

DISABILITY ADVOCACY IN VICTORIA
THE OMBUDSMAN'S REPORT AND
THE PARLIAMENTARY INQUIRY

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Abstract

This paper is a companion submission to one entitled "A Critique of the Ombudsman's Report into Victoria's Disability Sector". This submission specifically addresses advocacy as detailed in the recently released Ombudsman's Phase 1 report. The submission is critical of the superficial commentary and analysis of advocacy made by the Ombudsman. It identifies significant gaps and omissions, including the failure to consider the full range of advocacy activities. It also condemns the fact the Ombudsman failed to recognise the total of funds allocated to support advocacy and associated activities. Of particular significance is her total neglect to acknowledge the Federal government's contribution.

The submission therefore asks – How can the Ombudsman recommend the allocation of more money for advocacy, while at the same time saying this "should be informed by a comprehensive assessment of need"? This paper says this is putting the cart before the horse. Before any thought is given to the government providing more money, the paper contends a detailed, independent review of the level of the current funds and how they are being spent, must be undertaken.

Background

In November 2014 a Four Corners television program on abuse at Yooralla, a large provider in Victoria of services for people with disabilities, prompted both major parties to make pre-election commitments to a Parliamentary inquiry into disability abuse and failures in the disability system.

On 5 May 2015 Victoria's Parliament referred an inquiry into abuse in the disability sector to its Family and Community Development Committee (FCDC). The Terms of Reference for the Committee require it to "work cooperatively with the Ombudsman to avoid unnecessary duplication" and to "have regard to any preliminary findings, recommendations or advice from the Ombudsman's investigation" The Committee called for submissions at the end of May 2015 and held its first public hearing on 15 June.

On 8 December 2014 the Ombudsman announced an investigation into how allegations of abuse are reported and investigated. On 24 June 2015 the Ombudsman presented to Parliament her Phase 1 report of her investigation, *The effectiveness of statutory oversight*. This report contained two recommendations, with Recommendation 2 being specific to advocacy.

This paper is presented as a response to the Ombudsman's consideration of advocacy in her report, and her recommendation. The writers were shocked at the Ombudsman not taking account of particular facts associated with advocacy and making a recommendation which must be considered ill-informed in that she has ignored critical facts.

Advocacy in Victoria

- 1.** It is absolutely essential that in any discussion regarding advocacy, the discussion recognises that the generally accepted view of advocacy goes beyond what is commonly called individual advocacy. Indeed, there is a range of activities – including information provision, capacity building, awareness raising – which, although not necessarily specifically tagged as 'advocacy', nonetheless do constitute representation and support for people with disabilities.

2. Given the significance placed on advocacy by the Ombudsman, and the call made in Recommendation 2 of her report for "an increase in the funding for advocacy" the writers are concerned that the full range of what constitutes advocacy and support activities has been ignored by the Ombudsman.
3. The Ombudsman's report states that the Department of Health and Human Services (DHHS, the department) "funds 24 advocacy organisations and two resource units to assist people with disability. In its 2013-14 Annual Report the department stated there are 1,701 advocacy clients in Victoria and the cost of this advocacy is \$4.8 million. This includes systemic and individual advocacy, with individual advocacy allocated \$1.59 million." (para 93, p 21) Further, the report states that "There is currently limited funding for advocacy, with many advocates unable to provide advocacy services when called upon. Of the \$4.8 million provided for advocacy, only \$1.59 million is allocated to supporting individuals. (para 258, p 46)
4. The \$4.8 million in the Annual Report cited by the Ombudsman actually constitutes the total output cost for the Office for Disability. Given this Office undertakes activities in addition to advocacy, it is therefore questionable as to the actual expenditure by the Office of Disability on advocacy, and the allocation to systemic advocacy. In her report, the Ombudsman has failed to comment on how the Office for Disability distributes its funds between individual advocacy, systemic advocacy and other activities. <http://www.dhs.vic.gov.au/about-the-department/our-organisation/organisational-structure/our-groups/office-for-disability>
5. This is critical in terms of the Ombudsman's recommendation for an increase in the funding for advocacy. Is this funding for individual advocacy? Is it for systemic advocacy? Is it for other advocacy-related activities, such as the Resource Units? Is it for a combination of these activities?
6. Apart from the above, the Ombudsman has also overlooked or ignored other critical facts. She has presented what might be called a 'blind eye' view of advocacy by failing to take account of those organisations which receive funds from sources other than the Victorian government and its departments for advocacy activities.
7. It is critical to recognise that of the 24 organisations referenced by the Ombudsman, 17 are funded for advocacy only by the Victorian Government advocacy program. The remaining 7 receive funds from both the Victorian and the Federal government's advocacy program. The Ombudsman has failed to distinguish those that are jointly funded from those that are exclusively funded by the State.
8. Additionally, however, there are another 10 federally funded advocacy organisations operating in Victoria that are only funded by the Federal government for advocacy. Thus, in total, there are 34 organisations funded for "advocacy" operating in Victoria, and the Ombudsman has ignored this.
9. In addition to the Ombudsman ignoring federally funded advocacy, another area ignored by the Ombudsman in her report is that of Victorian government funding to organisations that represent and support people with disabilities. As well as funding an activity called "advocacy" the Victorian government funds organisations for information and awareness activities. Any consideration about

