

Lifestart welcomes the opportunity to provide further information and feedback on the Productivity Commission's National Disability Insurance Scheme (NDIS) Costs Position Paper, specifically feedback in relation to List D, Early Childhood Partners, perceived and potential conflict of interest issues, workforce issues, supports for children 7 and over; and investment in Information, Linkages and Capacity Building (ILC).

List D

The addition of List D for children under the age of 7 requires no further assessment to meet the access requirements of the NDIS. Many conditions on this list are also diagnosed conditions on List A. A person with a diagnosis that is identified on List A does not require any further assessment as the conditions identified on this list result in a participant having a permanent disability and substantial functional impairment that generally requires lifelong care and support. List A provides guidance to decision makers about disabilities and conditions where participants will require support because of the significant impact that they have on an individual's functioning.

Some of the same conditions listed feature on both List A and List D. This creates potential confusion and possible additional administrative burden both for families and for delegates of the NDIS. For example, conditions such as Angelman syndrome, Cri du Chat syndrome, Retts syndrome and Cerebral Palsy currently appear on both lists. Children with diagnoses such as these should be assessed under section 24 (disability), not section 25, Early Intervention, requirements of the NDIS Act, as these children meet the disability requirements of the Act. Therefore there is no need for further assessment.

List D may serve as a useful guide to identify participants who meet the early intervention (section 25) requirements of the NDIS Act but should not be required if Early Childhood Partners commissioned by the NDIA have well credentialed experienced staff that are able to undertake appropriate assessments and make recommendations as to children who meet the developmental delay early intervention access requirements of the NDIS Act. That is, Early Childhood Partners need to have clinical staff that are able to undertake functional screening and assessments to determine whether a child meets the developmental delay criteria and would benefit from an individualised reasonable and necessary support plan. Access information to the NDIA needs to be comprehensive including the child's level of functioning compared to normative data.

Early Childhood Partners

The success of the Early Childhood Early Intervention (ECEI) approach relies heavily on the expertise of Early Childhood Partners delivering the supports and services to children with developmental delay or disability and their families. Early Childhood

Partners need to be able to undertake specialised front end service delivery and provision of short term early childhood intervention (ECI) support services for children who do not require an NDIS individualised reasonable and necessary support plan. To undertake this support Early Childhood Partners need experienced qualified staff that can undertake clinical assessments and make recommendations about the appropriate supports required. The use of inexperienced non-specialist staff in generalist services, even with some early childhood training or early childhood intervention experience is risky without appropriate clinical governance that provides appropriate staff supervision, guidance and professional development in contemporary early childhood intervention best practice.

Conflict of interest, workforce issues and thin markets

There is in some quarters, including the NDIA, a concern that there is a perceived conflict of interest arising when an NDIS registered Early Childhood Intervention provider also provides the ECEI approach in the same region or as an organisation. The tension of providing high quality ECEI support services and managing perceived conflict of interest remains an issue of concern. Current workforce supply issues will almost certainly require partners delivering the ECEI approach to also be providers of support services.

A number of thin markets have been identified in the Issues Paper (Draft Finding 6.1) in considering a market based model for disability supports and the Paper acknowledges that these will persist for some time. These markets include participants who:

- live in outer regional, remote and very remote areas
- have with complex, specialised or high intensity needs, or very challenging behaviours
- who have an acute and immediate need (crisis care and accommodation).
- are Aboriginal and Torres Strait Islander Australians
- culturally and linguistically diverse backgrounds.

Using the arguments around thin markets as the only reason for allowing Early Childhood Partners to also provide early childhood intervention supports through purchasing under NDIS is a very narrow and short sighted one. The Issues Paper notes that in *the absence of effective government intervention, such market failure is likely to result in greater shortages, less competition and poorer participant outcomes.* p 58.

The impact on the ECI workforce at a macro level, if the NDIA pursues the strategy of only allowing the ECEI approach to be delivered by generalist services, apart from in thin markets could result in:

- A dilution of support services with the expertise and structures in place to achieve the outcomes intended in the ECEI approach.
- Reduction of available and experienced early childhood intervention providers if a number choose to do only Early Childhood Partner supports.

