

From:
To: [Committee, NDIS](#)
Cc: [Dane Morling](#)
Subject: Communiqué from the NRHA and NDCA
Date: Tuesday, 8 July 2014 12:35:09 PM
Attachments: [adv-getting-grips-NDIS-communique-26-June-2014.pdf](#)

8 July 2014

Secretary
Joint Standing Committee on the National Disability Insurance Scheme
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Secretary

On 26 June 2014 a group of individuals and agencies met in Mount Isa to discuss and agree upon some of the key ways forward to make the National Disability Insurance Scheme (NDIS) work well in rural and remote areas. The National Rural Health Alliance (NRHA) and the National Disability and Carer Alliance (NDCA) organised the meeting as part of their ongoing work to make the NDIS fit-for-purpose for rural and remote clients and their carers and families, as well as for rural service providers.

We commend to the members of the Joint Standing Committee the communiqué from that meeting which is available on our website and also attached to this email.

The communiqué outlines a number of topics agreed to be of particular importance for people affected by the changes underway, including dissemination of information about the NDIS and things learned from the rural and remote elements of the four trial sites. Specific areas of concern outlined in the communiqué include a range of serious transport challenges, from micro issues such as appropriate aids and appliances, through to the absence of public transport; and responses to housing and accommodation design challenges – which must be met with equity across the country, whatever the cost.

The NRHA and the NDCA are currently developing a Rural and Remote Bulletin for the NDIS - a statement of principles and concerns relating to the implementation and administration of the NDIS in rural and remote areas - which we will forward to the Committee once it is completed. In the meantime, the attached communiqué will provide you with some valuable insight into what rural and remote people regard as being of central importance to the rollout of the scheme. If you would like further information or to discuss the NRHA's ongoing work on the NDIS, please do not hesitate to contact us on (02) 6285 4660 or email gg@ruralhealth.org.au

Yours sincerely

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Gordon Gregory

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Getting to Grips with the NDIS in remote areas

A public information forum for people
in more remote areas, hosted by
National Disability and Carer Alliance
and National Rural Health Alliance
with the people of Mount Isa

“Equity from Newcastle to Normanton”

Mt Isa Communiqué on Disability Care, Thursday 26 June 2014

Disability forum charts way forward for disability care in more remote areas

In Mount Isa today a group of interested individuals and agencies agreed some of the key ways forward to make the National Disability Insurance Scheme work well in more remote areas.

The meeting was organised by the National Rural Health Alliance and the National Disability and Carer Alliance as part of their ongoing work to make the NDIS fit-for-purpose for rural people.

Topics agreed to be of particular importance include disseminating information to people affected by the changes in place, including about things learned from the rural and remote elements of the four trial sites.

Through no fault of the rural and remote community, public and even interest group awareness of the NDIS is still far too limited. An effective information campaign about the NDIS requires culturally appropriate messages to be delivered by means suited to the communication style and capabilities (eg internet access) of rural people. A successful campaign will relieve anxieties about what the new scheme will mean for clients and carers in particular rural or remote circumstances, and the transition to it from current arrangements.

Particular information needs to flow both ways from Aboriginal and Torres Strait Islander people, who have a distinct understanding of ‘disability’ and many of whom live in rural or remote areas, and the managers and supporters of the developing NDIS.

It will be essential for flexible respite care to be funded in the new scheme, provided by qualified workers who must be properly and strongly supported in their work. The conditions must be clarified in which the scheme will fund support provided by members of the client’s family or their friends.

Some clients of the new scheme will need the support of strong, close advocates to ensure that their best interests are met, including through their individual assessment plan.

Given the expectation of a greater volume of client-centred care services, the chronic shortage of professional staff in rural and remote areas, including allied health, is a matter of major ongoing concern. The implementation of effective workforce initiatives across the disability, aged and health care sectors – always more closely inter-related in more remote areas – will remain essential for the rural success of the NDIS. Professional care staff in rural and remote areas are often in their early career, meaning that a culture of interdisciplinary support is particularly important.

Alternative models of disability care practice can and should be developed in more remote areas and, given the widespread existence of market failure, are unlikely to be the result of a commercial or market approach.

Those at the Mt Isa meeting welcomed the adaptive responses of the NDIA to lessons learned in the trial sites about practical matters for clients of the new Scheme.

They agreed to promote additional actions for priority attention by managers and supporters of the NDIS, including in particular the NDIA. These priorities include a range of serious transport challenges, from micro issues such as appropriate aids and appliances, through to the absence of public transport; and responses to housing and accommodation design challenges – which must be met with equity from Newcastle to Normanton, whatever the cost.

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