

**Submission
No 164**

**INQUIRY INTO IMPLEMENTATION OF THE NATIONAL
DISABILITY INSURANCE SCHEME AND THE PROVISION
OF DISABILITY SERVICES IN NEW SOUTH WALES**

Organisation: The Ella Centre

Date Received: 8 August 2018

a. the implementation of the National Disability Insurance Scheme and its success or otherwise in providing choice and control for people with disability

The jury is still out. There have been some great NDIS stories but also some horror stories. People have little choice until they have their NDIS plan. The government controls what goes into the plan. The choice comes in choosing a service provider. The concept of reasonable and necessary has never been adequately explained to people which causes confusion when they go through the planning process.

b. the experience of people with complex care and support needs in developing, enacting and reviewing NDIS plans

Many people with complex needs need the support of their Carer in the planning process. There is little support for Carers who have taken on an additional roll now and they are not directly supported as they were under the previous system with case management. Many services, such as those under the Home and Community Care, HACC, system recognised the Care as being an integral part of the system and able to receive services. Under the NDIS only the person with a disability is really considered. The Carer receives no direct services under the NDIS.

Many people with complex needs rely on the service provider for information and assistance with developing a suitable plan based on the service providers knowledge and experience. This is not recognised in the pricing structure and the NDIS system does not allow any involvement once the information on a participant reaches the NDIA planner.

Some people with a disability with complex needs are struggling to get support from agencies, even with substantive NDIS plans. Under the previous system the state government was the provider of last choice. There seems to be no one filling this void.

c. the accessibility of early intervention supports for children

This has seen a positive increase in families being able to access support.

d. the effectiveness and impact of privatising government-run disability services

Too early to tell as many services have only just taken on the previously government run services. A key concern though was the lack of say people with a disability had in this policy decision.

e. the provision of support services, including accommodation services, for people with disability regardless of whether they are eligible or ineligible to participate in the National Disability Insurance Scheme

A significant issue is starting to emerge for people with a disability without an NDIS package. It is difficult to know how those without an NDIS package will find suitable housing, including finding the funds if modifications are needed.

A number of support services for Carers have closed as the funding has gone into the NDIS pool. As the NDIS is for the person with a disability it has left a gap in support for Carers. The state government used to be the safety net or provider of last choice for people with complex needs that other service providers were unable to support or where a Carer relinquished care of their son/daughter. It is not clear who will provide this support now.

All States, except NSW have retained a portion of funding allocated for disability support. NSW chose to give 100% of their disability funding leaving nothing to address gaps or to provide a safety net for NSW citizens with a disability.

f. the adequacy of current regulations and oversight mechanisms in relation to disability service providers

Is this a moot point as the NDIS Quality and Safeguards Commission will have responsibility for regulating service providers?

g. workforce issues impacting on the delivery of disability services

There was never enough skilled and trained workers in the field prior to the NDIS. The expansion of funding under the NDIS and the need for more workers will put more pressure on the workforce. The low unit cost for direct care work will not encourage workers to stay in the disability field nor will it encourage people to train and gain qualifications in such a lowly paid field. The NDIS requires greater flexibility and the ability to meet specific outcomes for people with a disability and yet the unit cost does not allow for well trained experienced workers.

The inability for organisations to guarantee regular ongoing work because of the nature of the NDIS and organisations never being guaranteed ongoing funding from a participant, has meant an increase in using casual staff instead of permanent staff.

h. challenges facing disability service providers and their sustainability

A number of service providers have noted the cost for direct support under the NDIS is much lower than under the previous system, this includes the recent small price increase. They have reduced training and seeking entry level workers, who can be employed at the lower end of the award, rather than experienced and qualified workers. This magnifies the issues above relating to the workforce which is increasingly being casualised.

As providers only get paid while a person is receiving support and the high 95% utilisation rate expected under the pricing, we have seen a casualisation of the workforce. Casuals have less connection to a organisation and do not provide the continuity of care a permanent employee can provide.

The administrative burden has increased with the need to make individual claims for every person while the hourly rate, set by the NDIA has been reduced from the pre-NDIS rate, putting a strain on administrative staff.

The reduction of income will impact quality with service providers seeking to 'cut corners' wherever possible to remain financially viable.

The unit cost provides no time outside of direct support and so liaison with Carers is now extremely limited as funds do not allow for this to happen. It is ruining the relationship providers had with Carers. It also limits time for staff to de-brief after incidents as there is no scope to pay for this time.

The NDIA pays little attention to service providers. Changes continue to be made to the system and service providers find out after the event. There is no ability for service providers to develop a professional working relationship with the NDIA which is different from the previous system where a suitable relationship was built up with the state government disability department.

The claims system which requires service providers to provide a service and claim in arrears has put significant pressure on the organisation's cash flow. The complexity of service bookings, getting correct information from participants and their Carers, who are often confused, the issues of participants getting plan reviews which then negate service bookings, the confusion between service providers on who can claim what when providing support across services for a participant and a less than user friendly NDIA portal for claiming has increased administration time and resulted in claim errors putting further pressure on the organisation's cash flow.

i. incidents where inadequate disability supports result in greater strain on other community services, such as justice and health services

A number of people with a disability have ended up in hospital beds as there has been no other place for them to go or they have stayed in hospital longer because there is no where to release them too. The issue of younger people with a disability being in residential aged care facilities still exists. It is not appropriate for the younger person and blocks a bed for an ageing person.

j. policies, regulation or oversight mechanisms that could improve the provision and accessibility of disability services across New South Wales

Education is required to ensure mainstream providers that have the ability to meet the needs of people with a disability and make sure they have appropriate processes in place to meet a person with a disabilities needs. For some people with a disability additional resources/supports are required which costs money and is a deterrent for mainstream service providers.

k. **any other related matter**

The pace of the NDIS rollout in NSW was too fast. Many planning processes were rushed and plans were inadequate and needed reviewing. It seemed the need to meet the time frame for the transition agreed upon between the Commonwealth and the State Government took precedence over a quality planning process. There was little education or information to Carers, people with a disability and service providers on the actual planning process from the NDIA. The NDIA did not follow the priority of access to the NDIS protocol they advertised at the start of the rollout adding to the confusion. The Ageing and Disability Department, ADHC, provided a priority of access guide for people to transition into the NDIS based on information from the NDIA. It was never followed and caused confusion with service providers, participants and Carers.

We were told by ADHC and the NDIA in early April 2017 that no one in the Inner West would have a planning meeting or receive an NDIS before June 30th 2017. We relayed this information to our Carers and participants. Our first Carers and participants started receiving calls for planning meetings in mid April and, like us, were very confused at the change in time frames with no advance notice. It meant people went to planning meetings underprepared. We were also advised that participants in programs such as respite and social support would not start their planning process before January 2018 but by December 2017 95% of our participants in these programs had had there planning meeting. Again the change in time frames meant people went into planning meetings under prepared.

Older parent Carers, particularly those from a Non- English speaking background are struggling with the NDIS and do not always understand the full implications of how it all works. With the withdrawal of Carer support services there is an emerging gap for supporting Older parent Carers. This then directly impacts on the support available to their son/daughter with a disability. Carers who were getting support for their caring role pre-NDIS no longer receive this support as the funded programs were closed on 30/06/18 and the funds given the Commonwealth as the States NDIS contribution. Carers need support beyond what the NDIS provides for their son or daughter but have been significantly disadvantaged by the introduction of the NDIS.

Philip Coller

CEO – The Ella Centre