, networking with government and non-government agencies, and having the occasional cups of tea with disability sector representatives.

Strong membership voices provide a great focus to stay on track of why the Network was established and what it signifies.

ATSIDNQ Team

ATSIDNQ engages the services of a dedicated Project Officer employed by ADA Australia. Funding from new projects will allow for expansion of the ATSIDNQ team from 1 July 2020, with support from ADA Australia's Aboriginal and Torres Strait Islander Advocates and a newly created Assistant Project Officer role.

ATSIDNQ is also supported by the ATSIDNQ Working Group, which is made of up Aboriginal and non-Aboriginal staff and management, who meet bi-monthly. Meetings specifically include the following:

- Informing ATSIDNQ of systemic issues
- Feedback for submissions to policy
- Networking and regional information sharing
- New memberships
- Event organisation and attendance

State-Wide Engagement

ATSIDNQ staff engaged with communities at a range of events and forums, which provided a great opportunity to promote the Network and grow membership.

ATSIDNQ was fortunate to visit and promote the Network in beautiful and significant cultural places across the state that included, the Torres Strait Islands, Northern Peninsula Area, Far North Queensland, Central Queensland, North and South Burnett, Sunshine Coast, Stradbroke Island, South West Queensland, Logan, Ipswich, Caboolture and Brisbane Regions.

The state-wide engagement activities included visiting communities both within the remote, rural, and urban regions. The engagement gave ATSIDNQ a better snapshot of the needs and challenges that are barriers to receiving quality support. The more remote the team ventured, the greater the discrepancies were, highlighting the limited disability resources and advocacy available in remote areas.

ATSIDNQ was very fortunate to hear the real stories of how this disparity impacts people in the community. While we could not provide immediate solutions, giving people the opportunity to share their story somehow provided a window of hope, a connection and validation of their experiences. The engagement highlighted the purpose of ATSIDNQ and how we can continue to provide the best supports and advocacy to individuals, carers, families at a community level.

There were also some amazing success stories of where ATSIDNQ was able to connect and provide a pathway to services for the communities visited. During the engagement there was profound cultural knowledge and guidance provided by Elders who knew the community's landscape and had a vision for their community. Some of the Elders came from Cherbourg, Dunwich-Stradbroke Island, Cairns, Maryborough, Hervey Bay, Seisia, Bamaga, Moa Island and Thursday Island just to name a few.

ATSIDNQ had the extraordinary privilege of talking to an Elders Consortium, established by an MOU through the Goondir Health Service, which services the regions of Dalby, Oakey and St George. This exchange was an amazing progression of community-controlled organisations coming together to Close the Gap for the target groups they service. This trip for ATSIDNQ fostered a strong relationship with the Health Service for these regions which will facilitate collaborative work on future projects,



Launching Targeted Outreach Program with partners QDN, QCOSS and the former Minister for Disability Services

There were also some amazing success stories of where ATSIDNQ was able to connect and provide a pathway to services for the communities visited.

specifically, the development of yarning groups.

ATSIDNQ participated in the 2nd Indigenous NDIS Conference in Cairns. This was a great chance to promote the Network to the Aboriginal and Non-Aboriginal NDIS Service Providers. Also, to hear of research within disability and the gaps in service that remain a challenge.

Participation in Regional Disability Expo's across Mackay, Brisbane, and Gold Coast was a fantastic way to meet and become familiar with the disability supports and services in these areas, and to disseminate information about the Network. Network Champions and ADA Australia advocates assisted with this activity.

ATSIDNQ participated in Queenslanders with Disability Network (QDN) Changing Lives, Changing Communities Forum in Normanton. Another fantastic way to meet the local people and recruit Network members.

ATSIDNQ also participated in NAIDOC Events in Brisbane, Cairns, Toowoomba, Maryborough, Hervey Bay and Stradbroke Island.

Membership

ATSIDNQ staff have engaged face to face with an estimated 3,000 people around Queensland during 2019-20. New membership for the period was 287, the growth of which has been impacted by COVID-19 restrictions.

All incoming membership applications were actioned within the reporting

period with new members receiving a welcome letter with information about the Network including information on how to connect with the closed Facebook group, a membership hat and wristband, and a copy of the latest newsletter. Membership forms were also distributed to a number of organisations and service providers for promotion amongst their client groups.

