

Submission
No 276

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

Organisation: Settlement Services International

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**NSW Legislative Council
Committee Health and Community Services**

**Inquiry into the implementation of the NDIS and the provision of disability services in NSW
August 2018**

Submission Summary

General comments

- Australia is implementing a complex social and economic reform through the rights-based and inclusive National Disability Strategy 2010 – 2020, which includes the NDIS.
- Ability Links NSW is a successful program which aligns with the Information, Linkages and Capacity Building (ILC) program of the NDIS, assisting people with disability to access mainstream supports and achieve stronger social and economic participation.
- The Final Report of Evaluation of the NDIS found that it is delivering outcomes as designed, but identified several issues including in support services, workforce, choice and control, and equity and access.
- The available Australian Bureau of Statistics evidence indicates that people from CALD backgrounds have rates of disability, and profound or severe disability, similar to the rest of the Australian population.
- Early indications are that people from CALD backgrounds are one of the groups with poor NDIS access, whereas the evidence from Ability Links NSW indicates strong outcomes for disadvantaged groups.
- 23% of the Australian population (27% NSW) are from a CALD background by the NDIS definition.
- 7% of NDIS participants across Australia (8.5% NSW) were CALD at the end on 2017, continuing the legacy of poor access which existed under the previous system of specialist disability services.
- The NDIS will significantly under-achieve in its mission and vision if CALD people with disability, who represent more than 1 in 4 of people with disability in NSW, continue to experience barriers in the NDIS.

NDIS and providing choice and control for people with disability

- In 2017 the Productivity Commission found that the NDIS has improved the wellbeing of NDIS participants, giving them more choice and control and increased social and economic participation.
- The Commission found that the benefits of the NDIS are unevenly spread. People with psychosocial disability, complex needs, and language and cultural barriers are at risk of poorer outcomes.
- Contributing issues are complex and confusing planning processes, pressure to finalise plans quickly, planners' limited knowledge of disability, and inadequate funding of the ILC program.

Experience of people with complex care and support needs

- The NDIS requires participants to self-advocate to have their needs met, and the early evidence is that several disadvantaged groups are less able to do this for themselves.
- The NDIS evaluation noted people with intellectual disabilities, Aboriginal and Torres Strait Islanders and participants from CALD backgrounds risk being allocated lower levels of supports.
- Specific barriers include complex planning processes and lack of advocates to navigate processes, difficulty communicating with the NDIA and the NDIS portal and lack of information in languages other than English.

Impact of privatising government-run disability services

- In the transition to the NDIS many people who previously received disability services have had difficulty accessing adequate supports under the NDIS, or have had services significantly reduced.
- Contributing factors include complex service agreements with providers, long approval wait-times, fragmented delivery and coordination of services, and gaps (e.g. transport or when services discontinued).

Support services whether eligible or not eligible for the NDIS

- People with disability not eligible for the NDIS should be supported through ILC to access mainstream supports. At this stage ILC has not been adequately funded during the NDIS transition.
- The Productivity Commission has recommended that the funding of ILC be substantially increased to \$131 million per annum for the remainder of the NDIS transition period to 2023.
- Ability Links NSW is a successful program which supports all people with disability to access support and achieve stronger social and economic participation. The available evidence indicates that Ability Links offers strong outcomes for disadvantaged groups, including Aboriginal people and CALD people and could form a model for future ILC funded initiatives nationally.

Workforce issues

- Workforce issues identified within NDIS service providers include casualisation, reduced levels of pay, lack of training of casuals, and reduced specialised skills.

Strain on other mainstream services

- Greater clarity is required in role delineation between the NDIS and mainstream services in health, mental health, education, transport, child protection and the justice system.
- State agencies must continue to share responsibility for providing services to people with disability.
- Poor access to the NDIS by people with mental health needs is creating demand on hospital emergency units, ambulance, police, courts, correctional services, mental health services and GPs.

