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State Records
of South Australia

State Records Act 1997

Operational Records Disposal Schedule

Department for Communities and Social Inclusion

Disability SA

Disability and Domiciliary Care Services

(and predecessor agencies)

RDS 2011/27 Version 2

Effective Date: 26 February 2013 to 30 June 2025

First Approved: 26 February 2013

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Department for Communities and Social Inclusion - Disability SA and Disability and Domiciliary Care Services (and predecessor agencies)

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Department for Communities and Social Inclusion - Disability SA and Disability and Domiciliary Care Services (and predecessor agencies)

Preamble

Purpose of the Schedule

This Operational Records Disposal Schedule (RDS) authorises arrangements for the retention or destruction of records in accordance with Section 23(2) of the *State Records Act 1997*.

Application of the Schedule

Department for Communities and Social Inclusion:

Disability SA

Disability and Domiciliary Care Services

(and predecessor agencies)

Approved Date: 26 February 2013

Extension Approved: 30 June 2023 to 30 June 2025

Effective Date: 26 February 2013 to 30 June 2025

Authorisation by State Records

This authorisation applies only to the disposal of the records described in the Schedule.

State Records' Contact Information

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Department for Communities and Social Inclusion - Disability SA and Disability and Domiciliary Care Services (and predecessor agencies)

Disposal of Official Records

Legislation

Section 23(1) of the *State Records Act 1997* states that an agency must not dispose of official records except in accordance with a determination made by the Manager [Director] of State Records with the approval of the State Records Council.

Section 23(2) states:

‘If an agency requests the Manager to make a determination as to the disposal of official records, the Manager must, as soon as practicable:

- (a) with the approval of the [State Records] Council, make a determination requiring or authorising disposal of the records in a specified manner; or
- (b) make a determination requiring delivery of the records into the custody of State Records or retention of the records and later delivery into the custody of State Records.’

The contents of an RDS, once the approval process is complete, constitute a determination within the meaning of the *State Records Act 1997*.

Functions of the Schedule

An RDS plans the life of these records from the time of their creation to their disposal. It describes the records created and/or controlled by CHSSA, the disposal sentence specifying whether they are to be retained as archives or destroyed, and when this should occur.

This Operational Records Disposal Schedule has been prepared in conjunction with staff from CHSSA to determine the records which need to be kept because of their long term value and to enable the disposal of records once they are no longer needed for administrative purposes. The assessment of the records takes into account their administrative, legal, evidential, financial, informational and historical values. The appraisal of the records is in accordance with the State Records’ policy as documented in *Appraisal of Official Records – Policy and Objectives* - available from State Records’ website (www.archives.sa.gov.au). The Schedule complements the General Disposal Schedules (GDS) that are issued by State Records to cover housekeeping and other administrative records common to most State Government agencies.

Relationship to Other Disposal Schedules

The General Disposal Schedule for State Government Agencies in South Australia (GDS 30, as amended) should be used by State Government agencies for common records documenting



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activities such as HR, financial management, policy and procedures.

Hardcopy source records dating from 1 January 2005 that are converted to digital format (digitised) as part of business processes can be disposed of under General Disposal Schedule 21 (GDS 21) where the conditions outlined in GDS 21 are met.

State Records of South Australia issue general disposal schedules from time to time to implement disposal freezes, restricting disposal of records which might otherwise be authorised for destruction. To see the latest schedules implementing disposal freezes check the State Records of South Australia website [Disposal Freezes | State Records of South Australia \(archives.sa.gov.au\)](http://archives.sa.gov.au)

Using the Schedule

The Schedule applies only to the records described within it.

Layout

The Schedule is laid out as follows:

- Item Number:** Numbering in the Schedule is multi level:
- Functions have single numbers (eg 1.)
 - Activities and/or processes have two-level numbers (eg 1.1)
 - Disposal classes have three-level numbers (eg 1.1.1)
- Function:** The general functions are shown in 12 point bold Arial upper case at the start of each section. (eg **EDUCATION**)
- Activity/Process:** The activities and processes relating to each function are shown in 12 point bold Arial sentence case (eg **Contract Services**).
- Description** Descriptions are in three levels ranging from broad functions to specific disposal classes:
- definitions of functions are shown at the start of each section in bold (eg **The function of providing education and training relating to primary health care matters, including content development and delivery.**)
 - definitions of activities are located adjacent to the activity title in italics eg *The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.*



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descriptions of each disposal class are arranged in sequence under the activity definitions.

Disposal Action: Disposal actions relate to the disposal classes arranged under the activity descriptions. The status of the class is either PERMANENT or TEMPORARY with a disposal trigger and retention period given for all temporary records.

Retention Period of the Record

The Schedule is used to sentence records. Sentencing involves applying the record retention periods within the RDS to the records of CHSSA. Decisions are made using the Schedule about whether records are to be retained and, if so, for how long, or when they are to be destroyed.

Retention periods set down in the Schedule are minimum ones and CHSSA may extend the retention period of the record if it considers there is an administrative need to do so. Where CHSSA wishes to retain records for substantially longer periods it should request that the Schedule be amended to reflect this requirement.

Custody and Transfer of the Record

Permanent Records

Section 19 of the *State Records Act 1997* includes provisions for the transfer of custody of an official record:

- a) when the agency ceases to require access to the record for current administrative purposes or
- b) during the year occurring 15 years after the record came into existence - whichever first occurs

Official records that have been sentenced as permanent, in accordance with an approved disposal schedule, are required to be transferred to State Records.

Agencies with valid reasons to retain permanent records for longer than 15 years should apply in writing to Director [Manager], State Records requesting either a postponement or an exemption from section 19. It should be noted that postponement or exemption are only granted in exceptional circumstances.

Temporary Records

The custody of official records that have been sentenced as temporary is the responsibility of agencies. A policy and standards framework for the management and storage of temporary value official records has been established by State Records as documented in *Records of*



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Temporary Value: Management and Storage: Standard and Guidelines (May 2002).

CHSSA needs to comply with these policy documents - available from State Records' website (www.archives.sa.gov.au).

The custody of official records on networks or hard drives is also the responsibility of agencies. CHSSA needs to ensure that records in electronic format remain accessible to authorised users for the duration of the designated retention period. State Records is, however, currently examining options for the transfer of permanent value electronic records in digital form to its custody.

Notification of Proposed Destruction of Records

Agencies must keep their own record of all records destroyed under this RDS, noting the relevant disposal schedule entry and the authorisation for destruction. Temporary records should only be destroyed with the approval of the CE or delegate in accordance with the *Destruction of Official Records Guideline* issued by State Records of South Australia.

Department of Human Services (DHS) must ensure that all destruction is secure and confidential and that a certificate confirming destruction is provided by private contractors.

Standard methods for destruction of paper are shredding, pulping or other means that are environmentally friendly.

Records in electronic format must only be destroyed by reformatting or rewriting to ensure that the data and any "pointers" in the system are destroyed. "Delete" instructions do not offer adequate security as data may be restored or recovered.

DHS should keep their own record of all records destroyed, noting the relevant disposal authority. Proof of destruction may be required for legal purposes, or in response to FOI applications. When records are destroyed systems that control them should also be updated by inputting destruction dates and relevant disposal authorities.

Review

State Records' disposal schedules apply for a period of ten years. Either DHS or State Records may propose a review of the Schedule at an earlier time, in the event of changes to functions or procedures that affect the value of the records covered by the disposal authority. Reviews are especially necessary if there is vast administrative change that affects the currency and use of the records and/or the records are dispersed to other agencies.

The State Records Council needs to approve all amendments to the Schedule. Officers using the Schedule should advise State Records of any necessary changes.

Compliance with the Determination

Failure to comply with this determination, or any directions in it, falls under Section 17 of the State Records Act 1997.



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Context Statement

Context of the Agency Covered by the Schedule

Disability SA and Disability and Domiciliary Care Services History and Background

Community and Home Support SA (CHSSA) was announced in a government restructure in December 2010, and became a division of the new Department for Communities and Social Inclusion (DCSI) - formerly Department for Families and Communities - under the Minister Ian Hunter MLC. The two Branches within Community and Home Support SA are (1) Disability Ageing and Carers and (2) Disability and Domiciliary Care Services. In September 2012, further administrative change in the Department was announced, with the removal of the name CHSSA, and the renaming of the two DCSI Divisions as (a) Disability SA and (b) Disability and Domiciliary Care Services, effective as at 1 November 2012.

Disability SA and Disability and Domiciliary Care Services provide advice on home care and support for older people, people with disability and their carers. The history of these two Divisions is described below.

History of Disability Services

When Governor John Hindmarsh read the proclamation regarding the Province of South Australia at Holdfast Bay in December 1836, he did not anticipate the forthcoming requirements of the new government to care for the sick, the elderly, the chronically ill and those with mental illness amongst the new colonists. With no infrastructure to support migrants' welfare, and an overwhelming responsibility on the shoulders of the Emigration Agent, the *Destitute Relief Act* was introduced on 24 November 1842.¹ The Act avoided any government responsibility for the sick and destitute, and imposed legal responsibility on the family members. The government would provide support only if it could be proved that there were no relatives to help. The Act became the legal basis for the social welfare action taken by the government.

Destitute Board

The Emigration Agent resided at Port Adelaide so he could deal with the incoming ships and supervise arriving migrants. In February 1849, the Colonial Secretary, Robert Gouger, and the Manager of the South Australian Company, William Giles, with others formed the Destitute Board. People in need could apply to the Board which deliberated and then recommended whether rations should be provided. These recommendations required the Colonial Secretary's approval.

¹ Disability Information & Resource Centre website: <http://history.dircsa.org.au/settlement>



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The Board's first report to the Governor on 7 January 1850 showed that it had granted weekly rations to eighteen families, sixty six adults, fifteen children and that there were one hundred and fourteen people on rations at year's end. However the report also highlighted two major problems with the system of providing more intensive assistance than the issue of rations. The first was that one hundred and ninety eight people had sought medical aid. As a result the Board was given the power to send people to the Colonial Hospital for medical aid after consultation with the Colonial Surgeon.

The second problem was the lack of suitable accommodation for those in need. The Board reported that it had been forced to house twenty five people, ie "seven deserted children, a family of four, four old men, three aged cripples, a blind person, an idiotic girl, three sick men and two women lying-in" in huts scattered around Emigration Square². However, nothing was done about the lack of accommodation for the destitute.

In April 1851 the government responded to this situation by granting the Board access to part of the barracks complex next to Government House on North Terrace. The first residents were moved into their new quarters on 10 May 1851. The site became known as the Destitute Asylum³, a place where the aged, poor and chronically sick were looked after and kept alive. The Asylum was not closed until 1917.

In 1927, the State Children's Council, which had been established in 1886 to oversee the care of children, was combined with the Destitute Board to form the Children's Welfare and Public Relief Board. In 1965 with the passing of the *Maintenance Act* the Department of Social Welfare was established under the Director of Social Welfare.

Destitute Asylum

The Asylum allowed regularity, supervision and control. It was also thought to provide the most efficient way of managing those who were socially dependent. Consequently, the Destitute Asylum provided institutional care for women, children, the aged, destitute and the sick. During the 1850s and 1860s the Asylum's occupancy of the barracks expanded.

The building was repaired and wings added to accommodate the increasing number of residents. In 1863 an Act was passed for the '*Regulation of the Destitute Asylum*' with the aim to better regulate the government's aid. It also provided rules relating to the behaviour of residents in the asylum. However, the Act did not address the issue of eligibility for assistance. The Asylum housed everyone in need, regardless of their individual needs, so that the poor, the ill, the elderly, men, women, children and people with disabilities were all placed under the same conditions. Residents were, however, housed separately based on their

² <http://history.dircsa.org.au/1800-1899/settlement> [includes language now regarded as derogatory]

³ Dickey, Brian 1986. *Rations, residence, resources: A history of social welfare in South Australia since 1836*. Netley: Wakefield Press.

Piddock, Susan 2001, 'Convicts and the Free: Nineteenth-century lunatic asylums in South Australia and Tasmania (1830-1883)', *Australasian Historical Archaeology*, Vol. 19, pp 84-95



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gender and age, which often led to families being separated. By the end of June 1864 there were seventy six males and sixty nine females (including children) in all these groups.⁴

From the beginning there were children at the Asylum. During the 1860s the problem of destitute children increased. It was not until 1868 when the Destitute Board established institutions for State children that they were removed from the Asylum.

In 1870 the growth in numbers of residents at the Asylum extended its accommodation over the remainder of the military barracks. However, applicants continued to arrive, increasingly referred by the Adelaide Hospital. The Colonial Surgeon realized that he could send chronically ill patients to the Destitute Asylum and free up beds at the hospital. The Destitute Board was forced, in turn, to press for improved facilities and extra nurses to care for these people. However, as there was no other alternative, public or private, this only meant patients would continue to end up at the Asylum. In 1882 the government recognised the need for professional full-time medical care at the Asylum and allowed the appointment of a paid medical officer.

Although the government dealt with many thousands of cases each year, non-government charities also dealt with hundreds of cases. The government often gave grants to charities to provide services, freeing the State of the obligation.

Home for Incurables, later Julia Farr Centre and Julia Farr Services

In 1878 Mrs Julia Farr, the wife of the headmaster of St. Peter's College, became concerned about the fate of people with incurable diseases who were confined at the Adelaide Hospital or the Destitute Asylum. Supported by Dr William Gosse, a pioneer medical officer and former Colonial Surgeon she was able to rally medical and philanthropic friends to establish the Home for Incurables. The Home was founded on 23 September 1878 and incorporated on 23 October 1879. Its mission was to provide care for those who were suffering from a crippling disease, where there was no prospect of a cure. The first admissions to their eight-roomed house at Fullarton were on 17 October 1879. By 1881 there were forty-four residents and a staff of nine.⁵

By 1954 the type of resident at the home had changed. Most residents were confined to wheelchairs or bed-ridden. The Home depended on significant financial support from the State and Commonwealth governments. In 1958, for the first time in many years, the ordinary income, excluding bequests, exceeded expenditure. In 1960 the Home appointed a Public Relations Officer, John Maguire. He organised the annual Miss Industry Quest. In 1965 and 1966 the Home was selected as the recipient of the Channel 9 annual Telethon and received £332 and £247. By 1978 on its Centenary, the Home had grown to provide accommodation for eight hundred and twenty-six patients, employed a nursing and domestic staff of one thousand and twenty-one, and operated with an income of \$11.5million.

⁴ <http://history.dircsa.org.au/1800-1899/destitute-asylum/>

⁵ The Home for Incurables: The First 100 Years. Lutheran Publishing House, Adelaide.



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In the same year, the Board of Management for the Home for Incurables announced the first full-time Coordinating Chaplain. This was done with the cooperation of South Australian Heads of Churches, and the Reverend Tony Baker of the Uniting Church was appointed. The position continues in 2012.⁶ The Chaplain works in ecumenical cooperation, counsels, provides training and takes services.

In 1981 the Home for Incurables was re-named Julia Farr Centre after Mrs Julia Farr. In 1995 the name of the Centre was changed to Julia Farr Services to reflect the changing focus and range of services.

Commonwealth Pension Relief

During the 1890s and 1900s the Destitute Asylum was usually full, with over six hundred residents. In 1897 a debate began on establishing a pension for the aged, but not for people with a disability. The pension was to be an alternative to support by the Destitute Board.

On 1 January 1901 the six colonies agreed to set up a Federal Government and the Commonwealth of Australia was formed.