ATSIDNQ has also supported nine Yarning Group meetings, which have been successful in engaging participants across the Maryborough, Bundaberg and Brisbane North areas. The Yarning Groups have been a useful platform for information sharing and gathering feedback from members about issues of importance.

Accessible and Culturally Appropriate Information

ATSIDNQ is committed to ensuring that all information distributed by the Network is both accessible and culturally appropriate. Over the last 12 months this has been achieved by the adoption of the following strategies:

- The Acknowledgement of Country is always performed at all ATSIDNQ events.
- Media release forms used to ensure culturally acceptable practices when collecting and using images of members for publication.
- Accessibility and wheelchair access are always the primary consideration for venues used for yarning group meetings and events.
- The closed Facebook group offers a platform for members to engage and share their stories in a culturally safe space for discussion. This is a members only group with new members added by request.
- Members continue to be offered access to culturally appropriate support and information from Indigenous Network staff.
- Engagement of cultural advisors and key Elders for regional/remote visits, for example to the Torres Strait.

COVID-19

During the COVID-19 pandemic, ATSIDNQ has continued to operate to ensure it maintains the support of existing members and potentially reach new members.

ATSIDNQ witnessed a lot of changes during this time. Changes in how we carry out business through community engagement, yarnning groups, recruitment of Champions and Members and, address systemic issues through the Network. ATSIDNQ has adjusted the way we do business by connecting through mediums of social media, utilising Skype, Zoom and frequent telephone calls.

ATSIDNQ Champions

An important strategy of the Network is to ensure that it continues to recruit Champions within the regions of Queensland. Champions can add 'voice' to ATSIDNQ through lived experiences and in-depth knowledge of the challenges that are occurring throughout the regions.

Champions meet every six weeks to discuss issues, challenges, and succession planning.

Champions advocate for change within their local, state, and federal platforms. Champions attended several community meetings and networking opportunities during this period.

ATSIDNQ recognises and is grateful for the continued support of Uncle Willie Prince (Brisbane) and Aunty Semah Mokak-Wischki (Brisbane) who remained as ATSIDNQ Champions.

ATSIDNQ welcomed two new Champions to the team this year, Gayle Jones (Redcliffe) and Cody Skinner (Kippa-Ring), who both bring a wealth of knowledge, wisdom and enthusiasm to the team.

ADA Australia would like to thank all Champions for their ongoing commitment to ATSIDNQ.

New Projects

ATSIDNQ was successful in gaining funding for two new projects which will be delivered over the next two to three years:

1. Targeted Outreach Project

Queenslanders with Disability Network (QDN) and Queensland Council of Social

Service (QCROSS) along with ATSIDNQ have partnered to roll out The Targeted Outreach Project, funded by the Department of Communities, Disability Services and Seniors. This forms part of the Queensland Government's continued effort to ensure as many Queenslanders with disability as possible are supported to access the NDIS.

2. Power of Peers Project

ADA Australia in partnership with QDN will establish funded Disability Yarning Groups utilising the existing Power of Peers framework within the following three regions over the next three years: Maryborough/Hervey Bay, Dalby/St George/Oakey and Cairns. The Power of Peers Project will support the expansion of yarnning groups and future advocacy projects within regions.

Funding from these new projects will allow for expansion of the ATSIDNQ team.

Pictured below: ATSIDNQ at NAIDOC Week July 2019



Communications and Resources

In addition to maintaining ADA Australia’s high profile as an expert on issues in aged care and elder abuse, in 2019-20 we also developed and delivered some significant resource packages to address gaps in consumer information across aged care, disability and human rights advocacy, which are available for use across the sectors.

ADA Australia’s profile has been cemented among mainstream media in Queensland, with CEO Geoff Rowe often the go to for commentary and opinion on aged care and elder abuse issues. The “Rock the Boat” Conference early in the year generated key media coverage with a total audience reach of almost one million. Other media opportunities throughout the year focused on these topics included ABC Radio statewide and Radio National, SBS Radio, local community radio, Channel 7, Channel 9, Channel 10, ABC News and News Corp publications such as the Courier Mail and Gold Coast Bulletin. We also continued to make contributions to sector online and print publications such as Grey Matters and Ageing Agenda.

