

SEARCH ENGINES	SEARCH TERMS USED (DESCRIPTORS)	SOURCE/CITATION	ABSTRACT, COUNTRY, and KEY WORDS
	RECEIVED FROM TIM VIA EMAIL	Fisher, K. R. & Purcal C. (2010, July). Effectiveness of Individual Funding for disability support. <i>Social Policy Research Centre Newsletter</i> , 4-7.	
Ebsco Host-Academic Search Complete	Individual* funding	Laragy, C., & Ottmann, G. (2011). Towards a Framework for Implementing Individual Funding Based on an Australian Case Study. <i>Journal of Policy &amp; Practice in Intellectual Disabilities</i> , 8(1), 18-27.	<p><b>Country: Australia</b></p> <p>Keywords:  Australia  individual funding  intellectual disabilities  organizational change  program implementation</p> <p>Although <b>individual funding</b> is increasingly being used around the globe as a mechanism to fund social care, its implementation is proving to be problematic and implementation strategies are not well developed. This paper proposes a framework for the successful introduction and implementation of <b>individual funding</b> programs based on the analysis of data collected in a qualitative case study conducted in an Australian not-for-profit disability agency over a 4-year period from 2003 to 2007. Data were gathered through participant observation and interviews with program participants and managers, and the findings were validated with those involved. Bronfenbrenner's ecological systems theory is used to analyze the findings from a micro, meso, exo, and macro</p>

			<p>perspective. The following factors were found to be important for successful implementation: the meaningful involvement of the person with disability in decision-making; adequate resources; access to information and appropriate supports; suitable activities being available; knowledge of policies and procedures; policies ensuring oversight and responsible accountability; employment conditions for workers being safeguarded; and support for staff and managers to adjust to their new roles. Knowledge of effective implementation strategies is important for disability agencies and for governments promoting <b>individual funding</b> because this radically different <b>funding</b> arrangement requires new implementation strategies</p>
<p>Ebsco Host-Academic Search Complete</p>	<p>Individual* funding</p>	<p>Ottmann, G., Laragy, C., &amp; Damonze, G. (2009). Consumer Participation in Designing Community Based Consumer-Directed Disability Care: Lessons from a Participatory Action Research-Inspired Project. <i>Systemic Practice &amp; Action Research</i>, 22(1), p. 31-44</p>	<p><b>Country: Australia</b></p> <p><b>Key Words:</b></p> <p>Community disability services  Consumer-directed care  Participation  Policy development</p> <p>User participation has been embraced worldwide as a means to provide better consumer outcomes in health and community care. However, methodologies to achieve effective consumer engagement at the programme design level have remained under-</p>

			<p>explored. The purpose of this study was to evaluate the impact of a Participatory Action Research (PAR)-inspired methodology used to develop a consumer-directed community care/individualised funding service model for people with disabilities. A retrospective analysis of case notes and internal reports for the first 6 years of an ongoing project were examined. The findings suggest that PAR methodologies need to take into account community development, group support, and capacity building as well as succession planning and risk management issues in order to facilitate the often lengthy policy and project development process. Drawing on these findings, this article discusses five lessons and their methodological implications for PAR in a health or social policy/programme design context</p>
<p>Ebsco Host-Academic Search Complete</p>	<p>Individual* funding</p>	<p>Spall, P., McDonald, C., &amp; Zetlin, D. (2005). Fixing the system? The experience of service users of the quasi-market in disability services in Australia. <i>Health &amp; Social Care in the Community</i>, 13(1), 56-63.</p>	<p><b>Country: Australia</b></p> <p><b>Subject Terms:</b></p> <p>People with disabilities  Customer services  Consumers  Public welfare</p> <p>A qualitative study involving semi-structured interviews with 31 people with disabilities and 32 carers in the state of Queensland, Australia, found that their <b>experience</b> of supportive</p>

