24 March 2017

Dear Commissioners

Submission to the National Disability Insurance Scheme (NDIS) Costs study
Productivity Commission

This submission is made by Professor Anne Kavanagh on behalf of the Centre of Research Excellence in Disability and Health (CRE-DH) funded by the National Health and Medical Research Council.

About the Centre of Research Excellence in Disability and Health

The first centre of its kind internationally, the CRE-DH will generate the evidence needed to guide social and health policy reform with the explicit intent of improving the health of working-age Australians with disabilities. The aim is to identify policy reforms that will improve the health of people with disabilities and reduce the avoidable (inequitable) health and wellbeing disparities between Australians with and without disability.

The Lead Investigator on the CRE-DH is Professor Anne Kavanagh (University of Melbourne) and Co-Directors are Kavanagh and Professor Gwynnyth Llewellyn (University of Sydney). The CRE-DH includes Chief Investigators from the University of Melbourne, University of Sydney, Monash University, UNSW and RMIT with multidisciplinary skills in epidemiology, health economics, health and social policy, psychology, psychiatry, public administration and public health. The CRE-DH will further develop the future research leaders in disability and health. (Appendix A has a list of the Chief and Associate Investigators associated with the project).

The CRE-DH has four work programs:

1. Mapping inequities in social and economic and health inequities between people without disabilities and developing a monitoring framework
2. Identification of the social determinants of health of people with disabilities
3. Health economic modelling of health and social polices
4. Policy research to identify the key emerging issues in health and social policy related to people with disabilities

We are working in collaboration with key stakeholders in the sector including Department of Social Services, ABS, AIHW and peak bodies in the disability advocacy and service sector. The program of work will produce new knowledge about the social and economic factors that drive the health and wellbeing of Australians with disability. The CRE-DH has a strong emphasis on the use of large, administrative data sets to identify the key drivers of health and wellbeing for people with a disability.

This submission

We note the wide scope of the current Study being conducted by the Productivity Commission much of which lies outside of the scope of the CRE-DH. CRE-DH Investigators are making submissions in other relevant areas. This submission focusses on the importance of high quality data for monitoring, evaluation and public accountability. Access to such data is not only critical to help answer those questions posed in the CRE-DH but also critical to help answer many of the questions posed in the current Productivity Commission issues paper.

The success and sustainability of the NDIS rests on making the best use of the available resources to improve the long-term social and economic outcomes as well as the health and wellbeing of people with disabilities and their families and carers. As the National Disability Insurance Scheme moves to full rollout there will be a comprehensive data base on all components of the scheme and user experiences such as service provision, service use, costs, and social, economic and health outcomes of the people with disabilities. It is critical to use this data to evaluate the outcomes of the Scheme and to identify how it can be improved. Careful analysis and reporting of this data is critical to ensure accountability to people with disabilities and their families and the Australian community.

Importantly the NDIA data will be longitudinal and will enable the tracking of outcomes within and between individuals over time. Currently the NDIA produces quarterly and annual reports that provide cross-sectional information against a
broad set of performance indicators and, as far as we are aware, the analyses of longitudinal data have not yet been reported. While the NDIA intends to make use of this data for its own evaluation purposes we believe that it is important that this rich data is made available to external researchers from a broad range of disciplines (e.g. business and economics, epidemiology, statistics, social sciences, public policy) who can provide independent evaluation of outcomes. This data should be de-identified unit record data and should be available only to credentialed researchers subject to data security and approved governance arrangements. This would significantly improve research capacity. The Agency has relatively limited internal capacity to conduct the broad range of research questions that need to be answered. This recommendation is in line with the Productivity Commission’s recent Inquiry into Data Availability and Use.

We also propose that the Commission consider the importance of linking NDIA data to other administrative and survey data sets (e.g. Census, Department of Social Services, Australian Tax Office). A model for this is the Multi-Agency Integrated Data Project (MADIP) being conducted by the Australian Bureau of Statistics as part of their data transformation activities:
http://www.abs.gov.au/ausSTATS/abs@.nsf/be4aa82cd8cf7f07ca2570d60018da27/5eaa695de4bc61d1ca257f4c00170b7f!OpenDocument

Linking NDIA data to the public survey and administrative data will significantly enhance capacity to examine the impact of the Scheme on a broad range of social, health and economic outcomes. A model for this is the Statistics New Zealand Integrated Data Infrastructure http://www.stats.govt.nz/browse_for_stats/snapshots-of-nz/integrated-data-infrastructure.aspx which has been successfully made available to approved researchers under agreed privacy arrangements. Like Statistics New Zealand we recommend that linked NDIA data is made available to external researchers.

In sum, the CRE-DH recommends that the Commission consider:

1. Access to de-identified unit record NDIA data be made available to approved external researchers
2. Linking NDIA data to ABS and other routine public data sets and making integrated data available to approved external researchers.
The CRE-DH strongly believe that implementation of these recommendations would significantly improve monitoring, evaluation, transparency, fairness and public accountability of the Scheme and would produce the evidence-base needed to improve the efficiency and impact of the Scheme and related mainstream services used by people with disability.

Yours sincerely

Professor Anne Kavanagh on behalf of NHMRC Centre of Research Excellence in Disability and Health
Appendix A  Chief and Associate Investigators, Centre of Research Excellence in Disability and Health (CRE-DH)

Chief Investigators

Professor Anne Kavanagh, University of Melbourne
Professor Gwynnyth Llewellyn, University of Sydney
Professor Eric Emerson, University of Sydney and Lancaster University
A/Professor Dennis Petrie, Monash University
A/Professor Helen Dickinson, UNSW
Dr Hannah Badland, RMIT
Dr Gemma Carey, UNSW
Professor Peter Butterworth, University of Melbourne
Professor Stewart Einfeld, University of Sydney
Professor Roger Stancliffe, University of Sydney