Cole Lawson continued to manage our social media presence and provide support with media and communications projects.

The Seniors Guide to Queensland Help app



People over 60 often seek help by asking friends, calling services, or searching the internet

and frequently are unable to find the right information or appropriate referral. To address this ADA Australia created a free app to help older Queenslanders find appropriate help for themselves. The app is available on Google Play and the App Store and has had around 600 downloads. It provides easy access to information on a range of topic such as navigating life transitions and understanding rights.

The release of the app was supported by promotion including:

- E-blast to The Advocate readership
- DL flyer distribution at events, expos, network and client meetings
- Social media
- Media coverage

www.adaaustralia.com.au/resources/seniors-guide-to-qld-help-app/

Self-Advocacy Toolkit

Part of ADA Australia’s philosophy is not only to provide direct support to help people have their voices heard, but also to help and



encourage people to develop their skills and capacity for self-advocacy. The National Disability Advocacy Program accepted a proposal from ADA Australia to develop a self-advocacy toolkit for people with disability.

The Speak-Up series is a suite of 10 short guides covering a range of everyday issues that people with disability tell us they face such as problems with disability support or care services or getting supports through the NDIS.

ADA Australia staff, other Queensland advocacy organisations and people with disability were consulted in the development

OTHER MEDIA COVERAGE

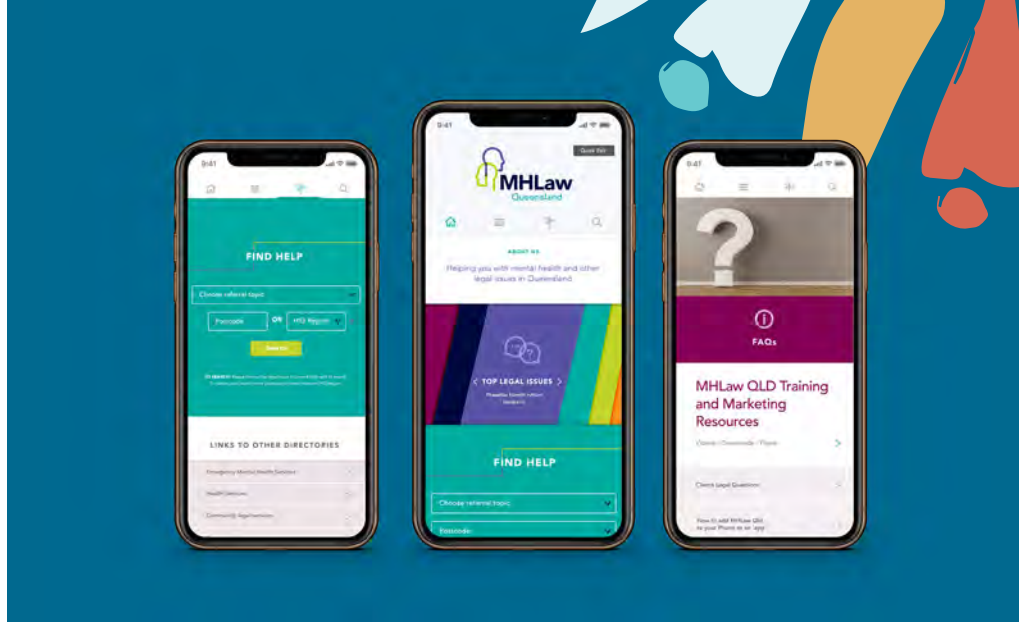


SOCIAL MEDIA



E-MARKETING





of the Speak-Up series, and the guides are available for download on www.australia.com.au/speak-up in a range of formats.

The release of the speak-up series was supported by communication and engagement, including:

- social media campaign across Facebook, Twitter and LinkedIn, including paid advertising
- distribution to The Advocate readership
- internal promotion to staff for inclusion in the enquiry and intake process.

www.adaaustralia.com.au/speak-up

MHLaw Qld

Research shows that people living with a mental health condition often may have a range of legal issues and that they will likely go to their trusted health professional for support and advice. However, health professionals may not have the appropriate legal background to give advice and make referrals. In addition, legal professionals may not have the mental health or clinical background that would assist with managing these matters.

