



Productivity Commission Inquiry  
into  
Long Term Disability Care and Support Scheme

Submission by

Neurological Council of Western Australia

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The Neurological Council of Western Australia was established and incorporated in 1992. It is the umbrella body for 26 members who represent some of the neurological focused community groups. The mission of the Neurological Council of Western Australia is to work in partnership with government and non-government organisations to ensure that appropriate services are accessible for all people with neurological conditions.

The Neurological Council of Western Australia as per its constitution, has a Council of Members aligned to it, who have made a request that the NCWA submits to the Productivity Commission Inquiry, a statement of support for the:

1. National Insurance Disability Scheme
2. National Injury Insurance Scheme

As has been highlighted in the Productivity Commission Draft Report (February 2011), the current disability support 'system' is inequitable, underfunded, fragmented and inefficient, and gives people with a disability little choice.

It is important that choice is afforded to all people with a disability or injury resulting in disability. The Neurological Community would like to ensure that all people dealing with the effects of disability and their carers have access to quality care and support.

The Neurological Community is diverse and complex with some people having to cope with significant disability, particularly those affected by brain or spinal cord injury. There are also those people for whom disability may be transient; an example of this would be a relapsing, remitting form of Multiple Sclerosis which could be very disabling and from which the person may recover fully, or may have accumulated a level of disability following the relapse. Headache and Migraine, Chronic Fatigue Syndrome and Myasthenia Gravis are other diagnostic conditions which can have significant disabling effects, albeit transient. These people may also need intermittent support which would need to be factored into the National Insurance and Disability Scheme. It is this group of transient or intermittently disabled people who are often overlooked as they can present very well, but it is the unseen which is disabling.

Clarity also needs to be provided in relation to the issue of eligibility. People living with Younger Onset Dementia may be classified as arising from 'natural ageing' which is not the case. Statements in the eligibility sections such as; *'certain conditions that are strongly related to ageing and that occur after middle age for example, exclusions might apply to disability arising from dementia or Parkinson's disease in someone aged 60 years or more'* are of concern to NCWA and those living with younger onset dementia. The neurological causative factors for dementia are complex and can often occur in the younger population; examples being Fronto -Temporal Dementia, Lewy Body Dementia, Vascular Dementia, Metabolic Dementias, and Korsakoffs Dementia. This cohort of need would not be best suited to being cared for in the aged care setting; the disability sector would be much more suited to meeting the needs of a younger population who have been disabled by a dementia type disease.

It is encouraging to note that the Productivity Commission Draft Report (February 2011) recognises the important role of early intervention; examples given being Parkinson's Disease and Multiple Sclerosis. The impact of good quality education and support in the early part of the disease

trajectory has been well documented and this model of service and support could transition well into other diagnostic groups within the neurological community. It is hoped that this type of care and support can play a more significant role in any planned service delivery through the National Insurance Disability Scheme.

We concur that the existing system of support services for those with high level disabilities is not functioning well, and would like to support the implementation of the National Insurance Disability Scheme and the National Injury Insurance Scheme.

It is welcoming to note that the Productivity Commission Draft Report (February 2011) states that *'Beyond the main function the National Disability Insurance Scheme would have several other important roles, including mustering community resources, providing information to people ,quality assurance, diffusion of best practice among providers and breaking down stereotypes'*. The Neurological Council of Western Australia believe these are all fundamental elements in any forward looking and sustainable system.

### [Summary](#)

The Board of the Neurological Council of Western Australia and the Council of Members support the recommendations in the Productivity Commission Draft Report (February 2011)