

Outsourcing Community Service Delivery

Organisation: Deaf Society of NSW

Name: Ms Sharon Everson

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Submission to the Inquiry into Outsourcing Community Service Delivery

Deaf Society of New South Wales

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Contact

Sharon Everson

Chief Executive Officer

Deaf Society of New South Wales

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BACKGROUND

The Deaf Society of NSW was established in 1913 and is a company limited by guarantee. We are a not-for-profit, bi-lingual, bi-cultural, community-centred organisation which exists to achieve equity for deaf people. Our services include employment services, Auslan interpreting, education and training, independent living skills and community services.

Our submission highlights two areas relevant to the inquiry:

- Considerations needed when outsourcing to small and specialist disability service organisations.
- Access and equity concerns for deaf and hard of hearing users of disability, housing and home care services funded by the NSW Government.

As a disability service organisation, the Deaf Society of NSW is best able to comment on the outsourcing of disability services, and this is the focus of our submission. However, we do assist deaf and deafblind consumers to access housing and home care services as well and will provide some comments on access and equity issues for these consumers. If further investigation of this area is required, we would also strongly encourage the committee to approach Deaf Australia, the consumer representative association for deaf people, to seek their input.

EXECUTIVE SUMMARY

Our submission addresses the terms of reference in detail below. In summary, we submit that:

- Outsourcing requires either very minimal quality systems or funding models that take account of the time to administer them, and the impacts for management of service by people with a disability and from culturally and linguistically diverse (CALD) groups need to be taken into account.
- Competition can lead to inequity in access to services, especially for deaf people who require access in Australian Sign Language (Auslan).
- Access in Auslan should be mandated by all service contracts and a separate funding pool should be made available for this to remove the financial incentive to provide sub-standard access to deaf people.
- The Person Centred Approach (PCA) and the NDIS will multiply both the benefits and challenges of outsourced service delivery, and that foreseeable problems need to be addressed now in light of the coming shift to individual funding.
- Outsourcing to generic services in regional areas does not remove the need for specialist services in regional areas.
- The promotion of disability services as a philanthropic undertaking should be viewed with caution, in line with the spirit of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) which uses a rights-based rather than a philanthropic or charitable model.

In this submission, we refer to the Deaf Community as both a **disability group** (because members of the community receive disability services and their rights are protected under the UNCRPD), and a **CALD group**, because the community has a unique language, Auslan, and a unique set of cultural practices and values which are quite different to the practices and values of the wider community. When outsourcing services, government agencies must ensure both equity with regard to the disability and cultural sensitivity with regard to the CALD nature of the community.

RESPONSE TO THE TERMS OF REFERENCE

A) STATE GOVERNMENT PROCESSES, OUTCOMES AND IMPACTS OF TRANSFERRING HOUSING, DISABILITY AND HOME CARE SERVICES FROM GOVERNMENT TO NON-GOVERNMENT AGENCIES;

There have been many positive impacts of outsourcing disability, housing and home care services, such as:

- greater consumer choice in service access
- a level of accountability to the people served, as they are able to “vote with their feet”
- greater flexibility and responsiveness in service delivery
- potentially greater community “ownership” of service delivery, especially by specialist NGOs which are run by or in the interests of particular community groups

There are, however, areas where improvement is required to reduce confusion and mitigate the negative impacts of competition between providers.

Confusion for clients is common as there are so many service providers that it can be hard for consumers to navigate the service maze. Information and advocacy services already assist here, but as the PCA and NDIS are implemented, particular attention will be needed in this area to ensure that culturally sensitive information and advocacy services continue to be provided, especially to CALD groups such as the Deaf Community.

Competition between service providers is a vexed issue. On the one hand, it provides greater consumer choice, and a level of accountability to consumers that has a good impact on service quality. On the other hand, it is all too easy for consumers to be negatively affected by competition between providers. For example, they may be discouraged from accessing a service from a competing organisation, even if they might benefit from that service. In addition, the privatisation of services can lead to cost-cutting that is not in the interest of the client such as refusal to pay for interpreters, or refusal to provide support staff who are fluent in Auslan. For deaf and deafblind people this is a particular problem as qualified interpreters are more costly than many other supports, and are often an on-going expense.

