

Notes
House of Representatives
Standing Committee on Health & Ageing
Inquiry into Health Funding

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City of West Torrens

Thank members for their time and the opportunity to appear before them.

1. Acknowledgement of existing funding partnerships.
2. A little bit about our city, including our Vision, Mission and Values.
3. Basic demographic information about the City
4. Social Development and Council's approach to services for the ageing population
5. Focus on HACC, CACP and Residential Care
6. Difficulties being encountered
7. Significant New Challenge

1 Acknowledgements

- The complexities in the 'health system and health industry' and that Local Government is a minor player in the grand scheme.
- Acknowledge the Commonwealth's support for programmes by way of reference to Monty Python's Life of Brian and the 'What have the Romans ever done for us?' scene, which featured the People's Liberation Front of Judea or the Judean People's Liberation Front or ???
- That Local Government receives funding from the Commonwealth and State Governments to provide a broad range of health and aged care services.
- That Local Government has a genuine role to play in the provision of primary health and aged care services and that some local authorities have elected to participate in the provision of direct services (eg personal care and nursing).
- Note a general concurrence with most of the matters raised in the May 2005 ALGA submission to the inquiry, though personally support the proposition that the biggest problem with respect to GP services (and other health care providers) relates to their maldistribution rather than

overall number and subscribes to geographic bonding for both medical practitioners and Medicare provider numbers.

- City of West Torrens is the beneficiary, on behalf of its community, of millions of dollars per annum from the Department of Health and Ageing, and several hundreds of thousands of dollars per annum from joint Commonwealth/State funded programmes.
- Council would be unable to provide many of the services it does, without the financial support offered by other levels of government, unless it elected to significantly increase the rate burden on its community.
- Naturally should all sections of our local community pay their fair share of the 'tax burden', either more services could be provided or the overall tax take could be reduced e.g. occupiers of Commonwealth and State land, especially commercial enterprises whether they are owned by govt or not.
- In 1998/99 Commonwealth General Purpose Grants to Adelaide metro councils totalled nearly \$34,438,000, and the City of West Torrens received \$1,120,000 of that amount (or 3.25%).
- 8 years and several changes to the distribution formula later, the amount available to Adelaide Metro Councils is about \$34,919,000 (up 1.4%) with West Torrens share falling to \$877,000 (down 21.7%) to about 2.51% of the total.
- That is not to say that all extra monies would have been spent on health and ageing, but a significant portion would have been expended in those areas, and/or to reduce the burden on residential ratepayers.
- Notwithstanding the above, in the current financial year (2005/06) West Torrens will spend close to \$3M in funds from Commonwealth and State Agencies, from a \$35M general expenditure budget, including:
 - \$1,900,000 for 71 bed subsidies for St Martins Aged Care Facility
 - \$360,000 for 30 Community Aged Care Packages
 - \$80,000 via the HACC programme for Elder Friendly Communities
 - \$350,000 via HACC for Home Assist programme
 - \$90,000 via HACC for the Western Region Home Maintenance programme
 - \$66,000 via HACC for Home Assist Plus
 - \$12,000 via HACC for extra 'Spring Cleans'
 - \$25,000 via HACC for Co Op West programme (6 mini CACPs)
 - \$30,00 for Council's immunisation service (vaccines etc)

Council receives about \$6 in combined subsidies per eligible vaccination, in total Council subsidises each vaccination (from general revenue) by \$6.50.

Activity - ~ 5,500 occasions of service 2004/05.

- These figures do not include the subsidies and grants (several million) for drainage, water conservation and roads etc.