To address this need, ADA Australia worked in partnership with Queensland Advocacy Incorporated Inc (QAI) to develop MHLaw Qld, funded by the Queensland Department of Justice and Attorney-General. MHLaw Qld is a one-stop online directory to information and services that can help navigate legal and other issues which impact people experiencing mental health issues in Queensland, such as answers to frequently asked questions by lawyers and mental health professionals and navigating issues under the Mental Health Act 2016.

The resource was developed in consultation with independent patient rights advisors, social workers, mental health social workers and a legal aid reference group and has

been well received across the health and community legal sectors.

The release of MHLaw Qld was supported by communication and engagement, including:

- distribution to key stakeholders and The Advocate readership
- social media campaign across Facebook, Twitter and LinkedIn, including paid advertising.

www.mhlawqld.com.au

Supporting Financial Decisions

People living with intellectual disability can face barriers when it comes to improving their money skills and making independent financial decisions. Even though these individuals have the same financial rights as everyone else, they are often not encouraged to improve their financial capability.

To help address this issue, ADA Australia (supported by Ecstra Foundation) developed a series of short videos titled Supporting Financial Decisions.

The release of the Supporting Financial

Decisions video series was published on ADA Australia's Youtube channel and supported by communication and engagement, including:

- launch event
- social media campaign, including paid advertising
- distribution of flyers at events, expos and client meetings
- disability, legal and finance sector publications and networks
- distribution to The Advocate readership.

www.adaaustralia.com.au/supporting-financial-decisions/

We are now looking forward to the year ahead with communication activity expected around the findings of the Royal Commission into Aged Care Quality and Safety, as well as planning new positioning activities and campaigns. Following the broadening of our scope in disability advocacy during 2019-20, in 2020-21 we will be increasing our focus on building ADA Australia's profile as an authority in the disability sector, with communication activity advocating for the rights of people with disability and on the findings of the Royal Commission into Violence, Abuse and Neglect and Exploitation of People with Disability.





Embedding Human Rights - NEAC & Beyond

The 6th National Elder Abuse Conference (NEAC), jointly hosted with Caxton Legal Centre and ADA Australia, was reported on in ADA Australia's 2018-19 Annual Report, as it was the year in which almost all the conference planning occurred. As it occurred at the start of the 2019-20 financial year, in late July 2019, it's worth reviewing the feedback from attendees regarding the themes that were explored. Overwhelmingly the feedback from the 500+ conference delegates attested to the fact that the conference program informed, stimulated, enlightened and challenged delegates, in line with the "Rock the Boat" theme.

The challenge laid down at the end of the conference was how exactly delegates could harness the energy generated over the course of the two days, in ways that contribute to positive change within our individual sphere of influence, to better promote the rights of older Australians, in a general sense and, specifically, afford them their right to live free from abuse and neglect.

The conference illustrated that reforms are required at many levels and the participants, when surveyed about their key issues as identified from the conference, nominated the following:

- 1. Human rights** – identifying ways to apply a rights-based lens to all services which support older Australians
- 2. Criminalisation of elder abuse** – ongoing discussion regarding the need for discrete laws which criminalise the abuse of older Australians
- 3. Awareness raising** – there is a need for further education of older people, their families and friends, industry and the community about elder abuse, how to identify it and where to access supports
- 4. Prevention** – research should be focussed on increasing our understanding about what prevention activities will work and then we need to adopt a collaborative approach towards implementing those activities
- 5. Ageism** – joining together to combat ageism in all the ways it exists in Australian society

6. Older Person Led Initiatives – older Australians should be empowered to take the lead on addressing elder abuse.

This is in many ways a reassuring response to such a broadly themed conference and underscores how participants recognise that much needs to happen to address elder abuse.

