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## F Community services preface

Families principally provide care for children, the aged and people with a disability. Community services can help families to undertake this role and even fulfil this role where families are not in a position to provide care.

Community service activities typically include ‘activities which assist or support members of the community in personal functioning as individuals or as members of the wider community’ (AIHW 1997). These activities include short term housing assistance such as crisis and transitional accommodation, financial assistance and relief to people in crisis, but exclude acute health care services, long term housing assistance and income support services (such as social security pensions).

Community services in this Report encompass aged care services, services for people with a disability, children’s services, and protection and support services (child protection, supported placements and supported accommodation and assistance). However, this preface discusses a broader range of community service activities (see box F.1 for definitions of the activities).

Performance information on community services as a whole is not currently reported; despite many interactions between various community services, currently they are too heterogeneous to enable aggregate community services reporting.

### **Profile of community services**

A variety of organisations — more than 8000 with employees in 1995-96 (ABS 1998) covering the not-for-profit, government and for-profit sectors — provide community services.

The numbers and types of service vary across community services activities. In personal and social support, nearly six million contacts for information advice and referral to government and non-government organisations were made in 1995-96 (table F.1). In child care, there were around 103 000 children each day in centre based long day care in that year. In residential care and accommodation support, there was an average of 73 000 residents per day in intensive residential care (such as nursing homes and residential support institutions for people with a disability) and 491 000 people were provided with crisis accommodation.

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### Box F.1 **Community services activities**

*Personal and social support* — services that provide support for personal and social functioning in daily life

*Child care* — the provision of care and development activities, by persons other than the child's parents, in a group setting or carer's home

*Training and employment* — services that assist people who are disadvantaged in the labour market by providing training, job search skills, help in finding work, placement and support in open employment and, where appropriate, supported employment

*Financial and material assistance* — services that enhance personal functioning and facilitate access to community services through the provision of emergency (or immediate) financial assistance and material goods

*Residential care and accommodation support* — services that help people who are disadvantaged (in terms of their capacity for independent living) to access suitable community housing arrangements and other appropriate community resources

*Statutory protection and placement* — services that protect clients from physical, sexual or emotional harm or physical neglect, through appropriate statutory intervention or other means (Foster care and other residential care are included under residential care and accommodation support.)

*Selected corrective services* — services that provide correctional and rehabilitative supervision and protect public safety through the provision of corrective arrangements and advice to courts and parole boards for juvenile offenders or offenders with intellectual or psychiatric disabilities (excludes corrective activities for adults other than those with an intellectual or psychiatric disability)

*Other community service activities* — other direct community service activities, such as preschool activities

*Community service related activities* — policy, community and service development and support, and payments to overseas individuals and organisations for community service needs, fundraising, business activities and self care

Source: ABS (1998).

**Table F.1 Output measures for direct community services activities, 1995-96<sup>a</sup>**

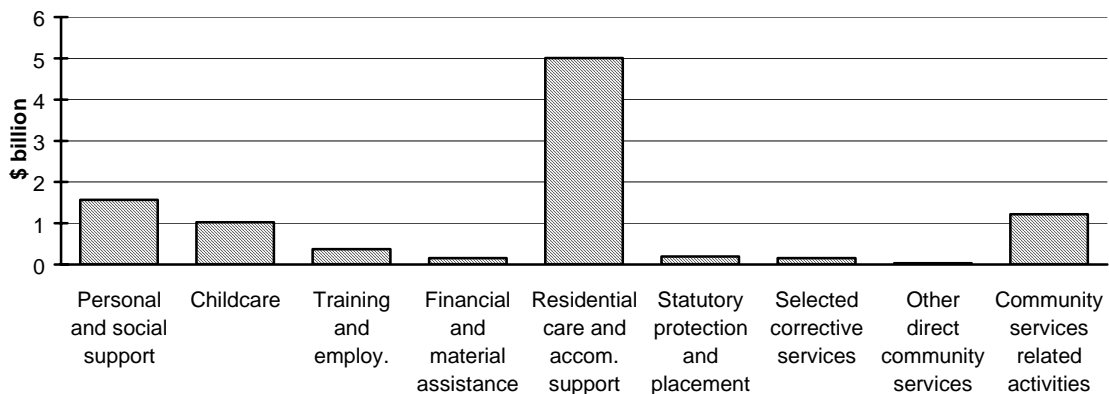
<i>Direct community service activity<sup>b</sup></i>	<i>Number</i>
<i>Personal and social support</i>	
Information advice and referral	5 935 000 contacts/year
Individual and family support	2 426 000 cases/year
Independent and community living support	1 468 000 cases/year
Domiciliary support	1 660 000 cases/year
<i>Child care</i>	
Centre based long day care	103 000 children/day (average)
Family day care	57 000 children/day (average)
Occasional child care	12 000 children/day (average)
Before and after school hours care	40 000 children/day (average)
Vacation care	29 000 children/day (average)
Other child care	6 000 <sup>c</sup> children/day (average)
<i>Training and employment</i>	
Pre-vocational/vocational training	55 000 trainees/year
Employment, job placement and support	86 000 clients/year
Supported employment	12 000 sheltered workshop employees/day (average)
<i>Financial and material assistance</i>	2 072 000 cases/year
<i>Residential care and accommodation support</i>	
Accommodation placement and support	47 000 placements/year
Foster care placement	53 000 placements/year
Transitional accommodation	456 000 <sup>d</sup> accommodated/year
Crisis accommodation	491 000 accommodated/year
Intensive residential care	73 000 residents/day (average)
Hostel care	64 000 residents/day (average)
Residential respite care	10 000 <sup>d</sup> occupants/day (average)
Residential rehabilitation	7 000 residents/day (average)
Other residential care	11 000 residents/day (average)
<i>Statutory protection and placement</i>	80 000 cases/year
<i>Selected corrective services</i>	61 000 cases/year

