

# **ANNUAL REPORT** 2018 - 2019



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#### THE ORGANISATION

AMPARO Advocacy is a non-profit community organisation which provides independent individual and systemic advocacy with and on behalf of people from culturally and linguistically diverse (CALD) backgrounds with disability. AMPARO Advocacy is governed by a voluntary Management Committee, the majority of whom are people from a CALD background with disability. AMPARO's core advocacy funding is received from State Government Department of Communities, Disability Services and Seniors.

AMPARO Advocacy believes that people from a CALD background with disability have the same right to live valued inclusive lives that are comparable to other citizens, however societal responses to vulnerable people can be inadequate and harmful, making independent social advocacy on their behalf often needed.

THIS ANNUAL REPORT PROVIDES AN OVERVIEW OF THE WORK THAT HAS BEEN CARRIED OUT FROM OCTOBER 2018 - OCTOBER 2019.

#### **Mission Statement**

AMPARO Advocacy defends protects and promotes the rights and interests of vulnerable people from a culturally and linguistically diverse background with disability.

#### Vision

AMPARO Advocacy's vision is for people from a CALD background with disability to be accepted and respected as part of the diversity of Australian society, with access to information, services and benefits, so that they can be included, participate and contribute in family and community life.

#### The Objects of AMPARO Advocacy Inc.

- 1. To provide individual advocacy for vulnerable people from a CALD background who have a disability to defend, protect and promote their rights and interests so that their fundamental needs are met.
- **2.** To influence positive sustainable change to attitudes, policies, practices and resources within governments and communities.
- **3.** To develop links with others who can strengthen our advocacy efforts.
- **4.** To be an effective, accountable social advocacy organisation.
- 5. To undertake activities that further the objects of the Association and social advocacy.

Human rights are inherent, inalienable, indivisible and universal. They are the birthright of all people and cannot be lost or taken away. They are all of equal importance and apply to all people whatever their race, gender, disability, language, religion, political or other opinion, national or social origin, age, property or other status. (United Nations)

#### **AMPARO Advocacy believes:**

People from a CALD background with disability have a rightful place in community where they:

- are respected and valued
- can experience valued relationships with friends and family
- have access to qualified interpreters and information in their preferred language
- have supports and services provided in a culturally sensitive and responsive way
- have their gifts and strengths recognised
- have the natural authority to influence the direction of their own lives, or where they have limited capacity, that their family where possible retains this authority
- are welcomed and have opportunities to live an ordinary life
- are participating and contributing members in the social, economic and political life of broader Australian society.

#### **AMPARO's Mandate**

AMPARO Advocacy takes our mandate from important United Nation declarations, Federal and State antidiscrimination laws and principles which promote the rights of all people as well as expectations for the lives of people from a CALD background with disability.

The **Convention on the Rights of Persons with Disabilities** in particular provides advocates with a mandate to assert the rights of people with disability to education, health, work, adequate living conditions, freedom of movement, freedom from exploitation and equal recognitions before the law.

#### **Advocacy Principles**

Independent advocacy is provided in a way that respects and meets the language, cultural and religious needs of the person and group and is guided by a strong commitment to the following principles of:

- Human Rights
- Social Justice and
- Inclusive Living

#### Independent social advocacy:

- Represents the rights and interests of people with disability who do not have a voice, or close family or friends who can support their aspirations or speak on their behalf.
- Addresses serious issues of discrimination, violence, abuse and neglect of people with disability.
- Respectfully challenges poor approaches and responses from service systems.
- Enables individuals to access important information, services and supports so they are able to actively participate, engage and contribute to family and the broader community.
- Prevents an escalation of the person's issues and vulnerability and in the long term saves government and public resources.
- Builds the capacity of individuals with disability and their family members to understand their rights and to speak up about what is important to them.

- Seeks to build and repair close relationships around the person, an important safeguard for people with disability.
- Encourages services to meet their obligation under Federal and State Policy Frameworks and to work in ways that are culturally safe, competent and responsive.
- Supports the Queensland Government to meet its National Disability Agreement (NDA) obligations as part of the National Disability Strategy (2010-2020).

#### Management Committee 2018 - 2019

President	Shahram Jazan
Vice President	Don Dias-Jayasinha
Secretary	Karin Swift (resigned Feb.2019)
Treasurer	Ludmila Doneman
Committee Member	Abebe Fekadu
Committee Member	Jennifer Barrkman
Committee Member	Julie King (April 2019)

#### Staff

#### 2018 - 2019

Manager	Maureen Fordyce
Advocate	Liz Martyn-Johns
Advocate	Murka Smiechowski
Multicultural Project Officers	Lalita Lakshmi
	Jo-Ann Cochran
	Benita Bierzynski
	Maree Anderson
Administration Officers	Linda Mullaly
Bookkeeper	Lucia Forman

#### Strategic Goals 2017-2019

- **1.** Provide vigorous individual advocacy.
- **2.** Engage in strategic systemic advocacy.
- 3. Undertake community engagement and development that furthers the social advocacy work.
- **4.** Be an effective, sustainable and independent advocacy organisation.

#### **PRESIDENT'S REPORT**



Good afternoon everyone, I would like to present my report for 2018 -2019. AMPARO has continued to provide independent individual advocacy support to those living in the Brisbane area with our advocates working to ensure people from CALD backgrounds with disability have equitable access to important information, mainstream services and specialist disability supports including the NDIS.

Over the past year, much of our advocacy has involved ensuring people from CALD backgrounds can access and participate in the National Disability Insurance Scheme. This new system has presented enormous challenges for individuals and families and through our systemic advocacy, these key issues are brought to the attention of governments and the NDIA.

At the organisational level as usual it has been another big year. We have seen changes in staff over the past twelve months with Jo Cochran our project officer who worked with us for almost two years on the Targeted Participant Readiness Initiative, finishing up in November 2018 and Maree Anderson commencing work with us in February this year. Maree has worked on a small state funded project to assist people to access the NDIS. We are so fortunate in attracting good people to AMPARO.

Early this year we prepared for our recertification Audit, which was conducted by the Institute of Healthy Communities Australia, under the Human Service Quality Framework the feedback from the auditors was extremely positive, particularly the fact that:

"All individuals and family members interviewed spoke highly of the services they received and stated that they would have continued to be in a very difficult situation had AMPARO Advocacy not been there for them."

We are pleased to advise members that AMPARO was successfully recertified.

We also found out early in the year, that AMPARO was successful in our application for an Information, Linkages and Capacity Building Grant, as a Disabled Peoples and Families Organisation. A major focus of this work is to increase the capability of current and potential committee members and other members of AMPARO to lead and govern the organisation into the future. We are pleased to have with us today some of those new members from this work.

In July this year AMPARO was pleased to sign another two year Service Agreement with the Department of Communities, Disability Services and Seniors, so that we can continue to deliver independent social advocacy. We hope that this commitment to fund independent advocacy is ongoing.

This time last year, at the AGM we were fortunate to welcome Julie King, Senior Lecturer with QUT, onto our board as committee member and since early this year Julie has taken on the important role of secretary. Unfortunately, Karin Swift had to step down from her role in February this year after 14 years as a much valued committee member, we will have more to say about Karin's departure later in today's proceedings. I would like to sincerely thank all members of the management committee for their tireless work throughout the year, you have all been such a great support to me in my new role as President of AMPARO.

Lastly, I would like to thank all of our staff Maureen, Liz, Murka, Linda, Lalita, Lucia and Maree, for the passion and commitment you bring to the organisation and the people we serve. Finally, friends thank you for your attendance and attention. Shahram Jazan

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### GOAL 1: Provide vigorous individual advocacy in the Brisbane area

AMPARO Advocacy undertakes independent social advocacy with and on behalf of vulnerable people from a CALD background with disability to defend, protect and promote their rights and interests, to address issues of social and economic isolation, unfair treatment and discrimination.

#### AMPARO represents those who are most at risk and least able to represent or defend their own rights and interests, so that fundamental needs are met and they can actively participate, engage and contribute to family and community life.

The majority of individuals that AMPARO works with are from a refugee background and new and emerging communities and are often missing out on accessing mainstream and specialist disability supports, including early intervention support for their children and the National Disability Insurance Scheme. They are often marginalised, and isolated from their own communities and the broader community.

Over the past twelve months, AMPARO's one individual advocacy position has provided intensive independent advocacy support on behalf of **38 individuals from CALD backgrounds with disability** living in the Brisbane area. AMPARO provides advocacy to people with a range of disability types, who come from a diverse range of cultural backgrounds including: Liberian, Vietnamese, Greek, Rohingya, Karenni, Karen, Shan, Eritrean, Hazaragi, Congolese, Chinese, Burundi, Iranian, Liberian, Somali, Nepalese, and Iraqi.

Whilst the focus of providing individual advocacy is on the rights, wellbeing and best interests of the individual with disability, getting to know the person and their family well is critical for advocacy efforts to be effective. Linking and supporting other vulnerable family members to much needed information, services and supports is also part of our work and often necessary.

#### Of the individuals who have received direct advocacy:

- **68%** required a credentialed interpreter to assist with communication.
- 68% were from a refugee background, where they or their family were forced to flee their homes to escape war and violence.
- 76% required long-term advocacy, over 12 months, to address the myriad of complex and serious issues they and their families were experiencing.

Since January 2018 most of individuals we work with have required vigorous advocacy support to successfully access and participate in the NDIS. Through this work we have witnessed the enormous difference the NDIS can make in people's lives, when they are well supported to navigate this new complex system of support.

Advocates, Murka Smiechowski and Liz Martyn-Johns, have worked hard to achieve positive outcomes for many individuals over the past year, including ensuring many have the level and type of support they desperately need in their NDIS Plans and undertaking several access and plan reviews when the NDIA get it wrong.

#### **Outcomes of independent Advocacy**

Advocacy has resulted in individuals receiving culturally appropriate information so they understand their rights, and can make informed decisions, and where family are supporting their decision making, they are better placed to do so.

As a result of individual advocacy those we have assisted have been able to access:

- Certified interpreters for effective communication
- Translated information, including translated NDIS Plans
- Successful NDIS Access
- Culturally appropriate NDIS pre-planning and planning support
- Successful Plan reviews
- Essential medical treatment and health services
- Psychiatric and psychological support
- Allied health assessments and treatment
- Legal Aid and other legal support
- Support to attend Mental Health Tribunal Hearings
- Culturally appropriate support and services
- Positive outcomes from QCAT hearings and Mental Health Tribunal Hearings
- More appropriate NDIS services, including support coordination services
- Intensive Family Support services
- Mainstream inclusive education
- Independent advocacy when this was questioned

Through our work we see how easily people can fall through the cracks and are aware of the many obstacles people experience in accessing and participating in the NDIS. The current NDIS Pathway continues to be complex and difficult to navigate.

AMPARO has found that without targeted culturally appropriate engagement, specialised assistance and independent advocacy, many individuals from a CALD background with disability and their families have either:

- not submitted an access request to the NDIS
- had their NDIS access requests rejected, often due to lack of evidence
- received poor plans that cannot meet their needs, or
- not been able to implement their plans, due to receiving inadequate or no funding for support coordination.

Some individuals with disability and their families reported that they had been assisted by several different services or people, over many months, to make a NDIS access request. However these applications can be poorly written and lacking evidence. As a result they receive rejection letters or requests for further evidence from the NDIA and they are either

unable to read the NDIS letter which is in English, or do not know what they need to do next. This scenario is too often the end of people's attempt at NDIS access.

Others have reported services had assisted them with initial access requests to the NDIS, and then disappeared, leaving them confused and unsure if an access request has been made and frustrated that promises of receiving support had not eventuated.

AMPARO's experience through providing individual advocacy and the Targeted Participant Readiness work which finished late last year is that, individuals and their families require intensive culturally appropriate support through each step of the process: to access the NDIS, to undertake preplanning, to effectively participate in the planning process, and to connect with culturally safe and responsive service providers.

#### **Stories of Individual Advocacy Work**

The following individual advocacy stories provide insight into some of the complex issues experienced by people from a CALD BACKGROUND with disability. Real names have not been used and details that may identify the individual have been changed.

