

REPORT FOR THE NDIS JOINT STANDING COMMITTEE



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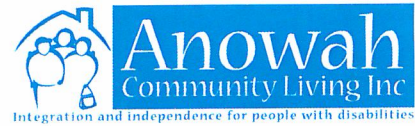
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Contact Details:

Carole Turnbull, CEO Anowah Community Living Inc



Introduction

I, Carole Turnbull, am CEO of Anowah Community Living Inc (Anowah) based in Horsley Park NSW. I am also a mother of two disabled adults, one of whom is in supported accommodation (Group Home) and the other resides in the family home. One of my sons has an intellectual disability and the other a physical disability.

Primarily I will be speaking on the experiences that Anowah and our clients have had in the initial implementation stage of the NDIS in the Western Sydney area. I would also appreciate the opportunity to speak of the experiences that I have had as a family support member for a NDIS Participant residing in the family home.

Anowah is a service provider that is in its 50th year of operation. During those years there has been a great many positive changes and thus progress made in the area of support for, and acceptance of, the valued disabled members of our community. The NDIS will in the long term enhance the lives of its participants even further. Anowah currently provides services to twenty three (23) clients, all of whom are NDIS Participants. All participants have chosen for the NDIA to manage the funding support. Services provided by Anowah are supported accommodation (including group homes and individual living options), a day service and support coordination. Anowah's clients range between the ages of 31 and 63 with the average age being 49.

In preparation for the introduction of the NDIS I, or representatives of this organisation, attended many information sessions that were provided by the NDIA. The required registration process including access to the Provider Portal was undertaken and completed prior to the 1 July. I was confident that Anowah as a service provider would undertake the transition process without too many problems.

As an organisation we provided our families with information via information sessions and printed material on the framework and processes of the NDIS as the information came to hand.

NDIS Participant Registration

As a provider of shared living support (group home accommodation) our clients were assessed as meeting the criteria to be eligible to be a NDIS participant. The participant registration process was therefore to be streamlined. This process involved the service provider and or family support supplying information via a phone call regarding each participant. Our organisation, together with family support members for our participants were not comfortable with this approach. However, we were informed that this was the only option for our clients to be registered as a participant in the NDIS. Although it is a quick method to gather information over the phone, I'm not sure that in all cases the information recorded from the conversations reflected accurately the support requirements of the participants.

Suggested improvements:

- Having the option to supply information in written format with provision for comments and supplying supporting documentation would definitely have made this organisation and its participants/ family support members more comfortable than the over the phone procedure.

Planning Meetings

Anowah clients commenced their planning meetings with the Local Area Coordinators in June 2016. It is my understanding that Anowah's clients were one of the first NDIS participants to have their planning meetings. This can be seen as a positive in that the process should be fairly straight forward and quick. At the information sessions for service providers run by the NDIA on the transition process clients currently in group homes were considered to be the easiest to transition (due to the availability of information) and thus would be the first to undergo the transition process. NDIA also informed service providers that "all service providers of shared living support (group homes) would be allocated the LAC and a NDIA support person to support the transition process for the clients".

Anowah clients and their families in preparation for the planning meeting all worked through the NDIS Planning Workbook. This was a very useful tool and as such our NDIS participants and their support families were well prepared for the planning meeting.

Although Anowah clients were well prepared for the planning meetings it was evident that the same amount of preparation had not been achieved by the NDIA and the LAC assigned to us.

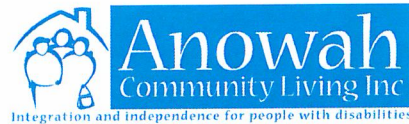
The first couple of planning meetings for our clients went well. The LAC that conducted these meetings appeared to be well informed and have an understanding on the participant's requirements and choices. However some of our participants had an LAC that had only been employed for less than a week and these LAC's were also training other LACs that had been employed for only a couple of days.

During the period of the planning meetings the NDIA had computer technical problems. On several occasions the planning meeting information was not able to be input directly into the computer system but written down for input at a later time. This often involved a follow up phone call in order to complete the plan.

The LAC's that did attend the meetings were always very professional and appeared to be focused on the interest of the participant.

Suggested improvement:

- It was evident that during the planning process for our participants that the LAC and the NDIA did not have the capacity or the capability to implement such a transition at 1 July 2016. I appreciate that the NDIA was itself struggling to have sufficient staff and computer technology able to cater for the massive task of transitioning the volume of participants. I also appreciate that this may have been related to available funding; knowing that the block



funding that was being provided from the state government was to be transferred to the NDIA, (as participants transitioned over), in order to fund the operation of the NDIS.

- Training for the LACs (information gatherers) with regard to the system and the collection of data. All of our clients that attend a day service for community access attend a centre based service. The majority of our clients attending the various day services were given support at the group based access support not at a centre. The information given at the planning meetings was that all clients attending a day service attended a centre based support service. Another example of incorrect information is two clients living in individual support accommodation were allocated funding at a rate of living with 9 others.

