



Submission to the Productivity Commission
Review of NDIS Costs

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Early Childhood Intervention Australia Victoria/Tasmania Limited

ECIA Victoria/Tasmania Limited (ECIA VIC/TAS) is the peak body for early childhood intervention in Victoria and Tasmania. We represent over 500 professionals and organisations providing specialised support and services for infants and young children with disability and/or developmental delay to promote development, well-being and community participation. Our vision is for young children of all abilities to fully participate in family and community life. We provide information and professional development across the sector.

ECIA VIC/TAS members are early childhood intervention (ECI) professionals working in community organisations, disability services, specialist ECI organisations, children's services agencies and government departments reflecting the diverse ways in which these services are provided to young children and their families. Our members implement a best practice approach to early childhood intervention as outlined below.

Executive summary

ECIA VIC/TAS welcomes the opportunity to provide input to the Productivity Commission's Review of NDIS Costs. This submission will address key NDIS cost issues from the particular perspective of the Early Childhood Intervention sector which is delivering best practice services to children with disability and/or developmental delay in Victoria and Tasmania.

To achieve the best possible outcomes for children aged 0-6 years in the NDIS, a best practice approach to the delivery of early childhood intervention services is essential. Getting this right for children in their first 3 years will produce better long term results. Investing early has significant health, well-being, educational, social, and employment outcomes for children and families in the longer term. This is also likely to lead to a reduction in pressure on the NDIS, reducing longer term expenditure.

ECIA VIC/TAS congratulates the NDIA for their focus on best practice through the NDIS Early Childhood Early Intervention approach and their commitment to achieving the best outcomes for children aged 0-6 years and their families. There is genuine good will across the ECI sector and a real desire to collaborate with NDIA to help make this revolutionary new people-centred approach to care and support work effectively and efficiently. It is in this spirit that ECIA VIC/TAS has identified aspects of the NDIS ECEI approach that require adjustment and streamlining to achieve cost savings and ensure the delivery of best practice for children and their families.

The review provides a timely opportunity to help inform the final design of the full scheme. This submission addresses key issues raised in the Productivity Commission Issues Paper (February 2017). Key recommendations follow.

Recommendations:

Priority Area:	Recommendation:
Ensuring Best Practice ECI delivery for children aged 0-6 years in the NDIS.	Fully fund the delivery of best practice early childhood intervention in the NDIS ECEI. NDIA, LACs and Early Childhood Partners (particularly planners) to undertake training in best practice ECI for children aged 0-6 years. ECIA VIC/TAS has developed best practice ECI modules which can be tailored for delivery to key staff.
Ensuring that NDIS ECEI policy, funding and practice are aligned to deliver best practice.	<p>Realign NDIS ECEI policy, funding and practice to enable the delivery of best practice ECI for children and families. Particular consideration needs to be given to reviewing the unit price for ECI supports including:</p> <ul style="list-style-type: none"> • the key worker/transdisciplinary model • supporting children in their “everyday environments” – including travel costs • access and participation for children and families needing additional support – including interpreters – see recommendation below • supporting families waiting for services • choice and control for families – see recommendation below. <p>Engage ECIA VIC/TAS to:</p> <ul style="list-style-type: none"> • undertake a needs assessment to identify areas in Victoria and Tasmania with no or limited service provision and • provide an outreach support program connecting these areas of need with best practice ECI service providers. <p>Engage ECIA VIC/TAS to run “consumer awareness” forums for families in the NDIS ECEI providing information on best practice ECI to enable them to make more informed choices for their children.</p>
Addressing inequities in the planning process .	NDIA to investigate putting in place an appropriate mechanism to ensure quality, equity and consistency in the planning process.
Improving collaboration and communication between those working to deliver the ECEI approach.	NDIA, LACs, Early Childhood Partners and ECI sector representatives to participate in a <i>Collaborative Partners in NDIS ECEI</i> working group facilitated by ECIA VIC/TAS to improve collaboration and communication between those working to deliver the NDIS ECEI approach.