### Access to the NDIS for people with Psychosocial Disability: Essentials for Reasonable and Necessary Supports

AMPARO Advocacy has advocated for a many people with disability from a culturally and linguistically diverse (CALD) background to assist them to access and receive the level and types of supports they require to meet their needs from the NDIS. The process of accessing such supports has been particularly difficult for four people with a psycho-social disability.

#### **Sourcing Evidence for Access**

With each person AMPARO needed to identify and work closely with a supportive psychiatrist who was able to provide a free assessment and report confirming the nature of the person's psychiatric condition. The psychiatrist needed to be able to report that the person's impairment was likely to be permanent, result in substantially reduced functional capacity and limit their social and or economic participation. And that supports were likely to be required for the person's lifetime.

As per the NDIS requirements they also had to confirm that a wide range of treatments had been trialled, but that substantial impairment remained. Whilst some psychiatrists were more aware of the NDIS criteria and report requirements others required considerable information and support to understand the importance of addressing each of the access criteria.

Despite having clear evidence of disability and impaired capacity from a psychiatrist, AMPARO found that applicants also required a good functional assessment from an Occupational Therapist (OT). However for some the combination of the two reports was still not sufficient for access to the NDIS.

We advocated for Ahmed, a young man with schizophrenia and resulting cognitive impairment. His psychiatrist had provided evidence of disability, long term treatment and continuing impairment and an experienced OT had provided a detailed report highlighting the person's experience of significant functional impairment across many areas of their life. The assessments were completed with the assistance of an on-site interpreter to ensure accuracy of reports.

Despite this clear and comprehensive evidence, he was declined access by the NDIA, due to a 'lack of functional impairment'. Thankfully an Access Review submitted by the advocate, with no additional information provided, resulted in access being granted.

Helena was referred to AMPARO having been denied NDIS access due to her condition not being deemed permanent by the NDIS. This was despite the fact that her GP had provided appropriate and detailed evidence on an Access Request Form that her chronic mental health issues had impacted her for more than 30 years and that this had resulted in a range of permanent impairments. It was also despite a WHODAS report that had been submitted in the initial application which provided further evidence of significant functional impairment.

The advocate worked hard over 4 months to assist Helena to access further assessments and to reapply to the NDIS. This included, spending time to build Helena's trust (and her trust of a well-respected interpreter), establishing the reasons for lack of connection with current services, working with a hospital-based psychiatrist to ensure she was aware of the full range of NDIS criteria that had to be addressed in the new psychiatric report and supporting Helena to attend hospital-based appointment and referring and linking her with the team at Disability Services to enable her to undergo further functional and cognitive assessments, free of charge, by an OT and psychologist. Advocacy was needed to ensure that the same trusted on-site interpreter was engaged for all meetings.

After a further 2 months Helena's application was finally accepted, 6 months after she was deemed ineligible for the NDIS.

Although Andreas had significantly reduced capacity in a number of areas due to his longterm Post Traumatic Stress Disorder, he had no medical reports or functional assessments to support his application to the NDIS. When Andreas had been discharged after several months as a hospital in-patient, his referral to his local hospital for out-patient follow-up had been declined and he was no longer under the care of a psychiatrist.

As Andreas did not have current access to psychiatric services through the public health system, more than 40 hours of advocacy was required to secure evidence of his psychiatric condition and functional impairment. Fortunately, the Specialist Disability Services Assessment & Outreach Team (SDSAOT) at the Department of Disability Services were at that time assisting with assessments to provide evidence of disability. Their psychiatrist met with Andreas, his preferred interpreter and the advocate on a number of occasions in order to undertake a comprehensive assessment, with no charge. The advocate provided information and assistance to the psychiatrist to ensure that each NDIS criteria was assessed against and reported on. Sadly others who were receiving advocacy and who required similar levels of assistance were unable to access SDSAOT support prior to the program being defunded.

The advocate also assisted Andreas to connect with a volunteer OT who conducted a functional assessment for him, with the same interpreter, and evidence of long-term treatment and continuing impairment was sourced from QPASTT. AMPARO then assisted Andreas to use this evidence to successfully gain access to the NDIS.

Despite Maya having met access requirements for support from Department of Communities, Disability Services and Seniors, due to her acquired brain injury and experience of schizophrenia, she had been on their waitlist for more than two years and had not been receiving supports. As a result, she was not deemed 'defined' and had to submit a full application to the NDIS. Fortunately, with Maya's consent, AMPARO was able to access reports from her treating psychiatric team at the local mental health unit which included a new psychiatric report and existing reports from previous functional assessments.

#### **Pre-Planning and Planning**

AMPARO Advocacy assisted all four participants with pre-planning and three at their planning meetings. Despite all having significant and complex support needs, and either no family supports or limited supports from family members with little or no English and no access to the internet, all but one was streamed to the Local Area Coordinators for their planning conversation. All four had decisions around their plan content and funding level made by an NDIA planner that they and their family had never met.

While Ahmed was waiting for the outcome of his Access Review a LAC visited him for a 'pre-planning' meeting. Despite there being considerable evidence on file re AMPARO's involvement in the lodgement of his original application and his Access Review, and being listed as a contact and his advocate, the advocate was not invited to this 'pre-planning' meeting.

When informed by the NDIA that access had been met, the advocate phoned Ahmed, who reported a 'visit' from the LAC. When the LAC was contacted, we were informed that the 'pre-planning' meeting had actually been his planning conversation and that he hadn't thought that the advocate should be informed. Moreover, the LAC was adamant that the conversation had gone well and there had been no need for an advocate to be present. Ahmed had expected to be invited to a planning meeting at an NDIA office with an NDIA Planner once access had been met, and had no idea that he had actually had his planning conversation and had met access requirements.

Ahmed's plan was very poor and funding for supports was far from adequate. A Plan Review by the advocate resulted in increased funding for support coordination, but other funding remains limited. AMPARO had therefore had to submit both an Access Review and Plan Review for Ahmed, a young man with clear psychiatric evidence of a significant psychosocial disability and who had a comprehensive professional functional assessment outlining the need for supports in near all aspects of his life.

Maya attended an early planning meeting with the NDIA and although an onsite interpreter had been requested by the NDIA, no one had checked that one had been allocated and none was available on the day. As neither of Maya's parents speak English and Maya has a significant cognitive impairment, it was incredibly difficult to have any more than a very basic question and answer session through the phone interpreter. Following the planning meeting the planner was transferred to a new position before she had finalised May's plan and allocated funding. Instead this was completed, some considerable time later, by a second planner. The resulting plan was very poor, with limited funding being allocated for the year. Maya has recently had her Annual Plan Review with advocacy support, an on-site interpreter and supporting evidence with a new comprehensive functional assessment report. Despite having exactly the same support needs as last year, she has been allocated more than twice the original level of funding in her second NDIS plan.

- Helena's LAC planner met with her, AMPARO's advocate and Helena's preferred certified interpreter in her own home. The LAC reviewed the comprehensive reports from the psychiatrist, OT and psychologist and with the assistance of the professional on-site interpreter, was able to determine accurately Helena's significant support requirements, and developed an appropriate plan accordingly. Helena is now well supported by a team of workers and a psychologist who speak her own language and she no longer presents regularly to the Accident and Emergency Department of the local hospital.
- Andreas recently attended his planning conversation with a LAC at Carers QLD, with his advocate and a certified interpreter. This LAC had obviously taken the time to read the comprehensive reports provided by the psychiatrist, OT and QPASTT and was able to clarify various points with Andreas through the on-site interpreter. It is obvious at times that those conducting the planning conversations have not been able to read reports that have been provided, prior to planning meetings and are less prepared. We are hopeful that Andreas will receive the level and type of funding that he requires to meet his needs, however weeks after the planning conversation he has yet to receive his plan.

#### Support Coordination and Support Services

- Advocacy resulted in Helena having the high number of hours for support coordination that she required and AMPARO was able to link her with a Support Coordinator who is locally based and aware of opportunities for local community involvement. With Helena's agreement, she has trialled a range of supports which has allowed Helena to experience different support strategies and select those she enjoys most. Prior to the NDIS Helena was not engaging with any services and was extremely isolated. She now accesses the community with individualised support four days a week and sees a psychologist fortnightly.
- Having been on the wait list with Disability Services for over two years Maya had no previous support to access the community and rarely left her home. She was initially linked by AMPARO to an experienced Support Coordinator, but when the latter left the organisation, she was replaced by someone who lacked cultural competency. After AMPARO raised concerns with the service, the Support Coordinator was replaced by a coordinator who engages well with Maya and her family. Maya now has weekly in-home support to assist her to participate in household tasks, enjoys developing her reading skills and has developed a keen interest in fishing at the local wharf.
- Prior to accessing the NDIS, Ahmed enjoyed meeting with people who spoke his language at a local service, and going on weekly social trips. This was Ahmed's only support prior to the NDIS and funded through QCCS. With the introduction of the NDIS Ahmed advised that he wanted to continue to participate in this group, in addition to having individualised

support in-home and for community involvement. However, within a few months the service withdrew supports for all NDIS participants whose plans were agency or plan managed, stating the reasons were, late payments by the NDIA and need to chase invoices. As Ahmed's plan is agency managed, he is disappointed his choices have been more limited and that he cannot meet weekly with his friends at his previous service. However, his support coordinator is looking at ways he can reconnect with these friends. Helena recently had a similar issue with the service who employed her preferred support worker, ceasing supports for all NDIS participants; fortunately, Helena has been able to source other preferred support workers through another agency.

Andreas has selected a support coordinator to assist him to establish his supports and is looking forward to having assistance to attend a local hydrotherapy program, attend English classes at his church and explore the community more widely once his plan has been approved.

#### **Essentials for Reasonable and Necessary Supports**

Critical for all four participants to gain access to the NDIS, was access to <u>free</u> and timely diagnostic and functional assessments and reports from psychiatrists, OTs and psychologists who had a good understanding of the NDIS criteria against which they could assess their patients.

Professional and competent on-site interpreters, that participants felt comfortable with, have been critical for effective communication throughout each step of the process from determining if individuals wanted support to access to the NDIS, to implementing their NDIS Plan.

While phone interpreters may be adequate for discussing brief information, for example arranging meeting times, trusted on-site interpreters are essential if accurate and detailed information is going to be shared appropriately during more

Whilst the NDIS is meant to be based on the social model of disability, there is a strong emphasis on medical evidence to confirm impact of functional impairment. Comprehensive assessments and reports documenting the person's functional impairments and related support needs have been critical to meet NDIS access, and for securing adequate supports in participants plans.

Advocacy has been essential for these four individuals and many others to successfully navigate the highly complex NDIS pathway and processes. Even with advocacy, access to affordable assessments and reports is exceedingly difficult, but for those without advocacy or a current treating psychiatrist, and particularly for those with limited or no English, it is often impossible.

In addition to linking with psychiatrists and allied health professionals and providing support at each stage of the process, significant advocacy was required for each of the four participants to negotiate the many hurdles that came their way.

Of the four, Ahmed required an access review and plan review, Helena required a reapplication and, following a very poor first plan. Maya required advocacy for her annual plan review to ensure sufficient funding to meet her needs was provided in her second plan. The advocate spent many hours advocating for Andreas to ensure that access was met and that his plan was adequate first time around.

Without free access to good evidence, professional on-site interpreters and significant advocacy these four individuals with significant psychosocial disabilities and substantially reduced functional capacity, would not have been able to access the level and types of supports they required to meet their needs through the NDIS.

#### The Importance of Having Access to Preferred On-Site Interpreters

Having access to a preferred on-site interpreter is critical for many for a variety of genuine reasons. Although the National Disability Insurance Agency (NDIA) have largely accepted this, the Translating and Interpreting Service (TIS National) continues to block applications for a specific interpreter or makes the process so difficult that those making the booking give up. As the NDIS and NDIS service providers can only use TIS National for interpreting this is a highly significant and concerning issue for many.

i) A core tenet of the NDIS is 'choice and control'. The NDIA's website clearly states that 'participants control the support they receive, when they receive it, and who provides it'. TIS National's policy of refusing to allow the majority of participant's choice when booking an interpreter conflicts directly with this guiding principle of the NDIS.