The negative impact of competition needs to be mitigated through the structure of funding arrangements in outsourcing contracts. For example, organisations should be rewarded rather than penalised for referring to other service organisations with specialist expertise. For the provision of interpreting services, we would propose that a separate pool of funding (similar to the Employment Assistance Fund (EAF) run by Job Access) be provided for use by deaf and deafblind clients and disability, housing and home care organisations. This would keep funding for interpreters separate from the funded amounts in service contracts. This would remove the current financial rewards offered to the practice of refusing provision of interpreters for deaf and deafblind consumers.

B) THE DEVELOPMENT OF APPROPRIATE MODELS TO MONITOR AND REGULATE SERVICE PROVIDERS TO ENSURE PROBITY, ACCOUNTABILITY AND FUNDING MECHANISMS TO PROVIDE QUALITY ASSURANCE FOR CLIENTS;

Quality assurance is a further vexed question for an over-stretched sector. On the one hand, it is clear to us that the principles of the Disability Service Standards (DSS) and the UNCRPD are not always embodied in the provision of services, especially in relation to service provision for deaf people in Auslan. On the other hand, despite ADHC's best endeavours, quality assurance systems continue to grow in complexity and require more and more staff time to administer.

To give one example, the recent release by ADHC of new quality guidelines in relation to probity in employment required 30 hours of staff time (20 from management, 5 from senior management, and 5 from other members of staff) in order to conduct and document an internal audit of our recruitment and selection procedures. As it turned out, our procedures were already in line with the bulk of requirements, and only required some small changes. Calculated at \$70 per hour, this is a cost of \$2,100 to check one relatively minor piece of the required quality system. These changes are occurring more and more

frequently as quality assurance systems increase in complexity, and costs increase too. Our concern is that this places an undue burden on smaller organisations relative to larger service organisations, and takes away time that would otherwise be spent on staff training, consumer consultation, and forward planning.

Similarly, client managements systems present a difficulty for smaller organisations. We have been quoted \$50,000 for the purchase of a client management system (CMS) which was compliant with statistical requirements. This was clearly unaffordable for us as a relatively small organisation and we continue to use paper-based systems. If quality requirements continue to grow in complexity to the point where a CMS is effectively mandated, this could jeopardise the operations of smaller specialist organisations such as ours.

To ensure probity, accountability and quality in service provision, we recommend a two-pronged approach to auditing outsourced disability services, based on the principles embodied in the UNCRPD. Firstly, desk audits could be used only for checking HR, training, governance and accounting systems. Secondly, service quality could be expected to be measured not by desk audits but by interviews with consumers and staff of the audited service to assess against the access requirements set out in the UNCRPD, perhaps mediated through a widely-known framework such as the DSS. Although slightly more labour-intensive for the auditor, this would be much less labour-intensive for service providers, leading to a whole-of-system saving. Service providers could then invest in staff training which actually ensures the staff are skilled for the work at hand and are able to make the consumers happy, rather than in staff training that focuses on the completion of paperwork and the navigation of complex client management systems.

The second part of the approach to quality assurance is to engage consumers in active decision-making about the services which they wish to access. The PCA and NDIS, if well-managed, should make it easier for consumers to “vote with their feet” and choose alternative service providers. If this decision-making power is adequately and properly supported, then it provides an additional quality check and layer of accountability at very little cost to anyone.

However, this second arm of accountability must be properly supported through developing the “human rights literacy” of the whole Deaf Community. In particular, information must be available in Auslan from service providers about their services and from government agencies about consumer rights. If the PCA and NDIS are rolled out without information available in Auslan, it is likely that deaf service users will remain unaware of their rights, vulnerable to exploitation. To support awareness and access, deaf-specific advocacy and information services, even for those without severe needs, must continue. We are concerned that the roll-out of the PCA and NDIS will leave deaf consumers with relatively moderate needs unable to access the occasional support which is all that they require. Without this support available to the whole Deaf Community, it is likely that the whole Deaf Community will have poor “human rights literacy”, thus making deaf people a vulnerable group who are unable to provide accountability through exercising their consumer choice.