Policies that could improve access to disability services across NSW

- NSW agencies must maintain and provide services that are accessible for people with disability.
- A cultural competency framework such as that developed by the National Health and Medical Research Council should be applied to the NDIS and all disability service providers.
- The Multicultural Policies and Services Framework implemented by Multicultural NSW provides a good framework for agencies in NSW to deliver services to CALD people with disability.
- Ability Links NSW, as delivered by SSI, provides a model which has delivered strong outcomes for people with disability, including CALD people with disability, with 64% of SSI outcomes being for CALD participants.

Recommendations

- Continue to implement the National Disability Strategy 2010–2020 as the overarching framework of NDIS.
- Endorse Productivity Commission's 2017 recommendations to enhance the implementation of the NDIS.
- Endorse the Commission's recommendation to increase funding of the ILC program to \$131 million per annum for the remainder of the NDIS transition period to 2023.
- Apply the learnings from Ability Links NSW which has shown strong outcomes for disadvantaged groups, including Aboriginal people and CALD people, as the basis for expanded ILC funded initiatives nationally.
- Apply a cultural competency framework such as that developed by the National Health and Medical Research Council, to the NDIS and all disability service providers.

Settlement Services International

Settlement Services International (SSI) is a community-based, not-for-profit organisation committed to a vision of a society that values the diversity of its people and actively provides support to ensure meaningful social and economic participation. SSI provides a range of services in the areas of disability support, humanitarian and migrant settlement, employment support services, foster care and asylum seeker assistance in NSW.

Formed in 2000, SSI is also an umbrella organisation for 11 Migrant Resource Centres (MRCs) and multicultural organisations across NSW. Collectively, our member MRCs provide services to between 30,000-40,000 individuals in any given year.

SSI is the largest provider of Ability Links NSW (ALNSW), funded by the NSW Department of Family and Community Services (FACS), Ageing, Disability and Home Care (ADHC). Under ALNSW Linkers support people with disability, their families and carers to identify their goals and connect with their community and mainstream services. SSI has five ALNSW teams working across several Local Health Districts in metropolitan, regional and rural NSW.

FutureAbility is a multiphase project, funded by the NSW Government and managed by SSI, which is primarily working to improve the capacity of the CALD sector and CALD communities in NSW to be 'NDIS ready'. This work includes provision of data on CALD people with disability, development of policies and procedures for the CALD sector, business development grants and culturally responsive practice workshops.

In the area of employment and enterprise services SSI delivers a number of programs for the Australian and NSW governments. SSI is a 5-star Jobactive provider and SSI was recently successful as the lead agency in a consortium to deliver Disability Employment Services which adds value to our existing service footprint for people with disability. SSI's self-funded Ignite Small Business Start-Ups facilitates establishment of enterprises by migrants and refugees, and IgniteAbility works in a similar way with people with disability.

SSI is the main provider in NSW of the Humanitarian Settlement Program, funded by the Department of Social Services, to newly arrived refugees and other humanitarian entrants. SSI is also the lead organisation in a consortium, the NSW Settlement Partnership, of 23 partner agencies which deliver the Settlement Services Program, also funded by DSS, to refugees and family stream migrants in the first five years of settlement across NSW.

In 2016 - 2017, SSI provided direct services to more than 19,000 individuals, and co-ordinated programs which reached an additional 11,000 individuals.

SSI is well placed to contribute to this Inquiry, drawing on our extensive experience in delivering services for people with disability, and significant engagement with people with disability and their families and carers.

General comments

Australia is implementing a complex social and economic reform through the rights-based and inclusive vision articulated in the 10-year National Disability Strategy 2010–2020.

The most widely known aspect of this reform, the National Disability Insurance Scheme, commonly known as 'the NDIS', is designed to achieve this vision by transforming disability services and achieving better alignment with mainstream services.

In 2015, there were 4.3 million people or 18% of the Australian population with some level of disability. Of these, 715,000 people had a profound or severe disability. (Australian Bureau of Statistics, 2015)

The NDIS provides individual supports, to assist people with permanent and significant disability to participate in economic and social life, and give them more choice and control in the supports they receive.

The NDIS also includes the Information, Linkage and Capacity Building (ILC) program, to assist all people with disability, their families and carers with information and referrals to mainstream services, and to increase social and economic participation.