This in itself should be sufficient grounds for participants to be able to choose their preferred interpreter, but there are also many other reasons why a participant's choice of interpreter should be respected.

ii) There is a huge variation in quality of interpreters. For those with a disability who may have difficulty expressing their wishes and concerns, or find this process very stressful, it is vital that they have access to good experienced interpreters who provide a respectful and supportive service.

Where we have worked with interpreters with individuals and family members, we have had feedback that information is not always interpreted correctly, that the interpreter may speak a different dialect or that people can feel rushed. It has been reported that some people have even felt denigrated by the interpreter. We had thought that important information had been shared accurately during a two hour meeting but at a follow-up meeting with a different interpreter it became clear that it hadn't and the material had to be revisited.

At an NDIS planning meeting for a young woman from Iraq, the phone interpreter from TIS was so poor the phone call had to be terminated, and a replacement interpreter requested. At another NDIS planning meeting the interpreter spoke so softly the family member could not hear. On another occasion it was obvious that the phone interpreter was driving at the time of the call and not focused on the conversation. On another, the phone interpreter had only expected a short call and informed us after 10 minutes that her battery was low and that we'd have to call TIS for a replacement interpreter.

iii) CALD communities are often very small with many in the community knowing each other well. For many from CALD communities there is considerable stigma around disability and mental illness which results in a real fear of their personal information being shared within their community. Participants may have real and or perceived concerns about breaches in confidentiality and wish to ensure that highly confidential information regarding themselves and family members is not shared within their community.

AMPARO worked with one young man from a small community who had previous experience of working with untrustworthy interpreters who had shared information about them within their community. As a result of this he was not prepared to speak in front of people that he didn't fully trust. Fortunately we knew of three interpreters that he trusted and were able to request one of the three for each meeting.

For someone else who was highly fearful about having information shared within the community, and had previously refused to engage with interpreters despite having little English, AMPARO was able to recommend a highly respected and trusted interpreter who spoke the same language but who was from a different community.

iv) When people are not confident their privacy and confidentiality will be protected, or do not want to share their very personal information with yet another member of their community, significant and important information will not be shared. This is likely to result in poor planning, inadequate funding and inappropriate service provision.

Following a recent planning meeting the advocate received a phone call from the participant informing her that he had been unable to share significant information regarding required supports with the planner, due to the interpreter being well known to the person, and to the interpreter having discussed his issues with community members in the past.

Had he been able to use his preferred interpreter this would not have happened, and the planner would have been given a much more accurate account of his support needs.

Although it was clear that the second person mentioned in iii) above was struggling and in need of significant support, the advocate was unable to establish the extent of the issues or the supports required, until the person first trusted the advocate, and then the interpreter who had been recommended by the advocate as trustworthy.

v) During the pre-planning and planning meetings and at meetings with NDIS service providers, highly confidential information is shared again and again,

often in the participant's home. It is much easier for people to have this information shared with one or two trusted interpreters rather than with a large number of different interpreters from within their community.

AMPARO advocated for a Sudanese man with psycho-social disability who had no evidence of the impact of disability to help with access to the NDIS. As is the case with most individuals we assist, AMPARO needed to engage an interpreter to ensure accurate communication with the person and their family member and other professionals and through each step of the process. This included following:

- For the OT to conduct a functional assessment
- With his psychiatrist to access a psychiatric report
- To complete his NDIS Access Request Form
- To write and lodge an NDIS Access Review
- To explain his NDIS Plan to him
- To meet with a potential Support Coordinator.

Much of the same material was revisited at each meeting. Working with one known and trustworthy interpreter over time, the man and his mother began to trust the advocate and interpreter and was gradually willing to provide more stressful and private information. This was critical to ensuring appropriate supports were provided in his NDIS Plan.

# vi) Interpreters who have worked with the person for some time, develop a good understanding of the context of the discussions, which makes the need for repeated clarification of points less likely. With new interpreters information usually has to be explained in more detail, and often clarified, to ensure the interpreter understands the point that is being made.

This was certainly the case in the above example. Over several meetings the interpreter gained a good understanding of the issues involved and thereby sought less clarification and was able to interpret more accurately.

#### vii) On a practical level, using a preferred interpreter enables the worker to arrange a meeting with relevant parties at a time when an interpreter is known to be available, and willing to travel to the meeting location. If meetings are arranged and then an interpreter requested, frequently there can be no on-site interpreter available.

This has been a particular problem for families living outside the central Brisbane region; with plenty of work available more centrally interpreters do not opt to pick up jobs further afield as they are not paid travel time or costs.

When first working with a family in Redlands, three meetings had to be cancelled before the interpreting service was willing to offer to fund travel time and costs and provide an interpreter for a critical meeting. Now the advocate checks the availability of interpreters who are known to be willing to travel to appointments prior to making the booking. Likewise, no interpreter was available to travel to a planning meeting at Browns Plains, despite several weeks' notice.

- viii) The use of telephone interpreters at lengthy meetings such as planning meetings, makes open and detailed discussion of functional impairment and support needs impossible. Likewise, phone interpreters should not be used for functional and medical assessments, nor for occupational or speech therapy and counselling sessions, where discussions are complex and where body language and facial expression are crucial to understanding what is being said. If such appointments can be scheduled for when a good on-site interpreter is known to be available, such appointments do not need to be cancelled and rescheduled due to lack of interpreter availability, and inappropriate fill-in phone interpreters do not have to be relied upon.
- ix) In exceptional circumstances TIS has agreed to provide preferred interpreters where 'continuity of care' can be proven. While AMPARO welcomes the recognition of the need for preferred interpreters, often it is not possible for a participant to provide such evidence.

People require interpreters in a variety of settings and may well not be able to get proof of continuity of care. For example, they may know of interpreters from hospital or GP appointments, or from meetings with services they no longer use.

Also, participants may wish to use interpreters that come recommended as professional and trustworthy by a third party who they already trust. AMPARO's experienced advocates have worked with a wide range of interpreters over many years. While many are highly professional and trustworthy a significant number are not. Engaging those that are well respected ensures that people with limited English are able to share their wishes and concerns clearly and accurately in a safe environment and get the most out of their meetings with the NDIA, Carers QLD and service providers.

It is therefore crucial that participants are able to request their preferred interpreter should they wish to do so, and that on-site interpreters are used for all detailed and complex conversations.

Should TIS National continue to be unable to provide preferred interpreters except in all but the most exceptional of circumstances it is essential that the NDIA, LACs and service providers are able to access interpreters through alternative interpreting services who acknowledge a participant's right to choice and control and are willing to book preferred interpreters as requested.

#### Akan's experience with the NDIS

AMPARO Advocacy commenced advocating on behalf of Akan in June 2019. Akan is in his thirties and has a physical disability due to an amputation above his left knee following a landmine accident in 2002. Akan arrived in Australia with his family in 2013 as recognised refugees under Australia's Humanitarian Entrance Program. The family had spent over 11 years in a Refugee camp prior to coming to Australia.

The family experienced a range of additional barriers in relation to settling in Australia. These included:

- Lack of knowledge and understanding of Australian social and medical systems
- Lack of information about the availability of services, programs and benefits
- No access to support due to their limited proficiency in English; and
- Shortage of interpreters in Akan's dialect (the interpreter was available only one day a week, which significantly impaired advocacy efforts).

Akan is using a poor quality prosthetic leg and has limited mobility which has a significant impact on his life. He also reported considerable back and leg pain and has poor balance and experiences extreme fatigue. These factors severely limit his ability to use public transport and to engage in his community. He can only walk for up to 5 minutes before needing to rest and requires support from his mother whenever he leaves his home.

Akan's elderly mother is his primary support and she has reported that she has to assist him with a range of day to day activities, decision making, financial assistance and transport. Akan spends a lot of time at home without much structure to his day and does not participate in any meaningful activities out of the home. His ability to attend TAFE or community based English classes is also very restricted. Thus, Akan speaks very little English and this further exacerbates his social isolation.

The family have never had opportunities to access any support. They are not familiar with the Australian service system, the processes to obtain support, or the possible support options which could be available and beneficial for Akan. Before an AMPARO advocate became involved, the family received assistance from a community member to complete and submit the NDIS Access Request form. NDIS recognises amputation as a condition resulting in physical impairment for which functional capacity varies and further information is generally required regarding the individual's functional capacity in order to be considered eligible. Once the advocate became involved and contacted the NDIA they would only confirm that they had received the completed Access Request Form and were unable to advise what medical evidence, if any, had been provided. However Akan's NDIS application was not approved and he received a letter in English requesting further medical evidence in relation to how his disability impacted on his functional abilities.

Unfortunately the family did not advise the advocate of this and a known community member assisted Akan to visit his GP to source the additional evidence requested by the NDIS. However, the family's GP refused to provide any further medical evidence on the impact of Akan's impairment on his functional capacity and advised the family to wait for the report from the prosthetic clinic which he had requested. Unfortunately the report from the prosthetic clinic would not have had the necessary information on the impact on Akan's functional capacity that the NDIA required. In AMPARO's experience, some GPs have limited knowledge of NDIS processes and medical evidence requirements. This unfortunately can have a major impact on the level of support that a person can obtain from the NDIS and their access to the scheme may be denied entirely. This is especially relevant to people from culturally and linguistically diverse (CALD) backgrounds with disabilities, due to the additional barriers they experience and some GPs limited interest and experience in working with CALD communities.

Furthermore, Akan had never undergone an occupational therapy (OT) assessment, and is unable to afford the cost of an OT assessment. Unfortunately the Mater at Home service no longer has funding to provide allied health assessments at a cost of \$10. The advocate on finding out that Akan's application had been rejected and that the NDIS required further evidence, supported Akan to another appointment with his GP and requested further evidence of Akan's functional impairment. The advocate was able to provide the GP with the necessary information about NDIS processes and requirements and detailed information gathered from Akan about the impact of his disability on his functional abilities. As a result, the GP was able to provide additional information for the NDIS, which included the impact of Akan's disability on his day-to-day functioning in all key areas including: mobility, communication, self-care, social interaction and learning and self-management. Akan is currently awaiting the NDIS decision to see if he will be accepted into the scheme.

After the first meeting with Akan and his family, the advocate identified a need for further medical investigations to explore whether Akan had also sustained a traumatic acquired brain injury. During the conversations with Akan's mother, the advocate learned that after the landmine accident which resulted in the loss of his leg, Akan was unconscious for three days and when he regained consciousness was unable to recognise anyone. He did not know where he was or what had happened to him for a further to 2-3 days. According to Akan and his family he has experienced a significant loss of short term memory and his ability to learn new skills has deteriorated since his accident. Additionally, Akan can become easily confused in unfamiliar environments and has difficulty finding his way back home after being out. His mother also reports that he is showing depressive symptoms and experiencing low self-esteem.

The advocate contacted the Acquired Brain Injury Outreach Service (ABIOS) and was advised that it was very possible that Akan suffers from a traumatic acquired brain injury and that he would need a neurology assessment to determine this. As a result, a referral has been forwarded to a neurologist in the public hospital system. However the waiting time for this is unacceptable and further advocacy will be needed to seek an earlier neurology assessment. Having lived in Australia for over 6 years, it is disappointing that the medical system had not previously identified Akan's need for further medical investigations to determine the extent of his disability and impaired capacity.

AMPARO will advocate for the NDIS to undertake an OT assessment as part of his plan to provide additional information and further evidence of the level and type of support Akan will need to become included in Australian society, his local community and gain control over his own life.

#### Challenges faced by an AMPARO Advocate

**Part 1:** According to its guidelines, the Public Guardian's role in Queensland is to protect the rights and interests of adults with impaired capacity who cannot make some or any of their life decisions on their own. The Public Guardian acts as a decision maker of last resort for vulnerable adults and is part of the framework of human rights protection in Queensland.

This year AMPARO encountered some difficulties when providing vigorous and independent advocacy on behalf of an individual with an intellectual disability for whom the Office of Public Guardian (OPG) had been appointed to make decisions regarding service provision and health

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issues. This individual is extremely vulnerable and has no family or others in their life that can act as a safeguard to protect and defend his rights and interests, other than the OPG and a paid advocate.

