Individualised Funding in Disability Services

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1 Introduction

This paper reviews individualised funding and the principles of self-determination that underpin it. The extent to which these principles have been applied in a Victorian post-school options program, the Futures for Young Adults (hereafter FFYA) program, will be examined. This program commenced in 1997 to assist young people with a disability to move from school to adult day service options. Its intention was to provide young people with services that meet their individual needs as well as to promote the development of new services as necessary. The lessons learnt from this project will be considered in light of the general principles of individualised funding.

2 Self-determination and Individualised Funding

Self-determination is formally defined as occurring when a person has control over their life and the choices made (Wehmeyer, Agran and Hughes, 1998: 32). A less formal definition is that it allows people to follow their dreams and to form meaningful relationships (Bach, 2000: 8). Central to self-determination is the principle that all people, including those with severe developmental disabilities, can be taught to take some degree of control over their own lives (Wehmeyer, 1999: 11). It is acknowledged that there may be limits to the degree of control people with an intellectual disability can exercise (Joseph Rowntree Foundation, 1995), but Wehmeyer argues that all people can be educated to enhance their decision making ability and become more self-determining. Individualised funding is one of a range of mechanisms that is used to assist people to become more self-determining and it is generally seen as a means to an end and not an end in itself. A description of individualised funding is provided below.

Shaddock (2000: 5) outlined the progression of attitudes towards people with a disability that has led to the current interest in self-determination. Until the 1960s, the medical model was dominant and when this gave way to deinstitutionalisation and independent living during that decade, professionals still provided top-down support and people with disabilities still had little power and influence. The following decade saw the ‘normalisation principle’, a major catalyst for reform, and moves towards individualised planning. Individualised planning came to prominence in the 1970s and, under an umbrella of ‘management by objectives’ bequeathed by the business world, it involved interdisciplinary coordination, accountability, integration and consumer participation. This came to be criticised because it still retained the pivotal role of the professional, had a bureaucratic style for life planning and emphasised quality program delivery and not quality lifestyles. When these limitations were recognised, person-centred-planning was introduced. This focused on the person and their wishes and aspirations, but in turn this was found wanting because it often

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simply repackaged old practices in a new vocabulary. The progress to self-determination is summarised by Shaddock as moving from 'planning for' to 'planning with' to 'planning by' people with a disability.

Many innovative programs have developed around the globe aiming to increase the involvement and self-determination of people with disabilities. One mechanism that has attracted much interest and debate is individualised funding. This term covers a wide range of funding mechanisms based on the principle that funding is put under the control of the individual (Dowson and Salisbury, 2001: 35; Belli, 2000: 1). As Dowson and Salisbury described, individualised funding means that funds no longer go from the funder (government or its representative) to service providers, but go directly to the individual who requires assistance. Individualised funding gives control of the funds to the person so they can purchase the services they require, sometimes with the assistance of a broker or other agent. The intention is that the person will determine the services needed and their needs will shape the service system.

> … the effect of this switch in the flow of funding is to shake the foundations of the entire service system. The relationship between the providers and receivers of support is turned upside down (Dowson and Salisbury, 2001: 35).

A wide variety of mechanisms has developed to implement individualised funding and assist people with the responsibilities it imposes. These include service brokers, personal agents, fiscal intermediaries and vouchering mechanisms, and they are all designed to assist with budgeting, selecting services, managing payments and accountability (O'Brien, 1999: 3). Across Europe, Canada and the United States of America (US) support organisations have developed to help people with this new funding structure because it is a radical departure from traditional services and it has brought many challenges.

Individualised funding developed in two areas during the 1970s (Dowson and Salisbury, 2001: 36; Bach, 2000: 1). In British Columbia, Canada, the *Woodlands Parents Group* assisted their children with intellectual disabilities as they moved from an institution to individually designed and funded programs. Around the same time in California in the US, a group of people with physical disabilities formed *Personal Assistant Services* and demanded control over the funding previously given by the government to support agencies. They were able to employ their own assistants and felt they gained real control over their own lives (Dowson and Salisbury. 2001:36).