Specialist support services for people with disability are transitioning from a medical model and core funding of disability services under the previous National Disability Agreement, to a rights-based and inclusive approach to disability under the National Disability Strategy and the NDIS.

In NSW, the NDIS will be managed by the Commonwealth, and the sector is seeking clarity on Commonwealth and NSW Government responsibility for support services for people with disability, including those who are not eligible for the NDIS.

Ability Links NSW is a successful NSW government program which aligns with the Information, Linkage and Capacity Building (ILC) component of the NDIS, assisting all people with disability, their families and carers to access mainstream services and supports and achieve stronger social and economic participation.

The Final Report of the Evaluation of the NDIS by the National Institute of Labour Studies (NILS), Flinders University, found that the NDIS has been designed and built on sound fundamentals, and has been delivering the outcomes that it was designed to deliver.

However, the evaluation also found that "some design aspects and implementation outcomes are not as person-centred as originally desired, and several outcomes are not attained at the speed that was originally expected." The evaluation identified several issues, including in service supports, workforce, choice and control, participation, and equity and access.

In this submission SSI also draws on the Productivity Commission's 2017 NDIS Costs – Study Report, and submissions to the 2017 Australian Parliament Joint Standing Committee Inquiry into the NDIS.

SSI is currently finalising a policy paper on CALD people with disability and their access to supports through the NDIS and other services. In this paper we have identified clear patterns of barriers for CALD people to access the NDIS, and that they are under-represented as NDIS participants. At the same time there exist successful service models and enablers for CALD people with disability to access supports, including through Ability Links NSW as delivered by SSI, that can achieve stronger participation and outcomes for CALD people.

An estimated 23% of the Australian population (27% of NSW population) are from a CALD background by the NDIS definition of cultural and linguistic diversity. These figures are derived through comparison with the available data sourced from the ABS Census 2011 and 2016 on country of birth and language at home, and a National Centre for Classification in Health analysis (Qingsheng, 2016) derived from ABS Census and ABS Survey Disability, Ageing and Carers (SDAC).

The available Australian Bureau of Statistics evidence indicates that people from CALD backgrounds have rates of disability, and profound or severe disability, similar to the rest of the Australian population. 6% of all Australians have a profound or severe core activity limitation, and that figure is also 6% for people born in a non-English speaking country. (Australian Bureau of Statistics, 2012, SDAC Table 4)

In the transition of disability services to the NDIS, by the end of 2017 just 7% of NDIS participant plans across Australia (8.5% in NSW) were delivered to people identified as being from a CALD background (National Disability Insurance Agency 2018, p26 & p65), approximately one third of the 23% of NDIS potential participants in Australia who could be expected to be from a CALD background. This pattern of CALD people with disability having poor access to supports continues the legacy which existed under the previous system of funded specialist disability services, with little improvement over many years.

People from CALD backgrounds represent more than 1 in 4 of the people of NSW and people with disability in NSW. The National Disability Strategy and the NDIS are based on the principle and vision that all people with disability should have access and be able to participate in all aspects of our society. The NDIS will significantly under-achieve in this vision if CALD people with disability continue to experience barriers in the NDIS.

The case studies included in this submission are real cases put forward by SSI staff providing services to people with disability, presented in their own words. All cases have been de-identified to maintain privacy.

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

The Productivity Commission's 2017 NDIS Costs – Study Report noted that both the NILS Evaluation of the NDIS and the NDIS Outcomes Framework found that overall the NDIS has increased supports, on average improved wellbeing of NDIS participants and their families and carers, given people more choice and control over their supports, and increased social participation for some participants and their carers. (Productivity Commission, 2017)

The Commission also noted: "However, not all are reporting improved outcomes under the NDIS" and identified groups, including those with a psychosocial disability, complex and multiple needs, language and cultural barriers, transitioning from the criminal justice system, the homeless and socially isolated as being at risk of having poorer outcomes. The Commission noted that NDIS participants' satisfaction ratings fell from 95% in 2015 – 2016 to 84% in 2016 – 2017.

