NASC PRESSURES, RESOURCES & INITIATIVES SURVEY AUGUST 2014

ANALYSIS OF RESULTS

Response Rate: Feedback was received from 10 of 12 NASCs. 83% response rate. Not all NASCs answered all Questions.

Pressure Factors Average Rating 1 low 5 high 1 Family Funded Carers 3.1		 Overview of Comments Increased workload Working 2 diverging processes (New Model and FFC) isn't easy Multiple versions of policy with frequent amendments and clarifications The pressure for staff was learning the process in a hurry. Understanding what families could and couldn't have. Dealing with angry families when they didn't qualify Need to simplify the process and treat as another option on the same basis as all other supports Additional resource has been well utilised and appreciated 		

Pressure Factors Average Rating 1 low 5 high ICare 3.9		 Overview of Comments The tool remains cumbersome, some of this NASC's feedback has been incorporated into a revised summary sheet. Most feedback seems to have been misunderstood. Having to complete ICare for all RSS going forward will have an impact on workloads Requires additional resource at every re-assessment. Still familiarising ourselves with this tool. Impact will have to be remunerated for. We have a number of residential clients we are using the I-Care model for, and are pleased to see that the I-Care tool is going to be used across the country and across providers which will go a long way to consistent practice. 		
Other Factors	Different factors mentioned by different NASCs All rated the issue mentioned as high 5.0	 E Filing (3) – additional to changes to workflow and practice for this NASC. Ad Hoc requests from MoH in responding to provider quality issues. Ongoing stress fall-out from earthquake, staff are also impacted personally Changes to BSS provider New managers New methodologies Socrates / Socrates Filing / SL / IF / FFC 		
Positive Impacts		 Additional choices available to clients so staff have options to explore More options for support Training well received Sharing positive stories 		

Negative Impacts	Workload / change / stress (mentioned by 3 NASCs)			
	Staff struggle to keep up with information			
Court Action and Payment of Legal Fees Court actions and incur legal fees.	where clients or families have	e challenges NASC decisions, and NASCs have felt obliged to defend		
Is this an issue for your	Has not been an issue for most NASCs			
NASC?	 No examples of such cases were given, except cases of preparing affidavits and n 			
	with families challenging decisions			
Do you consider this	All think that this should be a MoH expense if it comes up			
should be a NASC				
responsibility?				
Resources committed to Needs Assessm	ent and Service Coordination			
Time to complete Needs Assessment	Average estimated time	Range		
•	2.1 hours	2.0 to 2.3 hours		
Time to complete Service Co-ordination	Average estimated time	Range		
	1.6 hours	1.15 to 2.15 hours		

	2009	2014	
No. of clients	9,668	10,265	6.1% increase
(7 responses)			
No of FTE across Needs Assessment and Service Coordination (7 responses)	54	56	3.7% increase
	179	183	
Average clients per FTE Workload has increased with new processes and since 2009.			more with little additional re

New Model Initiatives Described

NASC	Dates	Additional Staff or Resource	Demonstration or project – description given
Support Net – Tauranga	Dec 2011 ongoing	No additional staff except fee for service – est costs 20% funded	New Model and LAC demonstration in BOP. Taken 2.5 yrs but we have shifted as a NASC. Challenges from unexpected change from MOH.
NorthAble	2014 for one year	Approx 2.0 FTE – est costs 40% funded	Navigation Service – Encompass – to show Navigator Model is transportable within another NASC.
AccessAbility – Dunedin	Commencing now	Funding 2.0 FTE	LAC through NASC
Life Unlimited – Hutt Valley	Commencing now	Funding 2.0 FTE	LAC through NASC
Options Hawkes Bay	Commencing now	Funding about 50% 1.3 FTE	MSD initiative for home for children and young people with disabilities

Focus Wairarapa	2013	None	FIM and SPA Tool project used by hospital, Focus and ACC
			Get agreements re assess in ward rather than home
			 Strengthen links with ACC to agree joint funding arrangements and transferring information Takes time to get from ideas to embedding in

Survey Summary

27 August 2014