

**INQUIRY INTO FOUNDATIONAL AND DISABILITY
SUPPORTS AVAILABLE FOR CHILDREN AND YOUNG
PEOPLE IN NEW SOUTH WALES**

Organisation: Autism Spectrum Australia

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**WRITTEN SUBMISSION INTO SELECT COMMITTEE INQUIRY INTO
FOUNDATIONAL AND DISABILITY SUPPORTS AVAILABLE
FOR CHILDREN AND YOUNG PEOPLE IN NEW SOUTH WALES**

Autism Spectrum Australia (Aspect) welcomes the opportunity to provide written feedback as part of the Select Committee on Foundational and Disability Supports available for children and young people in NSW.

About Aspect

Aspect is one of Australia's leading national autism service providers and knowledge leaders. We work in partnership with people of all ages on the autism spectrum to co-develop, co-produce and co-deliver supports and services that are individualised, goal driven and grounded in evidence-based practices. Aspect's research arm, Aspect Research Centre for Autism Practice (ARCAP) is continually working to improve our services and approaches to supporting people on the autism spectrum and their families by applying the latest knowledge and evidence available, as well as evaluating our services and programs for best practice.

Aspect provides a broad range of services to support individuals, carers and their families and support networks across their life span to achieve outcomes that are important to them, by engaging with them in their communities with one of the world's most extensive autism-specific educational programs. With over 55 years of experience, we provide quality services utilising a wide range of state-based and federal funding, developing innovative service models and initiatives funded by philanthropic organisations and benefactors, and fee for service offerings.

These include:

- Regular services in all states and territories (except WA) and a national program of workshops and consultancies, based on the organisation's distinctive capabilities.
- Direct services (both fee-for-service, state-based funded initiatives, and NDIS-funded supports) for children and young people including diagnosis and assessment; individualised early childhood development supports; therapies; behaviour support; schooling - incorporating ten autism-specific schools with 113 satellite classes from kindergarten to Year 12; education and family support; assessment; transition and educational outreach services; and capacity-building supports to preschools.
- Direct services for adolescents and adults in the form of assessments, therapies, behaviour support and group-based community services.
- A national resource for families and services seeking information and advice about people on the autism spectrum.
- Partnering with organisations to create environments that genuinely support and include Autistic people through environmental assessments, staff training, customised resources as well as sensory and quiet space design.

Aspect's Individual and Community Services Teams employs more than 330 staff who provide individualised funded services, who are highly skilled professionals and specialists in the field of autism, including Clinical Psychologists, Psychologists, Specialist Teachers, Speech Pathologists, Occupational Therapists, Behaviour Support Practitioners, Social Workers, Allied Health Assistants, and Active Support staff. As an organisation including our network of schools, Aspect employs around 1300 staff who work to support Autistic people.

Our Experience


We welcome the opportunity to provide feedback about Foundational and Disability Supports which can play a key role in supporting a community where everyone is able to access the supports that they need. Aspect has experienced first-hand the vacuum that has existed since the implementation of the NDIS whereby many young children, families and carers, are not able to access and benefit from evidence-informed early supports in a timely and nationally consistent manner, that builds family and individual capacity and capability. While “capacity-building” supports provided in natural/everyday settings are fundamental to successful early childhood development, delays to access individualised funding models and planners who do not have a sound understanding of the roles that well-supported carers can play, has led to ballooning costs and recommendations for more and more standalone and isolated therapy options.

Aspect has a long history of providing supports that encompass general and targeted foundational supports. Many of these supports ceased being funded following the implementation of the NDIS, which has meant that many vital supports have not been consistently available for young children and families throughout Australia. The various programs previously supported by Aspect were developed to provide support to individual families but many also utilised small group settings which maximised resources while also ensuring that parents/carers built authentic support networks.

They included programs such as the *Autism Advisor* program (HCWA) and *Early Days* Parent Information Program which provided timely access to targeted advice and information. These programs supported parents to gain confidence and capacity to support their children to develop functional skills and access a range of mainstream and individualised supports. They were delivered by a range of allied health professionals with specialist knowledge, access to ongoing professional learning, and strong support and supervision processes.