			<p><b>service</b> delivery had not improved despite reforms of the <b>service</b> delivery <b>system</b> driven by a version of the quasi-market model. Instead of delivering increased consumer choice and improved efficiency in <b>service</b> delivery, <b>service users</b> experienced inadequate <b>service</b> supply, <b>service</b> cutbacks, and an increased emphasis on cost subsidisation and assessment processes. Additionally, few consumers felt that individualised funding arrangements had personally delivered the benefits which the quasi-market model and associated policy paradigm had indicated that they should receive. For many consumers, the notion of consumer ‘choice’ around <b>service</b> provision was fictitious and they felt that any efficiency gains were at the agency level, largely at the consumers’ cost. It is concluded that there appears to be no particular benefit to <b>service users</b> of quasi-market reforms, particularly in policy contexts where <b>service</b> delivery systems are historically under-funded</p>
Ebsco host-Academic Search Complete	Individual* funding	Ottmann, G., Laragy, C., & Haddon, M. (2009). Experiences of disability consumer-directed care users in Australia: results from a longitudinal qualitative study. <i>Health &amp; Social Care in the Community</i> , 17(5), p. 466-475.	<p><b>Country: Australia</b></p> <p><b>Keywords:</b></p> <p>community care  consumer-directed care  disability services  empowerment  home care  policy development</p>

			<p>The rapidly growing body of literature suggests that <b>Consumer</b>-directed Care (CDC) has the potential to empower <b>consumers</b> and improve the flexibility and quality of care. However, reports highlighting quality and risk concerns associated with CDC focusing on a longer time frame have been few. This paper presents the findings from a qualitative longitudinal evaluation of an Australian CDC programme. Focusing on the period between 2003 and 2008, it reports on the <b>experiences of 12</b> families caring for a dependent family member. It is based on two external evaluations completed 6 and 36 months after enrolment, and one internal evaluation completed 48 months after enrolment. The findings were triangulated with internal memos, reports and minutes of meetings, as well as with the theoretical literature. The study demonstrates that CDC harbours considerable benefits for people with <b>disabilities</b> and their carers. However, the study also suggests that, over time, carers may experience an increased sense of isolation and lack of support as a result of their involvement in the CDC programme. The paper argues that the development of safeguards addressing these weaknesses is crucial for the sustainability of CDC programmes in contexts where risk cannot be simply transferred onto <b>consumers</b>.</p>
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Ebsco Host-Academic Search Complete	Direct payment*	Donoghue, J., & Taylor, C. (2010). Over the rainbow: direct payments and social inclusion. <i>Australian Health Review</i> , 34(1), p. 127-130.	<p><b>Country: Australia</b></p> <p><b>Subject Terms:</b></p> <p>Social isolation Prevention Payment systems Older people-social conditions Medical care, Cost of Social service Older people-services for</p> <p>This paper examines the impact of direct payments on social isolation. We define what social isolation means, and then evaluate the role of direct payments in the provision of social services in the United Kingdom. Social isolation is a particular problem for older people. In Australia there are an increasing number of older residents who are isolated, but would benefit from having greater choice in terms of how they access and receive social services. Increased access to direct payments could help to reduce waiting lists for traditional social services and address gaps in service provision.</p>
	RECEIVED FROM TIM VIA EMAIL	Bigby, C., Fyffe, C (EDS). (2008). <i>Achieving Their Own Lives: The Implementation of Individualised Funding for People with Intellectual Disability</i> . Third Annual Roundtable on Intellectual Disability Policy. School of Social Work and Social Policy, La Trobe University.	<p><b>Country: Australia</b></p>
Google Search	Individualized funding	Bleasdale, M. (2001). "Empowerment through Individualised Funding: Challenges for people with disabilities, service providers and governments." (Paper given at the "Sharing the	<p><b>Country: Australia</b></p> <p>Individualised Funding is currently</p>

		Road” Conference, Griffith University, Brisbane).	regarded as one way of progressing community living for people with disabilities beyond residential models. This presentation sets out to highlight aspects of best practice of Individualised Funding across the world, especially in the USA and Canada, as well as scoping efforts to date in Australia. Key concepts within the practice of Individualised Funding will be explained, and examples of successful models given. The notion of Individualised Funding will be contextualised within progressive disability theories, and criticisms highlighted and addressed. The presentation will present a realistic view of the potential of Individualised Funding to empower people with disabilities who require supports, as well as the many challenges that face all participants in the current disability sector who are interested to move beyond group home models of support.
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