The Constitution of the Commonwealth of Australia, among other things, gave power to the Commonwealth Government to provide age and invalid pensions. The Commonwealth Government did not use this power until June 1908 when the Deakin government introduced the *Invalid and Old Age Pension Act* providing means-tested 'flat-rate' age and invalid pensions.

The new pensions, which were administered by The Treasury and financed from general revenue, came into operation on 1 July 1909 for the age pension and on the 15 December 1910 for the invalid pension.⁷ The Commonwealth Invalid Pension reduced the need for the Destitute Asylum. However, it was not until the Old Folks Home at Magill was opened in 1917 that the Destitute Asylum was finally abandoned.

The Invalid Pension remained essentially unchanged from its introduction in 1910 until 1991 when both it and the Sheltered Employment Allowance were replaced by the Disability Support Pension (DSP). The Rehabilitation Allowance was phased out and new entrants to rehabilitation received DSP.

To be eligible for a DSP an applicant needed a physical, intellectual or psychiatric impairment of at least 20 per cent, based on impairment tables in the *Social Security Act 1991*, and had to be unable to work more than 30 hours per week. This change was introduced in response to the steadily increasing number of people on the invalid pension. The main reason for the rise was the historically high levels of unemployment that made it harder for people with disabilities to compete for jobs.

⁶ Kerr, Colin: *The Home for Incurables: the first 100 years*. Lutheran Publishing House, Adelaide. ND

⁷ Daniels, D. *Social Security Payments for the Aged, People with Disabilities and Carers 1909 to 2006 – Part 1*. 2007 [online]. [Accessed 15th May 2007]. Available from World Wide Web: <http://www.apf.gov.au/library/pubs/online/aged1.htm#invalidpension>



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Intellectually Retarded Services

Intellectually Retarded Services (IRS) was established in 1964 as a part of the Mental Health Services, a division of the Hospitals Department.⁸ It was established to provide referral and support services and to develop training programs for people with intellectual disabilities who were living in the community. At the same time the *Mental Health Act Amendment 1964* was amended to allow for the provision of hospital training centres, specifically for people with intellectual disabilities as separate institutions. Up to this time the institutions providing care for these people with disabilities were those whose primary focus was the care of the mentally ill (eg Hillcrest and Parkside Hospitals). The first Assistant Director of IRS was Dr John Covernton, to be succeeded by Dr Norma Kent.

Independent Living Centre

Independent Living Centres were established in several states from 1976 onward, to assist people to live independently in their own homes. In South Australia an Independent Living Centre (ILC) was established in 1978 at Payneham. From then until 1984, the ILC was funded and/or managed by many organisations, including the Australian Council for Rehabilitation of the Disabled (ACROD), South Australian Association of Occupational Therapists (SAAOT), various trust funds and donors, and finally by the South Australian Red Cross Society in 1981.

On 28 August 1984, the South Australian Independent Living Centre (ILC) transferred from Red Cross and became an incorporated body under the South Australian Health Commission. In 1985, the ILC moved from the Julia Farr Centre at Highgate, to new premises at Daw Park provided by the Minister for Health and Community Welfare.⁹ The service continued there until 1995.

Clients were provided with equipment, information, education and training, an outreach service, and services such as continence promotion and disabled driver safety assessments. In 1996, the ILC took on the role of Independent Living Equipment Contractor (ILEC) within the Independent Living Equipment Program. This involved the supply, tracking, maintenance, retrieval and recycling of equipment.

In 1996, the ILC moved to new premises in Gilles Plains, where it remains at the time of writing. Its primary services as ILEC, administering the purchase, supply, maintenance, repair, tracking, retrieval and recycling of equipment on behalf of clients, transferred to Domiciliary Equipment Services (DES) when ILC came under Disability SA in 2006.

In 2012, the ILC is funded by the Department for Communities and Social Inclusion and provides information for the general community to help individuals improve their quality of life and maintain their independence.

⁸ State Records South Australia: ArchiveSearch database

⁹ Dolling, Mareeta: The History of the Independent Living Centre South Australia 1976 – 1999. November 1999 (Sourced at the Independent Living Centre)



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Education

In the latter part of the nineteenth century and the first 50 years of the twentieth century, a number of schools were established in South Australia for children with specific disabilities. These schools were operated by charitable institutions or voluntary organisations. The earliest South Australian school for children with disabilities was established in 1874 for children who were deaf or blind. The South Australian Institution for the Blind, Deaf and Dumb, later known as Townsend House provided standard education.

In 1898 the first school for children with an intellectual disability was established at Minda Home. The home had accommodation for 22 pupils. It opened with 10 children but soon filled to capacity. The children were cared for by Matron Elizabeth Barker and educated by Miss Edna Fox.

The South Australian Education Department first established a service for children with special needs in 1924, when it appointed Dr Constance Davey as a psychologist. She examined children who were considered 'retarded' educationally by testing them and observing their home conditions. She provided vocational and educational guidance and was often consulted by Townsend House and Minda. Dr. Davey worked hard to improve conditions for children with intellectual disabilities and established Opportunity Classes in schools.¹⁰

In the immediate post-war period, the major efforts of State Education were concentrated upon children with mild intellectual disabilities. In consequence, voluntary organisations were formed to provide special schooling for children with moderate and severe levels of intellectual disability and for children with physical disabilities. The rise of voluntary organisations represented a mobilisation of concerned citizens faced with enormous problems in the absence of any government effort. These organisations included:

- Crippled Children's Association of South Australia (Novita) Incorporated, established 1939
- Spastic Centre of SA (at the Children's Hospital), established 1946
- South Australian Oral School, established c1946
- South Australian Spastic Paralysis Welfare Association, established 1948.

In 1961 and 1962, deputations from both Boards of Townsend House and Minda to the Minister of Education, requested that the government take over the responsibility of educating the children due to deteriorating financial positions in both cases.

The South Australian Department of Education under Minister Peter Duncan introduced the *Education Act 1972* making it compulsory for all children between the ages of six and fifteen,

¹⁰ <http://history.dircsa.org.au/1900-1999/education/>



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including those with a severe disability to attend school to get an education. This meant that the Education Department had to take on responsibility for educating all children.

Supported residential accommodation – Strathmont Centre

Opened by His Royal Highness the Duke of Edinburgh on 24 March 1971, Strathmont Centre was conceived as a residential village providing 24-hour supported accommodation for children and adults who have intellectual disability. The original plan was for approximately 20 villas, each divided into four units of eight residents each, situated around a central courtyard and staffed with a trained 'Mental Deficiency Nurse' and a 'Home Assistant', who, between them would provide care, support and developmental training in order to maximise the potential of each individual client.

The special school within the Strathmont Training Centre was officially opened on 28 July 1971, and at this time was officially named Piddington Special School in recognition of the work of the former Chief Psychologist, Mr L.S. Piddington. The school had already been operating since the beginning of that year as Strathmont Special School.¹¹ The school accommodated the pupils from Hillcrest Hospital School and Glenside Hospital School, both of which were closed at the end of the 1970 school year. Piddington Special School continued until closure on 20 December 1991.

By 1974 there were eight Junior Special Schools and one Senior Special in the metropolitan area, as well as Special Schools within the institutions of Minda and Strathmont Centre. The Education Department employed approximately 150 special education teachers, who taught approximately 1,400 children.¹²

Chaplain Services

Disability Services has provided a Chaplain for the pastoral care of clients, staff and families since the late 1970s at the (former) Home for Incurables, then Julia Farr Centre, then Julia Farr Services, located at Fisher Street, Highgate Park, Adelaide. Prior to that, a series of visiting Chaplains and Ministers provided this care, including ecumenical services in the Chapel, funeral, wedding, baptism and memorial services, all of which are ongoing with the help of pastoral care volunteers.

Intellectual Disability Services Council

Following the release in 1981 of the reports of two inquiries - the Committee of Inquiry into the Rights of the Intellectually Handicapped and the Intellectually Retarded Persons Project set up by the SA Health Commission - Intellectually Retarded Services was absorbed into a new Agency, Intellectually Disabled Services Council (later, Intellectual Disability Services Council). In July 1982 the new agency was created as an incorporated body within the SA Health Commission.

¹¹ State Records South Australia: ArchiveSearch

¹² Ibid: <http://history.dircsa.org.au/1900-1999/education/>



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Intellectual Disability Services Council (IDSC) operated within the Department for Families and Communities, responsible to the Minister for Disability. IDSC delivered services through two arms: (1) Community Services, including the provision of services to regions, coordinated options, specialist intervention and early childhood services, and (2) Accommodation Services, which provided services to clients living in community houses, the residential facility at the Strathmont Centre,¹³ and Ru Rua Nursing Home (previously known as Estcort House), which operated between 1981 and 1989.¹⁴

The Council was to consist of nine members, among which were to be two parents of intellectually disabled people, together with persons with expertise in the needs of people with intellectual disability.

The objects of the new Council were:

- to develop policies for comprehensive, co-ordinated and accessible services for intellectually handicapped South Australians
- to promote community services and residential, as distinct from institutional, care where appropriate
- to encourage voluntary participation in provision of services
- to promote or assist in research in relation to intellectual disability and service and
- to identify needs, disseminate knowledge, promote employment of intellectually disabled people.

On 30 June 2006, the Board for the Intellectual Disability Services Council was dissolved and the Intellectual Disability Services Council was dissolved on 1 July 2006¹⁵ to become Disability SA along with Julia Farr Services and the Independent Living Centre.

The Children in State Care Commission of Inquiry (The Mullighan Inquiry)

In 2004, the Parliament of South Australia enacted legislation to establish a Commission of Inquiry into Children in State Care. A separate Inquiry was later established into Children on Anangu Pitjantjatjara Yankunytjatjara Lands (APY Lands). Commissioner Ted Mullighan presented the reports of the Children in State Care Commission of Inquiry and Children on APY Lands Commission of Inquiry to the South Australian Government on 31 March 2008 and the 30 April 2008.

The *Children's Protection (Implementation of Report Recommendations) Amendment Act 2009* was passed by the South Australian Parliament on the 1 December 2009 and assented to on the 10 December 2009. The Act is the Government's legislative response to key recommendations of the Inquiry. The Act includes changes to the child safe environment obligations of non-government and local government organisations including introducing

¹³ RDS 2005/16: Intellectual Disability Services Council and predecessor agencies p11-13

¹⁴ <http://history.dircsa.org.au/2000-beyond/leveda/>

¹⁵ State Records South Australia: ArchiveSearch



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criminal history assessments for people working with children. The changes commenced 1 January 2011.

Transition to Disability SA

In early May 2006, the Minister for Disabilities in South Australia announced wide-ranging disability reform. As a result, the separate agencies Julia Farr Services (JFS), Independent Living Centre (ILC) and Intellectual Disability Services Council (IDSC) were dissolved to form part of Disability SA under the Department for Families and Communities. One of its main objectives was integrated access to assistance for people who needed more than one service. Services provided by IDSC, ILC and JFS would be delivered by the same staff, but through Disability SA.

History of Domiciliary Care Services

Domiciliary Care SA commenced operation on 1 July 2007 when Metropolitan Domiciliary Care (MDC) was transferred from the Department of Health and became a statewide service on 1 July 2007 under the Department for Families and Communities.

Domiciliary Care SA provides services to people with reduced ability to care for themselves, assisting them to stay living in their own homes close to loved ones, family and local community. The service includes physical assistance, rehabilitation and social support for those in need as well as respite and support for their caregivers.

In 1969, the Commonwealth Government passed the Commonwealth Home Care and Paramedical Services Act. The South Australian Director General of Medical Services accepted a pilot scheme in 1970. As a result, the Western Domiciliary Care Service (WDC) commenced in 1971 and operated from a small house on the Mareeba Annexe of the Queen Elizabeth Hospital, Woodville. It was the first of four domiciliary care service units to establish. The other three were:

- Northern Domiciliary Care Service (NDC) commenced as a Para Domiciliary Service in June 1973 amalgamating much later with the Lyell McEwin Health Service in March 1983
- Eastern Regional Geriatric and Medical Rehabilitation Service (ERGMRS) began in 1974 as the community services arm of the Royal Adelaide Hospital, now known as Eastern Domiciliary Care (EDC) and
- Southern Domiciliary Care and Rehabilitation Service (SDC) commenced on 2 May 1974. Staff were based in a shed at the Repatriation General Hospital at Daw Park. A regional office was later established at Brighton. In August 1980, SDC became an incorporated body under the *South Australian Health Commission Act 1976*. During 1991, SDC moved to Park Holme.

The four domiciliary care units – Western, Northern, Eastern and Southern - were amalgamated on 1 July 2002 under the new Metropolitan Domiciliary Care (MDC). MDC operated between 2002 and 2007 as an incorporated health unit under the *South Australian Health Commission Act 1976*. During this amalgamation, Therapy Solutions continued as the Clinical Services Unit.



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In 2003 MDC began introducing some major improvements to its services:

- the Metropolitan Access Team as a central referral contact point for all new clients
- eight locally responsive, multi-disciplinary client service areas across Adelaide
- a Consumer Participation Strategy to collect and respond to feedback on client services
- an Aboriginal Strategy for service development
- new service units for clients from culturally and linguistically diverse backgrounds
- the Financial and Corporate Services Unit to administer corporate services, financial management and risk management, and
- an Organisational Development Unit to provide a focal point for policy development, planning, consumer participation and organisational improvement.

Domiciliary Equipment Services

An agreement in 1995 with the South Australian Health Commission established the Domiciliary Care Equipment Services (DES) and it commenced operations 1 March 1996. DES provided statewide services to the Department of Veteran Affairs under the Commonwealth Rehabilitation Appliance Program until 2011.

DES provides hire, sales, delivery and installation of equipment to help people to live independently. Equipment is provided to individuals, government and non-government organisations. In excess of 40,000 clinician prescriptions per year are filled for clients.

The Free Limbs Scheme (FLS) was introduced by the Commonwealth Government in 1973 and was administered by the Commonwealth Department of Veterans' Affairs. On 1 September 1990 the Free Limbs Scheme was replaced by the Artificial Limbs Scheme (ALS) which was also administered by the Department of Veterans' Affairs. The ALS introduced a patient contribution except for pensioners and certain concessional beneficiaries who receive free treatment. It also introduced tests to prevent premature replacement of artificial limbs. Responsibility for the ALS passed to the South Australian Health Commission in March 1995, and was subsequently renamed the South Australian Amputee Limb Service (SAALS). Responsibility for the service passed to Domiciliary Care in 2003.

The Metropolitan Equipment Scheme (MES) provides access for older people and younger people with a disability, to a range of basic equipment, such as shower chairs and walking frames, and more specialised items such as powered wheelchairs. Assistance with approximately 5,000 home modifications per year, including the installation of hand rails and steps or, in some circumstances, more complex modifications such as the removal of a bath is also available within the scheme.

Some of the items that can be provided include:

- walking aids
- powered wheelchairs
- electric beds
- wigs
- medical footwear, and



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- grab rails.

Therapy Solutions

The Therapy Solutions business unit within Domiciliary Care Services was formed in 1995 during a restructure of Northern Domiciliary Care. It was formed to provide a range of allied health services to hospitals, community health services, nursing homes and day centres.

History of Disability SA (formerly Disability, Ageing and Carers)

Disability SA manages the distribution of funding from Treasury appropriations, the entry point for client intake and assessment, the HACC funding arrangements and the management of client funds on their behalf. Disability SA also is responsible for programs for people with exceptional needs.