- General reduction in the early childhood intervention workforce if generalist services recruit a large number of current early childhood intervention workforce members to work as Early Childhood Partners.

A preferred approach is for the NDIA to put in place mitigation strategies to manage perceived and real conflict of interest issues. These may include and are not limited to organisations managing separate service delivery teams such as Early Childhood Partners and NDIS service delivery teams, reporting on number of children providing NDIS support plans and number of children supported by other NDIS early childhood intervention support services.

The current ECEI approach delivered through the Nepean Blue Mountains has demonstrated an excellent return on investment by the NDIS supporting children with developmental delay and disability appropriately. The approach has supported numerous children to link successfully into mainstream support services such as early childhood and preschool services.

Numerous issues have emerged during transition from state delivered support services to the NDIS. However, these issues should not be confused or rolled into the evaluation of the effectiveness of the ECEI approach.

Supports for children in the school age years

Lifestart is pleased to note that the Productivity Commission Position Paper has acknowledged that there is a need for more to be done in supporting children and young people aged 7 and over in the school age years. Given that 44% of current participants are in the 7-14 age range, it is imperative that there is scope within the NDIS to ensure that adequate funding is made available to support action research and implementation of some innovative approaches.

There are many learnings from the rollout of the ECEI approach that can be applied in the school age years space in terms of inclusive practice. The School Age Years (SAY) Inclusion Support Program, funded by the NSW Government as an innovative pilot, is an initiative developed by Lifestart to support the inclusion of children and young people with disability aged 6–18 years during their school years. It has been put forward by the NSW Department of Family and Community Services, *Strengthening Supports for Children and Families 9-18 years* as a way of building capacity of non-government organisations and mainstream services.

The program builds the skills of children and young people and their families to make decisions about their interests and goals, including the activities they want to be involved in, and supports them to participate in mainstream settings and environments. The supports target key life stages and events, including transition to primary school, high school and life after school.

The program has been implemented throughout the regions in which Lifestart operates, and involves supports such as:

- training and coaching to empower families to manage their own planning and packages of support
- positive behaviour support, including resources, training and support for key partners in inclusive services

- resourcing children and young people and their families and school environments to engage in positive and successful inclusive practice
- support for universal and community services that are inclusive of children and young people with disability in mainstream social and recreation activities
- working with young people in Years 9 to 12 to prepare them for life after school
- supporting positive relationships for young people so they can develop safe, positive and appropriate relationships with their peers and friends
- support for siblings and other key family members

The SAY pilot has demonstrated that there are opportunities within the Information, Linkages and Capacity Building (ILC) to build capacity within individual participants, families/carers as well as mainstream services and settings and the wider community. Lifestart's experience as an Early Links auspice within NSW and with the broader Ability Links approach demonstrates the value of investment in the ILC space, particularly during a period of intense transformational change under the NDIS transition to full implementation.

Information, Linkages and Capacity Building

The Draft Finding 5.1 of the Position Paper notes it is a false economy to have too few resources for information linkages and capacity building, particularly during the transition period when it is critical to have structures in place to ensure people with disability (both inside and outside the national disability insurance scheme) are adequately connected with appropriate services.

The Position Paper (the Paper) overview identifies the Information Linkages and Capacity building (ILC) as a key component of the NDIS and notes its importance in linking people with disability, their families and carers with appropriate community and mainstream supports (box 8). The Paper notes the contribution of ILC to long term sustainability of the Scheme through the expectation that it will *reduce reliance on NDIS funded support and costs over time, through reducing reliance on individualised packages and the need for supports within funded packages, as well as making supports more effective at helping people achieve their goals.* p31.

Lifestart's existing ECEI and Early Linkers experience clearly demonstrates that supports provided by specialist staff delivers these outcomes for children, their families and the NDIS. These programs have demonstrated a good return in investment.