Given this broad reform agenda, it's worthwhile reflecting on which of these

Our overarching goal has been to support every older Queenslanders' right to live autonomously in safety with their support needs responded to by a service system that places them at the centre of every transaction.

areas ADA Australia has invested its energies. Our overarching goal has been to support every older Queenslanders' right to live autonomously in safety with their support needs responded to by a service system that places them at the centre of every transaction. As a rights-based, individual advocacy service, it's been important to identify where we can make a positive difference, given the breadth and magnitude of the changes required.

Our work with Human Rights Watch regarding unlawful use of chemical restraint in aged care clearly fits within the first key priority area listed above.



Press conference for 'Fading Away' report at Parliament House with Human Rights Watch



Human Rights Watch Report "Fading Away" How Aged Care Facilities in Australia Chemically Restrain Older People with Dementia

<https://www.hrw.org/report/2019/10/15/fading-away/how-aged-care-facilities-australia-chemically-restrain-older-people>

In 2018-19 ADA Australia supported Human Rights Watch (New York) in their investigation along the Australian eastern seaboard of the widespread use of chemical restraint in residential aged care settings. Our support involved the identification and connection of those whom we've previously supported where the use of chemical restraint was an identified issue for the person. With the consent of these clients and former clients, Human Rights Watch was assisted to gain access in order to interview subjects across Queensland.

The joint National release of the Human Rights Watch report in October 2019, gained national exposure to what in most cases amounts to a fundamental abuse of human rights. The report has been used in subsequent efforts by this agency to advocate to the Australian Government for banning the use of chemical restraint in the aged care system, except in cases where the short-term use of psychotropic medication is clinically indicated.

Evidence gathered by Human Rights Watch highlighted the extent to which such medications are being prescribed oftentimes without prior consent, as a long-term strategy for modifying the behaviour of residents, theoretically in order to make them easier to manage. Widespread human rights abuses of residents are occurring and the administration of medication for purposes other than clinically recommended have gone largely unchallenged in the residential aged care sector. The Aged Care Royal Commission, in its Interim Report <https://agedcare.royalcommission.gov.au/publications/interim-report> released last year also identified chemical restraint as a key factor related to the neglect of older Australians in aged care.

ADA Australia's cooperation with Human Rights Watch represents a powerful example of how this agency has forged an alliance with an agency at the forefront of human rights reforms and is working collaboratively to advance the rights of vulnerable older people currently not protected by the aged care system.

Systemic advocacy through current Royal Commissions

ADA Australia was active throughout 2019-20 making submissions to both the Royal Commission into Aged Care Quality and Safety (Aged Care Royal Commission) and

the Royal Commission into Violence Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission) that have been operating concurrently. Drawing upon the extensive case-based evidence of many people that we've been supporting over almost three decades, ADA Australia has argued with passion and persistence that our care systems lack a human rights focus.

We have urged the Royal Commission when giving consideration to the set of recommendations it will develop and finally present to the Australian Government, to include the absolute need for a rights-based approach to be embedded in a re-imagined aged care system. An aspect of this will be to ensure that all who work in the sector have access to training and on-going support in how to deliver quality care within a rights-based framework. ADA Australia has argued at length that the Charter of Aged Care Rights, which isn't legally enforceable, is insufficient to safeguard older people against abuses of their basic human rights and needs.

The Aged Care Royal Commission has been called upon to safeguard against the types of abuses they've heard about over the course of its hearing. Simply put, older people should be given more choice about what supports they need, rather than having to be placed in a system that has been repeatedly shown as not providing adequate care and support.

Safe and Just Futures for People Living with Dementia in Residential Aged Care

<https://www.dementiaallianceinternational.org/wp-content/uploads/2020/03/Safe-and-Just-Futures-Project-Report-for-Web.pdf>

Karen Williams from ADA Australia's Human Rights Service (HRS) has been part of a multi-disciplinary project Safe and Just Futures for People Living with Dementia in Residential Aged Care, comprised of individuals who bring legal, academic, social science perspectives and people with lived experience of dementia and/or carers. A collective re-examination of how dementia care is currently provided through a human rights lens and positing that widespread human rights abuses are occurring through the current accepted practices of incarceration, segregation, seclusion and restraint, as part of what's currently promoted as 'best practice in dementia care'.