AMPARO has advocated for this individual for the past 6 years. Over this time, the advocate managed to build a relationship based on trust and respect with the individual and had gained an understanding of their disability, complex family history, medical needs, and the additional language and cultural barriers they encountered. It was necessary for the advocate to engage an interpreter for all meetings with the individual and due to the complexity of the issues experienced, the same two interpreters were always engaged to ensure the individual could feel safe and comfortable in sharing information.

Part of the advocate's role was to ensure the necessary information and reports were available to inform the individual's NDIS planner so that the person's plan would meet their specific support needs. The planning meeting went well, however on seeking a copy of the participants plan after this meeting from the delegate of the OPG, it was not provided.

There is strong recognition of the role of independent advocacy in the lives of people with disability in the NDIS Act 2013. The General Principles guiding actions under the Act, support the right for independent advocacy in the following statement:

The role of advocacy in representing the interests of people with disability is to be acknowledged and respected, recognising that advocacy supports people with disability by:

- > promoting their independence and social and economic participation; and
- promoting choice and control in the pursuit of their goals and the planning and delivery of their supports; and
- maximising independent lifestyles of people with disability and their full inclusion in the community.

The NDIS review session was approaching and the advocate had still not been able to access the individual's NDIS plan after several months. Whilst the level of support being provided and services involved were fairly apparent as the advocate was in regular contact with the person, and their support coordinator, it was important that any limitations in the plan be identified and addressed at the review.

In order to prepare for an NDIS Review session, the advocate needed a thorough understanding of the level and type of supports provided to the individual under their current NDIS plan and whether the support being provided reflected what was in their plan. Furthermore, being familiar with the details of the plan allows the advocate to monitor the implementation of the individual's plan and the identification of any inconsistencies or failures in the level of support outlined in the plan.

After several months of not being provided with the report, and not receiving clarification from the delegate on the reasons for this, the situation was referred to the Regional Manager of the office concerned. The Regional Manager was able to explain that the Office of the Public Guardian is required to 'formally document the decision making process to ensure the release of (the person's) personal information is released in accordance with our Privacy Policy."

To satisfy the requirements of the OPG, AMPARO was required to provide a copy of the individual's advocacy plan, and ultimately received a copy of the person's NDIS Plan. This allowed the advocate to prepare for the person's NDIA review session, which was successful in securing additional funding for the individual.

**Part 2:** During, the past 12 months, AMPARO Advocacy has experienced long delays in receiving permission from the Office of the Public Guardian (OPG), to address specific issues for individuals for which the Public Guardian has been appointed. AMPARO works with some of the most disadvantaged and vulnerable people in the community. AMPARO often advocates for individuals from a refugee background with disability, who are experiencing multiple and complex issues. These include issues with communication, lack of understanding of Australian social and medical systems, lack of any informal support and extreme social isolation. The advocate is often the only person in their lives who may understand their circumstances, their specific and complex support needs, medical issues and emotional struggles. The delays in OPG's decision making processes and passing on this to advocates involved can significantly delay the advocacy efforts, which in turn can make the person more vulnerable.

Whilst AMPARO Advocacy has experienced these issues with some guardians from the Office of the Public Guardian, we appreciate the significant and valuable role the OPG has in the lives of vulnerable Queenslanders with impaired capacity. AMPARO is committed to continuing its close working relationship with the Office of the Public Guardian and to raising concerns where necessary, to safeguard the best interests of individuals from CALD backgrounds with disability in our community.

#### GOAL 2: Engage in strategic systemic advocacy

AMPARO also receives a small amount of funding to undertake systemic advocacy, which aims to influence positive sustainable changes to attitudes, policies, practices, that are not working in the best interests of people from CALD backgrounds with disability.

Through the individual advocacy work and our engagement and capacity building work with people from CALD backgrounds with disability, their families and communities, we become aware of the many obstacles and additional barriers people experience in accessing supports when service systems are not designed to effectively meet their language and cultural needs.

The systemic advocacy work challenges Federal and State legislation and policy that is inconsistent with international human rights obligations and what is considered to be best practice approaches in working with people from CALD backgrounds with disability. As part of this work AMPARO shares people's experiences that contribute to issues of disparity, with those in positions of power and influence to increase their understanding of the issues that this cohort experience.

### The additional barriers that prevent people from accessing important information, services and supports include:

- A lack understanding about disability and the rights of people with disability in the Australian context, including what a good or ordinary life can look like for persons with disability.
- Lack of awareness about available supports and services, including mainstream and disability specialist supports.
- Experiences of stigma associated with disability and mental health which can keep people isolated and can contribute to their being reluctant to seek help.
- Furthermore, when people do try to seek assistance they are generally confronted by service systems that have not been designed to meet their language and cultural needs and they struggle to effectively engage with them. Over time people can cease to engage because services lack cultural competence, including knowing how to engage language services for effective communication.
- Individuals from new and emerging communities and refugee backgrounds with limited or no proficiency in English, are particularly disadvantaged as services frequently fail to provide certified interpreters and translated information even when requested.
- Subsequently many people from CALD backgrounds with disability and their families have fallen through the gaps, and <u>are not</u> understanding or accessing mainstream or disability specialist services including the NDIS and early intervention services, to the levels that they should be.

#### **National Disability Insurance Scheme**

A large component of our systemic advocacy has again focused on respectfully challenging and providing feedback on the design and practice approaches of the NDIS which restrict people's access and participation in the scheme. Whilst there are some improvements in how the NDIS is being implemented, they are too few and far between to bring about the changes that are urgently needed.

The current NDIS participation rates are reflective of the additional barriers people from CALD backgrounds with disability are experiencing in accessing the NDIS and the failure of

the NDIA to adequately resource and implement the *Cultural Linguistic Diversity Strategy* 2018.

#### NDIS Participation Rates - June 2019 Quarterly Report to COAG

- In Queensland 5% of participants are from CALD backgrounds, however this figure should be closer to 15%
- Nationally **8.4%** of participants are from a CALD background, at full roll out the NDIS estimates this figure should be at least **20%**.

Only **57%** of Queenslanders with disability have an NDIS plan, compared with the numbers estimated in Queensland's bilateral agreement. The Northern Territory is the only location that is doing **more** poorly than Queensland.

#### Key issues taken up by AMPARO in relation to the NDIA

• Lack of the intensive support to make successful NDIS Access Requests.

Individuals and families we have worked with required intensive support with the assistance of interpreters, to make a successful access requests to the NDIS.

#### Support included providing:

- 1. Information and clarification of the NDIS application, planning and funding processes
- 2. Support to make verbal access requests to the NDIA
- 3. Assistance to access existing supporting diagnostic reports by:
  - providing letters for individuals to take to Centrelink / Schools / GPs to access diagnostic reports.
  - liaising with GPs, allied health workers and specialist doctors who may have existing diagnostic information
- 4. Assistance to arrange appointments and undergo assessment processes with appropriate allied health therapists and specialist doctors to obtain evidence of disability and impact on functional capacity.
- 5. Assistance to complete and submit Access Request Forms with appropriate evidence, to NDIA.
- 6. Assistance to obtain and submit further information and diagnostic reports to NDIA as requested.

AMPARO's experience shows, and Local Area Coordinators (LACs) acknowledge themselves, that they do not have the capacity to do what it takes to assist people with complex needs to effectively navigate the NDIS. Instead they report being under enormous pressure

to get as many people through the system, as quickly as they can, develop plans and undertake plan reviews.

In November last year when AMPARO had fully completed the **Targeted Participant Readiness Work**, with individuals and families' consent, we handed over their personal contact details to <u>local area coordination offices</u> with advice on what support people would need. We later provided updates and assistance when people's details changed. Whilst some were able to make access, many others are still struggling to do so.

#### Lack of preplanning support

Most Individuals from a CALD background with disability have not previously been accessing or connected to specialist disability services and have had no access to preplanning support. While the NDIA stresses how important it is for people with disability to come prepared for their NDIS planning meetings to get the best outcomes, this cohort are distinctly disadvantaged as they often will have little or no understanding of what a good life for persons with disability can look like and what supports, capacity building, therapy or equipment they or their family member would benefit from receiving.

NDIA translated documents are intended to help prepare people for planning meetings, however too few resources are translated into languages of new and emerging communities and those that would benefit from them, are not receiving them. Many individuals from some communities are not literate in their own language and require information in face to face discussions where they can ask questions with an interpreter present. Often they require this information in more than one and shorter sessions, as it is complex and difficult to understand.

Through our work AMPARO Advocacy has been able to meet participants from a CALD backgrounds in their own homes with certified interpreters and or bicultural community educators to discuss the NDIS planning process, to provide information and answer their questions.

### All the individuals and families we have worked with have required significant support in the preplanning process to:

- Understand their rights
- Explore what a good life for a person with disability can look like
- Understand the opportunities available under the NDIS
- Identify their specific needs for support/ therapy/ equipment/ and capacity building
- Understand the complex terms and the language of the NDIS
- And to collate reports and pre-planning information to take to their planning meeting.

Without this intensive support we see many participants' plans are inadequate do not meet their needs. They often have little core support, lack support coordination and are poorly implemented. At times even with this support it is shocking to see the poor quality of plans that then require a review to be lodged by the advocate

#### Lack of support coordination to implement the participant's plan

The lack of support coordination allocated to CALD participants is a major cause of frustration and the reason why many participants are struggling to implement their plans. When you understand the additional barriers people from CALD backgrounds are experiencing, it is clear why without support coordination many may fail to implement their plans.

AMPARO has raised this in many forums with the NDIA as a serious issue to be addressed, with little change. LACs seem reluctant to argue for support coordination, even when advocates and families ask for this, it may be because they lack experience in working with people from CALD or refugee backgrounds, and that they do not fully understand the needs of this cohort. However they commonly justify why the person doesn't need support coordination, stating that they can assist the person to implement their plan.

Unfortunately we do not see good evidence of LACs allocating the necessary time, or providing the culturally appropriate support that is required, to effectively assist participants to implement their plans. Many people are disadvantaged by LACs limited capacity to do this work well. AMPARO finds individuals who after several months are not implementing their plans, not connected with services, or connected with poor services that they are not happy with and are unsure what to do. Several families had said they won't bother next year, it's too difficult. Fortunately with the right support, they are encouraged when they see things working better and supports making a real difference for the person.

Furthermore in determining how many hours a participant might get for support coordination, planners do not factor in the additional time needed when communicating with interpreters and that each meeting or discussion will take twice as long and therefore more hours are needed.

#### Children from CALD backgrounds with disability missing out

We know that children from CALD backgrounds accessing Early Childhood and Early Intervention (ECEI) services and those with an NDIS plan, are particularly vulnerable and generally not receiving support coordination. AMPARO has received requests from concerned LACs, asking us to assist families to implement plans for their children, however we do not have funding to support this work, nor is it our role. ECIE workers advise they receive only 10 hours per year to meet with the child and their family, develop a plan and provide assistance to commence implementation. If you factor in working with an interpreter for all communication, this equates to a maximum of 5 hours per year, this is clearly inadequate.

AMPARO's previous experience with children accessing Better Start for Children with Disability and early intervention support through Commonwealth programs was that funding was often unspent by the time the child turned seven. This meant they had missed out on important and beneficial early intervention support, therapy and equipment. This was because they did not receive the case management support they required to understand the types of support available and the necessary assistance to access these supports. Similarly it appears that this is happening for some children form CALD backgrounds with disability under the NDIS.

#### NDIS Access Reviews processes are complex and difficult to navigate

AMPARO has assisted several people with disability from CALD backgrounds who had previously had their access requests rejected by the NDIA to reapply.

In some instances this was despite evidence being provided that demonstrated the person met all requirements for support from the NDIS, others required additional assessments and proof of the impact of impairment on their functional capacity. Two individuals had psychosocial disability and complex needs and had been rejected. Both should have made access. Some had made applications with little or no support and been rejected. On their own, individuals and families would have been unable to pursue a review of the NDIA's decision, nor would they have completed a new access request, despite their significant unmet needs. They all required intensive support to successfully complete a new access request, including support to undergo allied health, psychiatric or psychological assessments, collate reports and provide this evidence to the NDIS.

An additional stumbling block for individuals was the justifications given by the NDIA for denying access, which was vague and difficult for the person and their family to understand. And the length of time it takes to receive an outcome from a NDIS access review is unacceptable. It commonly takes up to 10 months. We have found and also advised by the NDIA that it is quicker to gather further supporting evidence and reapplying for access, than seek a review. Our experience confirms this and fortunately all individuals we have supported through this process have been successful.

