

Further comments by Better Caring in relation to the Productivity Commission's position paper into National Disability Insurance Scheme (NDIS) costs

***Better Caring is a peer-to-peer eMarketPlace where people with a disability (and those who are ageing) can find and engage independent care and support workers***

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[www.bettercaring.com.au](http://www.bettercaring.com.au)

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Better Caring refers to its early April submission to this Inquiry.

The Productivity Commission's position paper correctly highlights that the speed of rollout has compromised the quality of participant plans, but it fails to adequately recognise that the speed of the roll out and inherent biases in the roll out process, has also led to only a very small percentage of participants Self-Managing ("SM"), partially Self Managing or Plan-Managing ("PM")

Our direct experience suggests that a large number of participants who have the capacity and desire to SM or PM, have end up Agency Managed ("AM") which leads them down the path of traditional service provision.

Under its insurance model, the NDIS aims to empower people with a disability individualised funding and consumer choice and control over their supports to (1) enable better individual life outcomes and (2) cause the market to respond with more innovative, diverse, higher quality and better value services. To achieve these goals, we believe it is paramount that conditions are established such that potential early adopters are encouraged to consider (in some cases we know of, they have been actively been discouraged) or at the very least have SM and PM (and hybrids of these) is accurately explained. Conditions that currently exist which inhibit take up of SM and PM need to urgently be removed. We firmly believe that a strong early cohort of participants Self-Managing and Plan-Managing is critical to the sustainability of the scheme. There are a number of simple clear steps that can be taken to support this outcome. It would be a missed opportunity for the Commission not to make recommendations in this area. We encourage the Commission to re-read our earlier submission.

We would like to particularly make further comment on the section on page 41 and 42 of the Overview entitled "**Participants need help to make the most out of the NDIS**".

We agree that many participants will be ready or predisposed to manage and work with the NDIS to implement their plans. Many others however could be ready, with the support of various (independent) intermediaries to help build their capacity to effectively manage plans, to SM and PM. AM participants will hopefully over time build their capacity take more control by SM and PM.

The type of intermediary support needed will vary by individual and vary over time for each individual, reflecting their changing circumstances and evolving life goals. The need for intermediary supports will come and go. Therefore funding for intermediary support need not be so tightly classified and funded, but rather the participant could have funding for intermediary support and choose at any given time if and what type of support is most needed.

What is critical is that intermediary supports are independent of service provision so that the advice is impartial and person centred. This is akin to financial services advice, where the concept of conflicts of interest in advice is well established and understood. Generally, you do not want your advice from someone who is conflicted by having a product to sell you. It is critically important to participant outcomes and scheme sustainability that

participants can access a thriving eco system of independent Coordinators of Support and Plan Managers/Financial Intermediaries. This will ensure participants can access the independent advice they need to navigate the NDIS and exercise true choice and control over their supports. In this context, peer support groups have a role to play. The Commission could further explore this in conversations with Community Disability Alliance Hunter (CDAH) and members of the Self Direction Collaboration Network, and with innovators such as Better Caring.

With regard to seeking feedback on the role of intermediaries, we would welcome a discussion on our peer-to-peer online marketplace (or eMarketPlace) innovation that empowers participants with choice and control over individual supports, while clearly builds a participants' capacity to SM and PM. NDIS participants can enter Better Caring's safeguarded online market place [www.bettercaring.com.au](http://www.bettercaring.com.au), and easily decide what services to purchase, from whom and at what price, and rate and review their experience. The market place connects participants with independent care and support workers. The Commission should consider speaking with consumers and workers engaging with innovative intermediary models and achieving incredible outcomes. We are in effect a living case study, but interestingly, despite enabling high quality, affordable outcomes for participants, Better Caring model doesn't fit NDIS registration requirements. Yet, it is precisely innovations like ours that will support participant outcomes and drive scheme efficiency. We offer a rare productivity gain where everyone is a winner: consumers, workers, Government and the economy, and yet, our market place model empowering workers and consumers wasn't really contemplated by or facilitated by the NDIS framework.

While we note the Commissions reference on page 42 to the NDIA implementing "its proposed eMarketPlace", we question why the Commission would suggest an eMarketPlace be implemented by the NDIA when the market will deliver such a solution, most likely more effectively and at lower cost. There is little upside for the Government in the NDIA taking on such a challenge. One would also question the concept of **an** eMarketPlace rather than the likelihood that multiple eMarkets will emerge that service particular participants with specific solutions. BetterCaring.com.au is an established and rapidly growing eMarketPlace that is operating today, facilitating direct connections between participants and independent workers. It is a full transactional site that enables choice and control, feedback via ratings and reviews, electronic times sheets, invoicing, payment collection, record keeping, electronic shift notes. In other words, the Better Caring eMarketPlace decreases administrative burden and gives participants a simple viable path to exercise choice and control and build capacity. The Better Caring eMarketPlace operates with core standards for safe-guarding, overlaid with consumer or community regulation via ratings and reviews.

Rather than contemplating that the NDIA build **the** eMarketPlace, the NDIA would be better served by ensuring its' policies and regulations establish the conditions that allow eMarketPlaces to develop, and explicitly consider whether decisions taken might have the unintended consequence of inhibiting eMarketPlace development.

We would welcome an opportunity to discuss this further directly with the Commission.