

AASW

Australian Association
of Social Workers

***Submission to the Joint Standing
Committee on the NDIS
Re:Market Readiness***

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INTRODUCTION

Who we are

The Australian Association of Social Workers (AASW) is the professional body representing more than 10,000 social workers throughout Australia. We set the benchmark for professional education and practice in social work, and advocate on matters of human rights, social inclusion, and discrimination.

The social work profession

The social work profession is committed to pursuing social justice and human rights. Social workers aim to enhance the quality of life of every member of society and empower them to develop their full potential. Principles of social justice, human rights, collective responsibility and respect for diversity are central to the profession, and are underpinned by theories of social work, social sciences, humanities and Indigenous knowledges. Professional social workers consider the relationship between biological, psychological, social, and cultural factors and how they influence a person's health, wellbeing and development. Social workers work with individuals, families, groups and communities. They maintain a dual focus on improving human wellbeing; and identifying and addressing any external issues (known as systemic or structural issues) that detract from wellbeing, such as inequality, injustice and discrimination.

Our submission

The AASW welcomes the NDIS as a rights-based approach that supports the independence and the social and economic participation of people with a permanent impairment or condition resulting in disability. The values of 'choice and control' that underpin the NDIS are consistent with the values and principles of self-determination and empowerment that have guided the social work profession for many decades. Unfortunately, AASW members report that there have been multiple difficulties for many parties the transition to the market based system.

The concern raised by AASW members is that the outcomes that participants aspire to are not being achieved because of a lack of capacity in key roles within the NDIS:

- Planners, Local Area Co-ordinators (LAC's) and support co-ordinators are essential to the success of participants' navigation and access to appropriate services and supports;
- The pricing structure and allocation of hours does not allow service providers to cover the cost of providing specialist services, resulting in inexperienced workers, failure to address complex needs and the potential for the withdrawal of appropriate services from the NDIS;
- The separation of advocacy from service co-ordination means that services have been forced to identify a new way of working with people who have complex needs;
- The issues that are creating thin markets in remote communities will not be resolved through price setting alone;
- Service providers are not currently funded to cover the costs of observing the quality and safeguarding regime.

Terms of Reference

The AASW will respond to the following areas as identified in the terms of reference

- a. the transition to a market based system for service providers;
- b. participant readiness to navigate new markets;
- c. the development of the disability workforce to support the emerging market;
- d. the impact of pricing on the development of the market;
- e. the role of the NDIA as a market steward;
- f. market intervention options to address thin markets, including in remote Indigenous communities;
- h. the impact of the Quality and Safeguarding Framework on the development of the market.

RESPONSE

a. The transition to a market based system for service providers;

The impression from some of our members is that the NDIS model of a collection of discrete transactions, delivering compartmentalised items of service, is creating difficulties for participants who need a comprehensive coherent response to their evolving and complex needs. Further, the current market structure means that crisis services and other one-off responses to unanticipated events and needs, can no longer be funded from a flexible package of funds.¹ This has meant that the transition to the market based system is not one just of “market readiness”, but in many cases, requires fundamental change to the way services work with people with disabilities and complex needs.

In addition, the AASW is concerned that some new provider organisations are commencing operations without fully understanding the complexity of issues confronting people with multiple complex disabilities. When the providers are unable to deliver the necessary type or level of support, the participant experiences this as a personal failure, and there is a risk that they will blame themselves.

In other instances, there has been inadequate quality control, such as insufficient attention by planners to the qualifications and experience of people employed by service provider organisations. When a participant’s plan calls for therapeutic counselling or specialised behaviour support, those services needs to be provided by suitably qualified workers. Otherwise, participants and their families are exposed to a significant risk. It is reported from members that some specialist agencies, such as those providing therapeutic and behavioural support, make ambitious promises to participants, but after the service agreement is signed it becomes apparent that the service doesn’t have the capacity to respond. In some cases, the provider had not yet employed appropriately skilled staff.

¹ Warr, D et al, *Choice, Control and the NDIS: Service user’s perspectives on having choice and control in the new National Disability Insurance Scheme*, University of Melbourne, 2017

Recommendation:

The AASW recommends that protocols are established to ensure that the appropriate professional standards and staff experience and qualifications are used when planning for participants with complex needs, especially with complex psycho-social needs.

b. Participant readiness to navigate new markets

A number of concerns have been raised by social workers dealing with complex family circumstances. People from non- English speaking backgrounds, people with cognitive impairment and people experiencing poverty and multiple layers of disadvantage experience barriers both to mainstream services and the NDIS. In these instances, our members have reported needing to devote a significant amount of time to assisting these people through liaison and advocacy with mainstream services to ensure that participants receive the full range of appropriate community supports. This can include liaising with multiple community agencies, obtaining information about new services, exploring the options with participants, making 'warm' referrals and ensuring participants receive the promised supports.

