

Submission on Productivity Commission Position Paper NDIS Costs

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Contact

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Who we are

For 60 years, NSWCID has been the peak advocacy group in NSW for people with intellectual disability. We have a diverse membership of people with intellectual disability, family members, advocates, professionals and advocacy and service provider organisations. Our Board must have a majority of people with intellectual disability and we actively involve people with an intellectual disability in all aspects of our work.

Especially in the last 10 years, we have had a heavy focus on the development of the capacity of people with intellectual disability to not only make their own decisions but also lead our organisation. The NSW government has funded our *My Choice Matters* project which is focused on developing the ability of people with intellectual disability to control their own lives in accordance with the principles of choice and control that are inherent in the National Disability Insurance Scheme.

We have two representatives on the Intellectual Disability Reference Group of the National Disability Insurance Agency.

www.nswcid.org.au www.mychoicematters.org.au/

Preliminary comment

From the start, we have been strong supporters of the development of the NDIS and we continue to see the scheme as having a fundamental capacity to improve the lives of people with disability around Australia. In the submission, we seek to be constructive critics so as to assist the development of the scheme to its full potential.

Due to time pressures, this submission focuses on issues where we are best able to comment. Questions that we have not answered are in square brackets [].

How is the scheme tracking?

DRAFT FINDING 2.4

Early evidence suggests that the National Disability Insurance Scheme is improving the lives of many participants and their families and carers. Many participants report more choice and control over the supports they receive and an increase in the amount of support provided.

However, not all participants are benefiting from the scheme. Participants with psychosocial disability, and those who struggle to navigate the scheme, are most at risk of experiencing poor outcomes.

We strongly agree that participants who struggle to navigate the system are at great risk of experiencing poor outcomes. This is a large proportion of participants and potential participants. Over 60% of participants have intellectual disability and unless these participants have strong advocacy support from family, a guardian or other advocate, our experience is that they are often achieving poor outcomes in NDIS planning and plan implementation. Further, if members of this group are not already receiving disability support, they need strong outreach and support to become participants in the first place. This often does not occur for the large number of people who lead isolated lives on the fringes of society.

Scheme supports

INFORMATION REQUEST 4.1

Is the National Disability Insurance Scheme Act 2013 (Cwlth) sufficiently clear about how or whether the 'reasonable and necessary' criterion should be applied? Is there sufficient clarity around how the section 34(1) criteria relate to the consideration of what is reasonable and necessary?

Is better legislative direction about what is reasonable and necessary required? If so, what improvements should be made? What would be the implications of these changes for the financial sustainability of the scheme?

We are wary of creating more legislative direction about what is reasonable and necessary support. Every person with a disability is an individual with unique needs. There is currently a lot of inconsistency in what the scheme deems reasonable and necessary but this inconsistency should be reduced over time with more experience, judicial decisions and improved systems in the NDIA.

DRAFT RECOMMENDATION 4.2

The National Disability Insurance Agency should ensure that planners have a general understanding about different types of disability. For types of disability that require specialist knowledge (such as psychosocial disability), there should be specialised planning teams and/or more use of industry knowledge and expertise.

We agree with this recommendation. We emphasise also that specialist knowledge is required for people with intellectual disability and complex behavioural needs including specifically people in contact with the criminal justice system.

We also have concern that the current National Access Team who check eligibility of potential participants. Its staff also need more training. Our members with intellectual disability have informed us that the National Access Team have contacted them and asked a series of complex and personal questions. For many people with intellectual disability, phone contact is inappropriate. This is because they either do not trust the person or are inclined to acquiescence and may not disclose the true nature of the support they need. Some family members have also reported to us that the planning meeting was conducted over the phone. We strongly believe that all staff that have contact with people with intellectual disability should be given appropriate training in effective communication and interpersonal skills.

Provider readiness

DRAFT FINDING 6.1

In a market-based model for disability supports, thin markets will persist for some groups, including some participants:

- · living in outer regional, remote and very remote areas
- with complex, specialised or high intensity needs, or very challenging behaviours
- from culturally and linguistically diverse backgrounds
- who are Aboriginal and Torres Strait Islander Australians
- who have an acute and immediate need (crisis care and accommodation).

In the absence of effective government intervention, such market failure is likely to result in greater shortages, less competition and poorer participant outcomes.

We strongly agree with this finding. In NSW, the situation is currently particularly acute with the state government exiting from service provision. The state has been the predominant service provider for people with very challenging behaviour including as a last resort provider where the non-government sector is unable or unwilling to provide. There is serious concern that in NSW, there is not a safety net service with the exit of all NSW Government services.

INFORMATION REQUEST 6.1

In what circumstances are measures such as:

- cross-government collaboration
- leveraging established community organisations
- using hub and spoke (scaffolding) models
- relying on other mainstream providers

appropriate to meet the needs of participants in thin markets? What effects do each have on scheme costs and participant outcomes? Are there barriers to adopting these approaches?

Under what conditions should block-funding or direct commissioning of disability supports (including under 'provider of last resort' arrangements) occur in thin markets, and how should these conditions be measured?

Are there any other measures to address thin markets?

Block funding or direct commissioning is likely to be needed in relation to people with complex challenging behaviour and/or ongoing contact with the criminal justice system. This includes ensuring a provider of last resort arrangement.

Where people have cross sectoral needs, for example between disability support, health and justice systems, robust cross government collaboration may be needed.

Participant readiness

INFORMATION REQUEST 8.1

Is support coordination being appropriately targeted to meet the aims for which it was designed?

The market for support coordination is currently very inadequate. In NSW, the result is that much support coordination is occurring by core service providers which shows a flagrant conflict of interest. Also, the skills and allowed hours for support coordinator are inadequate.

In April 2015, the Disability Reform Council decided that "the NDIS will fund decision support, and capacity building for participants, including support to approach and interact with disability supports an extra access mainstream services".

The limited market of support coordinators and the inadequate hours provided for support coordination means that there is very limited scope for them to provide decision support or capacity building to people with intellectual disability.

INFORMATION REQUEST 8.2

Is there scope for Disability Support Organisations and private intermediaries to play a greater role in supporting participants? If so, how? How would their role compare to Local Area Coordinators and other support coordinators?

Are there any barriers to entry for intermediaries? Should intermediaries be able to provide supports when they also manage a participant's plan? Are there sufficient safeguards for the operation of intermediaries to protect participants?

We strongly support measures to enhance the capacity of disability support organisations to play a greater role in supporting participants, in particular with preplanning and support coordination. The advantage of these organisations is their being rooted in the values and lived experience of people with disability.