There is wide agreement that service systems need to change and be better focused on people's needs. This requires better relations with clients and a wider range of flexible alternatives (Moseley, 1999: 2; Kendrick, 2000: 15; Bigby, 1999: 56).

> Individualized funding and planning systems must be flexible and responsive to the culture, values and preferences of each person and their family (Dowson and Salisbury, 2001: 37).

However, Dowson and Salisbury (2000: 1) joined others in cautioning that individualised funding is complex, and even though it brings benefits to some, it should be implemented incrementally and cautiously. There are service systems that offer the opportunity for people with disabilities to choose the level of self-sufficiency they require, ranging from traditional agency based services to the opportunities for self-management. Tilly, Wiener and Evans Cuellar (2000) argued that offering this range of opportunities is the ultimate in self-determination and should be the goal of all services.

There are concerns that the difficulties in implementing individualised funding have obscured the original intention of giving people with disabilities greater control and a better quality of life (Bach, 2000: 2). Bach reported instances where people had received funds, but they did not gain increased power and control over their lives. He found instances where adults and their parents or carers were even not aware they had individualised funding and support workers, service providers, social workers and case managers continued to make the decisions about how funds were spent. On the other hand, there have been additional concerns expressed in discussions about individualised funding. These relate to the removal of safeguards previously provided by professional involvement which may leave people more subservient to the wishes of their parents/carers. Support groups called 'Circles of Friends' and 'Microboards' developed in the United Kingdom and in Canada respectively, to provide a wide base of support and protection to the person with a disability.

Amongst the concerns about individualised funding is the fear that existing services will no longer be viable and the choices available to people with disabilities will be diminished. There are some who argue that a demand driven service system, based on a market economy model, is the best way to address needs. However, others argue passionately that a market economy does not, and cannot, address the needs of the most vulnerable (Ripper, 2000; Simons, 2000). This latter group states that government regulation and support for community development will always be required. For those who accept market-based models, splits between purchasers and providers, stringent accountability and accreditation are considered essential (Dutton, 2000; Tilly et al., 2000: 18).

Some writers are concerned that governments will abdicate all responsibilities for individual support and service development once they give direct payments, and research has vindicated this concern (Bach, 2000: 4). There are also concerns, often from unions, that individualised funding will destroy hard won benefits and securities for workers that have been gained through group bargaining, and will leave them exploited as they individually negotiate each job (National Union Canada, 1998). There is some evidence in the literature, but not a lot, to justify these concerns (Tilly et al., 2000: 18). The unions were criticised as being self-serving and narrow by Bleasdale (2000: 1), who suggested that their social justice ethos positions them well to work cooperatively with people with disabilities.

3 Rights

Underpinning the moves to self-determination and individualised funding is an increased focus on the rights of the person with a disability. In recent decades the rights of people with a disability have been increasingly recognised and this is evident through legislation, individualised services and increased consultation with people with a disability. The 1975 *United Nations Declaration of Rights of Disabled Persons* provided a foundation and a guide for many nations to formulate their own legislation and implementation strategies. A commitment to the rights of young people with a disability underpins the FFYA program.

The Government of Victoria incorporated these principles into its *Intellectually Disabled Persons' Services Act (IDPSA) 1986*, where it included a *Statement of Principles* giving people with an intellectual disability the same rights as other members of the community to access services in order to support a reasonable quality of life; a right to individualised educational and developmental opportunities; and a right to exercise maximum control over every aspect of their life. These principles were extended to all people with a disability in the *Disability Services Act 1991 (DSA)* which followed the 1991 Commonwealth/State Disability Agreement (CSDA). The changes in Australia parallel similar changes in other countries.