C) THE DEVELOPMENT OF APPROPRIATE LEVELS OF INTEGRATION AMONG SERVICE PROVIDERS IN RURAL AND REGIONAL AREAS TO ENSURE ADEQUATE LEVELS OF SUPPLY AND DELIVERY OF SERVICES;

There are particular challenges for *specialist* service delivery in rural and regional areas. Integration and partnerships are crucial, but a level of specialist service provision is also necessary for groups with specialist needs such as deaf people who communicate in Auslan. Funding only generic organisations whose staff are unable to communicate in Auslan leaves deaf people unserved in regional areas.

At present, there is a large gap in specialist services for deaf and deafblind people in regional areas. The Deaf Society of NSW has five regional offices, established to meet growing demand in regional areas for deaf-friendly referral, information and casework services. Of these, only one (Northern Rivers) is funded. Providing unfunded services contributes significantly to the yearly deficit of our Consumer and Community Services department. In the 2010-2011 financial year, the Deaf Society of NSW spent \$192,980 on

unfunded regional services, and the unmet demand in these areas is still significant. To give one example, the Hunter region of NSW, with a deaf population which grew by an estimated 45% between 1996 and 2006, has no funded deaf-specific services available. The Newcastle office of the Deaf Society of NSW is funded from investment income at around \$51,500 per year. As the deaf population in the area grows and ages, growing demand places increasing pressure on very limited staff time. This is not sustainable in the long term.

The focus of specialist services in regional areas will always be on partnerships, referral, and supporting access to the generic services, but those specialist services, although small, must be adequately resourced.

D) CAPABILITY FRAMEWORKS ENSURING THAT COMMUNITY AGENCIES ARE NOT OVERLY BURDENED BY REGULATORY CONSTRAINTS;

Regulatory constraints do present something of a barrier to quality service provision. Regulation is not the problem *per se*, but the time required by management to document and monitor compliance is a huge burden for two reasons.

Firstly, the time required to check up on paper-work, although it is moderate compared to some sectors (such as the employment sector) is time spent away from actually monitoring service delivery, consulting with clients, and running staff training.

Second, the skills required to monitor paperwork and keep up to date with rapidly changing regulatory requirements is a barrier to the leadership of services by people with disability. There are many capable deaf leaders who would be more than able to manage a quality service, but they are deterred from applying for management roles by the amount and complexity of the regulations that govern the service, and the inaccessibility of compliance documents. Yet it is very much in the interests of consumers that services be lead and managed by people who identify closely with the community, who value and are fluent in the language of consumers, and who understand the particular challenges of life as a deaf person. The same is no doubt true for other disability and CALD groups.

To remove these problems we recommend a streamlined regulatory framework, based on the DSS, which takes a hands-on, rather than a paper-based, approach to auditing service quality as outlined above. Further, it is important that changes to the regulatory framework are made available in plain English and Auslan.

E) ENHANCED CAPACITY BUILDING AND SOCIAL INTEGRATION IN THE DELIVERY OF SERVICES BY LOCAL PROVIDERS;

Like a CALD community, deaf people have specialist needs, but unlike many CALD communities, deaf people are widely dispersed and as outsourcing continues as a service model deaf people are likely to access services from an ever greater number of organisations. The deaf awareness of service and management staff in this context is a matter for further capacity building.

As explained, deaf people use a unique language, Auslan, and have a culture which is different in significant ways to wider Australian culture. Deaf people also face barriers that are due to educational deprivation as well as disability. In order to provide accessible services, staff must be aware of the basics of deaf culture and appropriate strategies for interacting with deaf people. They should also be aware of how, where, and when to book an interpreter for more detailed interactions with deaf people. Deaf awareness training should be mandatory for all organisations managing outsourced services which have contact with deaf people.