Aspect also utilised state-based funding to deliver a range of group-based supports to young children and families and saw the benefit of individualised supports for children alongside the networking opportunities and individualised support for parents and carers (Aspect Building Blocks® program). There was a strong focus on supporting successful transitions into mainstream early childhood education and primary schooling.

State-based, federal and philanthropic funding also provided opportunities for Aspect to support newly diagnosed children and their families and carers, and children showing early signs of developmental delay or autism through early support and screening programs. The support for these young children and their families/carers in their homes or community settings ensured that supports were individualised and functional. Support was also provided to early education and care settings to help them better understand how to support young children, through the development of play and early communication.



Aspect has developed service models to ensure that local Allied Health Assistants based in regional and remote regions of Australia, including in NSW, are supported by regularly visiting Allied Health professionals to deliver high-quality supports in their communities.

Philanthropic funding has also supported diagnostic assessments in regional areas which has ensured that some children and young people have been able to access supports and funding in a timelier manner.

Aspect provides the below considerations to all questions in support of the inquiry into foundational and disability supports available for children and young people in NSW.

This submission has been developed in collaboration with the Autistic community through Aspect's Think Tank to ensure that Autistic voices and lived experiences have been considered in this submission.

In response: That a select committee be established to inquire into and report on child development, early childhood intervention services and other foundational and disability supports available for children and young people with developmental concerns, delays, differences or disabilities in New South Wales, and in particular:

a) the role of such services and supports on a child's overall development, health and wellbeing

Aspect strongly supports the introduction of Foundational Supports, ensuring that equitable supports are provided for all children and young people across NSW. Foundational supports, both General and Targeted Foundational Supports, need to be provided in addition to the NDIS and alongside existing mainstream services including NSW Health and NSW Department of Education.

Aspect has a strong history of supporting Autistic children, their families and communities and is well placed to deliver foundational supports across NSW. Employing a highly skilled workforce with access to resources as well as a history of delivering best practice, collaborative services, Aspect acknowledges the fundamental role of additional supports being provided by the state government. Aspect is passionate about building the capability of our staff, the sector and to set the future workforce up for success.

'Each child and family should be able to access the supports they need, when they need them, and in ways they desire, regardless of who they are, where they live, or how much money they have' (recommendation 16, Autism CRC Supporting Autistic Children Guideline). It is essential to look at the needs of the families and communities across the state when establishing foundational supports for NSW.

Foundational Supports need to:

- ✓ Be available **early** and provided in a timely way- with an easy, well communicated pathway for families and service providers alike.
- ✓ Be **guaranteed** and not based on diagnosis.
- ✓ Be provided for families and individuals to access with a 'doable workload', **considering parent and family capacity** and other impacts or demands on the family.
- ✓ Supportive of **neurodivergent** families and their individual needs and capacity.
- ✓ Be **provided in everyday settings** with strategies being able to be generalised into the real world.