This project, with reference to UN Convention on the Rights of People with Disability (CRPD) to which Australia is a signatory, challenges the legality of both the physical environment which makes the above permissible together with current care practices which cease to recognise people with dementia as people who have rights and who are capable of expressing preferences and/or giving consent.

The Safe and Just Futures for People Living with Dementia in Residential Aged Care continues to challenge the accepted orthodoxy of dementia care and amongst the many recommendations to come out of the project has been to seek a moratorium

on the construction of any additional aged care facilities intended as a home for a person who lives with dementia, until rights-affirming alternative models have been duly considered.

Evolution of ADA Australia's Human Rights Service (HRS) to ADA Law



ADA Law
Community Legal Service

Throughout 2019-20 ADA Australia's HRS has continued to work toward being recognised as a community legal service by becoming a community legal centre (CLC). Driving this pursuit is the knowledge that achieving accreditation and membership as a CLC will provide greater scope to respond to the raft of unmet needs of people with questioned or impaired capacity. Supports for adults with impaired capacity have historically been paternalistic and premised on the requirement for substitute decision-makers to make choices on behalf of the impaired adult, without including the views, wishes and preferences of the person.

In early 2020-21 the HRS achieved status as a Community Legal Centre and commenced trading as ADA Law. See www.adalaw.com.au for more information.

The HRS in the course of its legal advocacy support has seen the extent to which current approaches have failed to recognise and uphold the rights of individuals who have capacity issues, to exercise choice

and control up to the limits of their ability to do so. Instead, current responses treat individuals as if they lack any capability to decide and the HRS has successfully argued in Tribunal settings how the person presumed incapable can, if appropriately supported, exercise far greater choice and control than is often recognised.

The HRS has actively highlighted the structural inequalities that contribute to rights abuses and potential for abuses, as a result of the ways that substitute decision making entities are discharging their obligations, often with limited consultation with the person on whose behalf they're making decisions. The HRS is arguing that this is often about outdated attitudes that are not inclusive toward the person with the questioned capacity.

The HRS has been working with other key agencies, both government and community based, to improve the legal frameworks (particularly the guardianship framework) that people find themselves overly restricted within. The newly developed; capacity assessment guidelines, Enduring Power of Attorney forms and Advance Health Directives will hopefully better serve the community than the current documents and processes do.

The above examples represent just a few of the tangible ways in which our unwavering commitment to embedding human rights in all care systems, have been given increasingly clearer expression. Even though it seems a little self-congratulatory, we believe that we are an agency which has continued since NEAC to unapologetically "Rock that Boat".

Pictured below: OPAN delegation with Minister Colbeck.





Corporate Services

ADA Australia's greatest asset continues to be its dedicated and professional staff base that is critical to the development and success of the organisation. Advocates continue to bring extensive experience and skills in the community, disability, and aged care sectors, with professional backgrounds in nursing, social work, human services, diversional therapy, rehabilitation, education, and law. Integral to the capacity to deliver our services is our small team of dedicated Corporate Services staff, providing high level back of house support to ensure the ongoing operations of the organisation. Volunteers and students also support our staff, providing many hours of assistance in areas such as administration, information/referral and advocacy support.

ADA Australia continues to be an employer of choice, with staff retention rates remaining high, with over 35% of staff having worked for the organisation for more than 7 years. ADA Australia has continued to enhance the skills, capabilities and knowledge of its valuable employees by providing regular training and development opportunities.

While the 2019-20 year started off as business as usual, it certainly became a challenging one with a global pandemic hitting the second half of the year, resulting in office shutdowns across the state and staff deployed to work-from-home arrangements for several months. However, our team rose to the challenge, resulting in a seamless transition operating remotely utilising VOIP and portable technology.

In November 2019 ADA Australia rolled out Salesforce, a dedicated Customer Relationship Management system to take the place of the organisation's outdated and unsupported client database. Throughout

the year substantial further development was undertaken incorporating human resource and operational functions to streamline processes and increase productivity across the organisation.

ADA Australia has continually upheld a strong commitment towards being a quality organisation and has been formally recognised as a certified quality organisation against the International Organisation for Standardisation (ISO) Quality Management System 9001 Standards since 2009.

ADA Australia successfully passed its ISO 9001:2015 surveillance audit in June this year, and additionally achieved its second year of compliance against the National Standards for Disability Services.