National Disability Agreement – Australian Government funding

In 2008, the Council of Australian Governments (COAG) agreed to a new National Disability Agreement to improve and expand services for people with disability, their families and carers. On 29 November 2008, COAG met to discuss the new financial framework and specific purpose payment reforms, and the National Disability Agreement came into effect on 1 January 2009. The Agreement provides the framework for the provision of government support for people with disability.¹⁶

From 1 January 2009 to 30 June 2015, the Commonwealth Government will continue to provide around \$7.6 billion in funding to the State and Territory Governments for increased and improved specialist disability services such as supported accommodation, targeted support and respite.

On 4 May 2008 the Prime Minister and the Federal Minister for Families, Housing, Community and Indigenous Affairs jointly announced the investment of capital funds for supported accommodation. The funding has been distributed to State and Territory Governments on a potential population basis, and is used to establish new supported accommodation facilities for people with disability.

The transfer of administrative responsibilities of disability assistance, targeted support and transition support services, was formalised in the signing of bilateral agreements with each State and Territory Government.

A Bilateral Commonwealth / State Disability Agreement was reached between the Australian Government and South Australian Government to provide for action between the Commonwealth and the State on strategic disability issues within the broad national framework. The Minister for Disability in South Australia is a signatory to the agreement.¹⁷

¹⁶ Department of Families, Housing, Community Services and Indigenous Affairs website:
http://www.fahcsia.gov.au/sa/disability/progserv/govtint/Pages/policy-disability_agreement.aspx

¹⁷ Ibid; Bilateral Agreement and Schedules



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HACC in South Australia

In South Australia, the State Government provides 38% of Home and Community Care (HACC) program funding with the remainder provided by the Australian Government. The program is administered by Disability SA (formerly Disability, Ageing and Carers) through the Department for Communities and Social Inclusion, and supports 96,000 people in South Australia.

The HACC program aims to:

- provide a comprehensive, coordinated and integrated range of basic maintenance and support services for frail older people, people with a disability and their carers
- support these people to be more independent at home and in the community, thereby enhancing their quality of life and preventing their premature or inappropriate admission to long term residential care, and
- provide flexible, timely services that respond to the needs of these people.

HACC services may include personal care, domestic assistance, community nursing, allied health services, delivered meals, home maintenance and modification services, respite care, social support and transport.

Exceptional Needs Unit (ENU)

The ENU, through the Management Assessment Panel, was established by Dame Roma Mitchell in 1987 for people who require multiple service responses to address their exceptional or high and complex needs which are currently unmet or are unable to be met by the existing service system. ENU aims to achieve sustainable independent or supported living in the community for people with exceptional or high and complex needs, including those with social and functional impairment through homelessness.

Now part of the Disability SA Division, ENU comprises three separate programs:

- Supported Residential Facilities Intake & Support
- Homelessness Support Program, and
- Management Assessment Service.

Each program has responsibility for responding to vulnerable populations with exceptional needs who require long-term support from a range of services across Government and non-Government sectors, to live in the community.¹⁸ The Exceptional Needs Program is a “no-retreat” program, until death, aimed at stabilising and transitioning clients.

¹⁸ Department of Families and Communities website: http://sacommunity.org/org/201617-Exceptional_Needs_Unit_Department_for_Families_%2526_Communities



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The recommendations of the K Strangways Inquiry¹⁹ and Recommendation 247 of the Royal Commission into Aboriginal Deaths in Custody underpin the purposes of the ENU.

Seniors and Aged Care

Previously the responsibility of the (former) Disability, Ageing and Carers Branch (DAC), the following services were transferred to the Department of Health and Ageing on 1 January 2012:

- the South Australian Seniors Card which entitles card holders to a range of discounts and concessions
- the Aged Care Assessment Program, funded by the Commonwealth Government, which determines eligibility for many aged care services, and
- assistance for retirement village residents, committees and administering authorities through providing information and advice on matters relating to retirement villages, offering mediation and conciliation of disputes.

In October 2011, administrative change under new Premier Jay Weatherill created the new Department of Community and Social Inclusion (DCSI) under Minister Ian Hunter MLC.

In September 2012, further administrative change saw DCSI comprise the following Divisions, effective as at 1 November 2012:

- Disability SA
- Disability and Domiciliary Care Services
- Policy and Community Development
- Financial Services
- Social Inclusion
- Youth Justice, Community Engagement and Organisational Support
- Housing SA.

CHSSA – Current Role and Functions

DCSI consists of Divisions. This RDS concerns two Divisions of DCSI:

- Disability SA (formerly Disability, Ageing and Carers)
- Disability and Domiciliary Care Services (formerly two separate Directorates of the former Division, Community Home & Support Services SA. These Directorates were (a) Disability Services and (b) Domiciliary Care Services).

Disability SA

¹⁹ http://www.courts.sa.gov.au/courts/coroner/findings/findings_2000/strangways.finding.htm



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Disability SA is a Division within DCSI. It leads strategic planning, policy development, funds management, intake and resource allocation for the disability sector in South Australia.

Disability SA supports and administers a range of programs to assist South Australians with disabilities or exceptional needs. The South Australian Home and Community Care (SA HACC) program enables various government and non-government organisations to deliver in-home support services to frail and older people, people with disability and their carers.

One of the highest priorities for the Disability SA Division is to create an integrated community care and support system that is easy to access, ensures the best match of clients to services, and provides for diversity in the services available to people with disability and their carers.

Disability Services

Disability Services is part of the Division of Disability and Domiciliary Care Services within DCSI. It provides a range of specialist services for people with disabilities including information, community services, accommodation services and specialist allied health services. Regional offices are located throughout the State from Mount Gambier to Ceduna.

Disability Services assist people with disability and their carers who are eligible. These include:

- children under 5 years of age with a significant global developmental delay
- children and adults with intellectual disability
- children or adults diagnosed with Autism Spectrum Disorders (Autism or Asperger Syndrome), and
- adults with an acquired brain injury; and adults with a physical or neurological condition that cannot be resolved with medical treatment.

To be eligible for services the person must satisfy one or more of the above criteria, experience major difficulties with managing daily activities and need from the support of a specialist disability agency. The person must be under 65 when first referred and the disability must be permanent or likely to be permanent.

Disability Services also provides, or help people access, a range of specialist services such as:

- early childhood services, and developmental services for children and young people
- service assessment, planning, coordination and advice
- support in the family home or a person's own home
- support with personal care
- support for carers, including foster carers (for example advice, training, respite care, emergency support)
- support and advice to manage difficult behaviour
- fully supported live in accommodation services
- supported day-time activities



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- access to equipment and aids, such as wheelchairs and ramps
- therapy services, including physiotherapy, occupational therapy, speech pathology, music therapy, psychology, and
- specialist clinics and other specialist community health support services.

Disability Services also manage clinics at Modbury, Strathmont and Highgate, comprising the Centre for Disability Health, accredited by the Royal Australian College of General Practitioners. Disability and Domiciliary Care Services is the lead agency for supporting vulnerable and isolated people to prepare for and cope with extreme weather events. It does this through Telecross REDi and Red Cross volunteers. Emergency procedures are activated to ensure the safety and wellbeing of those registered.

Approximately 600 new clients with disabilities are registered for services every year.

Domiciliary Care

Domiciliary Care Services is part of the Division of Disability and Domiciliary Care Services within DCSI. Domiciliary Care provides a range of services to people with reduced ability to care for themselves assisting them to stay living in their own homes close to loved ones, family and local community. The service includes physical assistance, rehabilitation and social support for those in need as well as respite and support for their caregivers.

Domiciliary Care mainly assists frail people over 65 years of age, but younger people with a disability can also qualify for support.

Through its primary health care focus, Domiciliary Care helps to promote independence, injury and illness prevention for over 13,000 people across Adelaide²⁰. They seek to prevent unnecessary admission into hospitals or residential care, providing significant savings to the South Australian health system.²¹

Domiciliary Care also manages:

- Adelaide Aged Care Assessment Team (now with SA Health)
- Domiciliary Equipment Services
- Therapy Solutions

and suites of programs targeted at sections of the community in need eg. the Dementia Day Program which is conducted at Woodville, Elizabeth, Park Holme and Hampstead. It has operated since the earliest days of Domiciliary Care and includes respite and overnight respite care.

Client and Service Profile

²⁰ At the time of writing, 2012. www.sa.gov.au/DomiciliaryCare

²¹ <http://www.sa.gov.au/disability>



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At Domiciliary Care, 88% of clients are over the age of 65. This percentage is expected to increase as the population continues to age. South Australia currently has the oldest age profile of any Australian State or Territory. More than 50% of Domiciliary Care clients have a chronic illness. The most common are arthritis, diabetes, high blood pressure, and cardiovascular disease. Each of these illnesses has significant implications for the broader health system, community and aged care. The surveillance and management of these illnesses allows more people to stay at home rather than going to hospital.

Domiciliary Care has started the consultation and scoping phases of its plan to expand its client base - from metropolitan Adelaide to the whole of South Australia. In 2008-09, Domiciliary Care provided services to 12,015 clients, 47% of these clients received home help and 52% received allied health services.²²

Domiciliary Care currently has eight metropolitan client service areas:

- Adelaide
- Burnside
- Charles Sturt
- Marion
- Onkaparinga
- Playford
- Port Adelaide, and
- Salisbury.

DCSI Structure Description

The records of two Divisions of DCSI are covered in this RDS – (a) Disability SA, and (b) Disability and Domiciliary Care Services. *(See also Organisation Charts at Attachment 1).*

(a) **Disability SA** central operations are based in the Riverside Building, North Terrace, Adelaide. The Division comprises four Directorates:

- Intake, Assessment & Resource Allocation (IARA)
- Policy and Planning
- Funds Management
- NDIS²³ Reform.

²² Domiciliary Care SA: Annual Report 2008- 2009

²³ National Disability Insurance Scheme



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The IARA business unit has the adult community services teams reporting to it, including the country north and south regions which have both adult and children clients.

(b1) **Disability Services** primary offices are at Fisher Street, Highgate Park. Disability Services, comprise the following business units²⁴:

- Child and Youth Services, incorporating metropolitan child and youth services
- Specialised Services and Clinical Governance
- Disability Services South
- Disability Services North
- Disability Services Customer and Business Support.

Each region comprises teams that vary depending on the location (ie metropolitan or country). Generally there is a regional manager, team managers, senior service coordinators, service coordinators, senior practitioners and, in child and youth teams only, therapists.

(b2) **Domiciliary Care Services** has primary offices at Richmond Road, Netley. It comprises the following business units: Domiciliary Equipment Service, Therapy Solutions, Client Services, Access2Home Care and Business Services.

Predecessor Agencies

Disability Services (part of the Division of Disability and Domiciliary Care Services):

- GA 646 Children’s Welfare and Public Relief Department, 1927 – 1966 (part)
- GA 155 Intellectually Retarded Services, 1964 – 1982
- GA 2322 Strathmont Special School later Piddington Special School, 1971 - 1991
- GA 156 Intellectually Disabled Services Council, later Intellectual Disability Services Council (IDSC), 1982 - 2006
- GA 1918 Disability SA, 2006 – 2011.

Domiciliary Care Services (part of the Division of Disability and Domiciliary Care Services):

- GA 1168 Southern Domiciliary Care and Rehabilitation Service, 1974 - 2002
- GA 1281 Domiciliary Care SA, formerly Metropolitan Domiciliary Care, 2002 – 2011.

Successor Agencies

There are no successor agencies.

²⁴ As of 2012, following the restructure, regionally-based offices have changed



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Legislation

Legislation which the Agency administers is as follows:

- *Disability Services Act 1993* (currently under review)
- *Supported Residential Facilities Act 1992 and Regulations 2009 (SA)*
- *Carers Recognition Act 2005*

Relevant Legislation which the Agency does not administer is as follows:

- *Adoption Act 1988*
- *Aged and Infirm Persons Property Act 1940*
- *Bail Act 1985*
- *Child Protection Review (Powers and Immunities) Act 2002*
- *Children's Protection Act 1993*
- *Children's Services Act 1985*
- *Commission of Inquiry (Children in State Care and Children on APY Lands) Act 2004*
- *Coroner's Act 2003*
- *Criminal Law Consolidation Act 1935 (SA)*
- *Disability Discrimination Act*
- *Emergency Management Act 2004*
- *Family and Community Services Act 1972*
- *Freedom of Information Act 1991*
- *Guardianship and Administration Act 1993 (SA)*
- *Home and Community Care Act 1985*
- *Immigration (Guardianship of Children) Act 1946 (Commonwealth)*
- *Therapeutic Goods Act 1989 and Regulations 1990*
- *Young Offenders Act 1993*
- *Youth Court Act 1993*

Context of the Records Covered by the Schedule

Coverage of RDS 2011/27

This RDS applies to a combination of active and inactive operational records controlled by Disability SA Division of DCSI, and Disability and Domiciliary Care Services Division of DCSI, (and their predecessor agencies) since c1878 (records of the meetings of the Board of the Home for Incurables). It is intended to comprehensively cover records in the physical and digital environments, and at all locations.

RDS 2011/27 intends to cover all records with previous coverage under expired Intellectual Disability Services Council (and predecessor agencies) RDS 2005/16.



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It also covers:

- GRS 12270 – 1964–2006 – Client files relating to deceased clients, alphabetical series – Disability SA and predecessor agencies
- Part of GRS 13117 – 1979–2012 - Corporate files, numerical series with ‘DFC’ prefix – Department for Families and Communities.

RDS 2011/27 also provides coverage for those records for which (the former) CHSSA disposed of under RDS 2000/13 - Community Health and Special Needs Services. (Approval to use RDS 2000/13 expired on 30 June 2012).

Related Series Affected by RDS 2011/27

There are no related series affected by this RDS.

Complementary Schedules to RDS 2011/27

- GDS 27: Records Required for Legal Proceedings Relating to Alleged Abuse of Former Children Whilst in State Care 1st ed. (qualified by a freeze on destruction until 31 December 2020).

Existing Disposal Schedules Superseded by RDS 2011/27

RDS 2011/27 intends to cover all records with previous coverage under expired Intellectual Disability Services Council (and predecessor agencies) RDS 2005/16.

RDS 2011/27 also provides coverage for those records for which CHSSA had approval to use RDS 2000/13 for Community Health and Special Needs Services (approval to use the RDS expired on 30 June 2012).

Records Structure within Disability SA, and Disability and Domiciliary Care Services

The records across these two Divisions of DCSI are separate and independent collections relevant to the business of each Directorate. Most corporate files are managed in an EDRMS (currently Objective), the electronic document and record management system available in most business units. It is anticipated that all business units will have access to Objective by the end of 2014. Client records are predominantly managed in independent systems. Further details are provided below in “Broad Description and Purpose of the Records”.

Broad Description and Purpose of the Records

The records of the Disability SA Division and the Disability and Domiciliary Care Services Division include databases and complex series of records which have significance for South Australian citizens’ personal health. The records supporting these are operational and corporate in nature and include simple series eg. facilitative arrangements for meetings, managed in administrative files.



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Databases

The agency utilises two client-centred databases:

- Centralised Client Management System (CCMS) (Item 2.2.16) – which keeps ongoing longitudinal data on each disability client. It was created in November 2003 and used by APN, BIOC, IDSC and Julia Farr Services. Since July 2009, it has been unsupported by the external vendor; however the agency has internal support to ensure accessibility. The system will be replaced in the future with implementation plans in place for a new system in 2013
- Client Management Engine (CME) – (Item 2.2.14) which keeps ongoing longitudinal data on Domiciliary Care clients, including clinician activity, statistics, assessments, client social history and support plans.