advocacy and funding cannot ignore the disability sector organisations funded for information.

- 10.**An example of where funding is allocated for advocacy type activities is that of the Association for Children with a Disability. The Association's Annual Report 2014 notes that DHS funding of \$220,000 was received for information, DPCD Advocacy funding of \$137,175, DHS Industry Development funding of \$27,625 as well as funding from the Department of Education and Early Childhood Development and HACC. http://acd.org.au/wp-content/uploads/2013/12/ACD_annual_report_2013-2014_TH.pdf
- 11.**In addition to the funds provided by the Victorian government for advocacy activities, advocacy organisations in Victoria have also received Federal funds for specific activities. For example, the Youth Disability Advocacy Service was funded by the federal Department of Families, Housing, Community Services and Indigenous Affairs for its project on Youth Housing. http://www.ndis.gov.au/sites/default/files/documents/YDAS_PDF_Project.pdf
- 12.**Another example of the funding reality is seen in Victoria's Regional Information and Advocacy Council, which had revenue of almost \$1.45 million in 2014, and some of this included funding from both State and Federal governments. <http://www.riac.org.au/upload/2014%20annual%20report%20final.pdf>
- 13.**Based on the figure provided in the Ombudsman's report that \$1.59 million is allocated specifically for individual advocacy, and that individual advocacy is undertaken by 24 organisations, this translates into an average \$66,250 per organisation. Of itself, this must be an alert to there being other funds going into an organisation so it is able to operate.
- 14.**However, it must be kept in mind that over and above the 'advocacy' funding, there is also government funding to disability organisations for the provision of information and other activities. As well, there is peak organisation funding.
- 15.**In term of the 24 organisations funded to deliver individual advocacy, it is then critical to note that the figure of 1700 clients who received individual advocacy support, as reported by the Ombudsman, translates into an average of 71 clients per year per organisation. This is less than 1.5 clients per week who receive individual advocacy from each individual agency.
- 16.**The writers have questioned that \$4.8 million is allocated to advocacy, with \$1.59 million (around 30 per cent) allocated for individual advocacy. While actual amounts are undoubtedly important, their significance only comes to the fore on the basis of the conclusions drawn from them.
- 17.**It is reasonable to find that the Ombudsman has drawn an unquestioning conclusion associated with the 30 per cent of the funds allocated to individual advocacy by stating that "As a result many of these services do not have the resources to provide individual services to people with a disability but instead focus on systemic advocacy." (para 526)
- 18.**Questions must be asked as to why this focus on systemic advocacy? Further, is this focus written into the agreements the organisations would have with the department. For example, do such agreements designate a 70-30 split between other forms of advocacy and individual advocacy?

19. Given the above, the writers submit that the Victorian Ombudsman's portrayal of the advocacy landscape in Victoria as requiring "an increase in funding" fails to reflect the real picture of advocacy as it currently operates.