Introduction

This submission was informed by feedback from a cross section of ECIA VIC/TAS members from metropolitan and regional Victoria including those representing:

- disability specific service providers
- community service organisations incorporating disability services and
- specialist ECI service providers

Feedback was provided via a round table forum, telephone consultations and email.

The submission examines what constitutes best practice delivery of early childhood intervention (ECI) services and the evidence-based research that underpins this approach. It will then look at the NDIS ECEI approach which was based on the best practice model and address some key issues for ECIA VIC/TAS members which were also raised in the *Productivity Commission Issues Paper* (February 2017) particularly:

- Accessing NDIS ECEI
- Delivering best practice ECI
- Planning process
- Market readiness

Early childhood intervention best practice

Early childhood intervention (ECI) is the process of providing specialized support and services for infants and young children with disability and/or developmental delay and their families, in order to promote development, well-being and community participation. (ECIA 2016)

The primary focus of high quality early childhood intervention is to optimise a child's learning and development and their capacity to participate meaningfully in family and community life. To achieve the best possible outcomes for children aged 0-6 years in the NDIS, a best practice approach to the delivery of early childhood intervention services is essential. It is critical that this best practice approach is fully funded.

A large body of evidence demonstrates that getting it right for children in the early years not only improves their quality of life in the short term, but will also produce better long term results for the child and the broader community. Investing early has significant health, well-being, educational, social, and employment outcomes for children and families. This is also likely to effectively ease pressure on the NDIS over time, reducing longer term expenditure.

Australian and international research has established the importance of early experiences and interactions in shaping the way the brain develops. "A strong foundation in the early years increases the probability of positive outcomes and a weak foundation increases the odds of later difficulties."

(National Scientific Council on the Developing Child, 2007, p5.) Getting it right early is just as important for children with disability and/or developmental delay as it is for all children.

Longitudinal research studies in the US (the Perry Preschool project; Chicago, Child and Parent Centers' project and the Abecedarian Project) and in the UK (the EPPE study) demonstrate the benefits to the individual and to the community of investing in the early years of life. Cost efficiencies are achieved by intervening early, reducing the need for more expensive remediation later in life. While these particular studies focused on a broader group of children, it is reasonable to assume that early intervention and prevention strategies for children with disabilities and/or developmental delay, will also reduce the need for more expensive longer term interventions.

Professor Frank Oberklaid (Director of the Centre for Community Child Health at the Royal Children's Hospital Melbourne) considers "it has become apparent that to improve outcomes in adult life, there needs to be a focus on these critical early years. This has profound implications for public policy, as it indicates that investing in early childhood is an important and sound investment for the future." (Oberklaid 2007).

ECIA VIC/TAS believes that the strongest driver for investment in early childhood intervention though is the ethical and moral imperative to do so. "Early intervention represents an opportunity – and...an obligation – for society to support those who are most vulnerable" (KPMG, 2011, p. 24).

Many children and families using early childhood intervention services have multiple needs, requiring the expertise of professionals from multiple disciplines. For such families, best practice in ECI involves the delivery of services through a single professional or key worker, with the collaborative support of an appropriately knowledgeable professional team.

Services are provided in the child's natural environment – at home, in daily routines, in the community, in early childhood education and care settings. Using best practice principles, ECI professionals build the capacity of the child, family, professionals, including early childhood educators and others in the community to facilitate inclusion in daily life and maximise the child's learning and development. ECI professionals work respectfully with families from diverse backgrounds to achieve the outcomes they want for their child and family.

This approach to best practice ECI is based on extensive consultation within the ECI sector and on Australian and International research literature and is detailed in the *National Guidelines for Best Practice in Early Childhood Intervention* (ECIA 2016). In Victoria, these principles have been well understood and supported by the State Government through the Department of Education and Training. It is essential that this important work in best practice ECI is maintained into the future.