F) FUTURE EMPLOYMENT TRENDS, EXPECTATIONS AND PAY EQUITY FOR WOMEN EMPLOYED IN THE NON-GOVERNMENT SECTOR;

Auslan interpreters in NSW are being trained and accredited at the same slow rate as they were 10 years ago, while demand has grown recently by almost 20% per annum. The shortage is so severe that bookings can require two weeks to be filled. This compromises the access of deaf people to disability, housing and home care services. We expect demand to rise after the introduction of the NDIS, thus putting further strain on an already stretched sector.

Training courses in Auslan (Certificates II-IV in Auslan and the Diploma of Auslan) and the Diploma of Interpreting need to be funded with greater regularity if interpreting services are to be properly staffed.

G) INCENTIVES FOR PRIVATE PHILANTHROPY IN THE FUNDING OF COMMUNITY SERVICES;

Although philanthropy may contribute some funding towards community services, there is the potential for conflict between a philanthropic or "charitable" approach and the rights-based approach which underpins the UNCRPD. This is not to say philanthropy should be discouraged, but incentives to philanthropy should be ones that do not compromise the dignity of service users or particular communities, perpetuate patronising attitudes, impose a sense of obligation, perpetuate power imbalances or discourage leadership by people with a disability.

H) THE USE OF TECHNOLOGY TO IMPROVE SERVICE DELIVERY AND INCREASE COST EFFECTIVENESS;

There is great potential for the use of technology to improve service delivery and increase cost effectiveness, but bandwidth currently imposes a restriction on the effectiveness of remote service provision, and a universal design approach is needed in order to maximise access.

The Deaf Society of NSW has already lead in this area with projects such as DeafNet (remote service delivery) and Sign Online (an introductory online Auslan course), as well as Video Remote Interpreting services. Access is hampered, however, by bandwidth limitations. Interpreting services via Skype are theoretically possible, but in practice the video quality is so poor that comprehension is often severely compromised. We expect this to improve with the introduction of the NBN.

Principles of universal design need to be mandated for outsourced projects and services that can use technology, so that all technological innovations enhance rather than prevent access. For example, audio podcasts can be a useful tool, but they are inaccessible to deaf people. Consideration needs to be given to access from the very beginning of each outsourced project that may have deaf people in the target group.

I) A COMPARISON OF THE MANAGEMENT AND DELIVERY OF SIMILAR SERVICES IN OTHER JURISDICTIONS; AND

As we are only a state-based service provider, we aren't able to comment on similar services in other jurisdictions.

J) ANY OTHER RELATED MATTERS.

We have no other related matters to raise.

RECOMMENDATIONS

- That the outsourcing of disability services require minimal quality systems or funding models that take account of the time to administer them, and take account of the impacts for management of service by people with a disability and from culturally and linguistically diverse (CALD) groups.
- That a separate pool of funding (similar to the EAF) be set aside to cover the costs of Auslan and deafblind interpreting in order to remove the financial incentives to provide sub-standard access to deaf and deafblind people.
- That the provision of access in Auslan (using Auslan interpreters for face-to-face meetings and Auslan translations for fixed texts) be mandated in all service contracts.
- That basic deaf awareness training be mandatory for staff of all organisations running outsourced services which serve deaf people.
- That changes in outsourcing arrangements be made with a view to preparing the sector for the PCA and the NDIS.
- That specialist regional services be properly funded in order to ensure culturally and linguistically appropriate access for deaf and deafblind people in regional areas.
- That attention be paid to the funding of training in Auslan language and Auslan interpreting as a matter of urgency.
- That philanthropic models be viewed with caution in both outsourcing policy and outsourcing practice, in line with the spirit of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) which uses a rights-based rather than a philanthropic or charitable model.

Signed on behalf of
the Deaf Society of NSW:

Name: Sharon Everson
Position: Chief Executive Officer
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