Issues regarding the NDIS implementation identified by SSI staff are broadly consistent with those identified by the Productivity Commission. SSI staff have noted NDIS planning processes being complex and confusing, pressures to finalise plans quickly, planners often having limited knowledge of disability, and that there is inadequate funding for the ILC program for capacity building during the transition period.

These issues have contributed to instances of inadequate NDIS assessment and supports, inadequate choice and control by participants over planning and selection of supports, and inadequate access to supports through the NDIS. It is not uncommon for individuals who should be eligible for the NDIS to receive less support under the NDIS than they did prior to NDIS implementation.

People With Disability Australia highlighted similar issues in its submission to the Australian Parliament’s Joint Standing Committee on the NDIS:

“PWDA members and clients have experienced numerous issues relating to the NDIS transitional arrangements. These issues include gaps in support, denial of funded support services or equipment, and inconsistent or inadequate plans. In some cases, these issues have been life threatening ... bringing individuals or families to crisis.” (People With Disability Australia 2017, p1)

These issues and outcomes for participants will be analysed in greater detail in following sections of this submission. SSI broadly supports the recommendations of the Productivity Commission 2017 to improve the NDIS implementation and outcomes for people with disability.

SSI Case Study 1 – Implementation of the NDIS, choice and control	
Participant Background	<p>I have chosen a family that was impacted strongly by the process to access the NDIS. The family is a complex family of four, Mum and Dad with two children. They had formal or informal support and were new to the area. Both parents have disabilities, with both children born with a different disability. Mum has an intellectual disability and suffers from depression while the father has autism. The youngest daughter has aspergers syndrome and is in primary school, while the older daughter is also on the spectrum and is in high school. Neither parent is employed.</p>
Current impact	<p>Prior to the NDIS, the family were supported by an ADHC case worker and a case worker from “Intensive Family Support”. Due to the Mum’s depression, simple daily tasks proved to be difficult. She was supported by home care, with cleaning and organising the house, however this service is no longer provided.</p> <p>The youngest child is supported by a psychologist under Medicare. Prior to the NDIS a “behaviour support specialist” from ADHC attended the home but this service was discontinued.</p> <p>The process of applying to the NDIS, following the portal access and photocopying all the documentation, caused the Mum to have a break down and she needed additional help from a mental health service.</p> <p>After many months, their Disability Packages were approved. This created issues of new or existing services providing conflicting information.</p> <p>Both daughters continue to receive support from programs, however the original hours of what was once known as respite has now decreased dramatically.</p> <p>Mum currently has an NDIS package, as do the children. She was hoping for support coordination and domestic assistance but these were not approved in her package.</p> <p>Originally, the Linker referred the family to a major charity, however as the family had no NDIS at the time, the referral was not accepted.</p>

Future impact	<p>The NDIS was portrayed as allowing people with disabilities a better life and more choices, however this family has clearly expressed and stated they feel the Scheme is complex and now they have less choices than previously.</p> <p>Both parents are concerned and unsure about how they will be impacted in the future, and if support for them under the NDIS will be sustained.</p>
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b) The experience of people with complex care and support needs in developing, enacting and reviewing NDIS plans

The NDIS requires participants or their families to self-advocate to have their needs met, and people with complex care and support needs and disadvantaged groups are less able to do this for themselves, compared to individuals and families who understand the NDIS system and are able to articulate their needs. The NILS evaluation noted that the NDIS was considered to be working best for articulate, English-speaking participants, and that participants from disadvantaged groups such as people with intellectual disabilities, Indigenous people and participants from CALD backgrounds, were “at risk of being allocated lower levels of funded supports” (National Institute of Labour Studies, 2018, p185).

SSI has identified multiple examples where people with disability have had great difficulty in navigating the NDIS planning process and accessing the supports they require, without significant assistance or advocacy.