Recommendation:

Fully fund the delivery of best practice early childhood intervention in the NDIS ECEI.

NDIS ECEI approach

The NDIS Early Childhood Early Intervention (ECEI) approach was put in place as one response “to cost pressures emerging from experience with the NDIS...It aims to ensure that only those children who meet the eligibility criteria of the NDIS become participants of the scheme.” (Productivity Commission, February 2017, p. 12).

The ECEI approach “recognises that timely access to best-practice early childhood intervention is vital for children with developmental delay or disability to ensure that they achieve the best possible outcomes throughout their life” (NDIS ECEI). This approach is to be achieved by working in collaboration with sector experts, using an evidence based family-centred approach and utilising “everyday environments” to build the personal and community capacity of children and families. However, this is not yet happening in practice.

Early Childhood Partners are now being appointed as the first point of contact for families entering the NDIS system. It is essential that the Early Childhood Partners have a good knowledge and understanding of the needs of local children and families and of best practice ECI. It will be their role to develop a plan and budget that reflects the individual needs of each child and their family, a task that is currently being undertaken by NDIA.

At this stage, the slower than expected roll-out of Early Childhood Partners is having an impact on access for families, has created confusion and lead to some key problems for the delivery of the NDIS ECEI approach.

Accessing NDIS ECEI

It is clear from the numbers of children and families entering the system, that the need in this age group was initially underestimated. It is vitally important however that the fiscal response to this is neither to exclude this age group from the NDIS nor to further restrict eligibility criteria to reduce numbers and costs. Instead it is essential to focus on the longer term benefits that accrue from investment in early intervention.

Where the best practice early childhood intervention approach is working properly, it will lead to cost savings over time as outlined in the section on best practice above. Most importantly, identifying issues early and putting in place the most appropriate strategies for each individual child will mean better educational, social, health, well-being and employment outcomes for them and their families in the longer term.

Delivering best practice ECI

ECIA VIC/TAS members have identified a disconnect between NDIS ECEI policy, funding and practice which impedes the ability of the ECI sector to deliver best practice. Some of the key issues are outlined in this section.

Key Worker/Transdisciplinary model

NDIS funding

While the key worker/transdisciplinary model is regarded as best practice early intervention for 0-6 year olds ECIA VIC/TAS members report that this is generally not reflected in the way plans are developed and funded. In practice ECI service providers are seeing few plans that incorporate funding for a key worker or for “transdisciplinary early childhood intervention” at a price of \$175.57 (NDIS Price Guide, p. 49). Providers are uncertain why some children are not being funded for transdisciplinary early childhood intervention when other children with similar needs are able to access these supports.

Members report limited scope to provide a best practice key worker/transdisciplinary approach at this price. Based on feedback from ECI providers, it is apparent, that \$175.57 does not incorporate the indirect work that is required to deliver the transdisciplinary model. It is creating structural disadvantage as existing ECI providers are compromised in their ability to “compete” with sole traders who can deliver a higher volume of support through a ‘line therapy’ model.

For most ECI providers, every hour of ‘direct’ therapeutic support requires at least thirty minutes of indirect support and often up to an hour for children with more complex needs. This means operating at a price of \$175.57 is unsustainable. In a service environment where viability is challenged, there is a market risk that choice will be limited as organisations merge, fold or are acquired. This dynamic is particularly acute in regional Victoria and Tasmania, where there are already limited support options.

ECIA VIC/TAS recommends that further work be undertaken to assess the price for transdisciplinary supports to ensure that when the market is deregulated:

- there are enough providers to bring down cost pressures through competition and
- the goal of ‘choice and control’ is realised.

Planning

There is a lack of knowledge amongst many planners about the importance of consistently incorporating adequate funding for key workers and “transdisciplinary early childhood intervention” into plans for children aged 0-6 years. Many families are also unaware of the benefits of using the key worker model and are not receiving this information. One ECIA VIC/TAS member reported that only around 10% of the plans seen within their organisation require a key worker even though this is considered best practice.

