







# **E W Tipping Foundation Submission to Productivity Commission**

### **Disability Care and Support Public Inquiry**

#### August 2010

#### 1. General Comments

The E W Tipping Foundation network is a network of nonprofit community organisations overseen by community volunteers and supporting almost 3,000 Victorians with a disability. We have a fundamental commitment to social justice and social change, based not just in the provision of disability services but in "fostering independence, choice, and community for all."

We have contributed directly to some of the very detailed and high quality submissions being made to this inquiry, and our own submission is therefore brief.

## 2. Principles

We are actively involved in the national peak body National Disability Services and we support the principles of the National Disability and Carers Alliance submission (National Disability Services, Australian Federation of Disability Organisations and Carers Australia).

We strongly support the concept of universal lifetime entitlement to disability services. We see this as a natural evolution of Australian social policy. In particular we see such universal lifetime entitlement as an extension of other universal rights of Australian citizens, including essentially free education, essentially universal health care access, and essentially universal superannuation.

We believe that the concept of a National Disability Insurance Scheme is one viable way of bringing about a universal lifetime entitlement for people with a disability.

### 3. Implementation

We believe that the implementation of universal lifetime entitlement must be underpinned by:

- maximum control of services by people with a disability (or, where cognitive impairment materially impacts capacity to directly exercise that control, through a family member or independent advocate)
- 2. a substantially streamlined service system
- 3. a regulated "market" for disability services which:
  - a. provides quality, efficiency and choice
  - b. does not allow inappropriate or unethical service provision
  - c. does not allow market dominance by a few large organisations

- d. is not distorted by Government provision of services, other than in very limited circumstances
- 4. a recognition of the importance of a national workforce of appropriately qualified and/or accredited professionals to deliver the services

### **Systemic Inefficiency & Material Economic Savings**

We are of the view that individual nonprofit organisations involved in disability support are generally efficient, however we believe the system itself is profoundly inefficient. There are many examples of these inefficiencies and of a "broken system", dealt with in other submissions.

# Specific example of systemic inefficiency

Our own direct example relates to our current project to establish an Australian-first Acquired Brain Injury Rehabilitation centre. The centre is based on a unique UK neurobehavioural rehabilitation model which has been widely implemented with great effect by the Brain Injurty Rehabilitation Trust in the UK for almost 20 years.

Based on extensive evidence, the model demonstrates significant impacts on individuals' life outcomes as well as significant economic impacts. For example, around 72% of people entering a centre based on this model require full-time support, while only about 14% of people exiting a centre (typically after six months) require full-time support. The lifetime cost savings of such a relatively inexpensive period of rehabilitation can be around \$A2,000,000 per person.

Despite these demonstrated positive impacts and manifest economic benefits, implementing such a centre in Australia has been difficult. The difficulties do not arise from an absence of good will or good intent of any party, but rather the fragmented nature of the system. The relatively arbitrary boundaries between Health, Commonwealth Disability, State Government Disability, and other funders such as Victoria's Transport Accident Commission and WorkCover Authority tend to create a system which is reactive and in which innovation is far more difficult than need be. It is a system in which each funding and regulatory stakeholder - irrespective of their excellent separate intent - has great difficulty in holistically and strategically influencing the system for the benefit of people with a disability.

Our example of an ABI rehabilitation centre is no doubt just one of many similar innovations which would bring about similar economic and social benefit if the system were to be streamlined. Our view is that a system which is based on entitlement would engender appropriate minimisation of overall cost by encouraging strategic investment on a *lifetime* basis rather than a *rationing* and *reactive* basis, thereby fostering innovation, driving down overall economic cost per capita, and yet providing significantly more and better services. Such a system would be therefore economically sound and would uphold the fundamental rights of *all* Australians.