

Interaction Disability Services' Submission to the Productivity Commission

To Whom It May Concern:

Thank you for the opportunity to provide a submission to the Productivity Commission's Review of NDIS Costs on behalf of Interaction.

About Interaction

Interaction is a generalist and specialist disability provider, predominantly covering northwestern Sydney. Interaction's generalist services predominantly supports people with intellectual disability. Interaction's specialist support is for people with Prader-Willi Syndrome and is internationally recognised, and we are currently expanding interstate.

We are a registered NDIS provider and are well prepared for the NDIS. Our governance and systemic processes were ready, and Interaction has now transitioned 100 per cent of its existing clients into the NDIS whilst increasing its market share through supporting new participants into the scheme.

Pricing for Psychological and Behavioural Supports

Our most significant concern is that the NDIA has developed non-contextual pricing. In our view, this has happened because of what we believe is a failure to engage wholly with service providers on planning and pricing. This is a misplaced philosophical position based on assumptions that service providers will inflate prices. These assumptions have never been tested.

An example of non-contextual pricing is the significant restriction in what is claimable under the NDIS for a psychologist. The funding gap has been borne by providers, which is not sustainable for all parties. Interaction has a large team of psychologists. They provide assessment, behaviour intervention support plans, skills training and therapeutic support to people who experience challenging and/or other behaviours, their families and our staff. The breadth of their services is needed to enable the participant to interact with the community without significant support.

Well planned and funded intervention of these support services facilitates the NDIS's intended insurance outcomes of reducing funded supports in the longer term. Interaction has a number of clients with very complex needs. The number of hours provided for in plans is now significantly less than needed. For example, a teenage boy that was receiving 300 hours per year is now reduced to 22 hours per year. In addition, the pricing is confusing and mainly limited to face-to-face hours. This limitation means that essential and required tasks—such as report writing, service formatting of behaviour intervention support plans, individualised pre-reading and research, coaching of staff, coaching of families and so on—is not covered. Interaction's psychologists require 44 claimable hours per fortnight to support their

role within the organisation. That 44 hours requires another hour or two besides that to actually do the task, which means they do not have enough time per fortnight to actually do the job that they are supposed to do.

Recommendation:

The NDIA reviews the claimable hours for Psychological and Behavioural Supports to reflect the degree and complexity of work required to deliver this quality support under the NDIS.

Skills atrophy and the NDIS - An unintended consequence

I would also submit that non-contextual pricing has other, unintended consequences. For example, the NDIS pricing structure reduces the ability of organisations to attract and induct the expected injection of new staff into the sector. In that regard, skills atrophy has been observed in overseas jurisdictions that have implemented initiatives similar to the NDIS. Investing early and establishing a system where people can access appropriate training reduces participant risk, staff risk and organisational risk.

Recommendation:

The NDIA must reassess its approach to training and the inclusion of this in pricing and scheme design in future rollouts, for the sustainability and longevity of the NDIS and retaining a skilled workforce.

Prader-Willi Syndrome

Prader-Willi Syndrome (PWS) is a rare and complex genetic condition, affecting roughly one in every 15-20,000 births each year. The average lifespan for a person with PWS is around 30 without appropriate and life-saving interventions.

Associated challenges include (but are not limited to);

- High propensity to obesity due to lack of satiety, which can become life threatening
- Mild intellectual disability
- Mental illness including anxiety, bipolar and episodes of psychosis
- Speech difficulties
- Gastric complications like constipation, poor digestion and slow gastric emptying
- High pain threshold – making it difficult to diagnose illness
- Behavioural issues and emotional immaturity
- Slow sensory reception and processing
- Scoliosis
- Short stature, small hands and feet
- Lack of sexual maturity

Interaction is investing in its Prader-Willi expertise by bringing out international experts Dr Hodebeck-Stuntebeck, chair of the international Prader-Willi carers board, and Dr Hubert Soyer to train key people in best practice supports and outcomes for people with Prader-Willi syndrome. These doctors provide training throughout Europe. This is unfunded, and only made possible by the long-term

investment of Interaction in the future of the Prader-Willi syndrome community. Solely funded under the NDIS, this would not be possible.

Recommendation:

The NDIA must reassess its approach to up-skilling and training its workforce in lesser known disabilities, such as Prader-Willi Syndrome. This will ensure the reasonable and necessary resources required to support their ongoing wellbeing will be reflected in their NDIS plans and funding.

I thank you for the opportunity to provide a submission to this Review.

Yours sincerely,

Craig Moore
Chief Executive Officer