Attitudes towards people with a disability in the Western world have shown major changes over the past hundred years (Wehmeyer et al., 1998: 32). At the turn of the 20th Century, people with a disability were viewed as a menace and locked away from the rest of the community. In the 1920s, the eugenics movement recommended the eradication of the 'feeble-minded' and this led to segregation and sterilisation. Following World War II, the many veterans with disabilities were shown more humane and sympathetic attitudes. Hand in hand with the development of science and medicines, where the medical model was dominant, people with disabilities were seen as patients to be cured. The medical profession in particular, but also psychology, social work and teaching dominated decision-making. People with disabilities were viewed as 'victims' to be pitied. It was in this context that the disability rights and advocacy movement began with parents playing a more outspoken role (Wehmeyer et al., 1998: 42).

The recognition of the right to be included in general community services has driven many changes in service delivery. The strength of the inclusion movement is shown internationally by the June 2001 *Executive Order from The White House* (USA) directing that people with a disability be included in community services. This followed a court decision which decided that the norm is to be community inclusion and exceptions have to be justified. In Victoria, the *One Community* initiative is based on the principle of inclusion and *RuralAccess* is an example of a program working towards inclusion by strengthening community services so that supports do exist for people.

4 Futures for Young Adults Program

The Futures for Young Adults (FFYA) program assists young people with all types of disabilities in Victoria as they move from school to adult service options. Services were provided to approximately 3 250 students between the years 1997 and 2000. The need for transition programs to assist students with a disability to move to post-school options has been well recognised in Victoria and elsewhere (Community Services & Ministry of Education, *Report of the Working Party on Students with Intellectual Disability Aged Over* 18, 1989:5). The 18+ Transfer Project, existing from 1990 to 1994, was the predecessor to the FFYA program. The 18+ Transfer Project was not an individually planned transition program and was referred to as the *whole of school* transition as whole schools of students were moved together to one adult service (Schofield 1998: 7).

In November 1996, the Honourable Dr Denis Napthine, Minister for Youth and Community Services, announced the new Futures for Young Adults program in the Victorian State Parliament (Hansard, Victoria, 1996). This was in response to the 1 270 young people with an intellectual or physical disability over the age of 18 years who were in Victorian state schools.

Important features of the FFYA program announced by Dr Napthine were the emphasis on individual needs, self-determination and the development of new options to meet these needs. He stated:

> The government has committed $17 million in recurrent funding to provide services for young adults and an additional $10 million in capital and start-up costs to facilitate the program. The program must recognise the individual skills, abilities and needs of young adult persons. …I advise the house that we will treat each of them as an individual because we recognise that people with disabilities are individuals and no one size fits all in the services provided. …… The service was designed specifically to meet the needs of individuals and their carers. …… In consultation with the young person, with his or her family and with the school he or she is currently involved with, we will develop specific programs for each of these individuals to ensure that the most appropriate adult option is available. …. We have the option of providing further day programs, particularly for young adults with multiple disabilities or severe disabilities or challenging behaviour. We will also look at employment options, whether in the open work force or in the assisted employment work force (13 November 1996, Hansard).

The processes identified for the FFYA program relating to self-determination were:

- Individual transition planning in which the young adults and their families are full participants. This process is to include a formal review of each young person's initial choice, and a review of their needs over time;
- Recurrent and ongoing client-centred funding which is portable and travels with the young adult as they move between service providers;
- Service sector development with the involvement of existing service providers and the introduction of new service providers and new models of service delivery (DHS, FFYA Stage 1 Implementation, 1998:6, internal document).

5 Futures for Young Adults Program Funding

Dowson and Salisbury, (2001: 35) defined individualised funding as funds going from the government funder to the person or their representative so they can purchase services directly from service providers. The term *individualised funding* is currently referred to in relation to the FFYA program but it is not present in the original documentation about the program. Using the definition given above, individual funding was only found in the FFYA program for less than ten young people, who were self-managing through the assistance of their families. The overwhelming majority of young people receives services negotiated and paid for directly by government transition workers or their agents. The program does provide transportable funding, in that participants can choose to move from one service provider to another and the funds go with them. When necessary, services can use the funds to create new places. This is a radical departure from previous programs where service providers were funded by government to offer a set number of places and service users remained on waiting lists until a vacancy arose. The FFYA program has created two categories of service user, those on the FFYA program who can take their funds to another provider and those outside the accepted age range who have to wait for a vacancy. Not surprisingly, there are equity concerns about this discrepancy.