It also utilises five other major databases:

- An Electronic Document and Records Management System (EDRMS) - Objective – which keeps administrative and operational records for accountability and compliance (covered by GDS 30 v2 (as amended))
- Funded Grants Management System (FGMS) (Item 5.4.2) – which manages funding releases, budget allocations and acquittals
- Client Brokerage Management System (CBMS) (Item 2.1.3) - is essentially a contracting database, linked to CCMS. It is a doc.net SQL database on Foxpro
- Request (Order) Contract Reconciliation (RCR) system (Item 2.1.4). This application allows service providers to upload brokerage invoice data for reconciliation and payment. This system will replace the CBMS system in the future. It is an Oracle database managed through cloud technology
- Access Point System (APS) (Item 2.2.15) - is used to support Access to Home Care (A2HC) Call Centres at Netley and Angaston for the assessment, allocation and referral of ageing clients. It is an Oracle database managed through cloud technology.

For the preceding 15 years, Disability SA and Domiciliary Care managed client information on the IDS Client Information System, various MicroSoft Access databases, and hard copy files. Data from the IDS Client Information System has not been migrated.

Most common administrative records for these Divisions, that have disposal coverage under the General Disposal Schedule 30 v2 (as amended) for State Government Agencies, are now being captured in Objective EDRMS. Most operational records are kept in a myriad of purpose-designed Access databases, shared and non-shared drives. This RDS is intended to cover them. At present, these databases are supported by an officer whose position is



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dedicated to that purpose. However, all these databases will be superseded by the new integrated database planned for implementation in 2013.

Client files

Official client records have been housed in hard copy folders since the days of the Home for Incurables. Whilst client data and information is stored in various databases, the paper-based client file retains the complete record of care and is the reliable complete repository of information for any client. A hard copy client file (and database entry) is created by Disability SA (Intake and Assessment Resource Allocation unit) once eligibility is determined. The hard copy file is then forwarded to Highgate Park or the relevant regional office for the client location. From there, the nominated Service Coordinator will manage care and service plan and the delivery of services to the client.

Hard copy files are also created for client trust accounts, finances of self-funded clients and funding approvals. These files do not contain summaries of care, support plans or clinical records.

Domiciliary Care client files have also always been managed in hard copy files and accepted as the official record. Client data and information is also stored in two databases, Access Needs Identification (ANI) and Client Management Engine (CME) databases. ANI is a screening assessment tool while CME is the client database which allocates unique identifiers to each Domiciliary Care client.

Client files are created by each of the Client Service Area teams across 6 sites, Service Coordinator manage services provided to clients and the related files.

Functions and Activities Documented by the Records

The primary functions of Disability SA Division and Disability and Domiciliary Care Services Division are to provide advice on home care and support for older people, people with disability and their carers. To reflect this responsibility the following functions and activities have been used in the RDS:

- **ALLIED HEALTH PROVISION**
 - Contract management
 - Diagnostic imaging
 - Operational policy and procedures
 - Project management
 - Workbooks and journals
- **CLIENT SUPPORT**



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Brokerage

Client information management

Client trust funds

Complaint investigation

Contract management

Incident management

Liaison

Meetings

Needs assessment

Operational policy and procedures

Program management

Project management

Respite allocation

Statistical reporting

Volunteer management

Workbooks and journals

- EDUCATION

Contract management

Education delivery

Operational policy and procedures

- EQUIPMENT MANAGEMENT

Contract Management

Equipment provision

Home modifications



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Operational policy and procedures

Program Management

- GOVERNANCE

Committees

Compliance

Contract management

Grant funding provision

Investigations

Liaison

Operational policy and procedures

Reporting

- SUPPORTED ACCOMMODATION

Client activity reporting

Client information management

Contract management

Inspections

Operational policy and procedures

Project management

Statistical reporting.

Arrangement of the Records

There are a number of combinations for the arrangement of records across Disability SA Division, and Disability and Domiciliary Care Services Division. These include prefixed annual single number, client surname name number and single number order. The housing of files includes manila folders, suspension folders and lever arch folders.

DCSI active files are progressively being captured into Objective. It is not intended to capture closed and inactive files.



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- **Prefixed annual single number**

Corporate files eg DCSI/12/12345 records managed in EDRMS

- **Prefixed single number**

Corporate files eg DFC/12345

Hard copy files inherited from predecessor agencies continue to utilise a variety of file covers which bear the identifying predecessor Department of Families and Communities. More recently, DCSI has replaced DFC as the prefix. However, many files with the former DFC prefix remain active and open files.

- **Client surname**

Exceptional Needs Unit Client Files eg. Smith John

- **Client surname number**

Disability Services Client files eg Smith John/1234

- **Single number client name**

Domiciliary Care Client files eg 12345 – John Smith

- **Single number**

Domiciliary Care client files prior to single number client name arrangement eg 123456.

Initially, Julia Farr Services and IDSC used consecutive client numbers according to their admission date. Later, the numbering changed with the introduction of CCMS and electronic requirements.

Because clients can be either disability clients, or domiciliary clients (but not both), separate client files are created.

Agency Creating the Records

Disability SA or Disability and Domiciliary Services or their predecessor agencies created the records covered by this RDS.

Agency Owning or Controlling the Records

Disability SA or Disability and Domiciliary Services owns and controls the records covered by this RDS.



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Date Range of the Records

Records Date Range: c1878 to **Ongoing**

Volume of the Records

The volume of records across all sites at Disability SA Division and Disability and Domiciliary Care Services Division is estimated as follows:

- Disability Services – 2500 linear metres, including 13 linear metres of x-rays
- Domiciliary Care Services – 850 linear metres
- Disability SA – 300 linear metres

The volume of Disability SA and Disability and Domiciliary Care Services records held offsite is as follows:

- Fort Knox - 2442 linear metres
- State Records – 127 linear metres

Estimated annual accumulation rate is 150 linear metres.

It is estimated that 95% of all records housed at the agency across all sites, or at secondary storage are client files.

Special Custody Requirements

There are no special custody requirements.

Special Storage Requirements

There are no special storage requirements.

Issues Not Mentioned Previously

Paper-based Client files capture complete records of delivered services. Various other data and records in databases capture the same information, but generally for specific purposes. For example, the Annual Client Files (Item 2.1.5) managed by Disability SA are kept specifically for the purpose of funding. This might include possible cost-sharing with another client.

Remaining consistent with statutory limitations and GDS 30 v2 (as amended), contracts and agreements not under seal have recommended temporary retention of 8 years after action completed. Those under seal have recommended temporary retention of 17 years after action completed.



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Comments Regarding Disposal Recommendations

Permanent Records Rationale

Records deemed to be permanent are those which have continuing value to the State or are of national significance. The appraisal objectives adopted by State Records of South Australia for identifying records of permanent value relevant to the records covered by this Schedule are:

***Objective 1:** To identify and preserve official records providing evidence of the source of authority, foundation and machinery of the South Australian Government and public sector bodies.*

The records of Disability SA, and Disability and Domiciliary Care Services Divisions which meet this objective include:

- Historical records documenting the establishment of predecessor agencies, including subsequent proceedings of meetings. Includes the Home for Incurables, and Board proceedings of Julia Farr Centre, Julia Farr Services, Independent Living Centre, Southern Domiciliary Care & Rehabilitation Service, Metropolitan Domiciliary Care and IDSC. Includes photographs of events such as the Centennial Garden Party. (Item 5.1.2)
- Records documenting accreditation of clinics, medical systems and processes with the Royal Australian College of General Practitioners. Includes applications, processes of accreditation assessment through the accrediting organisation, audit reports and corrective actions. (Item 5.2.2)

***Objective 2:** To identify and preserve official records providing evidence of the deliberations, decisions and actions of the South Australian Government and public sector bodies relating to key functions and programs and significant issues faced in governing the state of South Australia.*

The records of Disability SA, and Disability and Domiciliary Care Services Divisions which meet this objective include:

- Records documenting the allocation of brokerage funded support to providers where alternative mainstream services cannot be negotiated. (Item 2.1.1)
- Client records documenting advocacy and legal services, compensation, intervention orders, grievances or other matters which been escalated to Ministerial notice. (Item 2.2.2)

***Objective 3:** To identify and preserve official records providing evidence of the legal status and fundamental rights and entitlements of individuals and groups.*

The records of Disability SA, and Disability and Domiciliary Care Services Divisions which meet this objective include:



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- Records documenting inquiries into complaints made to the Health and Community Services Complaints Commissioner and the Public Advocate relating to staff conduct. (Item 2.4.1)
- Records documenting coronial investigations resulting from a death in custody. Includes notification and reporting to the Coroner and South Australia Police, directions to enter, search warrants, legal advice, statements of evidence, insurer instructions, reports and briefings to Executive and correspondence with the Coroner's Office. (Item 5.5.1)

Objective 4: *To identify and preserve official records substantially contributing to the knowledge and understanding of the society and communities of South Australia.*

The records Disability SA, and Disability and Domiciliary Care Services Divisions which meet this objective include:

- Historical records documenting services and support provided to clients, including admission registers, day journals, resident books, pharmaceutical records, patient records, Matron and Nurse books and visitors books. (Item 2.2.1)
- Records documenting the purpose, development and content of specialised programs and services for domiciliary and disability clients, including children. Includes – but is not limited to – programs aimed at transition, palliative care, rehabilitation, dementia, home care, recreation, vocation. Also includes – but is not limited to – services for podiatry, therapy, locums and continence. (Item 2.11.1)

Objective 5: *To identify and preserve official records that contribute to the protection and well being of the community or provide substantial evidence of the condition of the State, its people and the environment, and the impact of government activities on them.*

The records of Disability SA, and Disability and Domiciliary Care Services Divisions which meet this objective include:

- Client records documenting advocacy and legal services, compensation, intervention orders, grievances or other matters which have been escalated to Ministerial notice. (Item 2.2.2)
- Records of liaison with external stakeholders from the disability sector, for contributions to the development of the Human Rights framework for South Australia. Includes records of research, proposals, reports to the Human Rights Commission, and auditing against the Articles of the Commission. (Item 5.6.1)

Other records of continuing value

Records which contribute to longitudinal studies in medical science, or which document undiagnosed conditions are also recommended for permanent retention. In discussion with research and medical personnel at the agency, it was revealed that many genetic disorders, intellectual disabilities and dementia are not yet scientifically identified or sufficiently researched. Client records which include these conditions, or have indeterminate diagnoses or brain injury as a child, where continued research may establish medical fact and precedent, have been recommended for permanent retention. (Item 2.2.4)



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The database “Tracker System” which operates at the specialised wheelchair design and manufacturing centre at Woodville, not only tracks the allocation of wheelchairs and their maintenance history, it also provides historical information regarding the technology used, and increasing capability, power supplies and fitness-for-purpose of these machines. (Item 4.2.2)

Temporary Records Rationale

Temporary records are those considered not to have a continuing value to Disability SA, and Disability and Domiciliary Care Services Divisions, the parent Department for Communities and Social Inclusion, the State Government nor to the community. Records documenting core business activities in this Schedule that are considered of temporary value have short, or less-than-permanent terms before expiry.

These include:

- X-rays including those where they are not referenced to any client (Item 1.2.1) and x-rays relating to specific clients who are deceased, and who had no significant medical issues. (Item 1.2.2)
- Activities where the retention decision was guided by complementary temporary disposal actions in GDS 30 v2 (as amended) for example Operational Policy and Procedures. (Items 1.3, 2.10, 3.3, 4.4, 5.7 and 6.5).
- Facilitative project records including draft agreements, unsuccessful proposals, submissions and registrations of interest, advice and draft letters, public reference documents and project variations. (Items 1.4.2, 2.12.3 and 6.6.3)
- Funding records that are statistical, rather than relating to individual clients, where the disposal action is recommended to be 17 years to allow for any agreements under seal. (Individual client files are retained for 30 years). (Item 2.1.6)
- Client records for children and adults, and those that are discontinued series. (Items 2.2.6 - 2.2.10)
- Client records which accompany the client when they attend activities at Strathmont Centre or other locations, or attend any outings. These are kept only 10 years, as the summary information is stored on the official client file. (Item 2.2.25)
- Databases, where most have continuing value, but some eg Item 2.3.5 which manage financial transactions only, are recommended for a shorter retention (7 years).
- Where necessary, disposal has reflected RDS 2000/13 Community Health and Special Needs Services. Video recordings of clients have been separately listed to follow RDS 2000/13. (Item 2.2.9)



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- Records of daily care at residential units including Strathmont are retained only for 10 years as details are kept in client files. These mostly concern handover, ward diaries and 24 hour reports. (Item 6.1.1)

Other Disposal Considerations

Children of the State Commission of Inquiry Report, specifically Recommendation 52 has been taken into consideration. This Recommendation specifically relates to children in State care, in this instance Families SA and therefore does not have a direct bearing on the client files of Disability SA, and Disability and Domiciliary Carer Services.

Limitations of Actions Act 1936 Part 7 Section 45 has been taken into consideration for retention of client files relating to people under legal disability.

Disposal Recommendation Effect on Related Records

There are no related records affected by the disposal recommendations in this RDS.

Alternative Record Formats

Disability SA, and Disability and Domiciliary Care Services Divisions have approximately 13 linear metres of x-rays. (Item 1.2.1 and 1.2.2).

Microfilm records are also part of the historical collection in the Family and Friends Museum. (Item 5.2.1) However, the hard copy record remains the official record.

Impact on Native Title Claims

There is no discernible relevance to Native Title Claims.

Aboriginal Considerations

The determinations within *RDS 2011/27* are consistent with Recommendation 21 of the *National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*.

The principles outlined in *GDS 16*, relating to Native Title claims, have also been considered in the development of this Schedule.

RDS 2011/27 meets all cultural, historical, legal and administrative requirements.

All documents considered relevant to native title in South Australia must be checked for actual relevance with the Native Title Section of the Crown Solicitor's Office before being disposed of.



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Scope Note

Records Covered by this Schedule

RDS 2011/27 applies to the operational records of Disability SA, and Disability and Domiciliary Care Services Divisions of DCSI. It applies to a combination of active and inactive operational records controlled by Disability SA Division of DCSI, and Disability and Domiciliary Care Services Division of DCSI, (and their predecessor agencies) since c1878 (records of the meetings of the Board of the Home for Incurables). It is intended to comprehensively cover records in the physical and digital environments, and at all locations.

RDS 2011/27 intends to cover all records with previous coverage under expired Intellectual Disability Services Council (and predecessor agencies) RDS 2005/16. It also covers part of GRS 13117 – 1979–2012 - Corporate files, numerical series with ‘DFC’ prefix – Department for Families and Communities.

It also covers:

- GRS 12270 – 1964–2006 – Client files relating to deceased clients, alphabetical series – Disability SA and predecessor agencies
- Part of GRS 13117 – 1979–2012 - Corporate files, numerical series with ‘DFC’ prefix – Department for Families and Communities.

RDS 2011/27 also provides coverage for those records for which (the former) CHSSA disposed of under RDS 2000/13 - Community Health and Special Needs Services. (Approval to use RDS 2000/13 expired on 30 June 2012).