<sup>a</sup> These estimates need to be read with caution. Not all organisations had detailed records of output measures as sought in the survey. Further, they are necessarily broad in nature, which can make interpretation of the estimates difficult. <sup>b</sup> See definitions in box F.1. <sup>c</sup> Subject to high sampling variability; this estimate may be subject to errors of up to 50 per cent. <sup>d</sup> Subject to high sampling variability; this estimate may be subject to errors of up to 25 per cent.

Source: ABS (1998).

Total expenditure by all business and organisations on community services activities was \$9.7 billion in 1995-96 (figure F.1). The major areas of activity were residential care and accommodation support (\$5.0 billion), personal and social support (\$1.6 billion) and child care (\$1.0 billion).

**Figure F.1 Community and related services expenditure, 1995-96<sup>a</sup>**



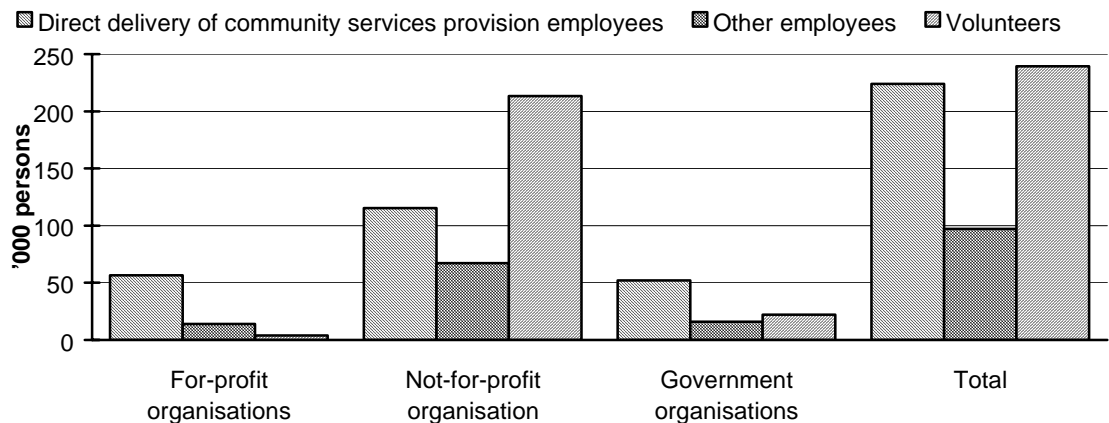
<sup>a</sup> See definitions in box F.1.

Data source: ABS (1998).

Around 321 000 people were employed in community service activities in June 1996, of whom 70 per cent were employed in direct service provision (figure F.2). A further 239 000 volunteers assisted in these activities. By type of organisation:

- not-for-profit organisations dominated community services employment, accounting for over half of all employees (57 per cent) and 89 per cent of volunteers;
- government organisations accounted for 21 per cent of all employees and 9 per cent of volunteers; and
- for-profit organisations relied on employees primarily, and accounted for 22 per cent of all employees and only 2 per cent of volunteers.

**Figure F.2 Employees and volunteers, by type of organisation, June 1996**



Data source: ABS (1998).

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## Government involvement in community services

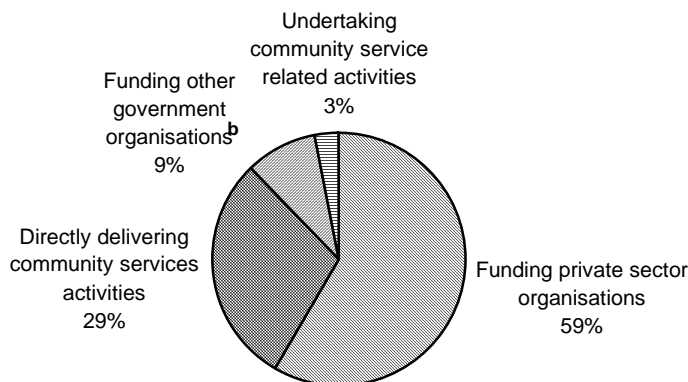
Governments are involved in the provision of community services in a number of ways:

- funding private sector community service organisations (who then provide community services to clients);
- delivering community services to clients (that is, direct community services activities);
- regulating non-government providers; and
- undertaking community services related activities such as policy development.