The FFYA includes an assessment of the support needs of the young adult using the Support Needs Assessment (SNA) which has six levels of funding. There has been some confusion about these funds and the level of control that participants and families have over their use. Parents who wanted to be closely involved in decision-making and those who wanted to self-manage using an individualised funding model wanted to know their entitlement. However, it was reported that some regions did not reveal the amount of funds available. The program administrators viewed the SNA as a means of distributing funds from the central office to each of the nine Department of Human Services (hereafter DHS) regions, and transition workers are expected to assess individual planning needs, negotiate with service providers and budget accordingly. Funds not expended individually have been used to support service development within the region. Additional service and equipment grants were also provided to regions.

Overview of the Program Evaluation

The Futures for Young Adults (FFYA) evaluation examined the impact of the program on all stakeholders. As stated by Minister Napthine in 1996, the program intended to assist students in their move from school to further education, training, employment and recreational activities and to facilitate the development of a flexible, consumer- responsive service system. However, there were no clearly stated aims and objectives for the program that could be used for its evaluation.

The first stage of the evaluation, the *Destinations Evaluation* (DHS, 2000) analysed all existing DHS data files and presented a profile of the adult options attended by the young people. The second stage, the *Program Design Evaluation*, consulted with young people on the program, their families or carers and a range of service providers and other stakeholders. A sample of young people on the FFYA program was randomly selected based on the nine regions, three broad levels of assessed need, gender and the first four years of the program under review. Some sample cells were empty, giving an actual sample of 180 instead of the 216 that was theoretically possible. One hundred and one young people or their families responded to letters sent to participants and their families or to phone calls from the Department of Human Services requesting their participation. Some declined involvement and the names of those who agreed were passed to the university researchers. Seventy-nine participants and their families/carers were interviewed.

Invitations to submit written submissions or have discussions with the researchers were advertised through peak bodies and disability networks to additional participants, families/carers, schools, further education bodies, service providers and advocacy groups. A total of 122 interviews were conducted or submissions received from these invitations. Additional consultations were undertaken with government staff administering the program around the state. A large number of the young people interviewed had communication impairments. To understand their expectations and aspirations, the researchers spent time visiting their current placements and talking to the young people.

The *Destinations Evaluation* profiled the service types that students moved to, across the nine Victorian DHS regions during the first four years of the program from 1997 to 2000, and showed the changes they made. The findings considered relevant to a discussion of individualised funding in disability services are the profile of services used and the numbers who moved to a second service option. It should be noted there were differences in data collection across the nine regions that limited the accuracy of the data and limited the findings to an approximation of the actual numbers. Despite this limitation, the major trends are considered valid.

Statistical Analysis of Placement Options

The analysis of the placements chosen by the young people showed the majority of young people attended disability specific services. The data did not specify type of disability, but it was known the majority had an intellectual disability. Approximately 40 per cent attended traditional government funded day services (ATSS) for people with an intellectual disability. A further 16 per cent attended TAFE disability- specific courses and 10 per cent attended supported employment. Other options attended were community based programs (sometimes part of an ATSS service) 10 per cent; open employment eight per cent; open TAFE five per cent; other three per cent; university two per cent; VCE two per cent; traineeship two per cent; adult education two per cent; apprenticeship 0.2 per cent; no placement four per cent; no support requested three per cent. (Total exceeds 100 per cent because of rounding.)