- ✓ Consider a **key worker/transdisciplinary model** of support with government buy-in; provided by larger organisations where cross discipline support and supervision is available.
- ✓ Be **inclusive** of programs that support **coaching** for parents/carers and the **wider family** including grandparents and siblings.
- ✓ Be **inclusive** of the **child/young person's voice**, considering where they need/want support and skill development.
- ✓ Be **culturally safe**, specific to Aboriginal and Torres Strait Islander children, families and communities, and culturally and linguistically diverse families.
- ✓ Founded in the **current research and recommendations**, with the implementation of the Disability Royal Commission Recommendations, the NDIS Final Review Recommendations, the National Roadmap, and the National Autism Strategy as well as other relevant state and federal guidelines.
- ✓ Include **state-based support** to meet the needs of New South Wales.
- ✓ Inclusive of diagnosis support and **post-diagnosis support**. With diagnosis itself needing to include strengths-based information for children and their families.
- ✓ Provided with **choice**; not a one size fits all; consider the needs of the child, the family and the community.
- ✓ **Maintained**. Maintenance of supports, when support is finished, continue to offer a maintenance phase or check in/consultations.
- ✓ **Sector capacity building** for mainstream services including health, early childhood education and care, and education. For **neurodiversity affirming** supports to be provided by quality providers with knowledge leadership.
- ✓ Include good **screening** of young children while supporting functional skills and independence- so support can be provided without diagnosis.
- ✓ Include smooth **transitions** between services and supports- government departments need to work together.
- ✓ Have a **clear pathway**- where parents know where to go if they have concerns or if they are seeking support/advice; high quality information on a state-based level.
- ✓ Universal **access across the state** of NSW- including rural and remote locations.
- ✓ Include **support for the workforce**- commitment and investment from government – investment in a capable, experienced workforce.
- ✓ Include **provider registration** for oversight of best practice and to have accountability of practice and support under the funding provided for Foundational Supports. Ensuring service provider accountability.
- ✓ **Government contracts**, following successful tender submissions, to be provided with accountability and with flexibility within contracts to ensure market changes and demands can be considered. Recommendation of two-year contracts with an option to extend for another two years to ensure service providers are able to deliver on their service and maintain community connections and relationships. Contracts to involve continuous quality improvement, being dynamic and able to adapt to the needs and demands of the community, demonstrating ongoing impact in the community.
- ✓ Include a **reduction in barriers** through the consideration of environmental changes, universal communication and be culturally informed.

b) the types of services and supports available and measures to improve effectiveness, availability and access of such services and supports in metropolitan, regional, rural and remote New South Wales, including medical, community-nursing, allied health services, NDIS services and other service delivery models

There are significant inconsistencies across the state as to what families have available to them based on where they live. Aspect delivers services across the state of NSW in a range of ways.


There are existing gaps and barriers including:

- In regional and remote parts of the state as well as metropolitan areas there are significant workforce issues which can be compounded by conflict of interest challenges as staff work across services in multiple jobs.
- Families and workforce moving in and out of towns and remote, regional and rural communities. Families then start from scratch with searching for provider in a new town, and services have to re-build the capacity of the new workforce as they come through.
- Less resources and fewer options in more remote communities.
- Additional steps required for families when outside of metro areas and when there are no services close by e.g. having to trial and access Alternative and Augmentative Communication devices (AAC) or voice output devices, where the steps include trials, postage and waiting for health professionals to support.
- Delays for children in accessing supports where there is no access to diagnostic assessment teams or paediatricians.
- Stepping outside of the metro regions, there are less neurodiverse-affirming practices occurring and families often are not given the opportunity to explore other possibilities or what might be available to them.
- Teletherapy challenges including internet access and reliability; access to efficient devices for supports via telehealth. Capacity to access these supports.
- Currently mainstream services such as Community Health do not support children with a recognised NDIS diagnosis or if awaiting access to NDIS supports- a real gap in family and child support.

Potential Solutions:

- Specialist services providing an Allied Health Assistant (AHA) model of service: This model links the therapist virtually, with regional, rural, remote location visits throughout the year. Local AHA working in the region, building community connections and providing the supports. This model needs to be understood by funders as there are costs involved in recruiting, training, supervising locally based staff and ensuring regular collaboration is supported.
- Key worker model of support: This offers one person for the family to collaborate and liaise with, with them advocating and providing and implementing strategies. E.g. preschool already aware that child was coming in – keyworker supported transition into the centre.
- There are benefits to local regional and remote communities when services are supported to provide ongoing supports for at least medium-term contracts. This allows investment in developing locally-based supports that can have long-term benefits of improved outcomes.
- Mapping of regional supports: This would be useful to determine what supports and services already exist that could provide additional support e.g. opportunities for services already providing supports in remote locations to be able to complete a range of professional health services as needed and within their scope of practice- referral to additional providers as needed.
- Focus on community capacity building and education: This ensures that providers are supporting preschools, childcare, and schools as well as the wider community and helps address the issue of high work-force turnover or transient staff as the whole of the community is supported.
- Project ECHO: This project focuses on delivering supports across the state from experienced allied health professionals. The aim of Project ECHO is to increase healthcare practitioner's knowledge and understanding of specific disabilities and best practice care.