3 Basic Demography of West Torrens

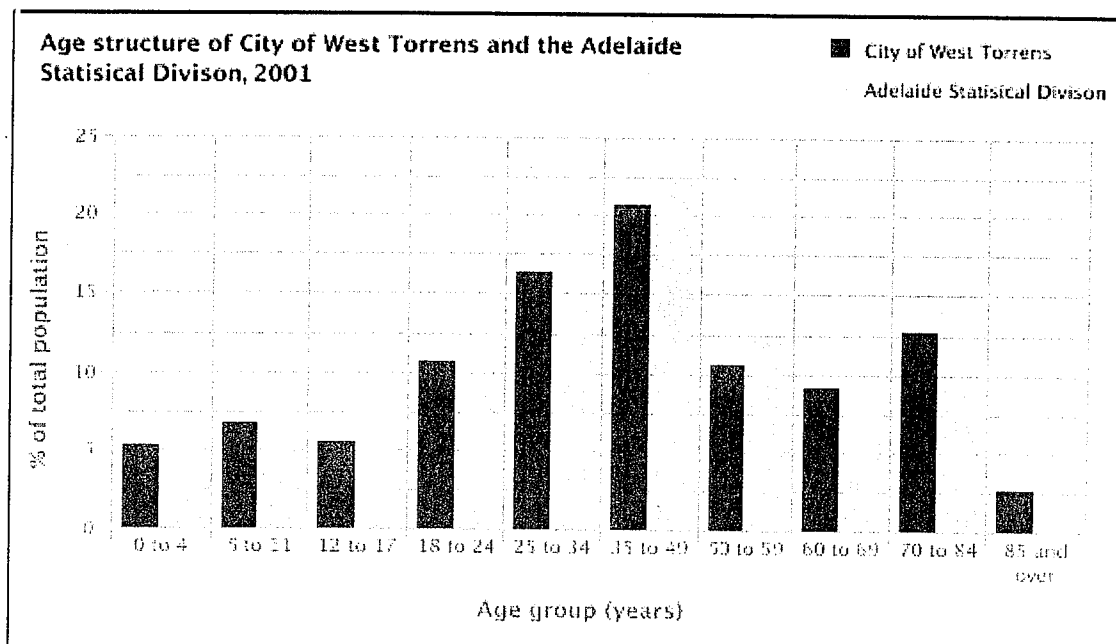
Key Statistics 2001	Number	%	Adelaide Statistical Division %
Total population	50,114	100	100
Males	24,395	48.7	48.7
Females	25,719	51.3	51.3
Indigenous population	436	0.9	1.0
Australian born	35,651	71.1	72.2
Overseas born (inc. not stated)	12,455	24.9	23.6
Australian citizens	45,213	90.2	89.8
Australian citizens aged 18+	37,258	74.4	68.4
Institutional population	1,315	2.6	2.7
Age Structure			
Infants 0 to 4 years	2,601	5.2	5.9
Children 5 to 17 years	6,146	12.3	17.1
Adults 18 to 64 years	31,426	62.7	62.3
Mature adults 65 to 84 years	8,631	17.2	12.8
Senior citizens 85 years and over	1,311	2.6	1.8
HOUSEHOLDS			
Households (occupied private dwellings)	22,784	--	--
Average household size (persons)	2.16	--	--
DWELLINGS			
Dwellings (total)	24,599	--	--
Owned	9,233	40.5	38.7
Purchasing	4,735	20.8	30.2
Renting	7,378	32.4	25.6

Top 10 overseas birthplaces ranked for 2001 (persons)	number	%	Adelaide Statistical Division %
United Kingdom	2,488	5	9.4
Greece	1,881	3.8	1.0
Italy	1,688	3.4	2.2
New Zealand	384	0.8	0.8
Germany	330	0.7	0.9
Philippines	303	0.6	0.4
China (excl. Taiwan Province)	296	0.6	0.3
Poland	287	0.6	0.6
Malaysia	275	0.5	0.4
Vietnam	260	0.5	1
Summary			
Non-English speaking countries	9,229	18.4	12.6
Mainly English speaking countries	3,226	6.4	11.1
Total Overseas Born	12,455	24.9	23.6
Australia	35,651	71.1	72.2
Not Stated	2,008	4	4.2
Total	50,114	100	100

Source - ABS Census 2001

Migratory Patterns in to, and out of, our area		
Previous residential location of current residents in the City of West Torrens, 2001	Number	%
Residents who did NOT move between 1996 and 2001	27,723	55
Residents who had moved within the City of West Torrens between 1996 and 2001	3,986	7.9
Residents who moved from another part of South Australia	10,708	21.2
Residents who moved from another part of Australia (excluding South Australia)	1,786	3.5
Residents who moved from another country	1,962	3.9
Residents who moved from a 'not stated' area (i.e. one they did not state the name of)	1,670	3.3
Total residents who moved between 1996 and 2001	20,112	39.9
Not applicable	2,572	5.1
Total 2001 usual resident population	50,407	100

Source - ABS Census 2001



Source - ABS Census 2001

4 Social Development and Council's approach to services for the ageing population

Community Development, Community Capacity Building and Social Development, are all names given to various approaches to working in and with local communities in order to address social and environmental needs.