Plan Preparation and Format

The current system is for the LAC to collect the data for the plan writer. Neither of these people have a good knowledge of the individual participant. The LAC has in most cases met the participant even if it is only for a period of 20 mins to 2 hours. The information gathered by the LAC is then given to the plan writer who has no knowledge at all about the participant. The plan writer then develops the plan has it approved and then forwards it to the participant. This system is flawed as there is no area for review or discussion prior to the plan being approved. As a result of this system approximately 50% of our participant's plans require review. This is just to get support to a level that was being provided by service providers to the participant pre NDIS.

I have during the process of supporting participants in their plan implementation spoken to other service providers and their comments regarding the level of plans requiring review was similar to our experience. I do not think our participants are unique in this area.

To have to undertake a plan review on receiving the first plan due to errors or support levels not satisfactory is a major area of concern. The additional resources required by the NDIA to review incorrect plans places unnecessary strain on the system and its integrity.

The format of the support plans is very easy to read and understand except for the area of support budgets. This area of the plan is not easy at all to understand and interpret. The "core supports" area is the most difficult and confusing. The core support area of the plan covers the important aspects such as daily living supports, community access and participation and consumables. The amount shown in the Core support area of the plan does not include shared living support. The "details" of the support, however, does include the shared living support. This aspect of the NDIS support plan has caused many participants and families distress due to the perceived lack of funding to cover all these components of the plan. Knowing the shared living support is not included in the support budget noted on the plan does not make the core support budget for the other areas of community participation and consumables clearer. I personally have spent many hours assisting participants and their family support work out budget allocations in this area.

Suggested improvements:

- The information obtained in the planning meeting is recorded accurately. One participant had requested in their planning meeting for replacement of boots. This is a consumable item

permitted under the NDIS. What was included in their plan was a consumable item but this was for incontinence aids. Somewhere from the planning meeting to the plan approval this information was changed. This participant has no requirement for incontinence aids.

- The participants should have the opportunity for a review or discussion of the plan prior to the plan being approved. This additional step would greatly reduce the requirement for plan reviews. This would then alleviate the strain on the valuable resources of the NDIA.
- The NDIS supports budgets provide more detail in the budget allocation for the individual items in the core support area. The participant portal does in some cases indicate in more detail the allocated supports in the core area. This information should be available in the written plan as well for those unable to access the portal.

Procedure Guidance and Training

I attended many information sessions prior to the introduction of the NDIS in year 1 areas. I may have missed some information but in none of the sessions I attended was there any information on the actual procedures required by the NDIA. An example of this is the requirement to provide quotations for some items of support. I could find no guidance at all in the portal manual or the information provided on the website on how this was actually to be done. To this date I'm not really sure of the correct procedure for submission of quotes. Is it the correct procedure to submit quotes to the general email enquiries@ndis.gov.au or via the provider portal or get the participant to upload the documents via their individual portal?

Plan review requests may require quotes submitted as supporting documentation. The NDIA during the review process informed me that it is a general requirement that 2 quotes be submitted with plan review requests. I have not been able to locate any information on the website in relation to supporting documentation required for plan reviews etc. If this information was available the process of plan reviews could be streamlined by submitting all required documentation with the request for plan review. This would save a great deal of double handling and waiting for additional information.

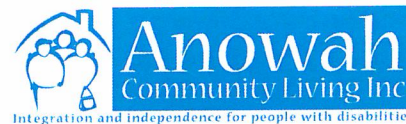
Suggested improvements:

- Training and guidance be available as to the requirements of the NDIA especially in the areas of quotations submissions and written plan review requests. This could be by fact sheets on the website.

NDIA Support

In the information sessions pre the introduction of the NDIS service providers providing shared living options were informed that they would be allocated a support person from the NDIA to assist participants through the transition process. I stated previously that our clients commenced the transition process in June 2016. At this time our organisation had no support from the NDIA.

Our NDIS participants having completed the planning phase were receiving their NDIS support plans. Many of these required review or were not able to be implemented due to NDIA not fulfilling all the



requirements for plan implementation. It was not until late November that I was able to make contact with a person from the NDIA who was helpful and has assisted us with various matters.

The period from August 2016 to late November was an extremely frustrating period for us as an organisation and for the participants and their family support members. Prior to the NDIS our organisation had provided support to our clients and their families in many aspects of the participant's life. Our clients are adults with the average age of the clients being 49. A client base in this age group generally has family support that is ageing, and for various reasons is relying on our organisation to manage the affairs of their family members. They have confidence in the support our organisation provides to their family members. With the introduction of the NDIS the participant authorised support person is a family member. This meant that as a service provider to the participants our organisation had no authority to speak for and assist our NDIS participants to correct any issues that they had with the NDIS plan.

Contact with the NDIA was usually a waste of time, generally it took over 40 mins to speak with someone when calling and then usually the response was "I can't help you with that, I will transfer you to another area, or I will send an email to the person you need to speak to and have them call back, or why are you ringing this area you should be going through your support person". Only a few of our calls were returned and our "support person" from the NDIA did not exist.