#### **Language Services**

AMPARO has brought many systemic issues, with the support of allies, to the attention of senior NDIA staff and the NDIS Independent Advisory Council. The poor provision of language services by the NDIA was one of these issues. Over a twelve month period, AMPARO highlighted where practices failed to meet best practice standards and State and Federal policy in this area and made recommendations for improvements.

In May this year, the NDIA released vastly improved information on new processes to support access to certified interpreting and translating services for NDIS participants. These improvements were welcomed. What the NDIA is yet to do, is widely promote these improvements. It is highly concerning and that many staff from the NDIA, their community partners and registered service providers, are unaware of their obligations in this area and frequently fail to provide certified interpreters.

Some staff do not seem to have had the necessary training to know how to engage and work effectively with interpreters, and too often are happy to have a friend or family member act as an interpreter and unware of their obligation to have Participant's Plans translated into the person or their family's language when this would be helpful.

Also of great concerns is the fact that requesting a specific interpreter, though much needed, in practice is extremely difficult to do. The NDIS current practice suggests that individuals can choose a specific interpreter, however TIS National policy makes this almost impossible. As highlighted in the individual advocacy stories this is an issue for many individuals and families we engage with.

AMPARO will continue to highlight these and other shortcomings in the design and delivery of the NDIS, which result in people from CALD backgrounds not benefiting from the NDIS on an equal basis with the broader population.

#### Joint Standing Committee on the National Disability Insurance Scheme

In September this year AMPARO provided a written submission to the Joint Standing Committee on the implementation and performance of the NDIS in Queensland and in particular in relation to planning practices that are leading to poor outcomes for people from CALD backgrounds with disability and their families.

Through our work assisting individuals with access and participation in the NDIS we have identified several factors that impact on whether CALD Participants and their families are able to effectively access and participate in NDIS planning processes and whether they receive a plan that is comprehensive and meets their needs. These concerns were provided in our submission and again in appearing before the Joint Standing Committee at a hearing held in Brisbane in October this year.

#### **Information Linkages and Capacity Building Guidelines**

#### **Multicultural Access and Equity Policy**

Under Australia's *Multicultural Access and Equity Policy: Respecting Diversity and Improving Responsiveness*, there is a requirement that Australian Government agencies make sure that cultural and linguistic diversity is not a barrier for people who need to access government and community services. This means, for example, that ILC Grant Applicants are required to consider whether professional translating or interpreting services may be needed to deliver services, projects, activities or events to non-English speakers.

However the NDIA had failed to include reference to the Multicultural Access and Equity Policy and its implications in the ILC Guidelines for two ILC rounds late last year. This was again brought to the attention of the NDIA and this information has been included in the Guidelines for ILC rounds since.

#### **Department of Communities, Disability Services and Seniors**

#### **Queensland's Community Care Services Program**

As part of Queensland's transition to the NDIS, early this year the Department of Communities, Disability Services and Seniors, undertook a review of Queensland's Community Care Services Program, which provides a small amount of assistance to support people with disability under 65, to remain living at home.

AMPARO became aware that the Department was planning to change the eligibility criteria for this program and that New Zealand Citizens residing permanently in Australia, who had previously been entitled to access the scheme, would no longer be able to do so. AMPARO often advocates for people from a refugee background who have first migrated to New Zealand and then later joined family here in Australia. This program was essentially the only direct assistance New Zealand citizens with disability living permanently in Australia were able to access and we knew that current residency requirements would prevent them from participating in the NDIS.

Fortunately with the support of QCOSS, AMPARO was able to bring our joint concerns and the unfairness of this proposal to the attention of senior staff in the Department of Disability Services. We are pleased to report that Queenslanders with disability who are not able to access the NDIS, including New Zealand citizens, will not be prevented from accessing the **QId Community Support Scheme (QCSS)** because of visa restrictions.

The fact that New Zealand citizens are not entitled to access the NDIS is a major systemic issue that we hope will eventually be taken up by many systemic advocacy agencies across Australia.

### GOAL 3: Undertake community development and engagement that supports social advocacy

This goal focuses on engaging and communicating with people from CALD backgrounds with disability, their families and communities to understand the challenges and issues they experience that contribute to disadvantage and to undertake activities to increase their capacity across a range of areas.

#### **Multicultural Affairs Queensland**

Building Capacity and Potential through Connection - sharing understandings, experiences and journeys of disability, and building capacity and potential through connection.

This pilot project was funded by Multicultural Affairs Queensland (MAQ). It commenced in December 2018 and was completed in September 2019. The project aimed to explore ways to build capacity and improve the lives of vulnerable people with disability from refugee and migrant backgrounds by connecting them with knowledgeable and caring community members whose understanding of disability has been informed by through their own lived experience.

Lalita Lakshmi co-ordinated the project and three bicultural workers Thao Pham, Venantie Niragira and Say Say Eh Lar were employed on a casual basis to assist with: identifying and liaising with suitable families, arranging meetings with volunteer individuals and families, helping to brief volunteers and attending meetings. Queenslanders with Disability Network (QDN), the Community Resource Unit (CRU) and Mamre Assoc. provided assistance to identify suitable volunteer families and other advice and support.

Nine families were introduced to volunteer families and individuals, and supported to have discussions that allowed them the opportunity to find commonalities in their lived experience of disability. These conversations and sharing of information between families took place in their homes, local parks, during visits to local surroundings and by attending groups, such as disability support groups together. Information shared included personal stories, understandings of specific disability types, effective therapies and interventions, local disability organisations, the NDIS, and sharing of internet resources such as government and disability specific websites, and translated materials and videos.

The refugee and migrant families and individuals were from diverse cultural backgrounds including Sudanese, Burundian, Karen, Congolese, Somali, Ethiopian, Lebanese, Vietnamese, Aboriginal and Anglo-Australian.

The impacts of the project for individuals and their families varied for each but some examples include:

- Learning more about disability, and having a chance to share experiences
- Understanding more about the NDIS and how it works
- Providing opportunities to visit places of interest within their local community and surroundings
- Gaining a better understanding of different types of education for children with disability
- One family who had no access to their NDIS funds, now has increased funds that includes support co-ordination and has now been linked to a local disability support organisation that will be able to provide them with ongoing links to local supports.

 One mother with a child with disability met three other mothers and their children who all have the same disability. This gathering was suggested by, and arranged by her volunteer family. Prior to this meeting, the mother had never met another mother or child with this disability outside of a hospital setting. This mother said she learnt many things:

"I learnt and understood more about the rights of children with disability. I understood that it is not only my family and I who are having this experience. I learnt and understood that I have the right to understand services offered to my child and even ask for changes if I find them not useful."

As a result, this mother said:

"I will prepare to put my child with disability in a normal school rather than a special school. I will do my best to avoid/stop isolating myself. I learnt and understood the best way is to present my child to other people in my community, I will do it."

### Feedback from individuals with disability and CALD families regarding this project was positive and included:

"Meeting this mother helped me so much to understand the NDIS. I was going to leave the NDIS but now I understand better and am so happy that you came to visit me."

"You have given me hope. Before I thought my child would never be able to talk, but hearing how your child learnt to talk makes me think this may be possible for my son too."

"This (project) should be done for all families with children with disability. It is important and helpful for such families to have people with same experience be close to them and meet them often."

"Everything that I did not know Helen\* explains to me. It is very useful for me to have this opportunity. She understands my problems and she comforts me when I am down."

\* Name has been changed.

#### Feedback from the volunteer individuals was also positive and included:

"It was a privilege for me to work with this CALD family. I can empathize with her and felt her frustrations. I hope with my personal experiences that I can give her some hopes for her son."

"It helped me learn how important it is to know your rights and speak up. Be persistent and determined to advocate for your family member. If you are unsure, reach out to other families, community or other government agencies. Don't take "NO" for an answer unless you have exhausted all avenues. For any emotional reasons that you can't advocate for your family member, find someone who you trust to do that. It will lead on a more positive outcome."

"This is a very good project to connect CALD families to whom they can reach out for help and learn from others. It gives the vulnerable families a sense of equality and some knowledge for them to support their family member." As the feedback highlights this project was valued by all participants and increased their knowledge and understanding across a broad range of areas. This is work that AMPARO would like to be able to do more of.

Unfortunately the project also highlighted many of the hardships that families were experiencing in accessing adequate NDIA support. Many were not receiving the support they needed to implement their plan, many lacked any support co-ordination and many had small and inadequate plans. These concerns have been highlighted with the NDIA and in a project report to MAQ and in some instances AMPARO was required to step in to provide the families with advocacy.

#### AMPARO Advocacy would like to sincerely thank MAQ for funding this important work and QDN, Mamre and CRU for their generous assistance with this project.

#### **AMPARO Advocacy NDIS Access Project**

In January this year AMPARO welcomed the opportunity to enter a subcontract agreement with Queenslanders with Disability Network (QDN), that funded a <u>6 month part-time position</u> to provide intensive support for individuals from CALD backgrounds with disability and their families living in the Logan, Brisbane and Strathpine areas, to access and participate in the NDIS.

Overall a total of 45 individuals were supported with accessing the NDIS through this small project.

- 21 individuals from refugee backgrounds with limited English proficiency, who had not
  previously been accessing support, now have NDIS access with plans that have the
  capacity to meet their needs.
- Several individuals also received support with reviews when their Access Requests were denied, or their plans did not provide the level and type of support needed.
- An additional 11 were assisted with sourcing evidence of diagnosis, accessing functional or medical assessments and pre-planning and then connected to other specialist services for further support.

When funding for this work ceased at the end of June, there were 15 individuals who were still at various points along the NDIS pathway. AMPARO chose to continue to support these individuals with our limited resources because we know that inconsistent support, and the involvement of multiple agencies, is confusing and stressful for individuals and increases the likelihood of people falling through the gaps.

LACs have also confirmed that they lack the resources and capacity to do what is necessary to assist individuals through each step of the process to enable them to successfully access the NDIS and to undertake the much needed preplanning. We also know the benefits of individuals having an advocate (formal or informal) present to participate in planning meetings, to argue for adequate support coordination and to connect them to culturally appropriate and persons centred support services once they have their plan.

At the time of writing this report and since 1 July, 5 more individuals from a refugee background with disability from a have met NDIS access, a further 5 are receiving support with preplanning and planning and 3 having assistance with plan reviews or plan implementation.

#### NDIA CALD Access consultancy work

In July this year AMPARO was engaged by the NDIA to provide them with feedback and advice regarding their CALD Community Engagement Initiative which sought to increase CALD access into the NDIS. The NDIA had envisaged that this initiative would help to inform further nation-wide strategies designed to assist CALD communities to access the NDIS. AMPARO's consultancy work was commenced in July and whilst it was scheduled to be

AMPARO would like to take this opportunity to thank the Department of Communities, Disability Services and Seniors for recognising the need for and funding this work to assist highly marginalised individuals. AMPARO would also like to thank Queenslanders with Disability Network (QDN) for their strong support of AMPARO's involvement in this work.

completed by October this date has now been extended until the end of November. Maureen Fordyce, Liz Martyn-Johns, Maree Anderson and Lalita Lakshmi all contributed towards this work.

As part of this work AMPARO was asked to review and provide advice and feedback on aspects of the NDIS's CALD initiative strategies including:

- Providing feedback to the NDIA regarding the development of short-term CALD liaison
  officer roles designed to support CALD NDIS access. AMPARO was asked to provide
  feedback on the role description, pay level, skills required, likely scope of work,
  processes and referral pathways to provide evidence of disability and complete an
  access request for NDIS.
- Advising the NDIA on engagement strategies for interpreter services, settlement services and targeted health professionals. AMPARO provided contact details and made connections and introductions to a number of settlement and multicultural services and multicultural networks.
- AMPARO worked closely with the NDIA and NAATI to facilitate a very successful Disability and the NDIA information workshop for interpreters, which was held on 14 September and attended by approximately 50 interpreters, some coming all the way from Toowoomba to attend.
- Developing referral and CALD NDIS Access pathway documents that showed best practice steps and approaches that NDIA and their Partners in The Community (PiC)

staff could undertake. This also included the development of a document which showed ways to support access to appropriate clinical support in order to assist people to provide evidence of the impact of disability. It must be noted as advised to the NDIA early in the process, there is an absence of a referral pathway that is affordable and timely. Recommendations were made of the need for the NDIA to work with the State Government to address this serious systemic issue that is a barrier to many meeting NDIS access requirements.