Community refers to people who live within a geographical defined area and/or who share a community of identity and who have social and psychological ties with each other and with the place where they live.

Community Development is a process that strengthens the community's capacity and ability to meet its own needs. This process utilises a range of tools and skills including awareness raising, information provision, advocacy, self-help, service provision, networking, participation, and resource provision.

Community Capacity Building refers to interventions, which assist communities (spatial or otherwise) to strengthen the support and problem solving resources of their community, which often involves empowering communities to have greater power over relationships, resources, information and decision-making.

Social Development is based on a recognition that helping the individual means addressing problems such as lack of skills or loss of confidence, and that this is best done by working in partnership with the communities in which people live.

Each of the approaches (described above) may involve, to a greater or lesser extent, a mixture of the following elements:

- Early intervention and prevention strategies to increase social and economic participation within the community;
- Initiating community-based ventures that enhance social connections and networks within communities;
- Support for volunteering;
- Fostering local action to respond to local issues and addressing community services needs;
- Using innovative government, community and business partnerships;
- Improving communication and cooperation between government, business, community and volunteer organisations, especially in addressing the problems of disadvantaged groups in communities;
- Building community capacity for self-help and sustainability;
- Providing accessible and/or culturally appropriate services for people with a disability or those with diverse cultural and linguistic backgrounds;
- Promoting community services, citizenship, reconciliation, recreation, cultural and educational opportunities;
- Literacy, numeracy and skill development.

Seven Steps to Aged Care Service Provision

For over 25 years, the City of West Torrens has acknowledged its role and responsibilities in providing care and support services for its elderly population. Council has undertaken a number of major initiatives in this field, which have mainly been concentrated in the provision of residential focussed aged care, including the following initiatives:

- Centenary Village (Ballantyne Street, Thebarton)
- George Robertson Retirement Village (Major Avenue, Lockleys)
- Kandahar Retirement Village (Marion Road, North Plympton)
- Ken Richards Retirement Village (Beckman Street, Glandore)
- Kintore Street Retirement Village (Kintore Street, Thebarton)
- Lockleys Retirement Village (Cross Street, Lockleys)
- Steve Hamra Retirement Village (Marion Road, North Plympton)
- St Martins Aged Care Facility (Cudmore Terrace, Marlestone)

Council undertook most of these initiatives in partnership with the State Government and the SA Housing Trust. St Martin's provides High and Low Care personal services, other facilities provide for more independent living and some provide for low-key communal support.

More recently the City of West Torrens, in developing its new vision and strategic objectives, acknowledged the growth in its ageing population and the critical need to provide a more strategic approach to the provision of aged care services and support.

Both direct and indirect service provision and intervention approaches are utilised to deliver a wide range of services and opportunities to the target group, and both approaches are underpinned by the following key principles:

- Maintaining the independence of older people.
- Providing choice of services.
- Encouraging active participation and meaningful involvement in social, recreational, educational and health related activities.
- Promoting accessibility to services through the provision of community transport.
- Providing responsive, effective and well-focussed initiatives for the aged population in all of their stages (50 years+).
- Recognising elderly people's capacity to positively contribute to the life of the community.
- Empowering elderly people, through community capacity building initiatives, to manage their daily lives, and to make decisions that influence and enhance the quality of their lives and well-being.
- Collaborating with other service providers, both within the City of West Torrens and on a regional basis, to provide a more comprehensive service to the elderly.

Council's strategies for the provision of aged care services are based on a view that people's lives (50 years+) consist of various stages, conditions, capacities and abilities, ranging from fully independent and self-sufficient to being totally dependent on others for most activities of daily living.