Recommendations:

- ✓ That mainstream supports and services are available for all children, even if they access NDIS, with foundational supports layered on top as required.
 - ✓ Transdisciplinary/Keyworker model of support.
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- ✓ Allied Health Assistant (AHA) model to be considered for locations with no or minimal high-quality service options for children and families.
- ✓ Highly skilled and qualified workforce.

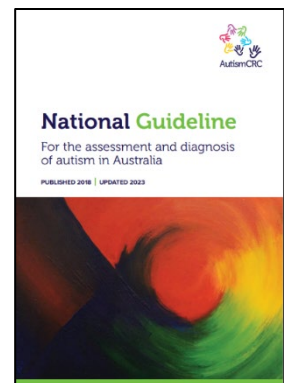
c) the role of diagnostic services, existing gaps and barriers, and measures to improve effectiveness, availability and access of such services

The role of a diagnostic service is to complete a comprehensive standardised assessment for a child or young person to determine if there is enough evidence to meet criteria for a formal diagnosis under the DSM-5-TR.

In line with the *National Guideline for the assessment and diagnosis of autism in Australia, 2023*, a diagnostic service is provided by a trained health professional, either an endorsed psychologist, an experienced Paediatrician or a Multidisciplinary Team. A rigorous assessment is completed with in-depth information gathered from the child or young person and their family in relation to their early life, family history, history of supports received and their effectiveness. The diagnostician will also review existing reports and information from those supporting the child or young person. The diagnostic report is based on the DSM-5-TR criteria. The diagnostic report will also contain details for next steps and recommendations.

There are existing gaps and barriers for diagnostic services including:

- Waiting times for children (aged 0-6 years) to access a diagnostic assessment service through NSW Health, long wait times across Sydney metropolitan.
- Longer wait times for families in rural, regional and remote parts of NSW, or in some instances, no access to diagnostic services through NSW Health in their region.
- Reduced options for children to access an assessment through a government service once they enter into the schooling system
- The out of pocket fee for a family to access a timely service through a provider outside of NSW Health.
- Government departments not working together- NDIS, NSW Health, Department of Education, Department of Communities and Justice (DCJ), each advising it's not their responsibility to fund a diagnostic assessment.
- Workforce challenges, professionals choosing not to work in disability, minimal information provided through tertiary education to build confidence in this area of practice.



Potential Solutions:

- NSW Health Child and Family health nurse or Brighter Beginnings worker to refer any child where concerns are raised in relation to their development into community early screening services with experienced health professionals. For regions where there may not be access to a community health nurse or the Brighter Beginnings program, tele consultation can be completed by these professionals. See [Children \(0-5 years\) presenting with developmental concerns: Clinical practice guide](#). This will reduce the wait times for families to access NSW Health specific Tier 3 services and will ensure a timely support is received by those who need it.
- Tele services provided for comprehensive screening and linking with appropriate services also via tele support. Joint collaboration and wrap around support for family via local services e.g. school representatives, preschool educators, Aboriginal health workers, etc.
- Targeted and specific education and parent support delivered by a trained professional. Not to change the child or young person, but to learn how they do things and then build on this e.g. play and communication. Building a parent/carers capacity and supporting the development of functional skills.

- A formal diagnostic service and assessment to be accessed when needed, with additional rebate available for families funded by the NSW government.

Recommendations:

- ✓ A stepped tiered approach to support in relation to diagnostic services ensuring children receive a diagnosis in a timely manner.
- ✓ Government and non-government departments to work together to provide screening and subsequent comprehensive diagnostic services when needed for children and young people and their families across NSW.
- ✓ Establish State-based programs, funded by the state, to set up early screening services and pathways to diagnostic assessments.
- ✓ Ensure every child and young person who needs a diagnostic service has access to one through the establishment of experienced diagnosticians working in collaboration with the local community and community services to offer tele diagnostic services for rural, regional and remote locations.
- ✓ Review the Autism CRC's **National Guideline for the assessment and diagnosis of autism in Australia**

d) gaps and barriers to accessing early childhood intervention and their impact on a child's overall development, health and wellbeing, as well as on their family or carers and other government services and systems

Early childhood intervention/supports provide both children and their families and carers, a solid, positive foundation for the future. A quality wrap around service, where the child and family are both supported, ensures that all aspects of the child and family's life are considered, supported and valued.