Specific barriers to accessing supports identified for potential participants include: the complexity of the NDIS planning and assessment process, and time and skills required to manage this process; lack of advocates to support participants navigate the planning process; lack of understanding of the NDIS program and disability services, particularly for people born overseas; difficulty in communicating with the NDIS or accessing information through the portal and other means; difficulty in communicating with NDIS Local Area Coordinator; lack of information or planning material in other languages; lack of access to technology; lack of responsiveness by NDIS planners to cultural and language needs; lack of awareness of NDIS planners of disability and other complex needs.

The Australian Federation of Disability Organisations echoed these concerns associated with the planning process and quality of plans, in its submission to the Australian Parliament’s Joint Standing Committee on the NDIS 2017:

“People with cognitive impairments and complex care issues, including psychosocial impairment, their families and carers are particularly vulnerable in the context of the impact of the planning process. Other groups that are vulnerable are . . . Indigenous Australians, people whose first language may not be English, and people with disability who live on the fringes of society. For example, people with cognitive impairments . . . on the whole do not fare well in a telephone planning conversation.” (Australian Federation of Disability Organisations, 2017, p8)

SSI supports the recommendations of AFDO to improve the quality of plans, including having processes and plans that are available in languages other than English, plain language, Easy English and Sign Language. (Australian Federation of Disability Organisations, 2017, pp8-9)

SSI Case 2 – experience with complex care and support needs

Participant Background	Participant is a single mother with a physical disability, and mental health issues related to stress. Her family consists of two sons and one daughter, one of the sons has autism and the mother has limited English.
Current impact	<p>Despite having two members with disability in her family, she was completely unaware of the NDIS. By chance she met a Linker who was doing outreach and spoke her first language and requested domestic assistance.</p> <p>However, knowing of the Scheme's existence did not make it any easier for her. She had difficulty understanding the NDIS, the forms, the funding, which left her confused. She eventually overcame most of this confusion when the Linker invited her to an NDIS workshop conducted in her first language, which helped with a submission and her son's application for the scheme. The mother's personal NDIS application was rejected, however her son's application was approved.</p> <p>She continued to be overwhelmed by the preparation required in the Scheme. She was stressed by rumours in her community that the planning meeting was the decisive factor on whether you receive adequate funding, little funding or no funding; this was compounded by her mental health issues and her limited English language.</p> <p>She eventually solved this through her Linker who requested a meeting with a support organisation to help role play the planning process, accompanied by the Linker, as a confidence booster.</p> <p>She engaged in a planning meeting with LAC feeling confident, and tried her best to communicate her son's needs through an interpreter. Unfortunately, she felt the meeting with the LAC was too short to communicate her son's needs. More time is needed for meetings when using an interpreter, but her LAC was unwilling to be flexible or allocate more time.</p> <p>Afterwards, when she received her son's plan it lead to more questions but she did not know where to find answers. For example, how does she help her son use the funds? Why were the funds at the given amount? Why was her own plan rejected? Eventually, she felt she had to contact her Linker again. The Linker connected her to a disability advocacy organisation to advocate for a review and Support Coordination funding for her son, and an appeal for her own rejected package.</p>
Future impact	<p>Throughout each stage of the NDIS process, her experience was a series of confusing and difficult gates to navigate. Due to language barriers, she required constant help to be aware of and understand NDIS, to access the Scheme, to have the meeting with the LAC (a negative experience), to develop knowledge on how to use the funds and how to appeal/review.</p> <p>She is likely to need more assistance into the future, when she has to navigate the review and the expiration of her son's plan.</p> <p>The NDIS needs stronger engagement with CALD communities, particularly those who need information in their first language. Otherwise CALD participants will be excluded from the NDIS, while also losing key supports they may have previously accessed as they have discontinued.</p>

c) The accessibility of early intervention supports for children

Nil comment.

d) The effectiveness and impact of privatising government-run disability services

Issues around privatisation of government-run disability services relate to the effectiveness of NDIS procedures, the provision of support and continuity of support in the transition to the NDIS.