The implementation of Council's strategies is based on seven [7] steps of intervention, each responsive to the various levels of people's capacity and ability to be independent, as well as recognising the cultural diversity of the community:

Step One

This intervention is specifically targeted towards people with high-level independence and a high capacity to manage their own lives. Council provides information and general support through the following mechanisms:

- Information Directories
- Talking Points (Council's quarterly publication)
- Website
- Local Messenger Press (free weekly)
- Community Noticeboards
- Community Centres
- Presentations to various seniors clubs and aged care service organisations
- Community facilities and resources to culturally and linguistically diverse populations (e.g. Italian Pensioners, Greek Pensioners, St Nicholas group etc)
- Community Transport

Step Two

Specifically targeted towards people with medium to high levels of independence and a reasonable capacity to manage their own lives.

- Seniors Community Centre
- Community Centres providing various support programs
- Thebarton Seniors Group
- Community Support Programs
- Community Grants
- Preventative Health Programs (e.g. Wise Use of Medicine, Aqua Fun, Well-being for Seniors)
- Community Transport

Step Three

Specifically targeted towards people with medium levels of independence and a reasonable capacity to manage their own lives

- "Links" Newsletter (Council's aged services quarterly newsletter)
- Celebrate Seniors Festival
- Senior Citizens Network
- Service Clubs Network
- Preventative Health Programs (e.g. Wise Use of Medicine, Aqua Fun, Well-being for Seniors)
- Regional Projects (e.g. Better Gardens Project)
- Community Transport

Step Four

Targeted towards people with a reasonable level of ability but may lack opportunities for social interactions, are socially isolated, experiencing loneliness, or are maybe without a partner.

- Community Meal, once per week (3 courses \$6)
- Social Outings
- Health related seminars/talks
- Preventative Health Programs (e.g. Wise Use of Medicine, Aqua Fun, Well-being for Seniors)
- Community Capacity Building
- Community Transport

Step Five

Targeted towards people with some independence but low level capacity to manage the maintenance of their home due to their limited physical capacity and/or mental ability.

- Home And Community Care (HACC)
 - Home Assist Services (HAS)
 - Home Clean – Short term and long term
 - Home Security and Safety
 - Minor Gardening and Pruning (for safety and security)
 - General Home Maintenance and Repair
 - Cleaning for people from culturally and linguistically diverse (CALD) communities
 - Home Support Volunteer Service
 - Disability Day
 - HACC Rag (Council produced quarterly newsletter)
 - Specifically targeted multi-lingual HACC information packages
- Preventative Health Programs (e.g. Wise Use of Medicine, Aqua Fun, Well-being for Seniors)
- Community Transport

Step Six

Targeted towards people who are experiencing poor levels of independence and significant difficulties managing their own lives.

- Community Aged Care Packages (CACP) e.g. Council's *Elder Choices* program
- Specifically targeted multi-lingual CACP information packages
- Retirement Villages
- Respite care e.g. St Martins low care
- Referrals from Hospitals and the Western Aged Care Assessment Team
- Preventative Health Programs (e.g. Wise Use of Medicine, Aqua Fun, Well-being for Seniors)
- Community Transport

Step Seven

This intervention is specifically targeted towards those elderly people (aged 70 and over) who have been assessed as requiring high or low level care provided through full time residential care. Higher levels of frailty/disability or the need for closer monitoring/supervision may lead to this level of intervention.

- Council's St Martins Aged Care Facility
- Other residential aged care facilities

Future Directions?

It is critical that West Torrens develops a clear, concise and well-focussed direction for the future delivery of aged care services. Council can capitalise on the strength of its present involvement, identify and minimise some of the existing weaknesses and expand into areas which will complement and move towards the provision of a more complete 'Aged Care Continuum' based on an integrated approach. The following initiatives will go a long way toward completing this cycle:

- *Consumer Advisory and Advocacy Group*

Council's Social Development Unit will establish a Community Advisory and Advocacy Group under the guidelines set out according to the HACC National Standards and Audit. The Group will advise and comment on services provided by the Social Development Unit for the aged and younger disabled. It will ensure that services are customer focussed and responsive to client needs.

The Community Advisory and Advocacy Group will consist of:

- 2 Culturally and Linguistically Diverse HACC clients
- 2 Indigenous HACC clients
- 2 Home Clean HACC clients
- 2 Home Maintenance HACC Clients
- 2 Community Meal Clients
- 2 Volunteer Support Clients
- 2 Community Aged Care Packages (*Elder Choices*) Clients

An independent person, approved by the Group Manager City Services, will chair the Group and training will be provided to all members of the Group on meeting procedures, HACC National Standards and the Community Aged Care Package program.