It is important that families are able to access timely supports when and where they need them. There are currently significant gaps and barriers for young Autistic children and their families.

There are current gaps and barriers for families in NSW in accessing early childhood intervention for their child or a child in their care. The First 2000 days of a child's life are a critical time for development and this early stage of life has been shown to impact on future development – See [The first 2000 days of life](#) for further information.

The Autism CRC Guidelines state that 'Each child and family should be able to access the supports they need, when they need them, and in ways they desire, regardless of who they are, where they live, or how much money they have' (recommendation 16, Autism CRC Supporting Autistic Children Guideline).

The 2025 National Autism Parent/Carer Survey (Autism Alliance Australia) found that "across Australia, families raising autistic children are battling a system that is slow, fragmented, and difficult to navigate".

Existing gaps and barriers include:

- Inequality of available support for families across Sydney metro, rural, regional and remote regions of NSW. Delays in accessing a GP, a paediatrician, an assessment, with navigating NDIS processes and forms, having an NDIS plan approved, contacting a provider, waiting for service provider, gaps in frequency of what is offered by service provider. For some families in rural, regional and remote parts of the state there is minimal access even to GP services, with families sometimes having to wait up to two weeks to see a GP in town.
- Inequitable supports with higher parental advocacy equating to increased support. Marginalised groups or families living in rural, regional or remote parts of NSW are receiving fewer services and smaller funding packages to access support.

- Gaps in professionals recognising the early signs of autism, particularly in girls, until much later in the child or young person's life.
- Professionals dismissing parental concerns (Gibbs et al. 2018).
- Time between parent first raising concerns and being able to access the right supports needed. Families, when they do notice their child developing differently, are being told to 'wait and see', the impact of this on a parent's self-confidence in sharing concerns with a health professional can be detrimental for future health supports required and leaving a parent to think they are doing a poor job at parenting and that their child is 'just naughty'.
- Conflict of interest preventing remote access to support. E.g. providing services to preschool under Sector Capacity Building Funding (DSS- Department of Social Security), but unable to support individual children within the centre (NDIS). The only visitor to sign in across the year is the therapist providing support under DSS funding.
- Minimal parent education groups, peer support and sibling support available across metro, rural, regional and remote locations.
- Families are unsure what they need, often provided with a list to see multiple individual therapists who often work in silos.
- Long waiting lists for high quality support services, particularly for children with higher support needs.
- Parents attempting to navigate providers, not always aware of what is best practice or what has an evidence base for the support they need for their child, just going with whoever can see their child first.
- Parent/carer difficulty navigating the system can be overwhelming and confusing for them. Minimal support is available other than an NDIS planning meeting. There is no clear pathway between the NDIS and service providers.
- Neurodiverse families attempting to navigate the systems can find it extremely frustrating to know the steps, to follow up on the steps and to persist when unsure of the next steps.
- Once a child starts school, with the Department of Education or other NSW schooling options, there is limited support for teachers.
- For a child displaying behaviours of concern or a child with higher support needs, there are fewer support options as these children and families often require a more experienced therapist or support service and to have a team around them.
- Currently NSW Health will not support a child with a possible autism diagnosis, or a child who is seeking to access NDIS.

Potential Solutions:

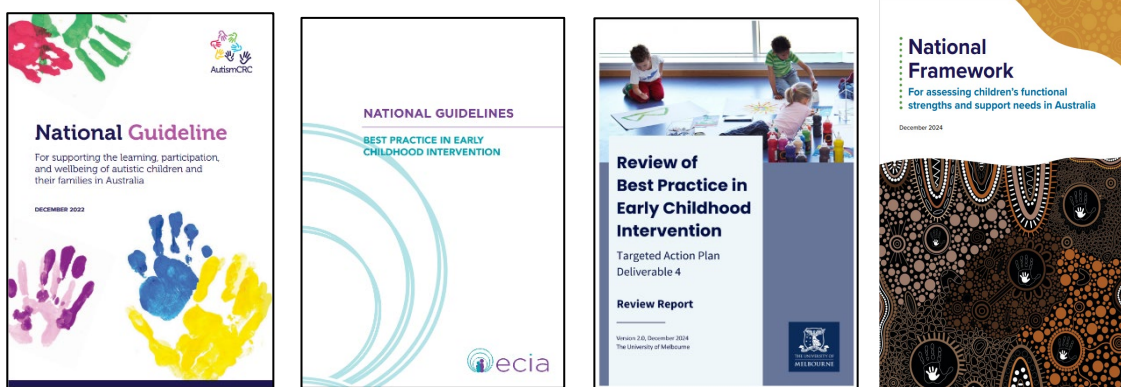
- Clear pathways to access evidence-based information – Autism Connect and linking families in with state-based autism provider- ensuring every family is aware of these resources, reducing overwhelm of all the information available on the internet and through social media. Have one general pathway as the first steps following diagnosis, following the first step, families can then branch off.
- Online connections to parent education groups, peer support and siblings' groups to increase accessibility.
- Supported playgroups receiving targeted consultations from industry leaders to build the capacity of the staff running the playgroups and to support families.
- Information, support and education provided by peak bodies to community professionals to be able to support children with higher support needs.
- Build greater mainstream service awareness of autism, consider the role of the Child and Maternal Health Nurse and their role within NSW Health to notice early signs of autism and refer on for autism screening.
- Ensure all mainstream services are able to access the information they require to support a child in their care.
- For families concerns to be acknowledged by mainstream services and for families to be supported by the mainstream service who the family and child have a relationship with, through the next steps in screening or assessment.
- For every child to have guaranteed access to a quality and inclusive early childhood

education and care setting for the two years prior to starting school.

- Remove red tape so service providers supporting remote locations can provide support across funding models e.g. DSS and NDIS.
- Identify the needs of the community. Specific planning and funding to build capacity and develop networks of support.
- Ability to access supports from Fly in Fly Out (FIFO) or teletherapy providers who develop strong and ongoing relationships with the community. It is currently not financially viable to do so without funding support external to NDIS, with funding allocated to regions and programs.
- Increase availability of funded parent support and training groups based on best practice e.g. Hanen programs; with groups delivered in a timely manner, in locations and in ways that are accessible for families across the state.
- State based mainstream supports such as NSW Health- Community Health- to support a child/family until they have a more specialised service involved.

Recommendations:

- ✓ A move to state-based supports. Including provision of professional development and coaching for mainstream service providers to further understand signs of autism and how it presents in children and young people. State based autism screening be provided for children demonstrating early signs of autism. Screening to be completed by state-based autism association where professionals are highly skilled and have significant experience in this area of practice.
- ✓ Timely access into support, families not having to wait or 'wait and see'; for families to be linked in with support services while awaiting further assessment.
- ✓ For families to have guaranteed access to supports when they need them and in the ways they desire. See Recommendation 16 – Autism CRC for further details.
- ✓ State based supports to manage autism support helplines. Currently these are federally run and in NSW many families are not even aware of these services.
- ✓ Families to be linked to high quality information e.g. websites for peak bodies, parent programs, sibling support information. Reducing the overwhelm felt by families in a time of often too much information from unreliable sources.
- ✓ Additional supported playgroups across the state.
- ✓ Return to previous services being provided for families on a block funding basis, where service providers can work collaboratively with local communities to deliver services and supports flexibly on what communities need most based on the population demographics.
- ✓ National Autism Strategy recommendations to be implemented.
- ✓ Review the Autism CRC's National Guideline for supporting the learning, participation, and wellbeing of autistic children and their families in Australia.
- ✓ Review the National Guidelines – Best Practice in Early Childhood Intervention, ECIA, 2016 (still current).
- ✓ Review of Best Practice in Early Childhood Intervention, Targeted Action Plan Review Report, 2024.
- ✓ Review of National Framework for assessing children's functional strengths and support needs in Australia (Dec 2024).
- ✓ Review National Autism Parent/Carer Survey 2025 Report – Autism Awareness Australia.