20. The table below shows those organisations funded under the Victorian advocacy program, those funded by both the State and Federal governments, and those funded by the Federal Disability Advocacy program.

| VICTORIA ADVOCACY PROGRAM | FEDERAL ADVOCACY PROGRAM |
|---|---|
| ADEC - Action on Disability in Ethnic Communities | ADEC - Action on disability in Ethnic Communities |
| | AED - Association of Employees with Disability Inc |
| | AMIDA - Action for More Independence and Dignity in Accommodation |
| Association for Children with a Disability* | |
| Barwon Disability Resource Council (Assert 4 All) | |
| Blind Citizens Australia | |
| Brain Injury Matters | |
| | Citizen Advocacy Sunbury and Districts Inc |
| | Colac Otway Region Advocacy Services |
| CAUS - Communication Rights Australia | |
| Collective of Self-Help Groups | |
| Cystic Fibrosis Victoria | |
| Disability Advocacy and Information Service | Disability Advocacy and Information Service Inc |
| DARU - Disability Advocacy Resource Centre | |
| Deaf Victoria (formerly Victorian Council of Deaf People) | |
| | Disability Justice Advocacy |
| Disability Resources Centre | |
| Disability Resources Centre - Outer South East | |
| Eastern Access Community Health - New Horizons | |
| Gippsland Disability Advocacy | Gippsland Disability Advocacy |

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| | |
|---|---|
| Grampians Disability Advocacy – Ararat, Ballarat and Horsham | Grampians Disability Advocacy Association |
| Leadership Plus Inc (formerly Action for Community Living) | Leadership Plus Inc (formerly Action for Community Living) |
| | Melbourne East Disability Advocacy |
| Migrant Resource Centre, North West Region – Disability Advocacy and Diversity and Disability Self-Advocacy | |
| | North East Citizen Advocacy |
| Regional Information and Advocacy Council (now called Rights Information and Advocacy Centre) | Regional Information and Advocacy Council (now called Rights Information and Advocacy Centre) |
| Reinforce | |
| SARU – Self Advocacy Resource Centre | |
| | Southern Disability Advocacy |
| South West Advocacy Association | Southwest Advocacy Association |
| STAR Victoria | |
| VALID – Victorian Advocacy League for Individuals with Disability* | |
| | Victorian Mental Illness Awareness Council |
| | Villamanta Disability Rights Legal Service |
| Women with Disabilities Victoria | |
| Youth Affairs Council of Victoria – Youth Disability Advocacy Service (YDAS) | |
| 26 organisations | 17 organisations |

* Also in receipt of recent Federal DSS-NDIS funds as a Disability Support Organisation

21. The Ombudsman also reports on the advocacy work of the Office of the Public Advocate, and Community Visitors. However, no total funding or client data is provided.

22. In terms of systemic advocacy, the writers submit that the community building program funded by DHS can also be considered as systemic advocacy. This is because it supports communities to develop new ways of including people with a disability in local community life. There are 31 MetroAccess workers based in each of the 31 local councils across Melbourne; 25 RuralAccess workers located in 25 local governments and community health services across rural and regional Victoria and 5 DeafAccess workers based in five community service organisation across rural Victoria. <http://www.dhs.vic.gov.au/for-individuals/disability/community-life-and-jobs/community-involvement/community-involvement-ruralaccess,-metroaccess,-deafaccess>

- 23.** The funding for these 61 workers would not be insignificant. Further, the workers are supported by DHS regional staff with specific responsibilities for community building.
- 24.** In terms of the Ombudsman's recommendation that a comprehensive assessment of the advocacy needs of people with a disability be undertaken, the scope of "comprehensive" must be detailed. For example, in the case of acquired brain injury, while advocacy funding is allocated to Brain Injury Matters there is a network, United Brains, of self-help, self-advocacy and support groups for people with an Acquired Brain Injury (ABI) throughout Victoria. The writers contend that a blinkered view of 'comprehensive' will not rectify shortcomings.

The Federal Government

- 25.** In terms of the Federal government and its support for advocacy, it is important to note that its National Disability Advocacy Program (NDAP) "provides people with disability access to effective disability advocacy that promotes, protects and ensures their full and equal enjoyment of all human rights enabling community participation". <https://www.dss.gov.au/our-responsibilities/disability-and-carers/program-services/for-people-with-disability/national-disability-advocacy-program-ndap>
- 26.** As well its National Disability Advocacy Program, the Federal government has a Peak Bodies program. This program includes National Disability Services (NDS) the peak body for disability service provider organisations. Peak Bodies are described as "national disability peak organisations that contribute to government policies about disability issues affecting Australian families and communities, to carry information between government and the community on social policy issues and to represent constituent views." <https://www.dss.gov.au/our-responsibilities/disability-and-carers/program-services/consultation-and-advocacy/national-disability-peak-bodies>
- 27.** The writers submit that the activities of these peak bodies very much contribute to advocacy and support, and in particular system advocacy. For example, the Peak body, the Australian Federation of Disability Organisations (AFDO) has a membership mainly of funded advocacy organisations.
- 28.** While there has been some recent controversy over the Federal funding for peak bodies, nonetheless the role and funding of peak bodies must be part of any review of advocacy.
- 29.** The writers submit that the Federal government contribution cannot be ignored, as it has been by the Ombudsman, when considering advocacy in Victoria. An account must be taken of the diverse nature of organisations whose activities can be construed as 'advocacy' although they may not be funded as such.
- 30.** The writers note that there are currently open consultations (19 June to 25 July) on the Framework for the National Disability Advocacy Program <https://engage.dss.gov.au/ndaf/>
- 31.** The NDAP is also being reviewed in consultation with advocacy agencies. https://engage.dss.gov.au/wp-content/uploads/2015/06/NDAF_Discussion_Paper.pdf