As identified above, NDIA planning processes are difficult to navigate, particularly to people who are disadvantaged, including people with intellectual disabilities or whose first language is not English. Planners' lack of understanding of disability, complex needs and cultural complexity, and inadequate time allocated to address these complexities in the planning process, has contributed to many people with disability not accessing the NDIS or having plans which do not provide the supports which they should be receiving, to meet the objectives of the NDIS. Other issues around NDIS processes include:

- Service agreements between NDIS participants and service providers may be twenty pages long, and are time consuming and difficult for NDIS participants to understand
- The process to get approval from the NDIS for support can be very long
- It is difficult to use the NDIS portal
- It is difficult to access the Local Area Coordinators
- Information is not available in languages other than English.

SSI staff have identified the following issues regarding provision of support by providers in the NDIS market, which negatively impact outcomes for people with disability:

- Low prices set by NDIA can lead to market failure with too few providers, or reduced quality
- Fragmented delivery of separate supports and services can lead to lack of coordination of services, with no provider able to address the overall support needs of participants
- Some new providers are primarily focused on profit and are of poor quality
- There is often conflicting advice from the NDIA regarding processes for quality control of providers
- There are significant gaps in services available in the NDIS market, for example, transport or language support and this reduces access to other supports.

In the transition to the NDIS, services previously provided have ceased or changed, due to individuals not being eligible for the NDIS, or previous supports no longer being approved, or the previous providers are no longer able to deliver continuity of supports. People With Disability Australia has identified instances where state agencies have withdrawn services, despite no appropriate alternative being available (People With Disability Australia, 2017 p3).

National Disability Services has identified that disability service providers are considering divesting themselves of their transport fleets, which will remove this service and hamper access. Also, state agencies have emergency responses in situations where a family member is unable to continue to support a person with disability, and these are planned to cease as the NDIS is fully implemented. (National Disability Services, 2017 pp2-4)

SSI Case Study 3 – impact of privatising government-run disability services	
Participant Background	The participant is an Aboriginal man living in a coastal non-metropolitan area. He has a physical disability which affects his mobility and ability to carry out physical tasks – as well as a number of other health issues, including diabetes and cardio-vascular disease.

<p>Current impact</p>	<p>His story shows how delays in providing services heighten stress. Not prioritising urgent cases or providing adequate supports can exacerbate various issues that people with disability are dealing with, particularly in smaller, regional communities.</p> <p>In 2017 it was reported that he had been living without disability services for several months after transitioning from a NSW program to the NDIS. Prior to the NDIS he had received services through an Aboriginal disability service. As part of the rollout, people previously receiving support through the NSW specialist disability services and Commonwealth disability programs transition first. However, after several months he was still waiting to meet an NDIS caseworker to determine the individual plan required. He lives alone and had to pay someone to do some things around the house, and get a family member who lives a long way away to visit to help with cleaning.</p> <p>He is very upset about the NDIS. He says that under the NDIS people were supposed to be better off, but he is worse off and doesn't know when he will be assessed for the NDIS.</p> <p>Ability Links tried to help fill the gap left by the loss of disability services, and found someone more affordable for him to pay to help around the home. He is also interested in displaying his art, so Ability Links connected him to an arts and culture program. He showed off his art work at a festival in Sydney last year, with the support of SSI.</p>
<p>Future impact</p>	<p>The types of challenges that he faces has heightened his stress as well as creating additional financial pressures.</p>

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 NDIS

Eligibility criteria for the NDIS, and the provision of support services for people with disability who are not eligible for the NDIS are critical issues.

As previously identified the NDIS is the most visible component of the National Disability Strategy, which is a broad strategy across major policy areas, designed to support all people with disability to maximise their potential and participate as equal citizens in Australian society. (Department of Social Security 2011, p3)

The level of supports and resources offered by the NDIS for individuals are significant, and it is essential that eligibility criteria are fair and consistent in order that the program meets its objectives and retains its integrity. In SSI's experience NDIS eligibility cut-offs are "sharp", with the potential for people who share similar circumstances to either receive or not receive NDIS supports.

The intention is that the program's Information, Linkage and Capacity Building (ILC) component will lessen these "sharp" cut-offs and assist people with disability and their families, including those not eligible for the NDIS, to access mainstream services and participate in the community (NDIS 2018).