- *Carers Respite Project*

As a result of the recent review of the City of West Torrens' Aged Care Service provision, Respite Care was identified as a crucial gap in the provision of a "continuum" of aged care support services. It is proposed that Council, in partnership with formal and informal aged care service providers, develop and implement a community-based project providing support to local carers by way of respite opportunities, as a pilot initiative.

It is planned that upon completion of this pilot initiative, a review and evaluation would be undertaken to improve and enhance the delivery of such a service, and to ascertain the feasibility of expanding it to engage other local and regional formal and informal service providers.

A planned expansion is critical to delivering an effective response to a clearly identified gap in local service provision.

▪ *Collaborative Projects with Western Linkages (Regional Projects)*

The Western Linkages Project identifies gaps in services and encourages a collaborative approach across service providers to create regional collaborative responses.

The City of West Torrens works in partnership with members of Western Linkages on projects as identified.

One such project is the "Better Gardens Pilot Project", which involves:

- The City of Charles Sturt
- The City of Port Adelaide Enfield
- The City of West Torrens

The "Better Gardens Project" will target low socio-economic frail aged and disabled residents and aims to reduce garden maintenance by using techniques such as mulching, planting of low maintenance and water-friendly plants and installing "soaker" irrigation systems.

This project will be of minimal cost to the clients, as people who are registered with Centrelink and are part of the Work for the Dole Program will deliver these services.

It is planned that upon the completion of this pilot project, and subject to its evaluation, an expanded program to include such strategies as paving and the installation of other low-maintenance ground cover (instead of lawn) will be developed.

▪ *Expanded HACC and CACP Services*

There is a clearly identified need for the expansion in the delivery of the range of HACC services and Community Aged Care Packages.

Current waiting lists for services, in addition to an increasing number of elderly people who are recently arrived migrants and refugees, indicate that more services are required.

This expansion can only be achieved through the successful negotiation with State and National Governments for an increase in funding.

- Active Ageing (for both Physical and Mental well being)

This is one of the most critical areas that requires serious attention by all levels of government, non-government agencies, the voluntary, formal and informal sectors, as well as individual citizens.

It has become evident locally, nationally and internationally, that as people are living longer as a result of improved nutrition and environmental conditions, advances in medicine and medical technology and the provision of a range of personal care services, attention is being diverted away from the need to maintain a healthy and fit physical and mental state of being.

Council should therefore consider the facilitation, funding and/or provision of:

- Cross-generational exchanges between elderly people of different cultural backgrounds sharing a variety of skills and knowledge with young people and with people from other cultural backgrounds
- Expansion and consolidation of the Aqua Fun program, Yoga and Relaxation, Body Balance, Wise Use of Medicine, Walk with Care, Massage and Grooming, Health related seminars, workshops and presentations and the Community Meal.

5 Focus on HACC, CACP and Residential Care

HACC

In the 12 months to 28 April 2006, Council provided support/services to 1,096 individual eligible clients, about 10% of our 'aged population'.

NB 2001 census shows ~ 10,000 residents aged 65 years and older.

Service Type	# Clients	# Occasions	Average (to 0.1)
Assessments	642	763	1.2
Domestic - cleaning	363	3,231	8.9
Social support	58	684	11.7
Meals	84	1,978	23.5
Home maintenance	411	555	1.3
Home modifications	233	278	1.2
Counselling/information	20	21	1.0
Total	1,811	7,510	4.1

Council has also 'picked up' some additional HACC funding for 'one off' extra assistance to current clients.

Community Aged Care Packages (CACPs)

- Commonwealth allocations for 'residential care and equivalent support' has only recently (late 2004) increased from '100 operational places', per 1,000 population aged 70 yrs and above, to '108' places.
- The 'places' encompass Community Aged Care Packages and High and Low care residential (nursing home and hostel), plus innovative service trials.
- First change in greater than 10 yrs, however, the 'allocation' represents a financing target, not actual service provision and 'packages/bed licences' are allocated according to 'priorities' each year and by 'competition', rather than geographic needs.
- EG Western Adelaide was last a 'priority' for funding in 2002 and is unlikely to be one again in the next 3 - 5 years.

