

SUMMER FOUNDATION STRATEGIC PLAN 2018 - 2021

July 2018

The Summer Foundation exists to resolve the issue of young people living in Residential Aged Care (RAC). Young people with disability have the right to live where, how and with whomever they choose. They deserve to be appropriately and adequately supported to achieve these choices.

This is a problem that could be solved within the next decade.

Our strategy is to influence the evolution of the National Disability Insurance Scheme (NDIS). We simultaneously influence the systems and markets that surround, support and impact young people with disability living in RAC or those at risk of entering RAC.

THE ISSUE

Today in Australia more than 6,200 young people (aged under 65) with disability are forced to live in RAC. Some of these people move into RAC aged in their 20s or 30s. They find themselves living among people aged in their 80s.

The majority of young people living in RAC acquire a disability in their adult life. Almost half are in a partner relationship and more than one in four are parents of school-aged children. Living in RAC has devastating consequences for a young person. Social inclusion is compromised and it is common for young people living in RAC to rapidly lose ability and independence.

OUR VISION

People with disability and complex support needs live where and with whom they choose, with access to high quality housing and support options that enhance health, wellbeing and participation.

OUR MISSION

To create, lead and demonstrate long-term sustainable systems change that stops young people from being forced to live in Residential Aged Care because there is nowhere else for them.

HOW WE WORK

Systems change requires collaboration and engagement from all stakeholder groups in the systems we seek to influence. We continually assess our relationship with stakeholders to determine whether leading, partnering with or informing will achieve the greatest systems impact.

Central to our stakeholder engagement are young people with disability and their families. Our stakeholders also include the disability, housing, health and aged care systems across the government, private and community sectors.

We use 5 tools to influence systems change:

Research	Data collection and analysis to provide a rigorous evidence base for problems and solutions
Storytelling	Support people with lived experience to share their journeys and perspectives
Policy Influence	Shape thinking and change decisions of governments
Capacity Building	Share information and best practice with stakeholders
Prototypes	Test new solutions

OUR STRATEGIC PRIORITIES

Four key strategic priorities direct the focus and scope of our work. These priorities are where we can achieve the greatest impact. We have determined the systems outcome we intend to influence over the three years of this strategic plan in each of these priority areas.

Housing	Significantly increase the volume and range of high quality, accessible and affordable housing
Pathways Home	Health, disability and other systems communicating and collaborating to support discharge to community living
NDIS	Those in RAC or at risk of RAC entry have NDIS plans which support and reflect their goals
Primary & Community Health	Define the challenges and explore solutions to barriers that limit access to primary and community health services

OUR GOALS

HOUSING

By June 2021 we expect the volume and range of accessible and affordable housing to have significantly increased.

The system problem

The lack of timely access to the housing and support people need to live in the community is one of the key reasons young people live in RAC.

Improving the range and scale of community based housing and support is needed to reduce the flow of young people into RAC, leading to better outcomes for young people with disability and lower costs for governments.

It is critical the NDIS funding to increase these options is well targeted to create the diversity of housing options that young people with disability require.

Indicators of system change

- Housing is accessible and its location helps to build community connections
- Housing choices are diverse and support change to circumstances and preferences over time, including options that support family circumstances
- Investors have confidence in the structure and delivery of the NDIA's housing payment scheme
- The design and delivery of housing and support models is innovative and highly collaborative

WHERE WE WANT TO BE IN 2021

Target	Measureable
The SDA market is developing and creating high quality housing for young people at risk of aged care	1,000 NDIS Specialist Disability Accommodation properties for 1-3 residents have been built or committed
Challenge thinking and redesign transitional and temporary housing that meets urgent housing needs	One rapid housing prototype delivered and evaluated for 10 people
Housing needs and potential solutions for people without SDA are understood	Options Paper outlining three potential solutions to meet the needs of participants not eligible for SDA developed
People are able to navigate the market and connect with available housing	500 people matched with housing by Summer Foundation
New housing and support models emerge	Summer Foundation evaluates the impact of 10 projects

NDIS

By June 2021 young people in RAC and those in the community at risk of entry to RAC should have the capacity and support to achieve their goals through access to the NDIS.

The system problem

The NDIS is not yet meeting the needs of young people in RAC or sufficiently stopping the flow of young people into RAC.