e) opportunities to increase engagement across sectors and improved collaboration across both government and non-government services, including Aboriginal Community Controlled Organisations, early learning services, educational settings and health services

There are existing gaps and barriers including:

- Silos of support are currently being provided with minimal cross service collaboration
- Inequalities across the state.
- Clearly evidenced in the failure of the NDIS and the ability of the NDIS to work alongside existing government services.
- Disconnections in service provision for families. Families cannot access mainstream services while awaiting NDIS funding e.g. Community Allied Health. The NDIS guideline stated that supports would remain in place and they would be 'in addition' to NDIS, this has never been the case since the introduction of the NDIS.
- Constant changes in staffing disrupt relationships being built and maintained over time.

Potential Solutions:

- Regular ways to disseminate local information- communities of service providers, including mainstream and specialist services in local areas.
- Building strong connections between services that support children and young people, ensuring everyone is included.

Recommendations:

- ✓ Government and non-government services to work together harmoniously for the greater good of the residents of NSW.
- ✓ State and federal government support systems to work together alongside providers.
- ✓ Streamlined access to the supports needed with all departments talking together and collaborating; everyone made to feel welcome and listened to.
- ✓ Government to set terms of agreement and clear guidelines on how the above will be implemented and ensure accountability.

f) other government or best practice child development and early childhood intervention service models and programs operating outside of New South Wales

We know that there is not a 'one size fits all' approach to what will be a successful service or support for a child, young person or family across NSW. The models we see working best are where the supports are individualised, inclusive and are nurturing in nature. We see engagement, trust and a sense of belonging when:

- Children have access to their local mainstream services including local playgroups and preschool, kindergarten and other activities such as swimming.
- Mainstream services provide the base of support and layering on top from more specialist

providers.

We know that environments shape the child/individual, and when they are set up for success within their environment they can thrive. Having mainstream environments set up for success is essential to supporting all children and young people in NSW.

There are existing gaps and barriers including:

- Children of higher support needs are often excluded from mainstream services or unable to access services and supports in a timely way.
- In NSW, supports delivered under the NDIS are supportive of people working in silos, as individuals, and not from a capacity building approach.
- Mainstream environments, including the physical and sensory environment, are often not set up for success.

Potential Solutions:

- Past programs, facilitated by service providers within NSW with successful outcomes should be considered for re-introduction for parents/carers and children (previously funded by DSS or ADHC and prior to NDIS).
- Mainstream services need to be delivering on their frameworks (including inclusion, acting early, in a timely way and delivered in a way that families need), with specialised supports layered on top to facilitate a child and family feeling the support of their and within their local community.
- Environments need to be inclusive.

Recommendations:

- ✓ Not a one size fits all approach, supports need to be individualised.
- ✓ Supports need to be varied and adjusted frequently.
- ✓ Children need to be supported in their everyday setting.
- ✓ Children need to be included in mainstream services and environments.
- ✓ Refer to the Autism CRC's National Guideline on supporting the learning, participation and wellbeing of autistic children and their families in Australia.
- ✓ Refer to NSW Health Brighter Beginnings: The First 2000 Days of Life document ([brighter-beginnings.pdf](#)).

g) workforce issues in the child development and early childhood intervention sectors, including workforce demand and the availability, quality and capacity of existing workers

There are existing gaps and barriers including:

- Limited support for the workforce sector. There is no money to support onboarding new staff, upskilling and professional development, being across the latest research and participating in research. Providers are required to fund this internally for themselves.
- Working in disability is not a highly sought-after job. New graduates are often not choosing to enter into employment in the disability field.
- There is currently no ceiling for NDIS plans, some young children receive incredibly large packages, and others, who sometimes require it the most, are on much smaller packages. There is inconsistency and inequity in what is being provided.
- High turnover of staff and a high casual workforce.

Potential Solutions:

- Having an amount allocated to a child to access the therapy and supports they need was better matched under previous funding models e.g. HCWA or ADHC funding where set amounts were provided for children and families to access services.
- Families who require additional supports due to increased complexity or requiring more specialised intervention support should be supported across both NDIS and mainstream

services e.g. Health, ensuring no child is left without the supports they need while also ensuring they are not receiving plans so large they don't know what to do with them, or just spending for the sake of using up the funding, rather than using what is needed and focusing on capacity building supports.