Numbers of CACPs operating within the City of West Torrens at 28 April 2006:

Organisation	Packages
Elderly Citizens Homes (ECH)	37
Aged Care and Housing Group (ACH)	45
City of West Torrens (Elder Choices)	30
Total	112

- Average age of Elder Choice clients is 86.9 years and their average time on our programme is 3.8 years, range is a few months to about 8 years.
- Discharge is generally to residential care.
- Funding is based on \$32.65 per client subsidy (Commonwealth) and a maximum \$6.02 client contribution per day, maximum possible is therefore \$38.67 per client per day.
- Funding must accommodate 24 hr emergency contact, direct care staff, equipment, travel and administration, so that client's average 1 hour of care per day.
- Low care in hostels provide (at a minimum) 24 hour supervision.

Residential Care

- Operates within the same '108 places formula' canvassed above.

Numbers of Residential Aged Care beds in the City of West Torrens at 28 April 2006:

Facility	High Care Beds	Low Care Beds
St Hilarion	50	5
Serene Aged Care	43	0
Flora McDonald lodge	53	31
St Martins	41	30
Bucklands	147	
West Beach Residential	0	40
St Raphaels	0	33
The Pines	0	158
Totals	334	297
TOTAL BEDS = 631		

Discharges used to be to acute sector and/or death, now 'death'.

- Residential care beds + CACPs = 743,
- At 108 places per 1,000, we would expect something like 1,000 'places' for the city.
- However, we stress that the 'allocation' is based on a financial model (one by way of capping expenditure), rather than one based on actual need or even a figure of 'administrative prevalence'.
- The inherent presumption is that only 10.8% of the population aged 70 years and older require support that is at least equivalent to Low Care.

St Martins Aged Care Facility - Current Cohort of Residents

	Low Care	High Care
Permanent Beds	29	40
Average Age on Admission	80 yrs 6 months	83 yrs 5 months
High	92 yrs 7 months	103 yrs 3 months
Low	70 yrs 0 months	62 yrs 6 months
Average Age Currently	84 yrs 4 months	86 yrs 5 months
High	99 yrs 2 months	105 yrs 0 months
Low	72 yrs 11 months	62 yrs 7 months
Average Length of Stay	3 yrs 7 months	3 yrs 0 months
High	15 yrs 2 months	12 years 1 month
Low	2 months	2 weeks

- By the end of 2006, Council hopes to fully commission its redeveloped St Martins facility, which is undergoing an \$11.4M development and refurbishment programme to take up the 40 bed licenses provisionally allocated in December 2002 and to meet the Commonwealth's 2008 building certification standards.
- 111 beds will be eligible for Commonwealth subsidies, with an additional 4 that Council must find an 'economic' use for eg transitional care, because its 2005 application for an additional 4 respite beds was unsuccessful.
- Council's application for a \$540,000 capital grant, to enable the purchase of additional new furniture fittings and equipment (rather than using old) was also unsuccessful.
- About 50% of the project costs will be 'covered' by using accommodation bonds, the remainder by way of a loan, that St Martins will fund through its operating budget (~\$700,000 p.a.), although Council is prepared to provide up to \$200,000 p.a. by way of a subsidy if required..

Supported Residential Facilities and Boarding Houses

A number of alternate accommodation services exist within the city, many of their clients are aged, or have a physical, intellectual or psychiatric disability, but few are licensed by any competent authority (eg government) and fewer still provide any level of personal care, never mind broad health care, beyond a place to stay.

Two 'supported residential facilities' (licensed by Council) operate within West Torrens; Brooklyn Supportive Care located on Henley Beach Road in Brooklyn is licensed to a maximum of 22 residents at any one time, and Pepper Tree Grove Rest home on Anzac Highway in Camden Park is licensed for a maximum of 34 residents at any one time.

We also believe that 11 boarding houses, of various sizes, condition etc, operate across the city, and we are aware of maybe 7 or 8 individuals who are almost permanently sleeping rough in the area (parks etc).