How to Apply this Schedule

Use in conjunction with GDS

This Schedule should be used in conjunction with **GDS 30 v2**, as amended, or its successor. Cross-references to the **GDS 30 v2** are included in this Schedule where appropriate.

To identify records that may be potentially relevant to native title claims, please refer to guideline *Identifying documents which may be relevant to Native Title* attached to **GDS 16**. Where records sentenced for temporary retention are identified as having potential relevance to a native title claim, they need to be retained until 31 December 2024.

To identify records that may be potentially relevant to *Legal Proceedings or Ex Gratia Applications Relating to Alleged Abuse of Former Children Whilst in State Care*, please refer to **GDS 27**. Where records sentenced for temporary retention are identified as having potential relevance, they need to be retained until 31 December 2020.



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Use in conjunction with, or complementary to, other RDS

This Records Disposal Schedule does not complement any existing schedules. See additional information regarding GDS 27 relevance on page 45.

Other RDS superseded by RDS 2011/27

RDS 2011/27 intends to cover all records with previous coverage under expired Intellectual Disability Services Council (and predecessor agencies) RDS 2005/16.

RDS 2011/27 also provides coverage for those records for which CHSSA had approval to use RDS 2000/13 for Community Health and Special Needs Services (approval to use the RDS expired on 30 June 2012).

Re-sentencing of records where schedules are superseded or particular entries within a schedule are superseded

RDS 2011/27 intends to cover all records with previous coverage under expired Intellectual Disability Services Council (and predecessor agencies) RDS 2005/16. Records already sentenced against this RDS may require re-sentencing.

Records excluded from RDS 2011/27

There are no records excluded from cover by this RDS.

RDS 2011/27 applies to records in all formats, including databases and other electronic records. CHSSA are required to ensure that records remain accessible for the duration of designated retention periods.

Interpretation of the Schedule

Minimum retention periods

Retention periods for temporary records shown in RDS 2011/27 are minimum retention periods for which records need to be retained. It is at the discretion of Disability SA, and Disability and Domiciliary Care Services Divisions as to whether records are kept for longer than the minimum period.

Acronyms

- ACROD – Australian Council for Rehabilitation of the Disabled
- ALS - Artificial Limbs Scheme
- ANI – Assessment Needs Investigation
- APN – Adult Physical and Neurological (Options Coordination)
- APY Lands - Anangu Pitjantjatjara Yankunytjatjara Lands
- ASSIST – Adult Specialised Intervention Support Services Team database
- BIOC – Brain Injury Options Coordination



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- CBMS -Client Brokerage Management System
- CCMS - Centralised Client Management System
- CME - Client Management Engine
- COAG - Council of Australian Governments
- COMPASS - Community Participation And Support Service (COMPASS)
- CT/CAT - Computerised (axial) tomography scans
- CYSS - Child and Youth Specialist Services
- DAC - Disability, Ageing and Carers Branch
- DCSI - Department of Community and Social Inclusion
- DECD - Department of Education and Child Development
- DES - Domiciliary Care Equipment Services
- DSP – Disability Support Pension
- EDC – Eastern Domiciliary Care
- EDRMS -Electronic Document and Records Management System
- ENU - Exceptional Needs Unit
- ERGMRS - Eastern Regional Geriatric and Medical Rehabilitation Service
- ESIS – Equipment Service Information System
- FGMS - Funded Grants Management System
- FLS - Free Limbs Scheme
- GA – Government Agency
- GDS – Government Disposal Schedule
- GRS – Government Record Group
- GRS – Government Record Series
- HACC - Home and Community Care
- HSP - Homeless Support Program
- IDSC - Intellectual Disability Services Council
- ILC - Independent Living Centre
- ILEC – Independent Living Equipment Contractor
- ILEP - Independent Living Equipment Program
- IARA – Intake, Assessment & Resources Allocation
- IRS – Intellectually Retarded Services
- JFS - Julia Farr Services
- MDC - Metropolitan Domiciliary Care
- MES - Metropolitan Equipment Scheme
- MLC – Member of the Legislative Council



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- MRI - Medical resonance imaging
- NASA – Nursing Agency of South Australia
- NDIS Reform – National Disability Insurance Scheme Reform
- NDC - Northern Domiciliary Care Service
- ONI – Ongoing Needs Investigation
- PTIC - Permission to incur costs
- RAA – Royal Automotive Association
- RADOT - Recreation And Development Options Team
- RDS – Records Disposal Schedule
- SA – South Australian
- SAALS - South Australian Amputee Limb Service
- SAAOT – South Australian Association of Occupational Therapists
- SCOSA – Spastic Centre of South Australia
- SDC -Southern Domiciliary Care and Rehabilitation Service
- WDC - Western Domiciliary Care Service

Definitions of terms specific to RDS 2011/27

- **Action completed** – A disposal action determining the legal destruction of records documenting a particular set of transactions linked to a function and activity set when all business action has been completed.
- **After last contact** – A disposal trigger determining the legal destruction of records to be calculated from the date of death of the client.
- **Allied Health** - Allied health professions are health care professions distinct from dentistry, nursing, medicine, and pharmacy. They work in health care teams to make the health care system function by providing a range of diagnostic, technical, therapeutic and direct patient care and support services that are critical to the other health professionals they work with and the patients they serve.
- **Client** – 1. A person who is recipient of a professional service. 2. A recipient of health care regardless of the state of health. 3. A patient.
- **Disability** – 1. Inability to function normally, physically or mentally; incapacity. 2. As defined by the federal government: “inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to last or has lasted for a continuous period of not less than 12 months.”
- **Domiciliary care** – *Social welfare* services, such as meals-on-wheels, health visiting, and home help, provided by a welfare agency for people in their own homes.
- **Exceptional needs** – clients who have various forms of mental health disorders, but who have no lead agency, or where agency-providers have no capacity or coordination. People with exceptional needs may be experiencing difficulty living independently or



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safely in the community, have significant behavioural problems, be in contact with multiple agencies, fall through gaps in the support system, be homeless or require an integrated response from a number of workers or agencies.

- **Imprest** – A system generally dictated by the quantity of stock a hospital ward should have. On a regular basis, nursing staff fill out a imprest sheet outlining their current stock levels and replenish what has been consumed to bring the balance stock to the stated imprest level.
- **Intervention Orders** - An intervention order is an order placed by a court, or guardianship board or police, and is designed to protect a person by placing limits on the behaviour of another person. An intervention order can be made to protect a person from threats such as family violence, assault or interference.
- **Legal disability** - The lack of competent physical and mental faculties; the absence of legal capability to perform an act. The impairment of earning capacity; the loss of physical function resulting in diminished efficiency; the inability to work.
- **Management Assessment Panel** – The Management Assessment Panel (MAP) is a body formed to facilitate the coordination of case planning and service provision for members of the community whose complex service needs are poorly coordinated or not adequately met. A referral to MAP is a last resort when service providers have not been able to achieve the necessary outcome.
- **Management Assessment Service** – the service provided by the Management Assessment Panel above.
- **Manutention** – the use of the human body to lift, lower, fill, empty, or carry loads.
- **Residential support** – Services which offer supervision and assistance to individuals in their home.
- **Section 32 powers** – enforcement powers that can be added to a *guardianship order* or an *enduring power of guardianship*. They provide the *guardian* or *enduring guardian* with the legal authority to use physical compulsion, described as ‘reasonable force’ in the *Guardianship and Administration Act 1993 (SA)* Act, to implement his or her decisions in relation to the person with a mental incapacity. Section 32 powers can authorise the placement and detention of a person and/or the use of such force as may be reasonably necessary to ensure the proper medical treatment, day to day care and wellbeing of the person under guardianship.
- **Supported accommodation** – 1. A living environment for children or adults who have disabilities or high support needs where staff assist residents with activities of daily living. 2. Accommodation where care or other services are provided to allow the resident to live as independently as possible within the community.
- **Telecross REDI** – Service that supports people by regularly calling them during heatwaves and other extreme weather events and discuss how they are coping.



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Legal Deposit

Legal deposit refers to statutory provisions that oblige publishers to deposit copies of their publications in libraries in the country in which they are published. Under the Commonwealth *Copyright Act 1968* and various Australian state Acts, a copy of any work published in Australia must be deposited with (a) the National Library of Australia and (b) the appropriate State Library. Legal deposit extends not only to commercial publishers but also to private individuals, clubs, churches, societies and organisations.

In South Australia, one copy of publications produced for external use should be deposited with the State Library and the Parliamentary Library (section 35, *Libraries Act 1982*). Publications include books, newspapers, magazines, journals, pamphlets, maps, plans, charts, printed music, records, cassettes, films, video or audio tapes, computer software CD-ROMS, compact discs and other items made available to the public.

Records and Litigation

Where Disability SA, and Disability and Domiciliary Care Services Divisions are aware that records may be required for use in litigation, for use in a government enquiry or the consideration of the Ombudsman, the records must not be destroyed. In such circumstances the records must be retained until two years after all cases and enquiries are complete (including appeals) and then have the original retention period applied to the records.

Pre-1901 Records

All pre-1901 records are required to be **retained permanently** in accordance with a motion approved by the State Records Council on 19 February 2008.

In this instance, this RDS applies to pre-1901 records.



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General Scope Note regarding the relevance of GDS 27

Given the considered relevance of GDS 27 to RDS 2011/27, advice was sought by the agency from the Crown Solicitor's Office to confirm relevance and therefore the application of "Retain until 31 December 2020, subject to a review at that date" to certain disposal classes.

In summary, the advice was that GDS 27 is relevant to Disability SA, and Disability Services and Domiciliary Care Divisions (and predecessor agencies) so far as the records relate or are likely to relate to legal proceedings relating to alleged abuse of former children whilst in care.

However, to safeguard the South Australian Government in preparation for the forthcoming national Royal Commission into the sexual abuse of children within institutional contexts, records relating to children potentially in State Care this RDS has adopted the longer retention of 105 years as per Recommendation 52 of the *Children in State Care Commission of Inquiry* (Mullighan Report) despite retention recommendations in GDS 27.

General Scope Note regarding Sampling of Client Files

Items 2.2.7 and 2.2.9 of RDS 2011/27 Version 1 are subject to the retention of a permanent sample (as indicated at item 2.2.6). This sample is to be achieved using the following methodology.

(1) Pre-2013 Client Files

- One-off 5% sample of all *deceased* client files consisting of services to children with disabilities (item 2.2.7) AND
- One-off 5% sample of all *deceased* client files consisting of services to adults with disabilities (item 2.2.9).

Files sampled to cover a representation of:

- A-Z of client surnames
- the date range covered by pre-2013 record holdings
- the various types of service/care provided to clients.

(2) Files of Current Clients (Once Deceased)

- Ongoing 5% annual sample of files for clients, once deceased, consisting of services to children with disabilities (item 2.2.7) AND
- Ongoing 5% annual sample of files for clients, once deceased, consisting of services to adults with disabilities (item 2.2.9).

Files sampled to cover a representation of:

- A-Z of client surnames
- the date range covered by post-2013 record holdings
- the various types of service/care provided to clients.



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
1 ALLIED HEALTH PROVISION			
1	ALLIED HEALTH PROVISION	The function of promoting functional independence through the provision of specialist allied health assessment and intervention for clients of the agency. Allied Health includes physiotherapy, occupational therapy, speech pathology, psychology, social work, podiatry and dietetics. Also includes the provision of information and advice on equipment to help individuals improve their quality of life and maintain independence.	
1.1	Contract Management	<i>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</i> <i>(See also GDS 30 v2 6.10 Procurement (Goods and Services))</i>	
1.1.1	Contract Management	Contracts and agreements with external specialists and providers including those for spasticity, neurologists, pathology, services from the Institute for Medical and Veterinary Services and Dental SA to clients with disabilities. Includes the actual contracts.	TEMPORARY Destroy 8 years after action completed
1.1.2	Contract Management	Records documenting arrangements with hospitals, community health services, nursing homes and day centres, for Domiciliary Care to provide allied health services on a fee-for-service basis. Includes contracts, terms and conditions, reports to Commonwealth Agencies and the Therapy Services Information System.	TEMPORARY Destroy 8 years after action completed.
1.2	Diagnostic Imaging	<i>The activities associated with creating and saving a visual display of structural or functional patterns of organs or tissues for diagnostic evaluation. Includes medical resonance imaging (MRI), computerised (axial) tomography scans (CT/CAT), and X-rays.</i>	
1.2.1	Diagnostic Imaging	Legacy collection of x-rays, not referenced to any client, where the radiographer's report is understood to be on the client file. <i>(See also CLIENT SUPPORT – Client Information Management Items 2.2.2 – 2.2.10)</i>	TEMPORARY Destroy immediately



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
1 ALLIED HEALTH PROVISION			
1.2.2	Diagnostic Imaging	X-rays and radiographers reports relating to specific clients who are deceased, and who had no significant medical issues eg elderly people submitted for short term convalescence with broken hip or similar. <i>(See also CLIENT SUPPORT – Client Information Management 2.2)</i>	TEMPORARY Destroy 7 years after last film taken (Adults) or 7 years after child attains 18 years of age (Minors)
1.3	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
1.3.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Allied Health Provision.	PERMANENT –
1.3.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Allied Health Provision.	TEMPORARY Destroy 2 years after last action
1.3.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Allied Health Provision.	TEMPORARY Destroy 3 months after last action
1.4	Project Management	<i>The activities associated with a defined series of actions, including planning, implementing, monitoring and the final assessment and report at completion of a project.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
1 ALLIED HEALTH PROVISION			
1.4.1	Project Management	Records that document the progress of Allied Health Provision projects that impact on the State and the public or have political risks for example the implementation of service provision at the Centre for Disability Health (comprising Modbury, Strathmont and Highgate clinics). Includes documentation through the Discovery - Initiation – Planning - Implementation - Closure phases in the Project Management Process. Records include: <ul style="list-style-type: none"> • performance briefs, risk assessment, feasibility, concept estimates and business cases • project proposals, planning studies, agreements and project definition reports • implementation plans, strategies, stakeholder communications, reports, contract management and photographs • handover reports and reviews. 	PERMANENT
1.4.2	Project Management	Facilitative project records including draft agreements, unsuccessful proposals, submissions and registrations of interest, advice and draft letters, public reference documents and project variations.	TEMPORARY Destroy 5 years after last action
1.5	Workbooks and Journals	<i>The activity associated with maintaining records of working notes and observations. Includes records generated by medical specialists, medical officers, allied health professionals, nurses, managers, coordinators, supervisors or clerical officers.</i>	
1.5.1	Workbooks and Journals	Clinical and other staff diaries which include client and staff communications, consultations and appointments. <i>(See also CLIENT SUPPORT - Client Information Management - Items 2.2.2 – 2.2.10)</i>	TEMPORARY Destroy 10 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2	CLIENT SUPPORT	<p>The function which includes determining eligibility and needs assessment at intake by providing access to and delivery of services and strategies for the agency's clients, their families and carers. This can include linking people with community services, helping people to choose and arrange support at home, respite and other services, arranging specialised support services where needed. Also includes carrying out detailed needs assessment and developing support plans for clients and their families and carers.</p> <p><i>(See Items 6.2.1 SUPPORTED ACCOMMODATION - Client - Information Management and 6.3.1 SUPPORTED ACCOMMODATION - Contract Management for clients in residential and supported accommodation facilities)</i></p>	
2.1	Brokerage	<p>The activities associated with brokering support services for clients. Support services include respite, personal support (shopping, cooking, cleaning, activities of daily living, transport) and home maintenance. Includes preparation and monitoring of contracts for support services.</p> <p><i>(See also Item 2.5 CLIENT SUPPORT - Contract Management)</i></p>	
2.1.1	Brokerage	Records documenting the allocation of brokerage funded support to providers where alternative mainstream services cannot be negotiated.	PERMANENT
2.1.2	Brokerage	Records documenting finances of self-funded clients, including the management of allocations and extraordinary expenses, monthly reports from parent or guardian and financial status.	TEMPORARY Destroy 30 years after last contact



