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Commissioners – Disability Care and Support Inquiry Productivity Commission GPO Box 1428 Canberra City – ACT 2601

Dear Commissioner

Whitehorse City Council Submission: Disability Care and Support Draft Report

Whitehorse City Council welcomes the opportunity to provide a submission in response to the Disability Care and Support Draft Report.

Council acknowledges the work of the Productivity Commission in developing the Disability Care and Support Draft Report which heralds significant change in the orientation and delivery of supports and services to people with a disability and their families. The vision of a rights based, unified, and accessible person centred service model supports Australia's commitment to the United Nations Charter on the Rights of Persons with Disabilities.

Furthermore, Council recognises the enormous change and benefit the introduction of a national disability insurance scheme will potentially make to the lives of people with a disability living within the local community.

Please find attached Councils submission to the Disability Care and Support Draft Report.

Yours sincerely

Terry Wilkinson

Acting Chief Executive Officer

Whitehorse City Council

Submission

Disability Care and Support Draft Report

Whitehorse City Council works with the local community to be an inclusive, vibrant, prosperous and sustainable community.

The City of Whitehorse is located 15 kilometres east of Melbourne and covers an area of 64 square kilometres. The municipality has an estimated population of 152,349 people with more than 110 languages spoken. The 2006 Census highlights that approximately 66% of Whitehorse residents are aged between 18 and 69 with 21% aged less than 18 years and 13% aged over 70 years.

The ABS Disability Ageing and Carers Report (2009) estimates that 18.5% of Australians report a level of disability that restricts everyday activities and has or is likely to last more than 6 months. The ABS report confirmed earlier findings that the rate of disability increases steadily with age. This equates to just over 28,000 residents reporting disability within the City of Whitehorse.

In providing this submission on the Disability Care and Support Draft Report, Whitehorse City Council would like to provide general comments prior to addressing the information sought by the Productivity Commission.

General Comments

Defining Disability

Acknowledging that there is no one all encompassing definition of disability care needs to be taken to ensure that the definition utilised in relation to the NDIS is not rigid. Having a rigid definition of disability is problematic as some people with a disability may be inadvertently excluded from access to services and supports. It is Whitehorse City Councils belief that NDIS utilise the definition provided in the United Nations Convention on the Rights of Persons with Disability. This definition is broad based and can be accompanied by the qualifying statements that the NDIS is intended to meet the needs of people with a disability where disability is present at birth or acquired through accident or health condition but not due to the natural process of ageing.

Interaction with other Government Departments

Within the Draft Report there is commentary on the interplay between various State and Federal Departments and the NDIS. It is imperative that people with a disability have access to support and services throughout their lifespan regardless of the venue in which that support is required, to ensure that people have the best opportunities possible to participate in the political, economic, social aspects of the

community. The Draft Report outlines that the state education systems meets the needs of young people with a disability and that many of the costs within the education cannot be attributed to specific individual needs. Families in the current education system compete for scarce support funding by continually presenting their child's needs in a deficit model that does not have the resources to meet the needs all children with a disability. The Shut Out Report (Commonwealth of Australia 2009) articulates the experiences of people with a disability and families as "The Wasted Years- the education experiences of people with disabilities". It is also known that very few people with a disability complete secondary schooling or enter tertiary education. It is imperative that young people with a disability have access to equitable education to enable greater opportunity to participate in the life of the community throughout their life. The NDIS therefore should consider the support needs of young people with a disability in education settings with a view to addressing issues that present that are beyond the capacity of the particular school to meet in relation to the specific individual.

Employment

Whilst social inclusion through economic participation such as employment is a one outcome for people with a disability it should not be considered as the primary focus or goal of the support provision under the NDIS. People with a disability may indeed have employment goals; however for some people employment is not a realistic goal for a variety of reasons. People with a disability are currently less likely to be employed than other members of the community; the likelihood of employment decreases with significance of disability, therefore the focus of the NDIS should centre on supporting the person to access a life that is meaningful to that particular person.

Age and Disability

Age should not determine access to care and support under the NDIS. The diagnosis and impacts of disability is not solely conditional on age of onset, or likely duration of care. The stated intention of NDIS is to provide coverage to people who experience disability from birth or as a result of accident or medical condition but not due to the natural process of ageing.

A "no disadvantage" rule should be applied where people are given the option to choose between the services and supports offered by the NDIS and the aged care system. The "no disadvantage" rule would then prevent cost shifting and ensure the best outcomes for the person, based on their presenting and future needs. Where a choice between service systems is available to the individual there should be onus placed on the NDIA to clearly depict the services and supports that can be provided under both systems without bias.

The Draft Report states that aligning philosophies acknowledging differences in vocational directions and duration of care between disability and aged care systems would be difficult. Whilst this may be so, it is not impossible as both the focus of both systems is to support the person to live a life that is meaningful. This point should be given further consideration at future reviews of the NDIS.

Carers

Whitehorse City Council acknowledges the valued role that informal and unpaid carers play in supporting people with a disability. It is acknowledged that in many instances these roles are undertaken by family or friends and therefore these relationships need to be preserved. Carers according to recent research (Deakin University 2007) have the lowest collective wellbeing and person health outcomes in the community. Social connectedness is one of the keys to emotional health and wellbeing for both the person with a disability and their family and carers. Caution should be exercised through the assessment phase so as not to place unrealistic expectations or additional burdens on family members and carers.