The movement from first to second placement option was analysed and only 16 per cent of the young people were shown to have moved to a second option. This figure may be an underestimate because some moves might not have been recorded, but the consultations confirmed that relatively few people changed options. It was also found that while the proportion of young people in each of the service categories remained much the same after the first transition, there was a tendency for those leaving the specially created TAFE disability courses to move to disability day services. Unfortunately, there are no figures available to compare the choice of options with those prior to the commencement of the FFYA program.

Overview of FFYA Service System

The consultations with young people and their parents/carers covered wide-ranging issues and only those relevant to a discussion of individualised funding will be reported. Dowson and Salisbury (2000: 65) presented a table detailing different mechanisms for implementing individualised funding and how they assisted the different stakeholders. Aspects of their table relevant to the FFYA have been adapted and are presented below with additional comments on the FFYA program.

Table 1: Individualised funding structures

STRATEGY	INTENDED TO ASSIST	PURPOSE	IMPACT	APPLICABILITY TO FFYA PROGRAM
	Dowson and Salisbury 2000			FFYA Findings
Banding recipients into broad categories of need	State fund-holders	Control overall spending	May undermine true recognition of individual funding requirements	FFYA program uses an assessment tool with six categories of need. Funding allocations were linked to level of need and funds go from the central government office to regional offices. Individual plans are made at the regional level and amounts spent may vary from the initial allocation. As Dowson and Salisbury suggested, the bands serve the purpose of allocating funds within the bureaucracy. The tool was criticised by many service providers and some parents on two accounts. They said it focused on physical support needed in the school and did not take into account relevant factors that influence future support needs, such as aspirations, levels of motivation, potential, emotional state, challenging behaviour, social skills, family background, literacy and numeracy needs. Also, some criticised the level of funding allocated to the bands.

Table 1: Individualised funding structures

STRATEGY	INTENDED TO ASSIST	PURPOSE	IMPACT	APPLICABILITY TO FFYA PROGRAM
	Dowson and Salisbury 2000			FFYA Findings
Approved provider list	State fund-holders	Ensure minimum range and quality of services	May undermine development of market responsive to consumer demand	Expressions of interest were invited from existing disability services to provide additional options for FFYA participants. The majority of the young people attended services that had a service agreement with the government prior to the program commencing. Providers were accountable to government and not the young people. It was not possible to establish in this study whether new services had developed in response to demand, which had been one of the original intentions. While some service providers reported their services had become more innovative, others said their viability was under threat and this made them less responsive and innovative.

Table 1: Individualised funding structures

STRATEGY	INTENDED TO ASSIST	PURPOSE	IMPACT	APPLICABILITY TO FFYA PROGRAM
	Dowson and Salisbury 2000			FFYA Findings
Crisis contingency funds	State fund-holders	Provide fast and flexible responses	If used excessively, may deny recipients ability to plan from guaranteed funding allocation	'Special needs funding' is applied for in a crisis and can be re-applied for every six weeks (some regions have extended this to longer periods). Service providers reported that they regularly depended upon it to provide necessary support for some young people with high support needs because funding was inadequate. The inadequacy of the general funding level for these young people is obscured. It also raises planning problems as the funds were not assured, a point made by Dowson and Salisbury. The 'special needs funding' in the FFYA program does assist the recipients, although Dowson and Salisbury do not include them as beneficiaries.
Case (or Care) managers	Recipients (ostensibly, though covertly may serve state fund-holders)	Plan, select, and manage supports	Severe conflicts of interest if accountable to either state fund-holder or service provider	Transition workers did the basic planning and their responsibilities varied across regions. Some worked exclusively within the FFYA program while others also carried case management responsibilities in other areas. Having access to a (familiar) worker was a critical factor in determining satisfaction with the FFYA program. In all but two regions, where transition workers were employed by independent services, they were government employees and their primary accountability was to the funding body. As Dowson and Salisbury suggest, this could lead to strong conflicts of interest.