Given that planners are recruited from a range of backgrounds it is essential that they are provided with appropriate training in best practice for children aged 0-6 years and that there are mechanisms in place to ensure consistency and accountability in the planning process.

It is hoped that when the Early Childhood Partners are fully rolled out, this situation will improve. However, in order to ensure that NDIA staff, LACs and Early Childhood partners (particularly planners), have a sound and consistent understanding of best practice for children aged 0-6 years, ECIA VIC/TAS recommends they are provided with appropriate training. ECIA VIC/TAS has developed best practice ECI modules which can be tailored for delivery to key staff.

Everyday environments and travel costs

ECI best practice means supporting children in their own “everyday environments” whether this be at home, in early learning settings or elsewhere in the community. The travel costs involved are particularly problematic for rural, regional and metropolitan services. Plans and allocated budgets often don’t support providers to work with children in this way. There is less opportunity to support children in early year’s services for example and many are attending centre-based therapy instead. Working on-site with children to ensure they are fully included in early learning settings can have a significant impact on their longer term social, cognitive, physical and emotional development and their ability to transition to school.

ECIA VIC/TAS members have observed that planners frequently direct families to centre-based therapy and this falls short of best practice for children aged 0-6 years. Some members report that in the past 12 months they have seen a tripling of the numbers attending centre-based therapy which removes from their everyday activities and natural environments where capacity building can best occur.

Providers have been actively looking for ways to achieve cost savings in relation to travel but find it extremely difficult to cover costs while meeting best practice standards. This is even more of a problem with cancellations and no-shows. It is important that planners view travel as a “reasonable and necessary cost” when working with children aged 0-6 years and build this into the plan and budget.

Children and families requiring additional support and advocacy

ECIA members report lower numbers of children and families from some backgrounds accessing the NDIS system. In particular, there are fewer families from culturally and linguistically diverse (CALD) backgrounds, fewer Aboriginal and Torres Strait Islander families and fewer vulnerable children and families. Providers largely attribute this to the many hours of extra support required in pre-planning to facilitate access for these families to the scheme. Currently 12 hours are funded to assist with access to the system and while this might have originally been perceived as adequate, in practice it can take many hours of additional work and follow-up just to make initial contact with some of the more vulnerable families.

Providers also struggle with the provision of interpreting services for CALD families. While 8 hours of interpreting is available to enable plan development, there is currently no specific allocation to activate the plan. Providers report very few families have interpreting costs built in to their plan as a “reasonable and necessary” cost. Interpreting services will be more of a need for communities in some geographic locations than others indicating a need for pricing flexibility.

Extra funding was initially flagged for work with CALD clients in NDIS, however has not been forthcoming. Consequently, ECI providers have been taking on the additional work involved to support CALD and vulnerable families, placing additional strain on their budgets.

ECIA VIC/TAS believes that the solution to working with “thin markets” as they are described in the Productivity Commission’s *Issues Paper*, is to adequately fund providers to deliver the level of support required. We would not want to see the NDIS stepping into “thin markets” as a service provider as this is not the role of an insurance scheme. Providers have a good understanding of the needs of local communities and will be better able to respond to these needs if adequately resourced to do so.

It is recommended that ECIA VIC/TAS be engaged to undertake a needs assessment to identify areas in Victoria and Tasmania with no or limited service provision and provide an outreach support program connecting these areas of need with best practice ECI service providers.

Gap between referral and service provision

There is a great deal of stress involved for a family when their child is diagnosed with disability and/or developmental delay. This stress can be compounded by the wait time between referral and service provision, adversely affecting the health, mental health and well-being of the whole family. Providing information and supports early can make a big difference to the ability of the family to cope in the longer term. At present there is no funding to work with families during this waiting period to support a “soft entry” into early childhood intervention services. It is essential that this is addressed with the roll-out of the Early Childhood Partners.