The lack of support from the NDIA placed our organisation in a state of financial distress as we were not able to lodge a payment request for almost 40% of our participant clients due to the NDIA not performing their role and the funding from ADHC was ceasing. Fortunately after several extremely frustrated phone calls and emails we were allocated our support person. This took 5 months. I must say that since this has occurred, any support requirement that we had has been actioned in most cases promptly and without question.

Our participants were all allocated a support budget for Support Coordination. The support coordinator was to be allocated by the NDIA. Although our participants had their NDIS plan the support coordinators were not allocated until late November or December. This often meant that service providers were not notified that participants had their plans until the ADHC funding was withheld. This caused service providers undue stress in having to very quickly obtain information regarding the level of service budget that had been allocated for the service they were providing.

Suggested improvements:

- Ensure that shared living service providers are allocated a NDIA support person at the commencement of the transition process. This is what we were expecting from the NDIA information sessions prior to transition. This simple step could alleviate a great deal of frustrations and distress for participants and service providers.
- Ensure that the Support Coordinators are allocated at the time of the plan being approved. If no support coordination is included in the participants plan then the LAC should be taking on this role to ensure that the plan is implemented and all relevant service providers are notified.
- Having trained support staff available to assist with phone enquiries



- Reduce the amount of time on the phone before support is available.
- Ensure that follow up/call back requests are actioned in a timely manner

Plan Review Requests

The written plan review process is not working well. As previously stated this process could be easier if more information was available as to supporting documentation required to be lodged with the review request. Our organisation being a service provider is only able to assist the NDIS participant and their family in the plan review request process. I am only able to comment on the written plan review request process as this is the option that our NDIS participants and their families have chosen for the lodgement of review requests. Family support for our participants does not feel confident in contacting the NDIA directly.

Current experience with plan review requests is that:

- Written requests submitted by email are not logged as being received until 2-3 weeks after being submitted e.g. requests lodged on 20 February 2017, evidenced by an email response, being recorded on the NDIA system as received on the 9 March 2017.
- Requests not being allocated to a planner for a period of up to 2 months after the system record date. This could be almost three months from actual lodgement of the request.
- Action only seems to occur on the progress of non urgent requests after follow up phone calls or emails.

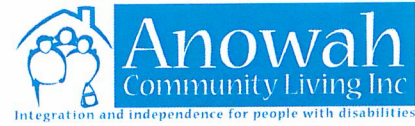
Support plan review requests are submitted due to the current plan not being suitable. To be expected to wait 3 months and longer to have the plan reviewed is an area of concern. I appreciate that the NDIA has been required to review a great number of the first support plans. This is common knowledge and is probably a result of the many of the factors mentioned previously such as incorrect or incomplete information being supplied to the plan writers initially, lack of a review process prior to the plan being approved, lack of experience of LACs and NDIA staff.

Suggested improvements:

- Reduce the requirement for a plan review by more consultation with the participants and their support people. Our experience is that the NDIS places all the information submitting responsibility on the participant or their family support. Service providers especially those providing shared living accommodation options (i.e. the participants home) have a great deal of information that is relevant to the preparation of a participant's support plan. My experience is that at the planning meeting there was no opportunity to provide supporting documentation to evidence requirements of the NDIS plan.

Provider and Participant Portal

Provider Portal: The provider portal is very easy to navigate and understand. Data input is straightforward. The only comment that I have in regard to the provider portal is that it is often very slow. I expect this is due to the demand and volume of users at these times. I find that if I need to input data e.g. payment requests it is better to do so out of business hours.



Participant Portal: The participant portal is also easy to navigate following in the same format as the provider portal. In order for participants to be able to access the information regarding their plans they or their family support require access to the participant portal. It in this area that contact details and bank details etc can be updated as required. The participant portal is the avenue for plan management and monitoring.

It is my experience that it is definitely an advantage and almost necessary that participants have access to the portal to manage their plans. Our organisation supports intellectually disabled adults who themselves are not capable of accessing computer portals. I stated previously the family support for many of our clients are ageing and have no interest in managing the supports of their participant via computer portals.

Suggested improvements:

- The option for participants to receive written notification on the management of the support budgets if requested from the NDIA.

Payment requests from NDIA

At the commencement of the NDIS there was negative media regarding the payment request process. Media articles reported that some organisations were waiting lengthy periods for payments to be processed. This negative media was an area of concern for this organisation as we did not have financial reserves that could cover any delay in the payment process.

In reality the payment process has been the area of the NDIS that has caused least concern. All payment requests of the NDIA have been paid within the 48 hour timeframe notified, with the majority of the payment requests being paid overnight.

For this organisation this part of the NDIS is working extremely well.

Pricing

Our organisation was underfunded by ADHC for many years. This was recognised by ADHC, although they were not able to assist with any additional funding. This organisation as a result of this lack of adequate funding had to operate on a minimal budget. We have minimal administrative staff and any allied health support service or consultancy requirements were engaged on a fee for service basis.

The NDIS price guidelines for the items that our participants access appears to be fair and adequate to cover the support provided.