Legislating for Care: An Exploration of the Role of Care Managers under the IDCCCR Act

Kate Prebble & Russell Vickery
NZASID Conference, Hamilton, August 2009
Aim of Study

To explore how the care manager role under the Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003 is working in practice.

- How has the theory of compulsory care been translated into practice?
Need for research

- Six years since implementation of IDCCCR Act

- The Act has not been evaluated - Bondari (2009) recommends need for external evaluation

- Care manager role is new, complex and carries considerable responsibility
Background to IDCCR Act 2003

- In 1992, Mental Health (CAT) Act passed
- Created a legal definition of ‘mental disorder’
- Section 4(e) specifically excludes people with intellectual disability (ID)
- Offenders with intellectual disability were no longer covered by legislation
Therefore ...

- Options for support for offenders with intellectual disability were limited.
- Courts no longer had an option for compulsory care if an offender only had an intellectual disability.
- People with ID ‘fell between the cracks’ (although some providers created innovative solutions).
IDCCCR Act 2003

● Developed to allow for compulsory care and rehab of offenders with intellectual disability

● Works closely with Criminal Procedure (MIP) Act 2003

● Together, the acts allow the courts to order compulsory care for individuals with an intellectual disability “who have been charged with, or convicted of, an imprisonable offence”
The IDCCR Act covers ...

An individual with intellectual disability:
- Awaiting trial or sentencing
- Transferred from:
  - prison
  - mental health services
- Subject to a court order under the CP (MIP) Act

Includes:
- Children who have committed serious crimes
The IDCCR Act created ...

New services:
- RIDSAS (supported accommodation)
- RIDSS (secure accommodation)

Statutory roles:
- Specialist assessor
- Compulsory care co-ordinator
- District inspector
- Medical consultant
Current situation

- $75.5 million allocated for 2008/2009
- As of September 2008, there are 135 people under IDCCR orders
  - 50 in secure settings
  - 85 in supervised settings
- Approx 31% charged with sexual offence (Bonardi, 2009)
This study will explore ...

- Characteristics of CMs (qualifications, training, ethnicity etc).
- How role works in each type of setting
- Preparation & support for role
- Issues related to statutory requirements
- CMs perspectives on how they contribute to wellbeing of care recipients
Methodology & Methods

Qualitative descriptive

- Data collection
  - Individual interviews and regional focus groups with care managers from across New Zealand
  - Focus groups with others (e.g. specialist assessors, care co-ordinators, cultural advisors) who work with care managers

- Data analysis
  - Content analysis: categorical & thematic
When will study happen?

- Funding secured - March 2009
- Ethics approved - July 2009
- Sector Reference group & cultural advisors appointed - July 2009
- Interviews - commence October 2009
- Focus groups – early 2010
Our Team

- Kate Prebble (Lead Researcher) - University of Auckland
- Kate Diesfeld - AUT
- Michelle Honey - University of Auckland
- Brian McKenna - University of Auckland
- Daniel Sutton – AUT
- Disability Consultant: Russell Vickery
- Research Assistant: Joanne Edwards
How can you help?

- Let people know about the study
- Encourage care managers to be involved
- Continue discussion of the IDCCCR Act and its effect on people with intellectual disability
References


- Brookbanks, W. (1995). The development of legislation to meet the needs of individuals with intellectual disability who, because of their disability, are considered to present a serious risk to others: a discussion paper, Wellington: Ministry of Health.