6 Difficulties being encountered

- Number of people requiring services and/or level of support required exceeds service capacity, so services try to prioritise and establish complex eligibility criteria to protect the available dollars. But other levels of government and other agencies sometimes 'suggest' that there is capacity elsewhere, just not in their programmes, which is unhelpful.
- High admin tasks (data collection and reporting) and therefore costs = reduced direct services
- Funding increases are influenced by c.p.i. not labour costs, especially not professional services
- Understand that services must meet quality criteria, recognise client sovereignty, account for expenditure of public funds, meet OHSW requirements for workers and clients, provide literature in community languages and have grievance procedures in place, BUT, the practical reality is that fewer dollars are being spent on actual service delivery to clients and, as administrative requirements become more onerous, agencies must continuously review the extent to which they can remain as service providers.
- Tight guidelines in terms of what we can/can't do for individuals because most programme guidelines are designed to 'quarantine' their funds for specific purposes, Generally to ensure that a mix of clients are serviced, but can actually be counter productive when you are presented with clients who have multiple/mixed needs and a lot of admin time is chewed up in case management trying to meet needs..
- Greatest concern is for the group of people that we know little about because they haven't been referred, are not yet assessed or are waiting lists. If you are 'in' a programme (of any type) its easier to move around the system picking up support (If you have a good advocate) but if you aren't in the system yet, you can exist on a waiting list for ages with the most significant needs, but until a vacancy opens up, you remain minimally or unsupported.
- Programme discharges (for turnover) are difficult because in this are needs are rarely satiated, they increase in number/complexity and programme exits are generally to another programme delivering greater services or death.
- Establishing priorities and conducting assessments to determine highest needs, generally only works at programme start up, and even then only if people make themselves known. Moving people up through the 'aged care continuum' works fine if we can identify all those in need and have sufficient places to accommodate them, but finding people 'late' with resource intensive needs is almost a daily occurrence so you try to 'shoe horn' them into whatever programme you can.

7 Significant New Challenge for West Torrens

The City of West Torrens provides a variety of services to accommodate the increasing proportion of Australia's migrants and refugees who are settled in the West Torrens locality either temporarily or permanently.

Personal communications from the SA Branch of the Australian Refugee Association (Henley Beach Road within Council's area) is that some 500 individuals from African countries have settled within West Torrens in the last 3 - 4 years. Primarily children and young parents, there is an expectation that in the near future, family reunions may well present us with a number of elderly people with a significantly different service profile e.g. cultural needs and expectations.

The Member for Hindmarsh can personally attest to the increase in the number of people from various parts of Africa very proudly taking up Australian Citizenship at our regular citizenship functions, which he attends in the company of local state members of parliament whenever their schedules allow.

Council's Social Development Unit has played a leadership role in facilitating collaboration between local service providers for new arrivals, for example:

- Education providers (e.g. Cowandilla Primary School, Thebarton Senior College, Richmond Primary School)
- Settlement agencies (e.g. Australian Refugee Association, Migrant Resource Centre)
- Employment agencies
- Community centres (e.g. Hilton Library, Thebarton Neighbourhood House)
- Recreation providers (e.g. Multicultural Communities Council of SA)
- Social workers whose clients are unaccompanied refugee minors (e.g. CYFS Refugee Program)
- Legal services and migration advice (Westside Community Lawyers)

In addition, Council collaborates with other services to offer:

- English as a Second Language classes
- After-hours recreation and arts
- Employment training (in hospitality)
- 'Learning to drive' courses
- West Torrens libraries - youth programs
- Community information and awareness programs

In July 2005 Council became a signatory to the Refugee Council of Australia's Refugee Welcome Zone, signing the declaration at a community event attended by old and new residents, service providers, and local members of parliament, including the Member for Hindmarsh.

A blank declaration appears below for information.

1. *This Declaration is a Commitment in Spirit to*

Welcoming refugees into our community,

*Upholding the **Human Rights** of refugees,*

*Demonstrating **Compassion** for refugees and*

*Enhancing cultural and religious **Diversity** in our community.*

.....
[name of signatory]

Date:

*This Declaration is proudly supported and endorsed by the
Refugee Council of Australia.*

*Received from
Declan Moore
Authorised as of
2 May 2006
KS.*