Attaining formal quality certification against both standards is an enormous accomplishment and recognition of ADA Australia's commitment of being a quality organisation for our stakeholders and clients.



Financial Snapshot

Financially 2019-20 was a very successful year for ADA Australia. Overall, actual income for the year was \$4,643,703, up by \$577,457 from the previous year.

ADA Australia continued to deliver advocacy services to clients of the National Aged Care Advocacy Program (NACAP) through a partnership with the Older People's Advocacy Network (OPAN) and eight other Service Delivery Organisations (SDOs) across the nation. This national partnership has ensured that older vulnerable people continue to be heard and supported and has created consistency in how these services are delivered to older people across the nation. The value of this national partnership was highlighted throughout COVID-19 with SDOs crossing state borders to assist with advocacy support to states impacted by outbreaks.

Through partnerships with OPAN, Council on the Ageing (COTA), and the Brisbane South Primary Health Network, ADA Australia has continued to participate in the Aged Care Navigator trial services in the Brisbane South and Bundaberg/Wide Bay regions. These trial services are funded by the Australian Government to provide information about aged care options, or help to access aged

This national partnership has ensured that older vulnerable people continue to be heard and supported and has created consistency in how these services are delivered to older people across the nation.

ACTUAL INCOME

↑
\$577,457
increase from 2018-19

care supports, to older people, their families, friends, and others who want to link with aged care supports. The trial services have been extended through to June 2021.

This year ADA Australia increased its focus on supporting people with disability with additional funding from the Department of Social Services to support people to make submissions to the Disability Royal Commission. This funding is an extension to the existing National Disability Advocacy Program (NDAP) funding provided for the Rockhampton and Gold Coast Regions.

While the 2018-19 year saw the wind down and loss of funding for the Queensland Community Care Program, ADA Australia welcomed the continued funding from the Department of Communities, Disability Services and Seniors in the form of a disability advocacy service for people under the age of 65. The demand for this service continues to grow exponentially, and ADA Australia will continue to lobby the Queensland Government to continue this important disability advocacy funding beyond June 2021.

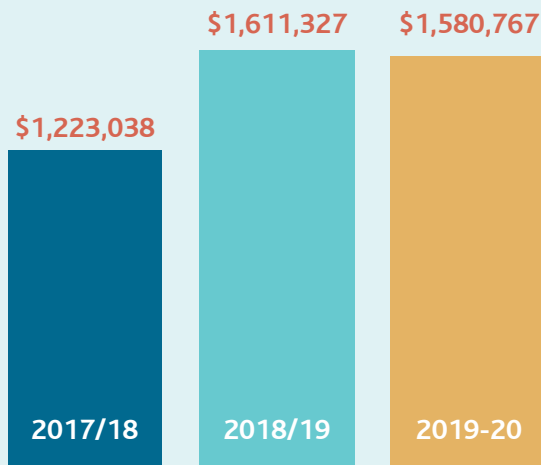
ADA Australia has continued to partner with the Queenslanders with Disability Network (QDN) to undertake a range of key activities to support a dedicated state wide network for Aboriginal and Torres Strait Islander People with disability, the Aboriginal & Torres Strait Islander Disability Network of Queensland (ATSIDNQ).

ADA Australia's Human Rights Service, funded by the Department of Justice and Attorney-General and administered by Legal Aid Queensland, continued to support adults with impaired decision-making capacity to resolve guardianship and administration issues. To better support vulnerable and disadvantaged people with multiple and/or complex legal and associated non-legal problems, ADA Australia commenced establishment of a specialist Community Legal Service, with ADA Law officially being launched in August 2020.