Unfortunately the ILC has not been adequately funded or implemented at this stage. The first round of funding for the ILC was for one year only (National Disability Services, 2017 p4), and the Australian Federation of Disability Organisations noted:

“It would be an understatement to say that the policy intent of COAG has not been matched by the budget allocation for ILC.” (Australian Federation of Disability Organisations, 2017 p10)

The effect of this is that people with disability not eligible for the NDIS often don’t receive assistance to access mainstream services or alternative supports. This has exacerbated issues around service continuity in the transition to the NDIS, and access to accommodation and other supports for people with disability.

SSI strongly supports the recommendation of the Productivity Commission that funding for the ILC element of the NDIS be substantially increased to \$131 million per annum for the remainder of the NDIS transition period to 2023. (Productivity Commission, 2017 p52)

Ability Links NSW is a successful program which aligns with the early intervention and ILC aspects of the NDIS and the broader National Disability Strategy. Under this program Linkers support people with disability aged 0 – 64 (with or without a diagnosis) and their families and carers to identify their goals and connect with their community and mainstream services. Linkers also support community organisations, mainstream services and businesses to become more inclusive of people with disability.

An evaluation of the state-wide Ability Links NSW found that it was generating positive outcomes, including for Aboriginal participants, and reported a 3:1 ratio of benefits to costs. (Urbis, 2016)

SSI commissioned an independent evaluation of its delivery of Ability Links in 2018, which found that 64% of SSI’s Ability Links individual outcomes were with CALD people, reflecting the cultural diversity of the areas where SSI delivered the program. The evaluation found that the strong performance was supported by the design of the Ability Links program, which is flexible, holistic, and free of cost with no upfront barriers in terms of diagnosis. (Settlement Services International 2018)

The learnings and evidence from Ability Links indicate that it could be a useful basis for expanded ILC funded initiatives nationally. This program would support all people with disability, including those not eligible for the NDIS, to access supports and achieve stronger social and economic participation. In particular Ability Links has also demonstrated that it is responsive to people with disability who are disadvantaged or have complex needs, including Aboriginal and CALD participants, and that it can assist them to navigate support through the NDIS, mainstream services and in the community.

SSI Case Study 4 – Provision of support services – eligible or not eligible for NDIS	
Participant Background	Kim is a middle-aged woman born in South East Asia with physical disability and mental health issues. She lives in South Western Sydney with her young son.
Current impact	Kim had difficulty understanding and accessing the NDIS. However, she was resourceful and able to reach out to Ability Links and other services to receive help that she needed to access the Scheme. Once in the Scheme, she found it easy to access her funded supports. She received a carer service that helped her with domestic assistance. This helped keep her house clean, which used to be messy. The carer also freed up time for her son, who has now been able to find employment.

	<p>The NDIS also provided her physio treatment, which helped her improve her physical health. As a result, her mental health has also improved. These improvements in mental health also came as a result of access to recreational activities that the NDIS provided.</p> <p>Since experiencing the above improvements, Kim has been able to increase her contributions to her local community. She finished a peer support mentoring training provided by a disability advocacy organisation, and Ability Links connected her to a local carers group. She is now the leader of the group and supports others with disability. Aside from this group, she has found herself empowered to support others in the community to help access the NDIS and other services, based on her extensive experience with services in the past.</p>
Future impact	<p>The role of Ability Links and the disability advocacy organisation was important for Kim accessing the NDIS and other supports. As an NDIS participant, she has had a very positive experience and is experiencing a better life, and is empowered to help and contribute back to her community. This is the goal of the NDIS and if all participants had a similar smooth experience, then the future is only positive.</p>

f) The adequacy of current regulations and oversight mechanisms in relation to disability service providers

Nil comment

g) Workforce issues impacting on the delivery of services

Workforce issues are related to the NDIS model and transition to private providers for separate service and support components. As identified in section (d) fragmented delivery of separate supports and services can lead to a lack of coordination of services, with no provider able to address the overarching support needs of participants. Similarly, this model of service provision, and any reduction in funding for services and wages, can have a significant impact on the workforce and its long term stability. SSI staff working with people with disability have observed the following impacts on the workforce of the NDIS market providers:

- Casualisation of workforce and poorer work security, due to piecemeal nature of service provision
- Little or no training of casual workforce by service providers, as this workforce has little incentive to remain with the provider
- Reduced overall skill level of the workforce as providers recruit lower skilled workers at lower pay rates
- Narrowing of the skills of the workforce as they often no longer need an understanding of the broader needs of participants
- Increased overall costs due to high staff turnover.

h) Challenges facing disability service providers and their sustainability

Nil comment

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

National Disability Services has indicated that greater clarity is required for interfaces between the NDIS and mainstream services in health, education, transport, child protection and mental health. They provide the examples of: lack of clarity in responsibility for funding of services for people on ventilator support (NDIS or Health); how much funding the NDIS should provide to people with disability who cannot use public transport, and what responsibility do state governments have to provide accessible public transport; should schools be

required to provide facilities for therapy sessions for school-aged NDIS participants. (National Disability Services, 2017 pp 1-2)

Clearly these issues require negotiation and agreement between the NDIA and the states, to ensure that necessary supports are provided. It is not reasonable for state agencies to assume that they no longer have responsibility for providing services for people with disability.

There is also potential for significant costs being transferred to state services or programs, where the NDIS does not adequately meet support needs. People With Disability Australia has highlighted that children with disability who cannot be adequately supported in the home may be relinquished to state care, and that people with disability who are relatively young are often forced to use aged-care supports. (People With Disability Australia, 2017 p3)

SSI staff have also identified the following impacts where lack of disability supports or NDIS processes have placed strain on mainstream services:

- Increased emergency admissions to hospitals where people with disability who do not receive NDIS supports, particularly for mental health issues
- Police and the justice system are also heavily involved with emergency mental health patients
- Increased use of mental health services for people who cannot access the NDIS, due to the high thresholds of eligibility for the NDIS for people with psychosocial disability
- Demands placed on GPs and health specialists to provide evidence required to show eligibility for the NDIS is hampered by health practitioners and the NDIS using different terminology.

j) Policies, regulations and oversight mechanisms that could improve the provision and accessibility of disability services across NSW

Earlier under general comments we outlined that CALD people are a significant proportion of our society and people with disability, but have poor access to the NDIS and other disability services. They have only one third of the participation in NDIS which they should have according to their proportion of the population, and having the same levels of disability and need for supports. The National Disability Strategy and the NDIS will significantly under-achieve on their objectives if CALD people with disability remain largely excluded from participation.

In order to address the issue of accessibility for all people with disability in NSW under the National Disability Strategy, it is important that NSW agencies maintain a commitment and strategies to provide services that are accessible to people with disability, and promote participation in mainstream services and community.

Similarly, to support participation by CALD people with disability, the NDIA and NSW-based services for people with disability should adopt and implement a cultural competency framework. Such a framework was developed by the National Health and Medical Research Council, (NHMRC 2006) with the four dimensions of the framework for cultural competency in a sector being systemic, organisational, professional and individual . (McMahon et al, 2010) The Multicultural Policies and Services Framework implemented by Multicultural NSW also provides a good framework for agencies in NSW. (Multicultural NSW, 2018)

The NDIA Cultural and Linguistic Diversity Strategy 2018 (NDIA 2018) is a welcome beginning for that agency, but a much stronger commitment to CALD participation is required.

As previously highlighted SSI believes that there is ongoing value in a program like Ability Links NSW. SSI's evaluation indicated very high CALD participation in the SSI Ability Links services, with 64% of SSI individual outcomes among CALD participants. Stakeholders attributed this result to the culturally competent elements of the program, including SSI Linkers being bilingual, from diverse cultural backgrounds and connected to their communities, which assisted building understanding, rapport and trusting relationships.

As outlined in a previous section FutureAbility has also developed capacity of the sector to provide supports to CALD people with disability in the transition to the NDIS.

k) Any other related matter

Nil comment.

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