This work currently comes under the role of Support Co-ordination. Although this work is key to ensuring that participants are appropriately connected to the most suitable supports to ensure they can achieve their goals, the maximum time allocated in a participant's plan is generally two hours per week for the most vulnerable participants with high level risks. Further, neither advocacy nor complex case management are funded by NDIA. Although it is a false distinction to separate advocacy from support coordination, the structure of the NDIS has created such a separation to the detriment of participants.

Recommendation:

The AASW recommends that the allocated hours for advocacy, and for specialist support coordination be increased to more accurately reflect the level of participant need.

Further, many mainstream services do not have the capacity to assist disadvantaged individuals who are not currently registered under the NDIS to access the required support they need to enable registration. The lack of proactive outreach by the NDIS is a shortfall in the role of LACs and has the potential to exclude many people whose disability has already caused them to be isolated from community information or services.

Recommendation:

That the NDIA extend the role of LACs to enable proactive outreach to ensure that access to the NDIS is supported for all people who may be eligible.

c. The development of the disability workforce to support the emerging market

The success of the NDIS depends on the appropriate workforce. Each of the many roles within the NDIS play a specific part in ensuring the enhanced quality of life and the development of the full potential of

each participant, and it is critical to the NDIS's success that staff have qualifications and experience appropriate to that role.

By contrast, our members have the impression that there has so far been an a-professional approach to developing the NDIS, which has resulted in the skills and experience of professionals being overlooked as crucial resources. This has influenced outcomes for participants, both directly and indirectly, as described throughout this submission

Social workers are finding many barriers to entry to the NDIS workforce. One barrier has been the difficulty of accessing the NDIS portal and of working through the registration process. Other barriers for social workers include the onerous requirements in several jurisdictions for third party verification to register to provide early childhood early intervention services, notably in Victoria and South Australia. These requirements are in addition to existing requirements for professional accreditation and continuing professional development, and are counter-productive to achieving the skilled workforce the NDIS is seeking.

Recommendation:

The AASW recommends that existing professional accreditations and professional development requirements be incorporated into the processes for registration under the NDIS.

d. The impact of pricing on the development of the market

The issue of pricing is central to the operations of any market. The AASW draws the Standing Committee's attention to recent reports which demonstrate that service providers are concerned that the levels at which prices have been set are so low that they are interfering with the quality of services.² In particular, the low levels of prices limit the amount of time for communication and co-ordination between team members, for maintaining oversight and supervision of direct service and for recruiting skilled workers into long term positions.³ When asked what actions would have the greatest impact on their capacity to deliver quality services, 60% of disability service providers nominated that they want the price at which services could be charged to be aligned with the cost of supplying them.⁴ This single action was more important to service providers than the other 8 actions combined.⁵

As one of the AASW's members reported:

"There is not yet a true market as prices are controlled by the Government, apparently to limit the costs of the scheme. This has had an impact on the viability of some service providers as well as the quality of service that can be offered."

These concerns were highlighted by last year's review of costs conducted by the Productivity Commission, which found that there are still difficulties providing comprehensive, multi-faceted services

² Cortis,N, McDonald,F, Davidson,B, & Bentham,E, 2017, *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs*; Social Policy Resource Centre; UNSW, 2017; National Disability Services, & Centre for Applied Disability Research, *State of the Disability Sector Report*

³ Cortis,N, McDonald,F Davidson,B, & Bentham,E, 2017, *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs*; Social Policy Resource Centre; UNSW, 2017.

⁴ National Disability Services, & Centre for Applied Disability Research, 2017 *State of the Disability Sector Report* .

⁵ National Disability Services, & Centre for Applied Disability Research, 2017 *State of the Disability Sector Report* .

for people with complex needs. As the NDIS is implemented, it is critical that the pricing structure address this situation. In particular, people living with psycho-social disability will require a highly skilled workforce. Because social workers focus on enhancing quality of life and empowering people to full social and economic inclusion, the values, qualifications and skills that social workers bring are a perfect match with the person-centred approach of the NDIS. Many of our members have extensive experience in assessment, planning and case management with people living with multi-faceted disabilities. These people can be a valuable resource for participants in achieving their goals.

Recommendation:

The AASW recommends that the pricing structure of the NDIS be adjusted to allow these specialised services of assessment, planning and case management to be made available for participants.

e. The role of the NDIA as Market Steward

The NDIA's budget-based approach to planning at times appears to be at odds with the insurance principles underlying the scheme. We have heard frequent accounts of funds allocated being insufficient to meet the participant's needs. What constitutes 'reasonable and necessary' support can be the subject of divergent opinion, however there is not enough recourse to professional expertise about what, in the long term, is most likely to produce the best and most cost-effective outcome. Rather, there is an emphasis on short term cost minimisation. Our members' impression is that this is exacerbated by the nervousness of service providers about their long term financial viability in the context of the current pricing structure. In this climate, greater transparency and accountability in the setting of prices is a necessary step in ensuring positive outcomes for participants. Therefore, the AASW welcomes the news that the NDIA will release the results of the Independent Pricing Review conducted last year.