- 32.**The writers have been advised that the review of the NDAP is in its early stages, and details of how this review will be undertaken are yet to be finalised.
- 33.**There is also the Information, Linkages and Capacity Building program within the NDIS, which replaces what was called "Tier 2" by the Productivity Commission. The service streams within this program must be taken into account when advocacy is being considered.
- 34.**The Framework discussion paper gives a timeline – "The Department of Social Services, together with State and Territory governments will use feedback from the consultation to develop a new Framework. The new Framework will be presented to disability ministers at the Disability Reform Council meeting in December 2015 for endorsement."
- 35.**Consequently, it seems reasonable to conclude that the Victorian government position will be informed by the Ombudsman's report and the Parliamentary Committee's deliberations. Therefore it is absolutely essential that the Committee's deliberations 'get it right' in regards to advocacy. There is no room for Victoria to take a poorly informed position to the COAG deliberations.

The NDIS, the Ombudsman's Investigation and the Parliamentary Inquiry

- 36.**The question to be asked is what ought to be the driver in terms of advocacy and its relationship to the NDIS. The writers contend that the NDIS (COAG) processes ought to be the driver.
- 37.**The Ombudsman in her investigation and the government through its Parliamentary Inquiry have imposed the requirement to consider the NDIS. Given that the driver for both the investigation and the Parliamentary inquiry were concerns about abuse, neglect and violence occurring in Victoria's disability sector, neither had need to consider the NDIS.
- 38.**Indeed, given the reasonable assumption that Victoria will continue to fund and manage disability services, albeit on a graduated reducing scale as the NDIS rolls out, until at least 2019-2020, it needs to be said that their focus ought to be squarely on what happens in Victoria until the full roll out of the NDIS.
- 39.**After all, if neither the investigation nor the inquiry had been established, the question must be asked - what process would the Ombudsman and the government have used to inform the future directions of the NDIS?
- 40.**An escalating concern in relation to the current provision of services and safeguards within the State jurisdiction is this ever-increasing propensity to focus everything on the NDIS as though the current situations do not matter.
- 41.**Given the fact that the Ombudsman established her own terms of reference, it seems reasonable to ask why she would include the NDIS within those terms. Certainly, given her Phase 1 report and the recommendations pertaining to advocacy, where she recommends that the administration of all advocacy be transferred to OPA and more funding, this could suggest that the Ombudsman is clearly backing OPA and seeking to establish it as a 'no go' zone for change when the NDIS is fully rolled out.
- 42.**The writers note there was no debate or discussion on the Inquiry Terms of Reference when they passed through Parliament.

43.The writers therefore contend in the strongest terms possible that by including reference to the NDIS in the investigation and the inquiry, the Ombudsman and the Parliament have muddied the waters in terms of the process and opportunities to contribute to the further development of safeguards, including advocacy, which may be developed as part of the NDIS.

The NDIA Contribution

44.Notwithstanding that the NDIS has only been in operation for two years and will continue to roll out for the next four or so years, it is also important to acknowledge that the National Disability Insurance Agency (NDIA) has provided funds to a support program.

45.The NDIA funds what it calls Disability Support Organisations (DSOs). This funding enables DSOs to "work with people with disability and their families and carers to make the most opportunities presented by the NDIS and engage effectively with the scheme." <http://www.ndis.gov.au/document/1236>

46.The Victorian organisations being funded are Amaze (Autism Victoria), Association for Children with a Disability, Carers Victoria, Down Syndrome Association of Victoria, VALID Inc, Victorian Mental Illness Awareness Council.