- Identifying cultural training needs and undertake training with NDIA and Community and Mainstream Engagement (CME) and Partners in The Community (PiTC). AMPARO has developed this training and hope it can be undertaken when the NDIA is ready.
- Mentoring and coaching newly appointed Culturally and Linguistically Diverse (CALD) Community Liaison Workers (CCLW).

AMPARO worked with various NDIA staff as part of this work including:

- Alice Tibbitts, Director, Pathway, Delivery and Diversity Engagement, Community and Mainstream Engagement Branch, National Disability Insurance Agency (located in Canberra)
- Suzanne Jones, Assistant Director, Pathway, Delivery and Diversity Engagement, Community and Mainstream Engagement Branch, National Disability Insurance Agency (located in Western Australia)
- Jade Contarino, Engagement Officer, Pathway, Delivery and Diversity Engagement, Community and Mainstream Engagement Branch, National Disability Insurance Agency (located in Western Australia)
- Gerard Corbett, Assistant Director, Queensland Community and Mainstream Engagement, Community and Mainstream Engagement Branch, National Disability Insurance Agency (located in Brisbane)
- Venantie Niragira and Mehdi Askari, Community Liaison Officers, Queensland Community and Mainstream Engagement, Community and Mainstream Engagement Branch, National Disability Insurance Agency.

As part of this work AMPARO was asked to assist by reviewing the pilot project's evaluation framework; participate in 'lessons learnt' on completion of the initiative including whether the initiative can be applied to other locations; and advise on the 'transition out' phase to ensure participants' pathway supports are in place following access.

Unfortunately the NDIA timeframe for the completion of some activities has been delayed, making it unlikely that AMPARO will be able to provide feedback or advice to inform these significant components of the initiative. Of course AMPARO will provide feedback on activities we have been involved with through this work and contribute our understandings of what strategies worked well with CALD communities.

#### Information Linkages and Capacity Building (ILC)

AMPARO was successful in our application for an Information, Linkages and Capacity Building Grant, as a Disabled Peoples and Families Organisation early this year. There are two components to this work, Individual Capacity Building and Organisational Capacity building.

The **Individual Capacity Building** work is aimed at increasing the capacity of individuals from CALD backgrounds with disability and their families to understanding their rights, know what services are available and how to access them and to increase their confidence in speaking up, voicing concerns and making informed decisions.

Following consultation with individuals and families AMPARO developed information on *the National Disability Insurance Scheme and Participants Rights* and an *NDIS Preplanning* document. To date this information has been translated into 9 languages in collaboration with the School of Languages and Cultures at the University of Queensland. These translations have been uploaded to AMPARO's website: <u>www.amparo.org.au</u>. This information will also be emailed out to our broad contacts across Australia.

The process to translate and develop audios of this information in additional languages has also commenced. The process of delivering this and other information to individuals and their families is going well, however as expected we continue to find many people who are missing out on accessing services and supports they are entitled to and who often need advocacy. These individuals are referred to the appropriate advocacy agency in their area. Further information is being developed and will be translated early in 2020.

AMPARO would like to acknowledge and thank the School of Languages and Cultures at the University of Queensland for their strong support and collaboration in translating these documents.

### GOAL 4: Be an effective, sustainable and independent social advocacy organisation

This goal focuses on ensuring AMPARO operates as an effective, accountable, publicly funded independent advocacy organisation that complies with legislative, constitutional, funding and industrial requirements.

AMPARO Advocacy is governed by a voluntary management committee, the majority of whom are people from a CALD background with disability. This is a requirement of AMPARO's constitution and ensures the organisation is led by people with a lived experience of disability and an understanding of the additional barriers that can be experienced when you are new to Australia, and have language and cultural differences.

## Over the past year the Management Committee have ensured the organisation fulfils its mission and remained faithful to the intent of AMPARO Advocacy's Constitution through the following:

- Holding five management committee meetings.
- Implementing the strategic plan for 2017-2019.
- Attending reflection meetings to hear and discuss the individual advocacy work in greater depth to develop a collective understanding of the challenges and experiences of people from a CALD background with disability.
- Undertaking succession planning to safeguard the effective governance of the organisation into the future.
- Mentoring and supporting each other in their respective roles.

#### Staff recruitment, training and development

This year AMPARO recruited and welcomed one new temporary part-time person, Maree Anderson to assist in a 6 month project funded by the State government to provide intensive support for highly marginalised individuals to access and participate in the NDIS. Maree continues to work on our ILC Project that commenced on the 1 July 2019 and with mentoring of the NDIA's CLOs.

All staff underwent professional development planning, and had access to training opportunities within budget constraints. This included:

• Team Building: staff had fun creating clay birds together with Karen Hannay at Highvale.

- Training on use of new data base
- Vicarious Trauma, Burnout and Self-care: all staff attended this training provided by QPASTT.
- Inspiring, Connecting, Acting for Change: 3 Events to Mark 3 decades
- CRU briefing on *Inclusive Education*
- NDIS briefing on *Support Coordination*
- NDIS briefing on Psychosocial Disability



### Comply with legislative, constitutional, funding and industrial requirements by:

Implementing efficient and effective systems to manage finances, assets and risk AMPARO has continued to review and develop efficient administrative and financial processes to reduce operational costs where possible. The risk management plan is reviewed regularly to ensure potential and real risks are identified and managed. This year after our annual review of current insurances, it was determined that costs could be saved by changing to an alternative provider.

An independent financial audit was conducted by Registered Company Auditor Jason O'Connor Pty Ltd and copies of the financial statements were provided to all members of the Association.

#### Implementing an effective Human Services Quality Framework

AMPARO implements a quality management system which strengthens the work of organisation through processes of continuous improvement and by maintaining accreditation under the Human Service Quality Framework. In March this year AMPARO underwent a recertification audit with the Australian Institute of Healthy Communities. AMPARO was successfully recertified as a result.

- Reporting to Department of Communities, Child Safety and Disability Services
  - Quarterly NMDS reports and Directors Certification Reports
  - Audited Financial Reports 2017/2018
  - Criminal history checks for all staff / volunteers
  - Annual Service Performance Report for 2018
  - Signed a new service agreement for 2019-2021.
- Meeting Industrial Relations and Other Requirements
  - Monitored and implemented changes to awards and pay scales with support of the Queensland Community Services Employers Association and Jobs Australia.
  - Reviewed and updated all insurance policies, including WorkCover

#### Support the need for a strong independent social advocacy in Queensland

#### Combined Advocacy Groups of Queensland.

AMPARO Advocacy is a member of the **Combined Advocacy Groups of Queensland** (CAGQ), which is a state-wide network of Federal and State funded advocacy agencies that have a commitment to the provision of independent social advocacy for Queenslanders with disability. Members of CAGQ maintain contact via regular teleconferences throughout the year, sharing important information.

In November 2018 members of the CAGQ met in Brisbane to discuss the sustainability of strong independent social advocacy, including the future of funded advocacy in Queensland, NDIS Appeals and the National Disability Advocacy Program.

The Queensland Audit Office report Access to the National Disability Insurance Scheme for people with impaired decision-making capacity recommended a state-wide strategy be developed that considers:

- the role of advocacy in supporting access to the NDIS
- o actions to reduce the pressures on the guardianship system

 the results of the review of the National Disability Advocacy Program (NDAP) to identify opportunities to improve coordination of Commonwealth and statefunded services.

Because of the intention to develop a state advocacy strategy, Tony Hayes and Paul Grevell from the Department of Communities, Disability Services and Seniors attended the CAGQ meeting and provided an overview of what this would mean and to advise advocacy agencies of the consultation process.

## **Department of Communities, Disability Services and Seniors**

In February this year the President of AMPARO and the manager met with Department representatives to present information on the need for independent advocacy for people from a CALD background with disability and to provide input into the development of a State Strategy for Advocacy. The Disability Advocacy strategy is now available on the Department's website at: <u>https://www.publications.qld.gov.au/dataset/queensland-strategy-disability-advocacy-2019/resource/8c3a9385-0e9a-4bff-a7d5-df69c1743f20</u>

The objectives are positive and approaches suggest a need to:

'Strengthen the availability of advocacy for people with disability from Aboriginal and Torres Strait Islander communities and from culturally and linguistically diverse backgrounds'.

AMPARO Advocacy welcomes this commitment, but it remains to be seen what this means in practical terms. We do know that AMPARO's current funding levels means that we are not able to meet the high demand for individual advocacy in the Brisbane area alone and resources for the systemic advocacy are limited.

In August AMPARO met with the Department to highlight the need for the State Government to fund advocacy agencies so they can work with individuals who wish to participate in the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. The State Government does not appear to be considering this and has suggested we approach the Federal Government.

## Information Linkages and Capacity Building (ILC)

AMPARO was successful in our application for an Information, Linkages and Capacity Building Grant, as a Disabled Peoples and Families Organisation early this year. AMPARO is extremely fortunate to be delivering Individual and Organisational Capacity building projects with this ILC funding in collaboration with the Community Resource Unit, Speaking Up for You, Queensland Advocacy Incorporated and Queenslanders with Disability Network.

The **Organisational Capacity Building** work aims to strengthen and build the leadership, knowledge and skills of current and new members from CALD background with disability to lead and govern the organisation into the future. This will ensure the strategic direction of the organisation will continue to be informed by the lived experience of disability and an understanding of the additional barriers experienced when there are language and cultural differences.

Significant community engagement work has been carried out to identify people from CALD backgrounds with disability and family members who are interested in becoming active members of AMPARO Advocacy. So far AMPARO has 13 new members who are from a CALD background with disability or family members. The project will facilitate and fund access to training, education and coaching for at least 10 of the current and new members to develop their knowledge, skills and confidence around: Contemporary Disability Practice; Governance and Leadership; Social Advocacy and Speaking Up and Sharing Stories in Groups.

AMPARO is working closely with the Community Resource Unit (CRU) to develop and deliver this training and to organize the 4 workshops as part of this work. The work is progressing well with AMPARO increasing our membership and the first workshop to be delivered by CRU on the 23 November 2019.



New members' morning tea

## **TREASURER'S REPORT**



As the Treasurer of AMPARO Advocacy, I extremely pleased to advise members and guests today that the Management Committee have acted to conduct the financial business of the organisation in accordance with the Association and Incorporation Act of 1981 and organisational policies. On behalf of the management committee I am delighted to present AMPARO Advocacy's Financial Report for the year ended 30 June 2019.

I would firstly like to thank Jason O'Connor Registered Company

Auditor for his professional and generous support over the past year and for his diligence in the preparation of the Independent Audit Report, which includes the statement of the financial position of AMPARO Advocacy as at the 30 June 2019.

AMPARO Advocacy has had another extremely busy and very productive year. I can advise members that the Audited Financial Statements for 2018 /2019 show a small deficit of \$5,269.97. I am pleased to confirm that AMPARO has made full provision for all liabilities, including staff entitlements such as annual leave, personal leave and long service leave.

This past year we have received a number of small grants in addition to our core funding from the Department of Communities, Disability Services and Seniors to undertake independent social advocacy. AMPARO has undertaken several interesting and worthwhile projects over the past year, some of which we are still working on, the details of these will be available in our annual report. We have been able to make a significant difference in the lives of people from CALD backgrounds with disability and their families because of this work.

I would like to thank our bookkeeper Lucia Forman, for her professional and careful preparation of the financial reports, and Maureen Fordyce our manager, for her support to me in my role as Treasurer. To all the staff of AMPARO Advocacy, thank you for the great work you do to assist the individuals and families we have worked throughout the year.

I would like to propose that the Audited 2018 / 2019 Balance Sheet and Annual Statement of Receipts and Expenditure be adopted, and the Auditors' Report be received.