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.1.3	Brokerage	Database records documenting the brokerage of contracts (currently Client Brokerage Management System - CBMS) which manages disability client accommodation funding, approvals, contracts, terms and conditions and authorities.	TEMPORARY Destroy 17 years after action completed Maintain and reformat as required for administrative purposes
2.1.4	Brokerage	Database records documenting invoice data (currently Request (Order) Contract Reconciliation System – RCR) which relate to managing reconciliations and payment to service providers.	TEMPORARY Destroy 15 years after action completed Maintain and reformat as required for administrative purposes
2.1.5	Brokerage	Annual client files (paper and digital) including funding allocation, copy of contract signed by delegate, endorsement of Service Coordinator. Includes recommendations from the Case Manager relating to funding approvals.	TEMPORARY Destroy 15 years after action completed Maintain and reformat as required for administrative purposes



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.1.6	Brokerage	Database records (currently Day Options database - MS:Access) documenting annual allocations of funding, contracting details, service agreement and provider, financial matters and rates.	TEMPORARY Destroy 17 years after action completed Maintain and reformat as required for administrative purposes
2.1.7	Brokerage	Summary records of allocated funding for service providers to deliver prescribed services to clients with disabilities, including personal assistance, home help, clinical attention. Service providers include NorthLink, Spastic Centres of South Australia, Minda Inc and Autism SA.	TEMPORARY Destroy 8 years after expiry of contract
2.2	Client Information Management	<i>The activities associated with the creation and maintenance of files and databases of client information. Records may include assessment forms, consent forms, consultation letters and summaries, equipment needs, health and other care plans, history records, management plans, observation and management reports, progress notes, photographs, sound and/or visual recordings, referral letters and correspondence and resident agreements. Includes case notes, client files and accommodation files.</i>	
2.2.1	Client Information Management	Historical paper-based records c1878-2007 documenting services and support provided to clients, including admission registers, correspondence day journals, resident books, pharmaceutical records, patient records, movement and death registers, medical surveys conducted of patients, Matron and nurse report books and visitor's book.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.2	Client Information Management	Client records specifically summarising advocacy and legal services, compensation, intervention orders, grievances or other matters which have been escalated to Ministerial notice.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.3	Client Information Management	<p>Client files consisting of services provided to <u>indigenous clients requiring disability or domiciliary care</u>. May include:</p> <ul style="list-style-type: none"> • referrals and assessment • supported accommodation • intake and allocation • financial records including fee waivers • approvals, consents, summaries and reports • health summary • photographs • medication authorities & charts • visits & in-home care services • equipment – technical specifications • build and re-build configuration drawings and design documents • investigations into misuse of equipment • postural measurements • care, support or health plans • mobility assessments • allied health services • clinical services • legal matters including interventions orders • transitions to Guardianship Board • rehabilitation, and • palliative care. <p><i>(See also summary data for clients retained in the disability clients database Item 2.2.17)</i></p>	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.4	Client Information Management	<p>Client files consisting of services provided to <u>people diagnosed with genetic disorders, or who have indeterminate diagnoses, intellectual disability, brain injury acquired as a child, or dementia</u>. Also includes clients assessed with <u>exceptional or complex needs</u> linked to disability, where the persons have no clear lead agency, or where agency-providers have no coordination or capacity. May include:</p> <ul style="list-style-type: none"> • Case conferences with independent facilitators • referrals and assessment • intake and allocation • service coordination • health summary • photographs • medication authorities & charts • visits & in-home care services • equipment • clinical services • legal matters and interventions orders • rehabilitation, and • palliative care. <p><i>(See also summary data for clients retained in the disability clients database Item 2.2.17)</i></p>	PERMANENT –
2.2.5	Client Information Management	<p>Video recordings forming part of the service plan that are client-identified or de-identified for <u>indigenous clients</u> requiring disability or domiciliary care and for <u>clients diagnosed with genetic disorders, or who have indeterminate diagnoses, intellectual disability, brain injury acquired as a child, or dementia</u>. Also includes video recordings of clients assessed with <u>exceptional or complex needs</u> linked to disability.</p>	Under review by SRSA



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.6	Client Information Management	5% sample of Client files covered by below items 2.2.7 and 2.2.9. Includes Clients already deceased as well as current Clients once deceased. <i>NOTE: For further description of the sampling methodology refer to the General Scope Note regarding Sampling of Client Files, page 47.</i>	PERMANENT
2.2.7	Client Information Management	Client files consisting of services provided to <u>children with disabilities</u> . May include: <ul style="list-style-type: none"> • referrals and assessment • financial records including fee waivers • approvals, consents, summaries and reports • photographs • medication authorities & charts • legal matters and intervention orders • visits and in-home care • equipment – technical specifications • clinical services and plans • rehabilitation • palliative care • intervention orders • palliative care and rehabilitation • children in specialist youth programs & life skills programs • children at risk. <i>(See also summary data for clients retained in the disability clients database Item 2.2.17)</i>	TEMPORARY Destroy 105 years after last contact
2.2.8	Client Information Management	Video recordings forming part of the service plan that are client-identified or de-identified for <u>children with a disability</u> .	Under review by SRSA



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.9	Client Information Management	<p>Client files consisting of services provided to <u>adults with disabilities</u>. May include:</p> <ul style="list-style-type: none"> • referrals and assessment • supported accommodation • intake and allocation • financial records including waivers • approvals, consents, summaries and reports • photographs • medication authorities & charts • legal matters and interventions orders • visits & in-home care • equipment – technical specifications • care, support or health plans • mobility assessments • allied health services • clinical services and plans • transitions to Guardianship Board • rehabilitation and palliative care <p><i>(See also summary data for clients retained in the disability clients database Item 2.2.17)</i></p>	TEMPORARY Destroy 30 years after last contact
2.2.10	Client Information Management	Video recordings forming part of the service plan that are client-identified or de-identified for <u>adults with a disability</u> .	Under review by SRSA



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.11	Client Information Management	Records of <u>domiciliary care services</u> provided to adult clients. May include: <ul style="list-style-type: none"> • referrals and assessments • service provision • financial records including fee waivers • approvals, consents, summaries and reports • photographs • home visits • equipment loans and returns. (See also child clients of Domiciliary Care Item 2.2.28) (See also summary data for clients retained in the domiciliary clients database Item 2.2.15)	TEMPORARY Destroy 10 years after last contact
2.2.12	Client Information Management	Management Assessment Panel proceedings and reports concerning clients with exceptional needs, provided to the clinics. These may not go to the master client file. Includes Ministerial briefings. (See also Client files Item 2.2.4)	PERMANENT
2.2.13	Client Information Management	Records documenting fortnightly meetings of the Management Assessment Service, which makes decisions on referrals and agreed capacity based on suitability criteria. (See also Client files Item 2.2.4)	PERMANENT
2.2.14	Client Information Management	Summary records documenting ENU client information, including client service agreements, expenditure approvals, reviews and re-assessment of appropriateness of services provided.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.15	Client Information Management	Database records relating to client domiciliary care (currently Client Management Engine - CME) including client activity data, interaction with the client, activity data and statistics, service plan scheduling and coordination, care management and assessments. Includes status of potential clients identified by the Metropolitan Access Team for eligibility and approval of service provision.	PERMANENT
2.2.16	Client Information Management	Database records relating to referrals of ageing clients from General Practitioners and Hospitals (Access Point System – APS) including assessment and allocation of services.	PERMANENT
2.2.17	Client Information Management	Database records relating to information about clients with a disability (currently Centralised Client Management System - CCMS) including client activity data, interaction with the client, statistics, intake, assessment, service plan and coordination, care management and progress reports.	PERMANENT
2.2.18	Client Information Management	Database records (currently ASSIST database) documenting the Adult Specialist Services Intervention and Support Service (ASSIST), including predecessor data from the Independent Living Equipment Program (ILEP), services not funded through ILEP and the Independent Living Centre. Includes client details, proposed therapy services, specialised equipment suppliers and measurements, client case notes and assessments. <i>(See also Client files 2.2.3 – 2.2.10)</i>	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.19	Client Information Management	Database records documenting the Early Childhood Program (currently E-pod). Includes allocation, referrals and reports on transition for children. <i>(See also Client files 2.2.6 – 2.2.10)</i>	PERMANENT
2.2.20	Client Information Management	Clinical database records of clients (currently Medical Director) used by medical officers for attending clients, clients living in their own home or an accommodation service, recording longitudinal medical consultation and progress, tests, radiology and pathology results, prescribed medication. Includes bookings, and invoicing for Medicare.	PERMANENT
2.2.21	Client Information Management	Database of client demographic data (including those who are homeless), service level agreements, expenditure and commitment (currently Homeless Support Program (HSP) Client Register –MS:Excel).	PERMANENT
2.2.22	Client Information Management	Chaplain summary records in the form of hand-written index card of clients who are residents of Highgate (discontinued series ~1978 - ~2006) documenting care provided, call-out reasons, observations, levels of comfort and comments on staff relationship with the client.	PERMANENT
2.2.23	Client Information Management	Records of portability of clients, including notification and correspondence with interstate authorities regarding interstate transfers, eligibility and registration.	TEMPORARY Destroy 30 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.2.24	Client Information Management	Database records (currently Portability Database) documenting portability of clients across Australia, whose information is used to satisfy the Council of Australian Governments Committee on portability through reports sent to COAG.	TEMPORARY Destroy 30 years after action completed.
2.2.25	Client Information Management	Records of services 2002-2007 provided to adult residents of aged care and respite care services auspiced by Metropolitan Domiciliary Care at Tregenza Avenue Aged Care Service, Elizabeth. Includes inspections of residential facilities.	TEMPORARY Destroy 10 years after last contact
2.2.26	Client Information Management	Daily communications diaries for each adult client attending activities at Strathmont Centre or at other locations, which accompany them from supported residential accommodation on all outings.	TEMPORARY Destroy 10 years after action completed
2.2.27	Client Information Management	Records documenting the assessment of adult clients eligibility for the "Board and Care" subsidy at a residential facility.	TEMPORARY Destroy 7 years after action completed
2.2.28	Client Information Management	Records of nappy services provided 1987-2004 to child Domiciliary Care clients.	TEMPORARY Destroy 5 years after last action
2.2.29	Client Information Management	Reference copies of client files including referrals from Doctors, prescriptions of care, and health plans.	TEMPORARY Destroy 2 years after Master Client file updated
2.3	Client Trust Funds	<i>The activities associated with managing client income, where the client is not able to perform these tasks. This includes allocating personal funds for such expenses as clothing, holidays, leisure and recreation.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.3.1	Client Trust Funds	Individual client records documenting financial transactions and dealings from arrival at supported accommodation until deceased.	TEMPORARY Destroy 30 years after last contact
2.3.2	Client Trust Funds	Records documenting internal and external audits of the Client Trust Account including review of processes and reports on findings.	TEMPORARY Destroy 7 years after action completed
2.3.3	Client Trust Funds	Records documenting weekly financial transactions with Treasury and with the Public Trustee on behalf of clients.	TEMPORARY Destroy 7 years after action completed
2.3.4	Client Trust Funds	Records documenting residents' withdrawals and cash advances, linked to the Trust Account database. Includes reconciliations and disbursements.	TEMPORARY Destroy 7 years after action completed
2.3.5	Client Trust Funds	Database records (currently Accounting Package - ACCPAC) which manage the Client Trust Accounts.	TEMPORARY Destroy 7 years after action completed.
2.3.6	Client Trust Funds	Records documenting rental payments for accommodation by a resident or nominee.	TEMPORARY Destroy 7 years after action completed
2.3.7	Client Trust Funds	Monthly statements of client deposits, expenditure and reconciliations.	TEMPORARY Destroy 7 years after action completed
2.3.8	Client Trust Funds	Client receipts for expenditure for day-to-day consumables.	TEMPORARY Destroy 1 year after reconciliation