Over half of government expenditure on community services is paid to private sector organisations. Governments paid \$4.9 billion (59 per cent of government expenditure) to private sector organisations for community service activities in 1995-96 (figure F.3). They spent \$2.5 billion on direct delivery of community services activities (29 per cent of government expenditure).

Figure F.3 **Government expenditure on community services, 1995-96<sup>a</sup>**

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<sup>a</sup> Government includes Commonwealth, State and Territory Governments and local governments. <sup>b</sup> Net of inter-agency transfers.

Data source: ABS (1998).

### Government direct delivery of community service activities

The major direct community service activities of government organisations in 1995-96, in terms of expenditure, were residential care and accommodation support (\$1.0 billion) and personal and social support (\$0.8 billion) (table F.2).

The relative contribution of government for direct provision of services varied between community service activities. Government primarily provided statutory protection and placement and corrective services (94 per cent and 96 per cent respectively). Conversely, non-government organisations primarily provided other direct community services activities and residential care and support (for which government provision only accounted for 15 per cent and 20 per cent respectively).

**Table F.2 Expenditure on direct delivery of community services activity, by type of organisation, 1995-96<sup>a</sup>**

<i>Activity<sup>b</sup></i>	<i>For-profit organisations</i>	<i>Not-for-profit organisations</i>	<i>Government organisations</i>	<i>Total</i>
<i>Level of expenditure (\$ million)</i>				
Personal and social support	25.7	695.0	846.5	1 567.2
Child care	371.3	414.1	240.3	1 025.7
Training and employment	0.2 <sup>c</sup>	375.1	0.2	375.5
Financial and material assistance	–	108.7	44.4	153.2
Residential care and accommodation support	1 402	2 586.3	1 015.5	5 004.6
Statutory protection and placement	–	12.7	185.2	197.9
Selected corrective services	–	6.7	151.0	157.7
Other direct community services activities	13.4	15.0	5.1	33.5
Community services related activities	51.8	910.7	258.3	1 220.8
Total	1 865	5 124.3	2 746.5	9 736.1
<i>Proportion of total expenditure (per cent)</i>				
Personal and social support	1.6	44.3	54.0	100.0
Child care	36.2	40.4	23.4	100.0
Training and employment	0.1	99.9	0.1	100.0
Financial and material assistance	–	71.0	29.0	100.0
Residential care and accommodation support	28.0	51.7	20.3	100.0
Statutory protection and placement	–	6.4	93.6	100.0
Selected corrective services	–	4.2	95.8	100.0
Other direct community services activities	40.0	44.8	15.2	100.0
Community services related activities	4.2	74.6	21.2	100.0
Total	19.2	52.6	28.2	100.0

<sup>a</sup> Totals may not add as a result of rounding. <sup>b</sup> See definitions in box F.1. <sup>c</sup> Subject to high sampling variability; this estimate may be subject to errors of up to 25 per cent. – Nil or rounded to zero.

Source: ABS (1998).

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## Interactions

Many community services clients have complex needs and require a number of services. These services are typically provided through a range of different programs by a number of government departments, both within each jurisdiction and across tiers of government. This means that clients usually have contact with, and receive services from, a number of organisations.

An important issue for government is to determine how to assist these clients with complex needs, and also how to assess its success in this objective. Governments have introduced case management and policy coordination at a higher level, which may improve the delivery of services. Local Area Coordination in WA, for example, offers service coordination and direct funding to people with disabilities to develop sufficient support to remain with their family and community (see chapter 11 and SCRCSSP 1998). The current individual service focused measurement frameworks in the Report can assess performance for individual services, but there are challenges in assessing the links among these services. The NT has introduced a new on-line client system which aims to improve coordination (box F.2).

There are also links between community services and other government services: the performance of community services may influence outcomes for clients of education, health, housing and justice sector services, and these other service areas affect outcomes for clients of community services.

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## Box F.2      **Community Care Information System in the NT**

Community Care Information System (CCIS) is an on-line client information system designed to record and coordinate community based service delivery to Territory Health Services clients. CCIS can also record services provided by other agencies and professions to these clients. The system aims to: improve overall management of service areas; improve communication of information across service areas; and provide access to information that enables health and community service professionals to obtain client data across a continuum of care.

Four Territory Health Services program areas will use CCIS:

- Family, Youth and Children's Services — child protection, substitute care, protective assessment, family support services;
- Mental Health — general, forensic;
- Community Health — general community health, child and maternal health, disease control, palliative care, school health, women's health; and
- Aged and Disability — aged care assessment teams, adult guardianship, home and community care, challenging behaviours, Seating Equipment and Assessment Team, Territory Independence and Mobility Equipment Scheme.

Family, Youth and Children's Services implemented CCIS in October 1998; implementation in other service areas will occur in 1999.

*Source:* Territory Health Services (1998).