*Ludmila Doneman* TREASURER

## AMPARO ADVOCACY INC

## MINUTES OF ANNUAL GENERAL MEETING Tuesday 23rd October 2018

## 1. Acknowledgement to Traditional Owners

Don acknowledged Traditional Owners of the land and the elders past and present.

## 2. Welcome

Don welcomed everyone and thanked them for attending.

Present: Don Dias-Jayasinha, Shahram Jazan, Ignacio Correa-Velez, Abebe Fekadu, Gustav Gebels, Esperance Kalonji, Julie King, Jo Roberts, Karin Swift, Patricia Wilson, Claire Brolan, Elizabeth Gajewska, Ruby Halaseh, David Isitt, Julie McDougall, Marcio Mostarderio, Neal Lakshman, Jenny Ryan, Mirjana Vukovic, Katie Artiss, Sheila Gonzalez, Maureen Fordyce, Murka Smiechowski, Liz Martyn-Johns, Linda Mullaly, Jo Cochran, Benita Bierzynski, Michelle Thompson.

## 3. Apologies

Jen Barrkman, Julie Granger, Daniel Montoya, Leslie Kirmsse, Mary Kenny, Shawn Phua, Anne Fraser, Michelle O'Flynn, Barbara Kienast, Edmund Kienast, David Roberts, David Swift, Dennis Forman, Lucia Forman, Bobby Noone, Aneta Bilal, Peter McQuoid, Margaret Rodgers, Ann Greer, David Tucker, Deborah Wilson, Donata Stucky, Diedre Phillips, Dragana Sasic Pahulu, Fiona, Anderson, Haley Kiata, Hana Alraman, Jane Prentice, Jos Woollet, Kay Wright, Lisa Bridle, Mark Henley, Palani Thevar, My-Linh Do, Phillip McCallum, Rebecca Bleakley, Robyn Renton, Paige Armstrong, Belinda Drew, Lorella Piazzetta, Michael Zgryza, Natalie Siegel-Brown, Jos Woollett.

## 4. Tabling of proxies

Proxy nomination received from Karin Swift.

## 5. Approval of Minutes of the previous meeting (AGM 2017)

It was proposed that the minutes of the 2017 AGM be confirmed as a true and accurate record.

PROPOSED: Karin Swift SECONDED: Don Dias-Jayasinha CARRIED

## 6. Business arising from previous meeting

None

## 7. President's Report

Don Dias-Jayasinha presented the President's report. He thanked the Management Committee members, including the outgoing members, staff and members and guests of AMPARO for their continuing support of the organisation.

Don also gave thanks to past employees Tamara Kenyon, Hereadae Fenton-Smith and Lalita Lakshmi for all their hard work and welcomed Linda Mullaly and Benita Bierzynski.

## 8. Treasurer's Report

Ludmila Doneman presented the financial report. She proposed that the Audited 2017/2018 Balance Sheet and Annual Statement of Receipts and Expenditure be adopted and the Auditors' Report be received.

PROPOSED: Ludmila Doneman SECONDED: Ignacio Correa-Velez CARRIED

## 9. Report on the work over the past year

- 9.1. Maureen Fordyce acknowledged the traditional owners of this land and presented the Manager's report, highlighting AMPARO's work, achievements and challenges over the past year. This included continuing individual and systemic advocacy on behalf of people from CALD backgrounds with disability, and working with partners to enable equitable levels of participation in NDIS of people from CALD backgrounds.
- 9.2. Jo Cochran presented a report on work undertaken as part of the Participant Readiness Project, where she gave details of workshops, home visits and training delivered to support NDIS access. Jo spoke of the identified gaps in support that she feels need to be addressed for people from CALD backgrounds to have any chance of accessing and participating in the NDIS.

## 10. Thanks to Management Committee members

Don thanked the Management Committee members for their work over the past year. He advised that Ignacio Correa-Velez was standing down after 11 years as Vice-President. Don thanked him for his invaluable contribution to AMPARO Advocacy.

## **11. Introduction of Returning Officer**

Don introduced David Isitt as Returning Officer. David then handed over briefly to Ludmila Doneman to acknowledge that Don Dias-Jayasinha would be stepping down as President, a role he's undertaken for 14 years and will now be assisting as Vice-President. Ludmila presented a gift. David Isitt then took over the proceedings of the meeting.

## 12. Election of Management Committee Members for 2018/2019

- 12.1. David asked and Karin confirmed that there was a quorum.
- 12.2. David declared all positions on the management committee vacant and asked that the committee step down. Ignacio Correa-Velez stepped down.
- 12.3. David announced that the Management Committee had asked that the number of members on the Management Committee remained seven. He invited the members to move a motion to maintain the number of Committee members at seven.

PROPOSED: Ludmila Doneman SECONDED: Shahram Jazan CARRIED

12.4. David read out the list of nominations received by the secretary by 10 October 2018 and posted on the noticeboard in the AMPARO Advocacy office.

Position	Nominee
President	Shahram Jazan
Vice President	Don Dias-Jayasinha
Treasurer	Ludmila Doneman
Committee	Karin Swift
Members	Jen Barrkman
	Abebe Fekadu
	Julie King

12.5. David confirmed that AMPARO Advocacy received one completed nomination for each management committee position, so there was no need to take nominations from the floor.

- 12.6. David said he was pleased to declare:
  - Shahram Jazan the President of AMPARO Advocacy Inc. for 2018/2019;
  - Don Dias-Jayasinha the Vice-President of AMPARO Advocacy for 2018/2019;
  - Ludmila Doneman the Treasurer of AMPARO Advocacy 2018/2019;
  - Karin Swift, Jen Barrkman, Julie King and Abebe Fekadu the Committee Members of AMPARO Advocacy for 2018/19
- 12.7. David welcomed Julie King to the Management Committee, and handed the meeting back to the President, Shahram Jazan to chair.
- 12.8. Shahram thanked David for his kind support and gave him a gift.
- 12.9. Shahram confirmed that Karin agreed to be nominated at the next Management Committee meeting to the office of secretary.

## 13. Appointment of the Auditor for 2018/2019

Ludmila proposed that Jason O'Connor from J O'Connor Pty Ltd, PO Box 5480, Brendale DC Qld 4500 be appointed as Auditors for 2018/2019

PROPOSED: Ludmila Doneman SECONDED: Don Dias-Jayasinha CARRIED

## 14. Confirmation of Public Liability Insurance

Karin confirmed that AMPARO Advocacy has Public Liability Insurance cover for \$40 million.

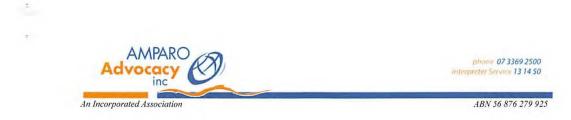
## 15. General Business

- 15.1. Karin presented Ignacio with a gift and an Honorary Life Membership Certificate for his 11 years' contribution to the work of AMPARO Advocacy.
- 15.2. Shahram enquired whether there was any other business, and as there was none he handed the meeting to Maureen.
- 15.3. Maureen thanked the Management Committee for their support of the staff over the past year and gave all Committee members a gift.
- 15.4. Shahram thanked all members and guests for attending the meeting and supporting the work of AMPARO Advocacy over the past year, and invited everyone to join in for some refreshments.

## 16. Close of Meeting

Meeting closed at 6.05pm.

## **AUDITOR'S REPORT**



## FINANCIAL STATEMENTS 30 JUNE 2019

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# We stand up for ....

people from a non-English speaking background with a disability who are being treated unfairly, abused or discriminated against.

We speak, act and write on your behalf to protect your most basic needs.

Auditor: Jason O'Connor CA www.joconnorptyltd.com.au



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ABN 56 876 279 925

## STATEMENT OF COMPREHENSIVE INCOME AS AT 30 JUNE 2019

		2019	2018
	Note	\$	\$
INCOME			
Grants	3	462,386.47	550,791.32
Interest received		1,312.44	1,298.85
Other income		2,254.88	15,757.39
Total Income		465,953.79	567,847.56
EXPENDITURE			
Audit fees		1,250.00	773.64
Audit fees - quality assurance		6,431.28	
Asset purchase less than \$5,000		1,985.42	122.73
Bank charges		111.32	127.89
Computer repairs and software		1,875.70	2,009.47
Consultancy fees		485.00	9,026.76
Depreciation		_	
Fees and permits		55.35	422.50
Interpreting services		60.00	545.44
Information resources		289.09	317.02
Membership fees		293.18	428.18
Other expenses		1,872.05	2,590.67
Printing and stationery		4,467.98	6,553,29
Postage, freight and courier		550.26	901.49
Rent		23,157.40	22,337.16
Repairs and maintenance		92.73	4.54
Telephone, fax and internet		4,573.69	4.061.79
Training and development		2,379.71	3,172.54
Insurance - general		4,366.00	5,998.11
Meeting expenses		4,190.34	3,317.61
Motor vehicle expenses		3,055.53	2,993.90
Travel and accommodation		7,524.62	14,012.18
Employment entitlements		402,157.11	488,090.65
Total Expenditure		471,223.76	567,807.56
Surplus / (Deficit) before income tax expense		(5,269.97)	40.00
Income tax expense	1	-	
Surplus / (Deficit) after income tax expense for the year			
attributable to the members		(5,269.97)	40.00
Other comprehensive income for the year, net of tax	_	-	
Total comprehensive income for the year attributable to the members.		(5,269.97)	40.00

The accompanying notes form part of these financial statements. Page 2



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ABN 56 876 279 925

## STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2019

		2019	2018
	Note	\$	\$
CURRENT ASSETS			
Cheque account		184,503.79	144,674.84
Donation account		733.50	692.47
Debit card account		1.000.08	783.35
Debit visa card account		2,001.10	1.890.58
Premier investment account		73,230.71	72,075.99
Other receivables		18,464.93	29,397.97
Petty cash float		138.10	337.00
Total Current Assets		280,072.21	249,852.20
NON-CURRENT ASSETS			
Total Non-Current Assets			
TOTAL ASSETS		280,072.21	249,852.20
CURRENT LIABILITIES			
Accounts payable		20,095.87	932.78
Unexpended grants and funds	5	137,946,16	117,730.64
GST liabilities		1,445.59	15,747.22
PAYG withholding payable		3,680.00	4,475.00
Provision for personal leave		28,965.97	25,850.40
Provision for annual leave		32,832.49	28,869.27
Total Current Liabilities		224,966.08	193,605.31
NON-CURRENT LIABILITIES			
Provision for long service leave		37,396.13	33,266.92
Total Non-Current Liabilities		37,396.13	33,266.92
TOTAL LIABILITIES		262,362.21	226,872.23
NET ASSETS		17,710.00	22,979.97
EQUITY			
Accumulated surplus		17,710.00	22,979.97
Total Equity		17,710.00	22,979.97

The accompanying notes form part of these financial statements. Page 3



An Incorporated Association

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ABN 56 876 279 925

## STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2019

	Accumulated Surplus \$	TOTAL \$
Opening balance 1 July 2017 Current year Surplus/(Deficit)	22,939.97 40.00	22,939.97 40.00
Closing Balance 30 June 2018	22,979.97	22,979.97
Opening balance 1 July 2018 Current year Surplus/(Deficit)	22,979.97 (5,269.97)	22,979.97 (5,269.97)
Closing Balance 30 June 2019	17,710.00	17,710.00

#### STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2019

		2019	2018
	Note	\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from customers		495,789.91	623,673.06
Payments to suppliers and employees		(455,949.30)	(575,934.39)
Interest received		1,312.44	1,298.85
Net Cash Provided by Operating Activities	4	41,153.05	49,037.52
CASH FLOWS FROM INVESTING ACTIVITIES			
Net Cash Used In Investing Activities			
CASH FLOWS FROM FINANCING ACTIVITIES			
Net Cash Used in Financing Activities			-
Net Increase in Cash Held		41,153.05	49,037.52
Cash at the beginning of the year		220,454.23	171,416.71
Cash at the end of the year	4	261,607.28	220,454,23

The accompanying notes form part of these financial statements. Page 4



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An Incorporated Association

ABN 56 876 279 925

## NOTES TO THE FINANCIAL STATEMENTS

#### NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

#### Basis of preparation

In the officers' opinion, the incorporated association is not a reporting entity because there are no users dependent on general purpose financial statements.