47.The writers have advice from the NDIA that funding of \$8 million was allocated to Disability Support Organisations for 'committed and complete' projects with a further \$15.85 million 'under development' at the time of its 5th Quarterly Report to the COAG Council on Disability Reform, September 2014. It appears that much of this funding was part of the Sector Development Fund.

48.The NDIA has also allocated funding to the Australian Federation of Disability Organisations of some \$1.96 million and National Disability Services has also been the recipient of around \$6.6 million of NDIA funds.

49.The NDIA has also funded support for people going to an External Merits Review and in Victoria an advocacy organisation has been funded to provide support to people seeking a Review.

50.In September 2014 the NDIA was administering the sector development fund (SDF) on behalf of the government. In December 2014 the government transferred administrative responsibility for the SDF to the Department of Social Services. However, information on the NDIA website still indicates that the DSOs are within the auspices of the NDIA.

51.The writers contend that funding to disability support organisations and other contributions aligned to NDIS activities cannot be ignored when advocacy is being considered.

Defining Advocacy

50 The current federal Framework defines advocacy services provided under the Framework as being:

"(a) Disability advocacy enables people with disability to participate in the decision making processes that safeguard and advance their human rights.

(b) Individual advocacy supports people with disability to exercise their rights, through either one-to-one support, or by supporting people to advocate for themselves individually, through a third party or on a group basis.

(c) Systemic advocacy seeks to introduce and influence longer term changes to ensure the rights of people with disability are attained and upheld to positively affect the quality of their lives."

https://www.dss.gov.au/sites/default/files/documents/11_2014/attachment_a.2_-_national_disability_advocacy_framework.pdf

51.For the purposes of considering what is provided and funded as 'advocacy' in Victoria, consideration must be given to its definition. It is suggested that the work which has been undertaken and continues to be undertaken at the Federal level provides a starting point, particularly when one takes into account that people require information to enable advocacy.

A single entity oversighting advocacy

52.The Ombudsman concludes that "Inadequate funding and inconsistent provision of advocacy services in the Victorian disability sector require a single body to establish and operate the services and functions of advocates." (Para 53, p 86)

53.The Ombudsman recommends that government "transfer sufficient funding provision from DHHS, and responsibility for administering advocacy services, to the Office of the Public Advocate" (p 91)

54.The writers contend that inherent in the Ombudsman's recommendation is identification of a failure of DHHS to effectively run the advocacy program in the disability sector. However, of greater significance is that the recommendation is seeking to move funding and responsibility from one single bucket to another single bucket, that is, the Office of the Public Advocate.

55.In her conclusions, when giving consideration to individual advocacy, the Ombudsman states that "No entity has the responsibility at present to assess the need for advocacy in an individual case, allocate an advocate and monitor as necessary the advocate's performance of their functions" (para 543, p 88) and goes on to say "To avoid any potential conflicts, this role should not sit within a department which provides services." (para 544, p 88)

56.Given Recommendation 2 where the Ombudsman is recommending OPA as becoming the keeper of advocacy, one could draw the conclusion that the Ombudsman's recommendation is more about advocating and promoting the Office of the Public Advocate as being the panacea of all things to do with advocacy.

57.The Ombudsman appears to ignore the fact the OPA's provision of guardianship services has the potential for conflict with individual advocates. As things are now, with advocacy being outside the responsibilities of OPA, the performance of a guardian can be challenged through VCAT. The writers contend that if the guardians and the advocates are within the same 'department' it is highly unlikely that such a challenge would be made.

58.Currently, under the Disability Act 2006 any complaint concerning an advocacy organisation can be made to the Disability Services Commissioner, and indeed the writers have been involved in just such a case. If, however, OPA becomes the keeper of advocacy, then this right would be lost if OPA were to become the

single independent oversight body as per Appendix 4 in Recommendation 1, with reference to the functions on page 87, which includes the power to investigate individual complaints .