Table 1: Individualised funding structures

STRATEGY	INTENDED TO ASSIST	PURPOSE	IMPACT	APPLICABILITY TO FFYA PROGRAM
	Dowson and Salisbury 2000			FFYA Findings
Service brokers	Recipients	Negotiate funds; plan, select, and manage supports	Undermines the control of the recipient if the broker has loyalties or obligations to providers or fund-holders	The FFYA program was fully contracted through independent service brokers in two of the nine regions. In other regions, contracted services sometimes brokered to additional services. Many respondents in the evaluation insisted that brokerage had to be independent of service providers to ensure impartiality. One of the regions with independent brokerage recorded some of the most positive client comments in the study, while comments about services in the other region were on par with the moderately highly rated government services.
Providers given guarantees of minimum income/business by state funding agency	Providers	Survive the uncertainties of demand-led market (especially during transition from block-funded system).	May obstruct development of demand-led market.	The government had service agreements with traditional service providers prior to the commencement of the FFYA program and they were invited to submit an expression of interest to participate in the program. Many respondents held similar views to Dowson and Salisbury and said the close relationship between the government and some providers resulted in the promotion of a restricted number of services with young people being directed to preferred services.

Table adapted from work of Dowson and Salisbury, (2000: 5)

Control

A significant feature of individualised funding, as previously discussed, is empowering of service users. The aim of self-determination, the principle that underpins individualised funding, is to give people as full and rich a life as possible based on their decisions, to the extent that they are able to choose. Rigid service systems were thought to limit people's options. The intention of portable and individualised funding is to make services responsive to people and not the reverse where people have to fit into existing services.

Two findings from the *Destinations Evaluation* considered relevant to assessing the degree of control that people had over their choice of option were the extent to which non-traditional options were included, and also the degree of movement from one option to the next over time. In both areas the results were conservative, with traditional service options predominating and little movement between services. Neither of these measures on their own were definitive in determining the degree of self-determination that was afforded to young people and their parents/carers, as people might prefer traditional services, and indeed many did. However, in conjunction with the interviews conducted, they do give an indication that people were very restricted in their choice. Some parents/carers reported they wanted more choice regarding their services, but they found it difficult to achieve this in their negotiations with regional offices. Also, it was frequently mentioned that information was difficult to access. The nine government regions across the state differed widely with regard to the degree of control they shared with families.

The researchers became aware of only a small number of people who had payments made directly to them, or to a brokering agency acting on their behalf. Less than ten families were mentioned in the study as being funded in this way, and three families participated in the consultations. These three families said they had control and could purchase the services they wanted and expressed great satisfaction with these arrangements. The workload was difficult when families self-managed, but they appreciated the choice and flexibility they achieved.

It should be noted that many of the families who did not control their own funds were also satisfied with the degree of control they experienced and the services received, and often did not want any further responsibility in their lives. However, according to definitions of individualised funding, it cannot be said they were part of an individualised funding program.

> … a system which merely tells people what their service costs are, without handing over control of funds or allowing any renegotiation, has no resemblance to IF (individualised funding) (Dowson and Salisbury, 2000: 65).

There were varying levels of satisfaction reported in the study regarding the level of control and services experienced. Many expressed their appreciation of having portable funding. This gave the potential to move to new services, even if the statistics showed that only a minority actually did so. Other factors that led to people feeling they had some involvement and control over the choices made were: access to transition workers; access to information; access to an appeal body (a Consumer Advocacy Reference Group was disbanded in the first year of FFYA and its loss decried by some who knew of it); and a welcoming attitude from workers (some parents/carers feared they would be labelled trouble makers if they complained and 'rocked the boat').

The study found many parents/carers who did not know that the program was intended to be responsive to their needs, nor that it offered portable funding. Bach

(2000: 2) reported similar findings where the workers determined funding allocations and made major decisions.

Service Innovation

One of the intentions of the FFYA program was to be responsive to individual needs and develop new programs if necessary. This intention is consistent with other individualised funding programs attempting to break away from the limitations of traditional services and give people the financial power to direct service development through their choices (Dowson and Salisbury, 2001: 35).