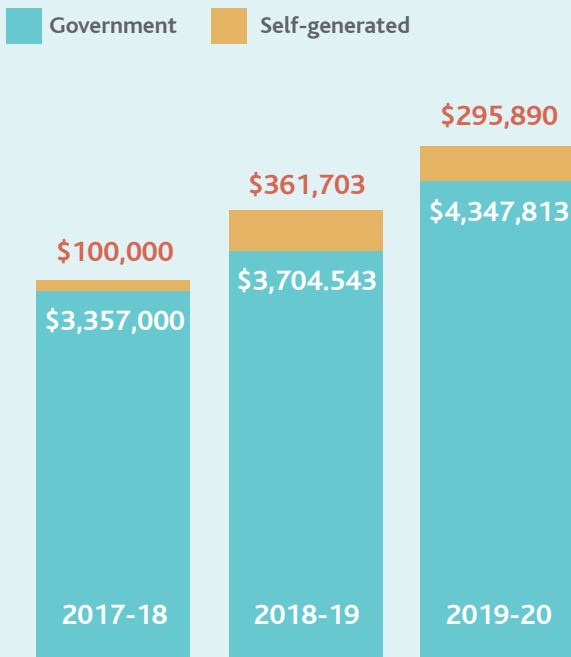
Total expenditure for the year was \$4,562,988, an increase of \$533,693 from the previous year. This escalation in expenditure is predominantly the result of the continued investment in increased staff wages and associated direct service delivery costs, to meet the increasing client demand for ADA Australia's services.

ADA Australia's cash position decreased slightly with a closing cash balance of \$1,580,767 at the end of the financial year, down by \$30,560 from the previous year. The closing cash balance has been impacted due to grants and funding received prior to year-end being reflected in the financial report as unexpended funds carried forward.

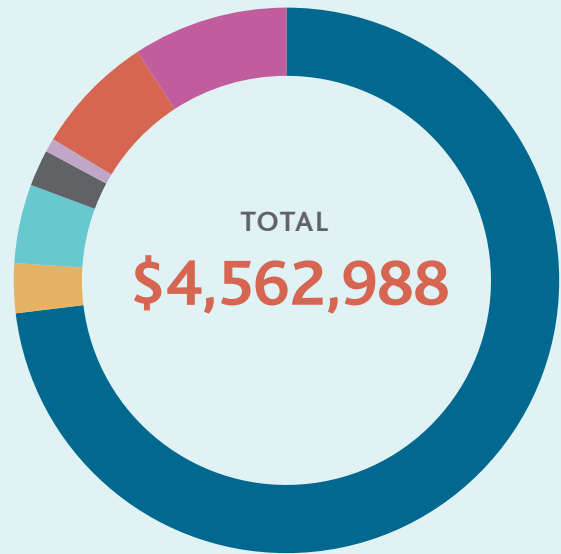
CASH AT END OF FINANCIAL YEAR





SOURCES OF INCOME





EXPENDITURE





- 
73.07%
Staffing


- 
2.94%
Travel

- 
4.68%
Premises/Accommodation

- 
2.16%
Equipment, Furniture, IT etc

- 
0.81%
Promotion

- 
7.14%
Communication

- 
9.2%
Contracted Services



Glossary

ADA Australia

Aged and Disability Advocacy Australia

Aged Care Royal Commission

Royal Commission into Aged Care Quality & Safety

ATSIDNQ

Aboriginal and Torres Strait Islander Disability Network of Queensland

CALD

Culturally and Linguistically Diverse

CHSP

Commonwealth Home Support Program

CoS

Commonwealth Continuity of Support Program

Disability Royal Commission

Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability

EPOA

Enduring Power of Attorney

HCP

Home Care Packages

ISO

International Organisation for Standardisation

LGBTI+

Lesbian, Gay, Bisexual, Trans, Intersex, Queer

MAC

My Aged Care

NACAP

National Aged Care Advocacy Program

NAIDOC

National Aboriginal & Islander Day Observance Committee

NDAP

National Disability Advocacy Program

NDIS

National Disability Insurance Scheme

OPAN

Older Persons Advocacy Network

PTSD

Post-traumatic stress disorder

QCAT

Queensland Civil and Administrative Tribunal

QCC

Queensland Community Care Program

QCSS

Queensland Community Support Scheme

RACF

Residential Aged Care Facilities

RAP

Reconciliation Action Plan



ADA
Australia

*Your aged and
disability advocates*

BRISBANE – HEAD OFFICE

121 Copperfield Street
Geebung, QLD 4034

Email info@adaaustralia.com.au

Phone (07) 3637 6000

Toll Free 1800 818 338

adaaustralia.com.au