These are special purpose financial statements that have been prepared for the purposes of complying with the Queensland legislation the Associations Incorporation Act 1981 and the Australian Charities and Non-for-Profits Commission Act 2012 and regulations. The Committee Members have determined that the accounting policies adopted are appropriate to meet the needs of the members.

These financial statements have been prepared in accordance with the recognition and measurement requirements specified by the Australian Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') and the disclosure requirements of AASB 101 'Presentation of Financial Statements', AASB 107 'Statement of Cash Flows', AASB 108 'Accounting Policies, Changes in Accounting Estimates and Errors', AASB 1048 'Interpretation of Standards' and AASB 1054 'Australian Additional Disclosures', as appropriate for not-for-profit oriented entities.

#### Historical cost convention

The financial statements have been prepared under the historical cost convention.

#### Critical accounting estimates

The preparation of the financial statements requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying the incorporated association's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements, are disclosed in note 2.

#### **Revenue** recognition

Revenue is recognised when it is probable that the economic benefit will flow to the incorporated association and the revenue can be reliably measured. Revenue is measured at the fair value of the consideration received or receivable.

#### Donations

Donations are recognised at the time the pledge is made.

#### Interest

Interest revenue is recognised as interest accrues using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

#### Grants

Grants are recognised at their fair value where there is a reasonable assurance that the grant will be received and all attached conditions will be complied with.

#### Other revenue

Other revenue is recognised when it is received or when the right to receive payment is established.



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#### Income tax

As the incorporated association is a non-profit institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

#### Cash and cash equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other shortterm, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

#### Trade and other receivables

Other receivables are recognised at amortised cost, less any provision for impairment.

#### Impairment of non-financial assets

Non-financial assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is recognised for the amount by which the asset's carrying amount exceeds its recoverable amount. Recoverable amount is the higher of an asset's fair value less costs to sell and value-in-use. The value-in-use is the present value of the estimated future cash flows relating to the asset using a pre-tax discount rate specific to the asset or cash-generating unit to which the asset belongs. Assets that do not have independent cash flows are grouped together to form a cash-generating unit.

#### Trade and other payables

These amounts represent liabilities for goods and services provided to the incorporated association prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

#### Employee benefits

#### Wages and salaries and annual leave

Liabilities for wages and salaries, including non-monetary benefits, and annual leave expected to be settled within 12 months of the reporting date are recognised in current liabilities in respect of employees' services up to the reporting date and are measured at the amounts expected to be paid when the liabilities are settled.

#### Long service leave

The liability for long service leave is recognised in current and non-current liabilities, depending on the unconditional right to defer settlement of the liability for at least 12 months after the reporting date. The liability is measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

#### Goods and Services Tax ('GST') and other similar taxes

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the tax authority. In this case it is recognised as part of the cost of the acquisition of the asset or as part of the expense. Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the tax authority is included in other receivables or other payables in the statement of financial position.



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#### NOTE 2: CRITICAL ACCOUNTING JUDGEMENTS, ESTIMATES AND ASSUMPTIONS

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue and expenses. Management bases its judgements, estimates and assumptions on historical experience and on other various factors, including expectations of future events; management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will seldom equal the related actual results. The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

#### Estimation of useful lives of assets

The incorporated association determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

#### Long service leave provision

As discussed in note 1, the liability for long service leave is recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

	2019	2018
	\$	\$
NOTE 3: GRANTS		
DCCSDS Recurrent Operating	293,134.49	284,855.59
DCCSDS Quality Assurance	6,400.00	3,200.00
DOC Multicultural Affairs		22,000.00
NDIS	65,067.50	-
ILC Readiness	118,000.00	
DCCSDS PRI Funds	-	100,000.00
DCCSDS Targeted PRI Funding	Street .	200,000.00
Grants carried forward as unexpended	(137,946.16)	(117,730.64)
Grants carried forward from last year	117,730.64	58,466.37
Total Grants	462,386.47	550,791.32

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Incorporated Association	AB	N 56 876 279 925
	2019	2018
	\$	\$
NOTE 4: CASH FLOW INFORMATION		
a. reconciliation of cash flows from surplus		
Surplus / (Deficit) attributable to members	(5,269.97)	40.00
Non-Cash flows in surplus		
Depreciation	2	
Profit / (loss) on sale of assets	-	
Changes in assets and liabilities		0.077.47
Increase) / decrease in receivables	10,933.04	6,377.47
ncrease / (decrease) in payables & grants	24,281.98	32,174.22
ncrease / (decrease) in provisions	11,208.00 41,153.05	10,445.83
b. reconciliation of cash		
Petty Cash Float	138.10	337.00
Cheque account	184,503.79	144,674.84
Donation account	733.50	692.4
Debit card account	1,000.08	783.35
Debit visa card account	2,001.10	1,890.58
Premier investment account	73,230.71	72,075.99
Less bank overdraft		
Total Cash	261,607.28	220,454.23
NOTE 5: UNEXPENDED GRANTS		
Unexpended Grant - recurrent operating	-	19,041.68
Unexpended Grant - quality assurance		2,372.53
Jnexpended Grant - Multicultural Affairs Queensland	3,129.78	22,000.00
Jnexpended Grant - Sector Development - PRI		71,955.73
Committed funds - Combined Advocacy Groups Queensland	1,748.88	2,360.70
Unexpended funds - ILC Readiness Grant - BOC	61,000.00	
Unexpended funds - ILC Readiness Grant - ICB	57,000.00	
Unexpended funds - NIDS	15,067.50	17
	137,946.16	117,730.64

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Incorporated Association	Ai	BN 56 876 279 925
	2019 \$	2018 \$
NOTE 5: UNEXPENDED GRANTS (continued)		
Unexpended Grant - quality assurance:		
Opening balance - unexpended	2,372.53	1,872.89
Plus, grant income	6,400.00	3,200.0
Less Expenditure	(8,772.53)	(2,700.36
	1.0	2,372.5
Closing balance - unexpended	-	(2,372.53
Net Surplus / (Deficit)	-	
Unexpended Grants - recurrent		
Opening balance - unexpended	19,041.68	1,188.2
Plus, grant income	293,134.49	284,855.5
Plus, association contributions	1,312.44	2,817.0
Less Expenditure	(318,838.58)	(269,819.16
	(5,349.97)	19,041.6
Closing balance - unexpended	(5,545.57)	(19,041.68
Net Surplus / (Deficit)	(5,349.97)	(13,041.00
Unexpended Grant - Multicultural Affairs Queensland Opening balance - unexpended Plus, grant income Less Expenditure	22,000.00 - (18,870.22)	22,000.00
	3,129.78	22,000.00
Closing balance - unexpended	(3,129.78)	(22,000.00
Net Surplus / (Deficit)	(0,120.70)	(22,000.00
Unexpended Grant - Sector Development - PRI		
Opening balance - unexpended	71,955.73	50,186.83
Plus, association contributions	2,174.88	
Plus, grant income	1	200,000.0
Less Expenditure	(74,130.61)	(178,231.10
	•	71,955.7
Closing balance - unexpended	÷	(71,955.73
Net Surplus / (Deficit)	•	
Committed Funds - Combined Advocacy Groups Queensland		
Opening balance - unexpended	2,360.70	
Plus, income	_,000110	5,681.8
Less Expenditure	(611.82)	(3,321.12
	1,748.88	2,360.7
Closing balance - unexpended	(1,748.88)	(2,360.70
Net Surplus / (Deficit)	(1,140.00)	(2,000.10



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Incorporated Association	ABI	N 56 876 279 92
	2019	2018
	\$	\$
NOTE 5: UNEXPENDED GRANTS (continued)		
Unexpended Funds - Access to NDIS - DS		
Opening balance - unexpended	the second se	
Plus, income	50,000.00	
Less Expenditure	(50,000.00)	
Closing balance - unexpended Net Surplus / (Deficit)		
ver Surplus 7 (Dencir)		
Unexpended Funds - ILC Readiness Grant - BOC		
Opening balance - unexpended	1. S. 1. A.	
Plus, income	61,000.00	
Less Expenditure	-	
	61,000.00	
Closing balance - unexpended	(61,000.00)	
Net Surplus / (Deficit)	and the second	
Unexpended Funds - ILC Readiness Grant - ICB		
Opening balance - unexpended		
Plus, income	57,000.00	
Less Expenditure	-	
	57,000.00	
Closing balance - unexpended	(57,000.00)	
Net Surplus / (Deficit)		
Unexpended Funds - NIDS		
Opening balance - unexpended Plus, income	15,067.50	
Plus, income Less Expenditure	15,067.50	
	45 007 50	
Closing balance - unexpended	15,067.50 (15,067.50)	
Net Surplus / (Deficit)	(15,067.50)	

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## STATEMENT BY MEMBERS OF COMMITTEE FOR THE YEAR ENDED 30 JUNE 2019

Responsible Persons Declaration.

Per section 60.15 of the Australian Charities and Non-for-Profits Commission Regulation 2013.

- the association is not a reporting entity because there are no users dependent on general purpose financial statements. Accordingly, as described in note 1 to the financial statements, the attached special purpose financial statements have been prepared for the purpose of complying with the Australian Charities and Non-for-Profits Commission Act 2012 and regulations;
- 2. the attached financial statements and notes thereto give a true and fair view of the association's financial position as at 30 June 2019 and of its performance for the financial year ended on that date;
- there are reasonable grounds to believe that the association will be able to pay its debts as and when they become due and payable;
- 4. the financial statements and notes satisfy the requirements of the Associations Incorporation Act 1981 and regulations; and
- the financial statements and notes satisfy the requirements of the Australian Charities and Not-for-Profits Commission Act 2012 and regulations.

Signed in accordance with subsection 60.15(2) of the Australian Charities and Non-for-Profits Commission Regulation 2013.

Chairperson

Dated this 10th day of September 2019.



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## INDEPENDENT AUDIT REPORT

#### To the members of Amparo Advocacy Incorporated

#### Opinion

We have audited the financial report of the Amparo Advocacy Incorporated, which comprises the statement of income and expenditure and the balance sheet as at the 30<sup>th</sup> June 2019, the notes to the financial statement, including a summary of significant accounting policies, and the Statement by the Members of the Committee.

In our opinion the financial report of the Amparo Advocacy Incorporated, has been prepared in accordance with Associations Constitution, including;

- 1. giving a true and fair view of the association's financial position as at 30<sup>th</sup> June 2019 and of its performance for the year ended on that date;
- 2. complying with Australian Accounting Standards to the extent described in Note 1, and the Associations Incorporation Act 1981; and
- the financial statements and notes satisfy the requirements of the Australian Charities and Not-for-Profits Commission Act 2012 and regulations.

#### Basis for opinion

We conducted our audit in accordance with the Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial report section of our report. We are independent of the Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report is prepared to assist for the purpose of fulfilling the Association's financial reporting responsibilities under the Associations Incorporation Act 1981 and the Australian Charities and Non-for-Profits Commission Act 2012 and regulations. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

#### Responsibilities of Management and Those Charged with Governance for the Financial Report

Management is responsible for the preparation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 to the financial report is appropriate to meet the requirements of the Associations Incorporation Act 1981 and to meet the needs of the members. The management's responsibility also includes such internal controls as the officers determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, Management is responsible for assessing the Association's ability to continue as a going concern, disclosing as applicable, matters relating to going concern and using the going concern basis of accounting unless Management either intent to liquidate the Association or to cease operations, or have no realistic alternative but to do so.

Management are responsible for overseeing the Association's financial reporting process.



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#### Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with Australian Standards on Auditing will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report. A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: <a href="http://www.auasb.gov.au/Home.aspx">http://www.auasb.gov.au/Home.aspx</a>. This description forms part of our auditor's report.

#### Independence

In conducting our audit, we followed applicable independence requirements of Australian professional ethical pronouncements.

Jason O'Connor CA

Registered Company Auditor (No. 353931)

Liability limited by a scheme approved under Professional Standards Legislation

Dated this 16th day of Systember 2019.

Jason O'Connor B. Com CA PO Box 3361 WARNER QLD 4500

Telephone: (07) 3048 5727 Mobile: 0402 32 7773 Email: auditor@joconnorptyltd.com.au Web: www.joconnorptyltd.com.au