Recommendation:

The AASW recommends that the NDIA release the results of the Independent Pricing Review immediately and calls on the NDIA to ensure that future pricing reflects the costs of supply.

f. Market intervention options to address thin markets, including in remote Indigenous communities

In many regional and remote communities, our members observe the consequences of limited service options. The ideal of consumer led care cannot be met when the services either do not exist locally, or when travel to those services consumes most of the funding package. Our members report that many plans are composed to conform to the services that planners know to be the only service available. This represents a complete reversal of the intention underlying the NDIS. Not only is this a frustration for participants,⁶ but also for members whose experience tells them that more sophisticated planning skills

⁶ Warr,D, et.al 2017 Choice and Control: *Service users' perspectives on the National Disability Insurance Scheme*, University of Melbourne.

could have identified better service options for that participant. In some instances, the inability to locate services led to participants losing their funding altogether, because planners misinterpreted the reason for funds not being spent.⁷

In remote indigenous communities, the absence of Aboriginal controlled organisations in the provision of disability services is compounded by very low levels of employment of Aboriginal staff by the major disability service providers. In these respects, the system is failing to provide culturally responsive services to Aboriginal people. This, combined with ineffective outreach and information has led to an identifiable absence of plans and services for Aboriginal children.⁸ This represents an injustice for already vulnerable people and is causing an unacceptable increase in inequality of outcomes.⁹

Central to the addressing of thin markets will be the need for prices in those markets to reflect the costs of providing services in those areas. Nevertheless, the lack of culturally appropriate services will not completely self-correct through setting the price. Specialist approaches will be needed to ensure that the NDIs is accessible in these communities. For example, existing organisations in those areas (e.g. Aboriginal controlled organisations could be used as the platform from which existing services can be extended to include disability services. Such an extension will require a viable service and pricing model to be made available.

Recommendation:

The AASW recommends that the NDIA adopt specific strategies to extend the NDIS to reach Aboriginal and Torres Strait Islander peoples: to engage Aboriginal controlled organisations in the provision of disability services; to support existing disability organisations to engage with Aboriginal people; and to attract and retain Aboriginal staff.

h. The impact of the Quality and Safeguarding Framework on the development of the market

The Social Policy Research Centre has raised concerns that the under-pricing of disability support work means that particular attention needs to be paid to the quality of the face to face work with participants.¹⁰ The entry of inexperienced or unqualified service providers means that there is an increased risk of sub-standard services and the possibility of poor outcomes for participants. In some instances, AASW members have observed that there is too little attention by planners to the qualifications and experience of people approved to provide therapeutic counselling and positive behaviour support, presenting a possible risk to participants. These concerns have been reinforced by participants themselves.¹¹ Therefore a robust, standardised and enforceable Quality and Safeguarding Framework is an essential element of the NDIS.

⁷ Warr,D, et.al 2017 Choice and Control: *Service users' perspectives on the National Disability Insurance Scheme*, University of Melbourne

⁸ National Disability Services, & Centre for Applied Disability Research, 2017 *State of the Disability Sector Report .2017)*

⁹ National Disability Services, & Centre for Applied Disability Research, 2017 *State of the Disability Sector Report .)*

¹⁰ Cortis,N, McDonald,F, Davidson,B, & Bentham,E, 2017, *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs*; Social Policy Resource Centre; UNSW, 2017

¹¹ Warr,D, et.al 2017 Choice and Control: *Service users' perspectives on the National Disability Insurance Scheme*, University of Melbourne

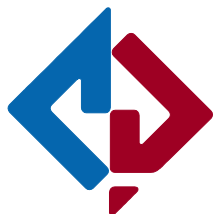
Both the recent high profile examples of abuse within the disability sector, and the findings of the Royal Commission into Institutional Responses to Child Sexual Abuse indicate that implementing comprehensive safeguards should be a major priority for disability services. Given that service providers are already discovering that the prices they can charge for service do not cover the costs of providing them, the NDIA should ensure that the extra costs of compliance with the Quality and Safeguarding regime are factored in to the pricing structure.

Recommendation:

The AASW recommends that the NDIA ensure that partner organisations and disability service providers are funded adequately to ensure that they can comply with the Quality and Safeguarding Framework.

Conclusion

Unfortunately, AASW members report that there have been multiple difficulties for many parties the transition to the market based system. As a result, outcomes for some participants have been less successful than the ideals that were originally imagined. The AASW believes that this inquiry represents an opportunity to learn from these experiences to ensure that they are not repeated as the NDIS evolves to support increased numbers of people living with significant disability.



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