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.4	Complaint Investigation	<i>The activities associated with responding to complaints made against the agency by clients directly, the Ombudsman, Members of Parliament, advocates and/or relatives on behalf of clients. (Where a complaint results in staff discipline, see GDS 30 v2 5.7 Discipline)</i>	
2.4.1	Complaint Investigation	Records documenting inquiries into complaints made to the Health and Community Services Complaints Commissioner or the Public Advocate. <i>(Where a complaint results in staff discipline, see GDS 30 v2 5.7 Discipline)</i> <i>(See also Riskman database, Item 2.6.2)</i>	PERMANENT
2.5	Contract Management	<i>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</i> <i>(See also 2.1 CLIENT SUPPORT – Brokerage)</i> <i>(See also 2.2 CLIENT SUPPORT – Client Information Management)</i> <i>(See also GDS 30 v2 6.10 Procurement (Goods and Services))</i>	
2.5.1	Contract Management	Records of agreements between parents, service providers and the agency to deliver services to children with a disability. Includes agreements made as an outcome of – but not limited to - Child and Youth Services Projects, Children in Out-of-Home-Care and Service Improvement Projects.	TEMPORARY Destroy 105 years after last contact
2.5.2	Contract Management	Memoranda of Administrative Agreement, Understanding and other inter-agency agreements including those with the South Australia Police and Correctional Services for clients with Intervention Orders, or concerning portability.	TEMPORARY Destroy 30 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.5.3	Contract Management	Service agreements, contracts, variations and negotiations with service providers funded by the Home and Community Care Program (HACC), including non-government organisations and local government.	TEMPORARY Destroy 8 years after expiry of contract or agreement
2.5.4	Contract Management	Contracts for the Independent Living Centre to provide services eg occupational therapy and home modification to external agencies including Housing SA.	TEMPORARY Destroy 8 years after expiry of contract
2.5.5	Contract Management	Contracts with the relevant agency (currently Department of Education and Child Development - DECD) to meet the requirements of Intervention Orders for children. <i>See also Client files 2.2.3 – 2.2.8</i>	TEMPORARY Destroy 8 years after expiry of contract
2.5.6	Contract Management	Records of agreements with stakeholders for the provision of services, including South Australian Medical Officers Association, Australian Nurses Midwifery Association and Psychologists Board.	TEMPORARY Destroy 8 years after expiry of agreement
2.5.7	Contract Management	Records of agreements and contracts with service providers to deliver prescribed services to clients with disabilities. Service providers include NorthLink, Spastic Centres of South Australia, Minda Inc and Autism SA.	TEMPORARY Destroy 8 years after expiry of agreement or contract
2.5.8	Contract Management	Dossier records documenting non-government organisation service providers contracted to provide services to clients with disabilities.	TEMPORARY Destroy 8 after expiry of agreement
2.6	Incident Management	<i>The activities associated with identifying, analysing and correcting hazards to prevent a future occurrence. Includes post-incident analysis, precautionary measures employed and evaluations for contingency planning.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.6.1	Incident Management	Records of quarterly reports from partner providers, including crisis management and ad hoc reports eg sudden problems or injuries.	TEMPORARY Destroy 45 years after action completed
2.6.2	Incident Management	Database records managing and reporting incidents (currently RISKMAN) including all reportable deaths, workforce health and safety, complaints, compliments, staff or client incidents. <i>(See also disciplinary complaints, Item 2.4.1)</i>	TEMPORARY Destroy 45 years after action completed.
2.6.3	Incident Management	Records documenting incidents (pre-RISKMAN) including reporting and management, day-night and episode reports.	TEMPORARY Destroy 45years after action completed
2.6.4	Incident Management	Reports of incidents involving residential clients. Includes investigation, remediation of client, incident and injury reports and final outcomes.	TEMPORARY Destroy 45 years after action completed
2.6.5	Incident Management	Records documenting the after-hours service provided Statewide to clients living in their own homes. Includes documentation of calls, requests, responses and staff attendance.	TEMPORARY Destroy 45 years after action completed
2.6.6	Incident Management	Records documenting the 24-hour community nursing telephone service, providing responses to issues and emergencies from clients, accommodation services or members of the public, including needs for Police, Ambulance and immediate medical help. Includes 24-hour report and the Disability Services Incident Reporting Hotline.	TEMPORARY Destroy 45 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.7	Liaison	<i>The activities associated with maintaining regular general contact between the organisation and professional associations, professionals in related fields, other private sector organisations and community groups. Includes sharing informal advice and discussions, membership of professional associations and collaborating on projects that are not joint ventures. (KWAAA)</i>	
2.7.1	Liaison	Records of liaison with non-government organisations eg Novita, Spastic Centres of South Australia (SCOSA), Minda Inc, regarding support and services for people with disabilities.	PERMANENT –
2.8	Meetings	<i>The activities associated with gatherings held to formulate, discuss, update or resolve issues and matters pertaining to the management of the Section, Department or organisation as a whole. Includes arrangements, agenda and minutes. (KWAAA)</i>	
2.8.1	Meetings	Records of the proceedings of weekly intake meetings to determine eligibility criteria, eg chronic illness or rough sleeper. Includes the ongoing management of the intake waiting list.	TEMPORARY Destroy 10 years after action completed.
2.8.2	Meetings	Records documenting fortnightly Senior Service Coordinators meetings which allocate the client to a Coordinator, considering needs of the client competence and resources. Also notes information on Client files, CCMS and CME. <i>(See also Client files, CLIENT SUPPORT – Client Information Management Items 2.2.3 – 2.2.10)</i>	TEMPORARY Destroy 7 years after action completed
2.9	Needs Assessment	<i>The activities associated with assessing the service requirements of clients. Includes the allocation of support resources, prioritising needs, and the availability of a given resource type for allocation to clients.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.9.1	Needs Assessment	Records documenting the process of determining clients to be <u>ineligible</u> for intake. Includes referral from client, doctor, teacher, family or hospital, screening for allocation, further information gathered about the potential client, assessment, status, notification of ineligibility and un-actioned documents.	TEMPORARY Destroy 7 years after action completed
2.10	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
2.10.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Client Support.	PERMANENT
2.10.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Client Support.	TEMPORARY Destroy 2 years after last action
2.10.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Client Support.	TEMPORARY Destroy 3 months after last action
2.11	Program Management	<i>The activities associated with the management of an ongoing series of actions, including planning, implementing, monitoring and assessing a program. Includes coordination and provision of client-focussed services in response to a need or to achieve common goals or objectives.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.11.1	Program Management	Records documenting the purpose, development and content of specialised programs and services for domiciliary and disability clients, including children. Includes - but is not limited to - programs aimed at transition, palliative care, rehabilitation, dementia, home care, recreation, vocation. Also includes – but is not limited to - services for podiatry, therapy, locums and continence.	PERMANENT
2.11.2	Program Management	Records documenting the Access to Home Care Program (previously the Metropolitan Access Team), including purpose, achievements, predecessor program, ongoing needs investigation tool (ONI) and assessment needs investigation (ANI).	PERMANENT
2.11.3	Program Management	Records documenting the purpose, development and content of the programs for children with intellectual disability, eg dysphagia in children with significant development delay.	PERMANENT
2.11.4	Program Management	Records documenting the purpose, development and content of programs for clients with a disability, which focus on recreation and vocation eg Day Options Program.	PERMANENT
2.11.5	Program Management	Records documenting the pastoral care of clients with disabilities provided by the Chaplain, such as statistics of visits, quarterly reports and records of the Family Network Group. Also includes current activities programs eg music, woodwork and art.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.11.6	Program Management	Records documenting the development content and purpose of the support provided to indigenous clients, including coordination with case managers, social workers and service coordinators.	PERMANENT
2.11.7	Program Management	Records documenting visits to indigenous community organisations, including Umoona Aged Care and the Aboriginal Advisory Network Group, in remote areas such as Coober Pedy and Oodnadatta.	PERMANENT
2.11.8	Program Management	Records documenting significant Child and Youth Services projects and plans, such as Children in Out-of-Home Care, and Service Improvement Projects.	PERMANENT
2.11.9	Program Management	Records documenting the development and execution of State funded programs delivered by a Service Provider, that provide life skills to clients with disabilities such as the Youth Transition Program and the Day Options Program.	PERMANENT
2.11.10	Program Management	Records documenting the development and purpose of programs delivered through Home and Community Care funding, including specialised programs such as ethnic programs, the Alzheimer's Program and volunteer-based day care programs, service model and innovation programs.	PERMANENT
2.11.11	Program Management	Diaries of programs at Strathmont Centre and other sites, including daily recreation program, and monthly calendar of activities detailing clients' attendances at every event.	TEMPORARY Destroy 5 years after last action



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.11.12	Program Management	Records documenting the program of activities conducted by volunteers, for clients in community houses and Highgate Park residents. Includes pet therapy, Chapel visits, cosmetic care, and the Highgate library.	TEMPORARY Destroy 5 years after last action
2.11.13	Program Management	Facilitative program records including unsuccessful proposals, drafts, working copies and reference material.	TEMPORARY Destroy 5 years after last action
2.12	Project Management	<i>The activities associated with a defined series of actions, including planning, implementing, monitoring and the final assessment and report at completion of a project.</i>	
2.12.1	Project Management	Records documenting significant administrative projects eg Outcomes Measurement Forecasting Project, including applications and acquittals of funding to State and Commonwealth agencies. Records include proposals for training, meetings, workgroups and project initiation, following a formal project methodology.	PERMANENT
2.12.2	Project Management	Records documenting non-significant administrative projects such as the Workforce Management Program. Records include proposals for training, meetings, workgroups and project initiation, following a formal project methodology.	TEMPORARY Destroy 10 years after action completed
2.12.3	Project Management	Facilitative project records including draft agreements, unsuccessful proposals, submissions and registrations of interest, advice and draft letters, public reference documents and project variations.	TEMPORARY Destroy 5 years after last action



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.13	Respite Allocation	<i>The activities associated with responding to either urgent or planned requests for temporary accommodation. Includes responding, prioritising, negotiating and assigning respite services to individuals.</i>	
2.13.1	Respite Allocation	Records documenting accommodation placements for non-government organisation and Disability Services <u>indigenous clients</u> , including planned respite accommodation and emergency client accommodation in supported and non-supported accommodation. Includes applications, assessments, permission to incur costs (PTIC), rejections and approvals.	PERMANENT
2.13.2	Respite Allocation	Records documenting accommodation placements for non-government organisation and Disability Services <u>adult clients</u> , including planned respite accommodation and emergency client accommodation in supported and non-supported accommodation. Includes applications, assessments, permission to incur costs (PTIC), rejections and approvals.	TEMPORARY Destroy 30 years after action completed
2.14	Statistical Reporting	<i>The processes associated with managing statistical data on specific activities, and to provide formal factual statements or findings of the results of their analysis or examination.</i>	
2.14.1	Statistical Reporting	Statistical records of service demand from the Independent Living Centre. Includes instances of service, but no personal identification.	PERMANENT
2.14.2	Statistical Reporting	Reports to Executive including summaries and analyses about client information. Includes monthly aggregated statistical reports and annual reports.	PERMANENT –



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.14.3	Statistical Reporting	Database records (currently Management Performance Reporting) providing data for client information reports, including fluctuations in the numbers of active clients, service provision and workflow through the services provided.	PERMANENT
2.14.4	Statistical Reporting	Statistical records of the Continence Service, compiled monthly from daily running sheets and telephone advice records, detailing attendances, origin of referrals and annual summary.	TEMPORARY Destroy 7 years after action completed
2.14.5	Statistical Reporting	Statistical reports to the Directors, including youth transition movements and demographic statistics.	TEMPORARY Destroy 7 years after action completed
2.14.6	Statistical Reporting	Records documenting operational statistical data used for referrals and time to action.	TEMPORARY Destroy 7 years after action completed
2.14.7	Statistical Reporting	Summary records of statistics, episodes and reports from the 24-hour community nursing telephone service, including bedstate and incident reports.	TEMPORARY Destroy 7 years after action completed
2.14.8	Statistical Reporting	Monthly work reports to Regional Managers documenting client allocation.	TEMPORARY Destroy 7 years after action completed
2.14.9	Statistical Reporting	Source records of Domiciliary Care client activity statistics entered on to the Client Management Engine (CME). <i>(See also CME, Item 2.2.14)</i>	TEMPORARY Destroy 1 year after last action
2.15	Volunteer Management	<i>The activities associated with the management of volunteers within the agency.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
2 CLIENT SUPPORT			
2.15.1	Volunteer Management	Records documenting the purpose, development and content of volunteer programs to accompany residential disability clients on outings, or the conduct of activities at the residential facility eg Community Participation And Support Service (COMPASS) Program previously known as Recreation And Development Options Team (RADOT) and Gatewayz.	PERMANENT
2.15.2	Volunteer Management	Database records (currently Volunteers databases (3), and Drivers database) documenting the allocation of volunteer resources State-wide who work with adult clients with a disability, including transportation, outings and volunteer attendances.	TEMPORARY Destroy 5 years after last action.
2.16	Workbooks and Journals	<i>The activities associated with maintaining records of working notes and observations. Includes records generated by medical specialists, medical officers, allied health professionals, nurses, managers, coordinators, supervisors or clerical officers.</i>	
2.16.1	Workbooks and Journals	Clinical and other staff diaries, and office diaries which include documenting client/staff communications and activities, consultations and appointments. <i>(See also CLIENT SUPPORT – Client Information Management Items 2.2.2 - 2.2.10)</i>	TEMPORARY Destroy 10 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
3 EDUCATION			
3	EDUCATION	The function of providing education and training relating to primary health care matters, including content development and delivery.	
3.1	Contract Management	<i>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</i> <i>(See also GDS 30 v2 6.10 Procurement (Goods and Services))</i>	
3.1.1	Contract Management	Contracts and agreements with external training providers to provide training to direct care staff on the agency's behalf, including manual training provided at supported accommodation.	TEMPORARY Destroy 8 years after expiry of agreement or contract
3.1.2	Contract Management	Records of agreements with stakeholders including TAFE colleges and universities.	TEMPORARY Destroy 8 years after expiry of agreement
3.2	Education Delivery	<i>The activities associated with developing content and delivering training relating to primary health care matters.</i> <i>(See also GDS 30 v2 5.17 Training)</i>	
3.2.1	Education Delivery	Records documenting manual handling and Manutention training, content and delivery provided to external agencies.	TEMPORARY Destroy 5 years after course superseded or discontinued
3.2.2	Education Delivery	Records relating to peer education provision to other health workers.	TEMPORARY Destroy 5 years after course superseded or discontinued



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
3 EDUCATION			
3.2.3	Education Delivery	Records that are not client-identified, relating to education provision on a group basis to clients.	TEMPORARY Destroy 5 years after course superseded or discontinued
3.2.4	Education Delivery	Records of training development and content provided to non-government organisations and agency staff connected to agency services eg. Nursing Agency of South Australia (NASA). Includes provision to the national community of practice.	TEMPORARY Destroy 5 years after course superseded or discontinued
3.3	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
3.3.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Education.	PERMANENT
3.3.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Education.	TEMPORARY Destroy 2 years after last action
3.3.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Education.	TEMPORARY Destroy 3 months after last action



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
4 EQUIPMENT MANAGEMENT			
4	EQUIPMENT MANAGEMENT	<p>The function of advising and providing independent living equipment and home modifications to individuals through government and non-government organisations in the health, community and aged care sectors. Includes the acquisition, supply, maintenance, repair and disposal of equipment. Also includes consumables, rehabilitation supplies and specialised equipment.</p> <p>Excludes equipment and stores stocked and used by the organisation, such as tools, machines, plant, furniture and furnishings.</p> <p>See GDS 30 v2 ASSET/PHYSICAL RESOURCE MANAGEMENT</p>	
4.1	Contract Management	<p>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</p> <p>(See also GDS 30 v2 6.10 Procurement (Goods and Services))</p>	
4.1.1	Contract Management	Records documenting service level agreements with external stakeholders for the provision of equipment services. Includes non-government organisations such as NOVITA, Amputee Limb Service, and clients on a fee-for-service basis eg private nursing homes.	TEMPORARY Destroy 8 years after expiry of agreement
4.1.2	Contract Management	Records documenting contracts with Commonwealth Veterans Affairs Department for the provision of equipment services in South Australia.	TEMPORARY Destroy 8 years after expiry of contract
4.1.3	Contract Management	Contracts with private companies for the design and implementation of home modifications for complex projects.	TEMPORARY Destroy 8 years after expiry of contract



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
4 EQUIPMENT MANAGEMENT			
4.1.4	Contract Management	Records of contracts with providers and suppliers for specialised wheelchair and seating componentry.	TEMPORARY Destroy 8 years after expiry of contract
4.1.5	Contract Management	Records of contracts with the Royal Automobile Association (RAA) for after-hours and emergency attendances to wheelchairs and other mobile equipment, including tyre, battery and controller problems.	TEMPORARY Destroy 8 years after expiry of contract
4.1.6	Contract Management	Records of contracts with organisations to undertake repairs, maintenance, delivery and modification of domiciliary care equipment.	TEMPORARY Destroy 8 years after expiry of contract
4.2	Equipment Provision	<i>The activities associated with the acquisition, cleaning, maintenance, repairs, delivery, collection, disposal, hire, installation and sales of independent living equipment.</i>	
4.2.1	Equipment Provision	Database records (currently Equipment Service Information System - ESIS) of equipment inventory control, providing a register of clients and equipment allocations, reports on stock levels, pre-purchased stock items and online ordering from clinicians and contractors. Also includes technical specifications, designs, diagrams and plans, for the management of acquiring materials, parts and components, limbs for amputees, and powered mobility aid equipment such as wheelchair bases, managing inventory and design modification through time.	PERMANENT
4.2.2	Equipment Provision	Database records (currently MS:Access - Tracker System) tracking wheelchair status, including maintenance and location. Also shows historical wheelchair design.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
4 EQUIPMENT MANAGEMENT			
4.2.3	Equipment Provision	Records documenting equipment that meets client specific requirements. Includes instructions, terms and conditions for use of equipment.	TEMPORARY Destroy 8 years after action completed
4.2.4	Equipment Provision	Records of equipment disposed of, following collection and inspection for suitability of re-issue.	TEMPORARY Destroy 2 years after last action
4.2.5	Equipment Provision	Records of requests to collect equipment from clients including collection orders and arrangements.	TEMPORARY Destroy 1 year after last action
4.3	Home Modifications	<i>The activities associated with providing modifications to private homes following clinical assessment of clients. Includes ramps, rails and bathroom modifications.</i>	
4.3.1	Home Modifications	Project or job records documenting home modifications, which may include: <ul style="list-style-type: none"> • scope of works eg hand rail to stairs • specifications • development applications • inspections and approvals • consents to proceed • examination and testing • completion of works. 	TEMPORARY Destroy 8 years after action completed
4.4	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
4.4.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Equipment Management.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
4 EQUIPMENT MANAGEMENT			
4.4.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Equipment Management.	TEMPORARY Destroy 2 years after last action
4.4.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Equipment Management.	TEMPORARY Destroy 3 months after last action
4.5	Program Management	<i>The activities associated with the management of an ongoing series of actions, including planning, implementing, monitoring and assessing a program. Includes coordination and provision of client-focussed services in response to a need or to achieve common goals or objectives.</i>	
4.5.1	Program Management	Records documenting the South Australian Amputee Limb Service Program, which provides prostheses to eligible South Australian residents.	PERMANENT
4.5.2	Program Management	Records documenting the Metropolitan Equipment Scheme and predecessor Independent Living Equipment Program (ILEP).	PERMANENT
4.5.3	Program Management	Records documenting the specialised wheelchair and seating service provided for clients.	PERMANENT
4.5.4	Program Management	Facilitative records of the South Australian Amputee Limb Service, Metropolitan Equipment Scheme, and specialised wheelchair and seating service, including unsuccessful applications for prostheses or equipment, working drafts and superseded program reviews.	TEMPORARY Destroy 7 years after action completed