NDIS

The following section of the submission seeks to provide feedback sought by the Productivity Commission

Chapter 3 Boundaries between the mental health sector and NDIS

Whilst acute care should be managed through existing State Health Services Council asserts that services such as psychosocial rehabilitation, where the focus is on the person's connection to the community and subsequent social participation (not treatment of the illness) should be managed through the NDIS. There is a significant overlay between the disability and mental health sectors in relation to the focus on employment, education and training as well as connection to the social fabric of community. Whilst current practice models, services and supports available may differ between disability and mental health services the underlying principles are similar and the skill set required by NDIA case managers would be transferable.

One of the issues people with a disability face in the current dysfunctional service system is the difficulty navigating the system when a person presents with both a diagnosis of mental illness and disability. Aligning both systems and having an equitable service model will work towards preventing this from occurring and should promote opportunities for specialist organisations to work together to address the individuals needs and aspirations of people.

Chapter 4

It is imperative that people who require artificial limbs have equitable access to the equipment that best suits their needs; Council therefore supports the Productivity Commissions premise that the NDIS should fund artificial limbs.

Higher electricity costs associated with disability should also be covered by the NDIS where that rise directly relates to the nature and impact of disability. This may be administered in the same way as concessions arrangements that are currently available to Centrelink recipients and are then subject to CPI increases. Avenues to reduce total electricity costs through sustainability measures should also be considered in conjunction with other Federal and State Government departments such as the installation of insulation and solar panels in public housing.

Centrelink payments such as Carer Payment, Carer Supplement, Carer Allowance, Mobility Allowance and the Child Disability Assistance Payment should be considered in the development of a comprehensive support plan for the person with a disability. NDIS however should not determine eligibility or administer Centrelink entitlements. The individual's support plan however could be utilised as evidence to support the application for Centrelink entitlements.

Chapter 5

The framework for assessing care and support needs is clearly outlined in the Draft Report however the person centred emphasis is lost in the commentary. The person with a disability (or their legal guardian and or family) should take lead role in identifying the supports and services needed and the subsequent decision making, where possible.

In relation to drawing on multiple sources of information this should be undertaken with the consent of the person with a disability (or their legal guardian and or family) and the person with a disability (or their legal guardian and or family) should subsequently direct who is involved in the process. Referral options should then be provided to the person to follow up; this will empower the person to make choices based on the best fit of service for their particular need.

Furthermore, reassessments should be triggered by the person (their legal guardian and or family) where the current supports are no longer meeting that person's needs. Reviews should take place at least annually as the system commences as this will provide much needed guidance and build the capacity of people with a disability to identify and communicate their own needs as they arise.

Chapter 8: Delivering Disability Services

The current focus on external evaluation that reports back to the organisation and the funding body should be considered as this will enable a level of trust from people accessing the services as well as building a continuous improvement model into the service system.

Chapter 16 NIIS

The need for a separate National Injury Insurance Scheme is not clear. It is understood that there is not a national approach to transport or workplace injuries or injuries that occur where there are other insurance based schemes in place. Rather than seek to develop an additional system consideration should be given to aligning existing state systems to provide a national approach. In addition then care and support could then be provided through the NDIA. Alternatively funding from current income sources such as TAC and WorkCover could be redirected to NDIA to administer the total system. Exploring the concept of a National Disability Insurance Scheme should result in one no fault system that is fair and equitable. Whilst it may

take additional time to align State based insurance schemes this should not prevent the work needed to introduce the NDIS.

Whitehorse City Council supports the Municipal Association of Victoria's (MAV) submission to the Commission on the Disability Care and Support Draft Report which, specifically focuses on the development of the National Injury Insurance Scheme (NIIS). Council believes that aligning the State based insurance schemes such as TAC and Workcover so as to ensure equitable access to no fault claims and service provision would benefit the community.

Council however agrees with the MAV that the Productivity Commission needs to reconsider the funding arrangements of the NIIS based on the following:

- There is little potential benefit to Victorian Local Governments through the imposition of a no-fault injury scheme as catastrophic injuries where a Council is deemed at fault are highly infrequent and would only form a very small proportion of the costs not currently covered by TAC, Workcover or medical indemnity insurance.
- Given the above, the MAV contends that far from presenting an incentive for Local Governments to manage risks and hence reduce injuries over time, the removal of the alignment between the parties responsible for catastrophic injury and the schemes funding will introduce moral hazard that could lead to further accidents.
- There are serious deficiencies in the argument for the introduction of a rates based mechanism as an administratively simple and efficient mechanism. This argument relies on analysis undertaken which does not accurately reflect the rating system in Victoria. As such, the efficiency of any levy placed on Council rates is likely to be lower than is estimated by the report.
- There is no consideration of the equity of the effect of a levy on Councils. Research undertaken by the MAV has suggested that rates are regressive, which would lead to a reduction in the overall progressiveness of the taxation system in Australia.

Citing the Submission to the PC Inquiry into Disability Care Based on the above points, the MAV argues that an alternative funding model should be considered — either a model which is more able to accurately connect the risk of injuries to the contributors or a tax which also fulfils criteria related to equity and distributional impact.