- 59.**In terms of these three functions of assessing, allocating and monitoring, at present the department as the funder of advocacy has the function of monitoring an advocacy organisation's performance.
- 60.**In terms of assessing the need in an individual case, whilst it is true there is no individual entity which does this, nonetheless individual advocacy organisations as well as the Public Advocate have a part to play. Again, while this does not represent a single entity, the Ombudsman, while suggesting a single advocacy entity, in fact is proposing a limitation on choice.
- 61.**The writers question the Ombudsman's statement, "There must also be a question about whether there is an inherent conflict in the department funding advocacy for people who are reliant on the services of the department itself." (para 528, p 86) This statement ignores the fact that Community Visitors and the Disability Services Commissioner also receive funding from DHHS. The writers suggest this reflects a double standard by the Ombudsman.
- 62.**In terms of the NDIS, much has been made by disability organisations that advocacy must be funded outside of the scheme. This seems to suggest that the funding source has an inhibiting effect on an organisation's capacity to be 'frank and fearless'. The writers contend, however, that the critical point is that it is the government who allocates public money, and not a department.
- 63.**Advocacy organisations are not subject to the operational direction of the department, albeit they have funding and service agreements. In essence, the department operates as a conduit through which funds are distributed. The department does not control, manage or direct the organisations to whom the funds are distributed. Given that it is government funding, then just so long as it is tagged for advocacy or indeed any other specified function, the conflict of interest argument becomes null and void.
- 64.**In terms of the Ombudsman's conclusion and recommendation pointing to the function of advocacy being removed from DHHS and given to OPA, this has considerable implications, in that practical realities come into play, for example:
- What would be the extent of the functions, the scope of the role, which OPA will have for 'advocacy'
 - Legislative change is possibly required
 - The willingness of existing advocacy entities to give up their independence, recognising they are entities with their own structures, governance regimes, legal requirements
 - The willingness of existing advocacy entities to give up funds currently allocated
 - Willingness of government to withdraw funding currently allocated to these entities to put in a single advocacy bucket for OPA
 - Willingness of government to top up the funding pool
 - The effect on entities who have Federal funding and those who are jointly funded

Conclusion

- 65.** The analysis of the Ombudsman's report vis-à-vis advocacy highlights significant deficits in the rationale underpinning Recommendation 2 of her report. In relation to her recommendation, while on the one hand the Ombudsman has made a call for more money to be allocated to advocacy, on the other hand she recognises the necessity of establishing need. Essentially, her recommendation is putting the cart before the horse.
- 66.** Further, the writers' analysis of the report is that the Ombudsman has failed to acknowledge the full range of advocacy and associated support-type services and the composite of State and Federal funding. Instead, in only recognising individual advocacy, she ignores the role of funded advocacy organisations for systemic advocacy, and 'support' organisations and peak bodies who currently have a part to play in pursuing systemic advocacy, education and training, and information provision.
- 67.** The Ombudsman's obvious focus on promoting the Office of the Public Advocate, along with her call for more money for advocacy, tends to suggest that these two factors combined provide the panacea for advocacy in the future.
- 68.** Indeed, the writers find it concerning that the Ombudsman has placed the Public Advocate and her office on a pedestal, and as such has failed to critically analyse the obvious deficits that would occur if the Office of the Public Advocate were to become the single administering body for advocacy in the State. The unitary control of advocacy is not necessarily the first order issue as presented by the Ombudsman.
- 69.** Account must be taken of deficits such as the conflict of interest between guardianship and advocacy, the conflict between the role of advocates and Community Visitors, the diminution of choice, as well as the degree to which the Public Advocate, as representing 'public advocacy' has necessarily totally fulfilled her obligations in this regard.
- 70.** The writers therefore contend that the critical first tasks required in relation to addressing the future for advocacy in Victoria must be an uncompromising, urgent and time-limited review for the purpose of:
- (i) Confirming the definition of advocacy, in all its forms.
 - (ii) Identifying all those funds currently allocated to all activities and programs which fit under the umbrella as determined by (i) above.
 - (iii) Determining the coverage and effectiveness of each of the components of advocacy
 - (iv) Determining the need for each of the components of advocacy, and further, whether any particular component could be more appropriately undertaken by entities who have not traditionally undertaken these particular activities.
 - (v) Determining if there is a need to rationalise the existing funds.
- 71.** It would only be on the basis of the above comprehensive examination that the Victorian government would be in a position to then consider whether or not additional funds are required for advocacy, and to consider whether a single body is required to establish and operate the services and functions of advocates. Or alternatively, whether it simply requires a redistribution of the current funds.

72. Further, this comprehensive examination would provide a factual basis for the Victorian government's decision-making for input at the COAG level regarding advocacy.

End of Submission

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