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
4 EQUIPMENT MANAGEMENT			
4.5.5	Program Management	Facilitative program records including unsuccessful proposals, drafts, working copies and reference material.	TEMPORARY Destroy 5 years after last action



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5	GOVERNANCE	<p>The function of the capacity of the agency to effectively formulate and implement sound policies in respect of clients and supporting institutions that deliver services. Includes managing the accountability and compliance of the agency, the records of the Boards of predecessor agencies which document their composition over time through documented proceedings, high level committees, reporting, investigations, joint ventures and the granting of funds.</p> <p><i>For activities relating to the strategic management of the organisation, including strategic planning, reporting and policy development, use GDS 30 v2: STRATEGIC MANAGEMENT</i></p>	
5.1	Committees	<i>The activities associated with the management of committees and task forces (internal and external, private, local, state, Commonwealth). Includes the committee's establishment, appointment of members, terms of reference, proceedings, minutes, reports, agenda. (KWAAA)</i>	
5.1.1	Committees	Records documenting Independent Living Centre Board appointments, proceedings, agenda, reports and minutes.	PERMANENT
5.1.2	Committees	Historical records c1878-2007 documenting the establishment of predecessor agencies, including subsequent proceedings of meetings. Includes the Home for Incurables, and Board proceedings for Julia Farr Centre, Julia Farr Services, Independent Living Centre, Southern Domiciliary Care & Rehabilitation Service, Metropolitan Domiciliary Care and IDSC. Includes photographs of events such as the Centennial Garden Party.	PERMANENT –



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.2	Compliance	<i>The activities associated with complying with mandatory or optional accountability, fiscal, legal, regulatory or quality standards or requirements to which the organisation is subject. Includes compliance with legislation and with national and international standards, such as the ISO 9000 series.</i> <i>(Keyword AAA)</i>	
5.2.1	Compliance	Historical records documenting financial accountability c1878 - 2007, including cash books, ledgers, rules and regulations, and financial assistance from the Miss Industry Quest. Includes microfilm records and preservation project records.	PERMANENT
5.2.2	Compliance	Records documenting accreditation of clinics, medical systems and processes with the Royal Australian College of General Practitioners. Includes applications, process of accreditation assessment through the accrediting organisation, audit reports and corrective actions.	PERMANENT
5.2.3	Compliance	Records documenting external audits for three-yearly accreditation for Aged Care, including supporting evidence and continuous improvement plans.	TEMPORARY Destroy 10 years after expiry of accreditation
5.2.4	Compliance	Records documenting the licensing to possess S4 and S8 drugs for administration, under the <i>Controlled Substances Act 1984, Poisons Regulations 2011</i> .	TEMPORARY Destroy 2 years after expiry



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.2.5	Compliance	Records documenting pharmacy dispensing, or prescribing of drugs, medication and other pharmaceutical products to individuals under the <i>Controlled Substances Act 1984, Poisons Regulations 2011</i> , eg Highgate Park and Strathmont Centre. Includes orders, prescriptions and auditable drug charts.	TEMPORARY Destroy 2 years after last action
5.2.6	Compliance	Records documenting pharmacy to ward drug dispensing including ward Imprest records under the <i>Therapeutic Goods Act 1989</i> .	TEMPORARY Destroy 2 years after last action
5.2.7	Compliance	Records 1956-2011 documenting pharmacy manufacturing of drugs, medication and/or other pharmaceutical products for individual patients in accordance with the <i>Controlled Substances Act 1984, Poisons Regulations 2011</i> .	TEMPORARY Destroy 2 years after last action
5.2.8	Compliance	Drug and Dependence Special records book, includes auditing by staff.	TEMPORARY Destroy 2 years after last action
5.3	Contract Management	<i>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</i> <i>also GDS 30 v2 6.10 Procurement (Goods and Services)</i>	
5.3.1	Contract Management	Records documenting contracts and arrangements with Australian General Practice Accreditation Limited to conduct assessment and auditing for accreditation by the Royal Australian College of General Practitioners.	TEMPORARY Destroy 17 years after expiry of contract



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.3.2	Contract Management	Records documenting contracts with pharmaceutical suppliers for the acquisition of controlled substances and dietary supplements.	TEMPORARY Destroy 8 years after expiry of contract
5.4	Grant Funding Provision	<i>The activities associated with the provision of grants and subsidies. Includes requesting applications from external parties to assessing applications against funding criteria and the approval and provision of monies.</i>	
5.4.1	Grant Funding Provision	Records documenting offers of funding to the disability sector including invitations to Home and Community Care (HACC) providers for funding submissions. Includes direct allocations for identified needs.	TEMPORARY Destroy 7 years after action completed
5.4.2	Grant Funding Provision	Database records documenting the management of funded grants (currently the Funded Grants Management System – FGMS). Data includes quarterly grants payments, funding releases, budget allocations and acquittals, contracts and variations, service data, correspondence, service agreements, authorities and variations. Also includes performance management, quality assurance, and anecdotal evidence of HACC providers.	PERMANENT
5.5	Investigations	<i>The activities associated with the carrying out of investigations and participating in them. Investigations are carried out by persons or bodies who have been empowered to investigate and report on a matter.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.5.1	Investigations	Records documenting coronial investigations resulting from a death in custody. Includes notification and reporting to the Coroner and South Australia Police, directions to enter, search warrants, legal advice, statements of evidence, insurer instructions, reports and briefings to Executive and correspondence with the Coroner's Office.	PERMANENT
5.5.2	Investigations	Records documenting a coronial inquiry including advice of inquest, advice to management and legal services, briefings, Treasury approvals where appropriate, correspondence with and reports from the Crown Solicitor, Coroner's Court findings and report of actions to be taken.	PERMANENT
5.5.3	Investigations	Summary register of all cases, including those reported to the Coroner or South Australia Police. Details include name, Doctor, signature on death certificate, if inquiries were conducted and deaths that are both notifiable and non-notifiable.	PERMANENT
5.6	Liaison	<i>The activities associated with maintaining regular general contact between the organisation and professional associations, professionals in related fields, other private sector organisations and community groups. Includes sharing informal advice and discussions, membership of professional associations and collaborating on projects that are not joint ventures. (Keyword AAA)</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.6.1	Liaison	Records of liaison with external stakeholders from the disability sector, for contributions to the development of the Human Rights framework for South Australia. Includes records of research, proposals, reports to the Human Rights Commission, and auditing against the Articles of the Commission.	PERMANENT
5.7	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
5.7.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Governance.	PERMANENT
5.7.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Governance.	TEMPORARY Destroy 2 years after last action
5.7.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Governance.	TEMPORARY Destroy 3 months after last action
5.8	Reporting	<i>The processes associated with initiating or providing a formal response to a situation or request (either internal, external or as a requirement of corporate policies), and to provide formal statements or findings of the results of the examination or investigation. Includes agenda, briefing, business, discussion papers, proposals, reports, reviews and returns. (KWAAA)</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
5 GOVERNANCE			
5.8.1	Reporting	Summary or annual watching brief reports of costed unmet need, costed accommodation, and (for all those in hospital), a report on costings required if accommodation had to be found immediately.	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
6 SUPPORTED ACCOMMODATION			
6	SUPPORTED ACCOMMODATION	The function of providing supported accommodation services to clients. Includes assessment, consultation, management, planning, support, treatment and therapy. Also includes provision of care by medical, nursing, allied health and/or community health professionals. This function covers clients in residential support or supported accommodation facilities.	
6.1	Client Activity Reporting	<i>The activities associated with the change-over of support staff and the documentation of any events required by the next shift.</i>	
6.1.1	Client Activity Reporting	Report books for each residential unit at Strathmont Centre and other residential accommodation, detailing daily housekeeping, nurse communications, 24 hour reports, ward diaries and handover documentation.	TEMPORARY Destroy 10 years after action completed
6.2	Client Information Management	<i>The activities associated with the creation and maintenance of files and databases of client information. Records may include assessment forms, consent forms, consultation letters and summaries, equipment needs, health and other care plans, history records, management plans, observation and management reports, progress notes, photographs, sound and/or visual recordings, referral letters and correspondence and resident agreements. Includes case notes, client files and accommodation files.</i>	
6.2.1	Client Information Management	Client support and development data (currently part of Accommodation Services Database) which manages ownership and rentals of the community houses, personal support for day-to-day clients, nutritional information and recommendations. <i>(See also 2.2.2 – 2.2.10 CLIENT SUPPORT – Client Information Management)</i>	PERMANENT



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
6 SUPPORTED ACCOMMODATION			
6.2.2	Client Information Management	Database records for Accommodation Services clients (currently Client Database - MS:Access) providing client demographics, profiles, photographs and contact details, health plans, medication management, service monitoring and statistics. <i>(See also Client files 2.2.3 – 2.2.10)</i>	PERMANENT
6.2.3	Client Information Management	Records documenting support for <u>children</u> who came to Julia Farr Centre for <u>convalescence or respite care</u> . Includes those temporarily transferred from Kalyra nursing home to Julia Farr Centre.	TEMPORARY Destroy 105 years after last contact
6.2.4	Client Information Management	Records documenting support for <u>adult</u> members of the public, who came to Julia Farr Centre for <u>convalescence or respite care</u> . Includes those temporarily transferred from Kalyra nursing home to Julia Farr Centre.	TEMPORARY Destroy 30 years after last contact
6.2.5	Client Information Management	Hand-written index card records of clients 1978-2006 in supported accommodation, documenting care provision, call-out reasons, observations, levels of comfort and comments on relationship with staff. <i>(See also Client files 2.2.3 – 2.2.10)</i>	TEMPORARY Destroy 30 years after action completed
6.2.6	Client Information Management	Records documenting support for <u>adult</u> members of the public, who came to Julia Farr Centre for <u>domiciliary care</u> . Includes those temporarily transferred from Kalyra nursing home to Julia Farr Centre.	TEMPORARY Destroy 10 years after last contact



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
6 SUPPORTED ACCOMMODATION			
6.2.7	Client Information Management	Client records (inactive or deceased) from Julia Farr Centre, not recorded to the master client file, including client temporary files, 'remainder' podiatry records, progress records and dental record cards.	TEMPORARY Destroy 30 years after last contact
6.2.8	Client Information Management	Records documenting the 24-hour community nursing telephone service, providing responses to issues and emergencies from clients in accommodation services including needs for Police, Ambulance and immediate medical help. Includes 24-hour report and the Disability Services Incident Reporting Hotline.	TEMPORARY Destroy 45 years after action completed
6.2.9	Client Information Management	Records documenting the after-hours service provided Statewide to clients living in accommodation services. Includes documentation of calls, requests, responses and staff attendance.	TEMPORARY Destroy 45 years after action completed.
6.3	Contract Management	<i>The activities associated with providing or receiving professional services or arrangements by agreement to meet the needs of the agency. Includes contracts and agreements.</i> <i>(See also GDS 30 v2 6.10 Procurement (Goods and Services))</i>	
6.3.1	Contract Management	Records of individual tenancy agreements with clients with disabilities for accommodation services, including application from the tenant, letter of offer and Community Housing Association rental agreement.	TEMPORARY Destroy 30 years after last contact



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
6 SUPPORTED ACCOMMODATION			
6.3.2	Contract Management	Records of agreements between the agency and parent agency to provide residential services.	TEMPORARY Destroy 8 years after expiry of agreement
6.4	Inspections	<i>The process of official examinations of facilities, equipment and items to ensure compliance with agreed standards and objectives. (KWAAA)</i>	
6.4.1	Inspections	Records documenting inspections of facilities, and the assessment of unmet needs of people with exceptional needs accommodated at private residential facilities. Includes psycho-social supports and allied health.	TEMPORARY Destroy 10 years after action completed
6.5	Operational Policy and Procedures	<i>Standard methods of operating documented by the agency according to statutory requirements or formulated policy.</i>	
6.5.1	Operational Policy and Procedures	Master copy of agency specific operational policy, procedures, guidelines and work instructions relating to Supported Accommodation.	PERMANENT
6.5.2	Operational Policy and Procedures	Records documenting the background and development of agency specific operational policy, procedures, guidelines and work instructions. Includes working papers and drafts relating to Supported Accommodation.	TEMPORARY Destroy 2 years after last action
6.5.3	Operational Policy and Procedures	Reference material relating to agency specific operational policy, procedures, guidelines and work instructions. Includes circulars, reports and information sourced from other agencies relating to Supported Accommodation.	TEMPORARY Destroy 3 months after last action
6.6	Project Management	<i>The activities associated with a defined series of actions, including planning, implementing, monitoring and the final assessment and report at completion of a project.</i>	



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Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
6 SUPPORTED ACCOMMODATION			
6.6.1	Project Management	Records documenting transitioning, relocation and accommodation projects which may involve the Public Advocate, eg Tregenza Avenue Aged Care Services, Strathmont Centre Community Living and Redevelopment Project, and the Younger People in Residential Aged Care Program, previously known as Younger People in Nursing Homes. Records include project brief, funding proposals, approvals, working groups, project plans, stakeholder meetings, floor plans and photographs, project reports and technology meetings. Includes the development of concierge apartments, alarms and other technology fit-out specifications needed by the client.	PERMANENT
6.6.2	Project Management	Records documenting the selection process of client-tenants for inclusion, relocation and accommodation projects eg Smart Living Projects. Includes selection criteria and panel process on disability needs priorities eg progressive disorder and financial status.	PERMANENT
6.6.3	Project Management	Facilitative project records including draft agreements, unsuccessful proposals, submissions and registrations of interest, advice and draft letters, public reference documents and project variations.	TEMPORARY Destroy 5 years after last action
6.7	Statistical Reporting	<i>The processes associated with managing statistical data on specific activities, and to provide formal factual statements or findings of the results of their analysis or examination.</i>	
6.7.1	Statistical Reporting	Records documenting quarterly statistical reporting to the parent agency regarding the provision of residential services.	TEMPORARY Destroy 7 years after action completed.



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