



# AADDM

Australian Association of  
Developmental Disability Medicine

January 2019

Attention: Malcolm Schyvens  
Chair, AGAC  
participation@justice.nsw.gov.au

Re: AGAC Project

Dear Malcolm,

Thank-you for the invitation for the Australian Association of Developmental Disability Medicine to provide feedback on the draft guidelines on the participation of the proposed represented person in guardianship and financial management/administration hearings.

The Australian Association of Developmental Disability Medicine (AADDM) is an organisation of medical practitioners who specialise or have an interest in the health of the over 300,000 Australian children, adolescents and adults with intellectual disability (ID). The key aim of AADDM is to improve the health of children, adolescents and adults with intellectual and developmental disability.

Firstly, we applaud the Australian Guardianship and Administration Council for highlighting this issue and the need to reduce barriers for the participation of individuals with Developmental Disability in Guardianship and Financial Management proceedings. We note the significant differences across jurisdictions in the approaches and resources for including the subject person.

As a general principle the position of our association would be that as much as practical the views and where possible participation of the subject person be supported in all matters. We would hold this view irrespective of whether they be initial hearings or reviews. We note that in some jurisdictions matters are dealt with on 'the papers'. Although this may be necessitated due to resource constraints it does not provide the appearance of the subject person being of central concern to the proceedings. Similarly our view would be that multidisciplinary panels are preferred to single member hearings in order to better provide the experience and knowledge necessary in these very significant proceedings.

We have also had an opportunity to review the easy read material related to this project and believe that any proposals need to include the views of people living with disability. We note that reference is made in the guidelines to the development of material in easy read formats and we strongly support this recommendation as we do the recommendation to include people living with disability in the composition of the panels/tribunals.

In draft Guidelines 4 reference is made to the health professional report. Our view is that many health professionals would not be familiar with the nature of Guardianship and Financial Management proceedings and asking them to make comment on the person's capacity to attend and contribute to the proceeding may be misleading. We would instead suggest that as well as providing further education and training to health professionals the application is amended to reflect what support is necessary to enable the person to participate. As a presumption, if the person is able to attend to see their General Practitioner at the practice then assuming physical access is not a barrier, their participation in proceedings should be assumed to be possible unless

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specifically stated otherwise. Similarly we would suggest that the initial application include opportunity to comment on how the subject person can participate or barriers to their participation (for example bright lights/ sensory overload for people with Autism).

In regards to specific statements in the draft Guidelines;

Guideline 1: "support" It is not clear whether the guidelines refer to the support necessary for participation to arise from the hearing support staff or elsewhere within the person's existing support network.

Guideline 2: 'promptly'. More definitive timelines would be helpful.

Again, we thank-you for the opportunity to provide feedback and wish the council well in their endeavours to be more inclusive of people with Developmental Disability.

Yours sincerely

Dr Jacqueline Small,  
President AADDM

And

Dr Alexis Berry,  
Member AADDM

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