Young people in RAC are facing significant barriers to accessing the NDIS. Some young people in RAC are isolated from informal support networks and many have never had interactions with the disability system before entering RAC. This means they often do not know how to go about applying for support from the NDIS.

Young people in RAC also have problems developing and implementing their NDIS plans. The problems experienced in planning include a lack of Specialist Disability Accommodation funding, insufficient funding for equipment and support, and a lack of expertise among planners and support coordinators working with people who have high and complex support needs.

There is also a widening gap between what the health system provides and what the NDIS is delivering. This means that not all the person's support needs are being met through their NDIS plan, however key additional needs (e.g. nursing and clinical supports) are also no longer being provided by the health system.

Indicators of system change

- NDIS systems and processes ensure young people in RAC have a rapid and streamlined entry into the scheme
- Participants' right to choice and control is upheld by the scheme
- A good life in the community is deemed reasonable and necessary
- Service providers have the expertise necessary to support people with high or complex support needs

WHERE WE WANT TO BE IN 2021

Target	Measureable
The NDIS has reached the majority of young people in RAC	80% of people aged under 65 in RAC are connected to the NDIS
Young people with no option other than entering RAC have an NDIS plan in place prior to entry	90% of young people facing admission to RAC have NDIS eligibility established, and these plans are of a high quality

PATHWAYS HOME

By June 2021 clear communication and effective collaboration between health, disability and other systems will support young people to return to the community post hospital discharge.

The system problem

Young people with disabilities are too often forced to remain in hospital or rehabilitation settings because there is no clear pathway home.

Successful discharge planning for a smooth and timely transition back into the community for people with complex support needs now requires skills and understanding of the NDIS pathway. When there is no immediate pathway home, many young people are forced into RAC leading to poor health outcomes and isolation from family and friends. Difficulty finding appropriate housing is often the most significant barrier to returning to life in the community and keeping young people out of RAC.

The NDIS and health systems do not currently work together in a streamlined way to ensure people with disability have the right support at the right time. Those responsible for discharge planning can sometimes also lack the necessary expertise or resourcing to support people back into the community in a timely way.

Indicators of system change

- Young people entering the health system at risk of RAC entry identified promptly
- Those eligible in the health system are registered with the NDIS, flagged and have their NDIS planning fast tracked
- Discharge planning for young people with complex needs commences early after their admission and is undertaken by a skilled practitioner
- For existing NDIS participants, potential need for a plan review based on change of circumstances is flagged with NDIA resulting in a coordinated, timely response

WHERE WE WANT TO BE IN 2021

Target	Measureable
An increasing number of young people in RAC leave within their first 12 months	Threefold increase in YPIRAC returning to their homes/families
Reduction in number of young people discharged from hospital into RAC	The number of young people being discharged from hospital to RAC reduces by 20% across Australia & by 60% in two large hospitals

PRIMARY AND COMMUNITY HEALTH

By June 2021 the challenges and barriers to proactive primary and community health services should be defined and potential solutions explored.

The system problem

Primary and community health services do not meet the needs of people with high and complex disabilities, forcing many to stay in hospital longer than is necessary, or return frequently to hospital increasing their likelihood of being forced into RAC.

Indicators of system change

- Primary health services have increased knowledge and capacity to meet complex health care needs in the community
- Slow stream rehabilitation services are available in the community
- Preventative healthcare is available and responsive to people with disabilities with high and complex needs

WHERE WE WANT TO BE IN 2021

Target	Measureable
A model for clinical care in the community has been established with an evidence base and a plan to scale nationally	Prototype model for clinical care in the community tested with a business case to scale

SUMMER FOUNDATION SUSTAINABILITY

The systems we seek to influence are shifting. Taking a focused and flexible approach to our work and workplace is critical to maximising our impact. We strive to be an exemplar not-for-profit, engaging experts in a supportive and inclusive environment to produce measurable, evidence based systems impact.

WHERE WE WANT TO BE IN 2021

Target	Measureable
Summer Foundation's infrastructure and culture support impact, change and diversity	80% of staff report high levels of satisfaction with their work environment 15% of staff and board members are people with disability
All activities of the organisation have meaningful and measurable impact	100% of activities involve meaningful evaluation, large initiatives subject to external return on investment evaluation