- Layering of specialised supports with additional funding for the service provider will ensure onboarding of new staff, ongoing supervision and professional development can be accessed. Large organisation level incentives.
- Financial benefits for Allied Health Professions to work in disability.

Recommendations:

- ✓ Tiered pricing with funding to account for the costs of being a quality provider, working in regional and rural areas and working with people with complex needs. Providers need to be compensated for having quality systems in place.
- ✓ Financial support for large NDIS registered providers that contribute to training and placements of the future and early career workforce/students.
- ✓ Universal registration to ensure a commitment to quality.
- ✓ Commitment to investment in the disability workforce for the future.
- ✓ Review of the National Autism Strategy response and the Mental Health Roadmap

h) measures to implement recommendations of the NDIS Review Final Report and the Disability Royal Commission Final Report in relation to foundational supports, and

Aspect strongly supports the accountability of the Australian Federal and State Governments to implement the recommendations provided within the NDIS Review Final Report and the Disability Royal Commission Final Report in relation to Foundational Supports.

The NDIS review final report made 26 recommendations, with a series of 139 actions. This review, clearly outlines the creation of a new connected system of support, including a new system of foundational supports to ensure that Australians with disability receive the support they need when they need it.

The NDIS Review Final Report outlines Foundational Supports, existing outside individualised NDIS budget, and needing to be timely, individualised, early, transdisciplinary and accessible for working families.

The Disability Royal Commission Final Report made 222 recommendations across 12 volumes. With families, individuals, service providers and advocates providing evidence. Strong recommendations were made to reduce the violence, abuse, neglect and exploitation of people with disability.

There are existing gaps and barriers including:

- Families are overwhelmed with information and choice. They are often accessing information without an evidence base and through word of mouth and social media. The difficulties that come with this include families not knowing where to start, attempting to access all supports all at once, not being sure where to go for the 'truth', often not aware of current government support and websites.
- Parents and carers are unable to access timely capacity building support in a way that works for their family. Families may live in regional, rural or remote parts of the state and not have access to the capacity building support they wish to access, working families may not have the time availability to access capacity building supports at a time that suits them.
- Rising cost of living in Australia means that families and carers are sometimes having to choose work over care for their child, or accessing additional supports for their child as they are unable to get to appointments or sessions at times it works for the provider.

- Long waiting lists for quality support services, quality support services having workforce issues preventing them to able to support more children and families.
- There is not currently the early investment in supporting young children with emerging development concerns and disability. Families are left wondering and waiting what to do and how best to support their child.
- Inclusivity of children is not always supported in mainstream services.
- Barriers to information and to quality settings and services, such as health care, education, employment and housing (DRC).

Potential Solutions:

- Having one federally funded autism-specific navigation support hub for families so that all families know this site, have it widely advertised and backed with state marketing. Evidence based information available; collective design and input from all state-based autism peak bodies so that it can provide detailed and accurate information.
- Capacity building programs for families/carers to be available through multiple modalities across the state. Online and in-person options with days and times available across the week including on weekends so working families can access reputable and evidence-based programs of capacity building support e.g. Hanen. Capacity building supports to be block funded to providers to deliver on the support, and offer to families.
- Investing early in supports for children with emerging development concerns and disability through programs that families can easily access, at a time that works for them, in a way that works for them, where they feel supported, listened to and valued as an expert on their own child.
- Children require more support at key transition points in their life including, starting primary or high school or when finishing high school. There is a disconnect between supports provided by mainstream services such as the Department of Education and the individualised support available to students and their families at this time.
- Service providers who receive government funding need to be accountable for child outcomes.

Recommendations:

- ✓ Financial investment from government to implement the DRC and NDIS Final Review Recommendations.
- ✓ Investment in a capable, experienced workforce.

i) any other related matter

Aspect wish to thank you for your time in reading this submission and we look forward to continued collaboration and discussion in relation to Foundational Supports across NSW. Aspect welcome the opportunity to meet with you to further discuss the above-mentioned information in NSW Parliament as part of this process.

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