

**COUNTRY WOMEN'S ASSOCIATION OF NEW SOUTH WALES**



**SUBMISSION:  
Overview and Recommendations on  
Disability Care and Support**

**To:** Inquiry into Disability Care and Support  
Productivity Commission  
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The Social Issues Committee of the Country Women's Association of NSW thanks the Australian Government Productivity Commission for the opportunity to comment on the proposed National Disability Insurance Scheme.

The sheer scope of introducing this Insurance Scheme is "mind boggling". The estimated cost is incredible, \$6.3 billion per annum, the entire needs of the NDIS being funded by the Australian Government, because the Federal Government can raise taxes more sustainably and with fewer efficiency losses than state and territory governments.

There are already a number of Acts that define disability differently. This will have to be tidied up before the insurance scheme can work. For example - what is a disability with a medical or disease cause; a disability caused by an accident and resultant physiological damage; a disability with psychological cause; a disability caused by alcohol or drug abuse; a disability that is learning related and a myriad of other forms of disability.

The insurance proposal is excellent/most ambitious in theory, but there is so much to be achieved before this comes into operation 2014-2015 (three to four years time frame) is certainly not enough time. So many more workers will be needed and all of them trained i.e. occupational therapists, disability support workers etc. So much paper work to compile for all eligible (for this scheme) clients from the very young to the old.

As with so many government funded and run schemes there seems to be a great waste of resources, duplication of administration and, in some cases, simply a lack of understanding of the schemes that are being controlled.

This Committee has always stressed the need for a "big picture" coverage of the care and monitoring of all disabled. There should be a state-wide reporting system on every physically and mentally disadvantaged child/adult with complete details of family, type of carer, reports from doctors/specialists/occupational therapists etc., date of next appointment, equipment needed, when equipment was last serviced, respite, forward planning for future housing/hostel arrangements. This information should be available to all health-care workers, should be portable (inter-state and overseas). Regular contact should be personal, by trained staff and not by phone.

This Committee is divided regarding the benefits of large pay-out packages. On one hand, it is known that many people with disabilities are not capable of handling "big" money and often become victims of unscrupulous "so-called" financial advisers. On the other hand, some are quite capable of controlling their own funding and driving their own service delivery by choice of services and providers.

The problem may be setting spending limits on these services bearing in mind the enormous range in disabilities and the services required for them.

Another concern, especially for those in country areas, is that of the provider. In these areas, there are not sufficient workers skilled in providing services and support to people on disability without major training taking place. Providers in country areas find that they are accountable and complete returns to both state and federal systems – again a duplication of work. Yet, another problem exists with the for-profit and not-for-profit providers, with the for-profit sector tending to service clients in town, leaving the not-for-profit sector (who under funding agreements cannot refuse a client) to service the remote, isolated or difficult clients.

However, it is thought that the main deterrent to the National Disability Insurance Scheme getting off the ground is the huge number on disability payments. Over the last decade there has been a great increase to the numbers on disability assistance. The Federal Government is aware of this, and the Prime Minister has stated that "everyone who could work, should work".

From reports received by Committee Members, it seems that Centrelink and similar organizations have become so overworked and incapable of handling the work load that they have lumped many applicants for assistance into one category and, unfortunately, that is the disabled category. From previous submissions on disparate subjects we found that mothers (forced off a parental subsidy because the youngest children reached school age) elected to go on a disability pension instead of Job Search; formal carers of disabled clients, who have died or entered nursing homes etc., invariably went from a carer's pension to a disability pension; older people, made redundant and, in spite of the government's encouraging media barrage urging the aged to get back in to the work force, employers show great resistance to employing these 50s to 60s people. So, they invariably end up in the disability category. There are many other such cases. We suppose that, if these people are on the disability list, then, at least,

they are not listed as unemployed and that makes the unemployment figures look better. However, there should be a separate listing for these people; they should not be included with the "truly disabled."

This Committee firmly believes that the National Disability Insurance Scheme is a worthy plan but, until an understanding of the vastness of the problem has been reached, the official monitoring of every disabled person has taken place, and the various criteria of the disabled have been sorted out, the scheme will not get off the ground.

Social Issues Committee  
Country Women's Association of NSW