The study found that portable funding allowed new places to be created in existing services and it fast tracked access so that people moved off waiting lists. However, the study was not able to determine the impact of the FFYA program on the development of new services at a time when political directives resulted in major changes to the services system. There were anecdotal reports that the imposition of competition policy forced the closure of smaller disability services, and also that the remaining services developed programs that were more innovative and responsive. However, the extent of these changes and the contribution of the FFYA program cannot be gauged by this study. It can be determined, however, that few FFYA participants moved outside the established service system. It was also evident from the study that the infrastructure within government and the contracted services remained focused on group activities and it was difficult to cost and administer individual programs that differed from the norm. Payments from government to services were processed around annual service agreements and computer technology was designed for bulk payments and not individual flexibility.

An important factor to be considered when judging the extent of change to the service system associated with the FFYA program is the slow place at which change typically occurs in complex administrative systems. Pollitt and Bouckaert (2000: 33) argued that existing procedures reflect organisational history and large-scale change is always difficult, requiring considerable investment in staff training, new information technology and new accounting systems. Change in each of these areas is critical for the full implementation of the FFYA program and both the government department and service providers were grappling with the profound changes needed to provide individually focused and funded services. The slow rate of change observed is understandable from this perspective, but it also gives impetus to putting resources into the areas identified. Without adequate technology and accounting systems, and without educating staff in a new philosophy and new practices, the potential of the program may not be realised.

Some service providers mentioned that individualised funding threatened their service viability. They feared that portable funding could lead to a sudden loss of people attending and this was of particular concern to some small providers. There was acknowledgement from some service providers that they sometimes retained young people at their service to bolster their numbers when it may have been appropriate to refer them on to other options. Even though the actual number of young people in the FFYA program who move is small, the loss of one or two was sometimes seen as a serious threat.

The individualised funding model requires service users to act like consumers in a marketplace. However, the study found parents/carers did not want to have to negotiate with service providers about extra costs for activities and transport that is now required in many services. Parents/carers were unaccustomed and uncomfortable with this role. As discussed previously, many writers recommend a flexible service system that accommodates those who want to manage their own funds as well as those who want a well-defined service. The findings of this study support the need for this varied approach.

The study was able to confirm the importance of positive relationships between young people and their families/carers with service providers in determining satisfaction with services, but it did not examine whether this led to a change in service delivery. Kendrick (1999: 9) observed that the hoped for innovation in service reform does not automatically flow from individualised funding. He suggested that individualised funding is only a financing method and the critical factor in achieving innovation lies in relationships between people and in the potential of staff to be responsive and creative. While pockets of innovation were found, there were also services that appeared to be unresponsive to individual needs.

7 Lessons

The cautions in the literature about the move to individualised services and individualised funding being complex and needing to be implemented incrementally were born out in this study (Dowson and Salisbury, 2000: 1). The FFYA evaluation provides an opportunity to learn from the experiences of the past four years and develop further opportunities. The program was a bold initiative that produced gains for the young people for whom new places have been created because of portable funding. A handful of families have full control of their funding and have directly purchased their own services. This opportunity has been greatly appreciated by the families concerned.

There are many challenges when a large service system tries to change from block funding arrangements to individual responsiveness. Every person in the service system including recipients, parents/carers, providers, funders and policy makers has to travel the path of significant change. An ongoing commitment to implementing a changed philosophy is required. The FFYA program has examples where people have been empowered to follow their dreams and services have changed, and these can serve as models for the whole program. However, it is clear that many people need further support for changes to occur. Procedural changes are needed if people with a disability are to have greater input into decision-making to the extent that they want and are able. Disability advocacy and peak bodies demonstrated a depth of understanding of the overall service system in their submissions, and they could possibly be supported to play an important role in bridging the divide between government funders and service users. Most importantly, staff in all government and non-government areas will need support to adapt to the radical changes that are being attempted.

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