Choice and control for families

The NDIS advocates “choice and control” for participants over the supports they receive under the scheme. However, there are some factors within the current NDIS ECEI approach which need to be addressed to ensure families are in control of the system rather than controlled by it including:

- Families need to be made aware of the benefits of using the collaborative key worker model but are not currently receiving this information. This reduces the ability to make informed decisions about what is best for their child.
- Separating the planning process from service provision does not always lead to the best outcomes for families. While this was put in place to overcome a perceived “conflict of interest” it can effectively reduce choices for families and increase the incidence of haphazard plans that require review.

It is recommended that ECIA VIC/TAS run “consumer awareness” forums for families in the NDIS ECEI providing information on best practice ECI to enable them to make more informed choices for their children.

Recommendations:

- NDIA, LACs and Early Childhood Partners (particularly planners) to undertake training in best practice ECI for children aged 0-6 years. ECIA VIC/TAS has developed best practice ECI modules which can be tailored for delivery to key staff.
- Realign NDIS ECEI policy, funding and practice to ensure the delivery of best practice ECI for children and families. Particular consideration needs to be given to reviewing the unit price for ECI supports including:
 - the key worker/transdisciplinary model,
 - supporting children in their “everyday environments” – including travel costs
 - access and participation for children and families needing additional support – including interpreter support
 - supporting families who are waiting for services
 - choice and control for families.
- Engage ECIA VIC/TAS to:
 - undertake a needs assessment to identify areas in Victoria and Tasmania with no or limited service provision and
 - provide an outreach support program connecting these areas of need with best practice ECI service providers.
- Engage ECIA VIC/TAS to run “consumer awareness” forums for families in the NDIS ECEI providing information on best practice ECI to enable them to make more informed choices for their children.

Planning process

Along with the need to ensure planners are trained in best practice ECI delivery (refer to the recommendation above), there are also other aspects of the planning process that require attention.

Where Early Childhood Partners are not operational NDIA planners have been taking on this work, in many cases without a thorough understanding of the ECEI approach. This has led to the development of some haphazard and inappropriate plans for children aged 0-6, requiring review and redevelopment, wasting both time and money and frustrating clients and service providers. The review process can be particularly time consuming and expensive.

ECIA VIC/TAS believes that many of the current issues in the planning process outlined below could be overcome with improved collaboration and communication between all parties working to deliver the NDIS ECEI approach.

Diagnostic assessment tools

Of particular concern to ECIA VIC/TAS are reports that NDIS planners are using diagnostic assessment tools such as the PEDI-CAT as planning aids. Planners have not been trained to use these tools and they are inappropriate for use with children aged 0-6 years. Linking funding to the outcome of these assessments has meant that children with disability and/or developmental delay who should be eligible

for support are being removed from waiting lists with no funding. This needs to be addressed in any best practice training provided for planners working with young children.

Funding/support inequities

There were many reports from ECIA VIC/TAS members about significant inequities in the plans and budgets prepared for children. There is a perception that parents who are more articulate and better able to advocate on their child's behalf will receive better funding and support outcomes than parents who are less articulate and less able to advocate on their child's behalf.

One ECI provider related the experience of 2 families meeting with the same planner on two consecutive days. The first family was from a high SES background with a single child with higher level functioning. The second family was from a low SES background living in housing commission accommodation with two children with higher level needs. The first family received more support/funding than the second family even though the second family had two children with higher needs. Many similar examples to this one were provided by ECIA VIC/TAS members.

One member reported that a family was on a cruise overseas funded by NDIS. It is difficult to imagine a circumstance in which this could be seen as "reasonable and necessary" support – and it contributes to cost blowouts in the NDIS system.

Families also often report items on their plan that they didn't ask for – supports are often bundled up and families are unaware of this until later. This further contributes to cost inefficiencies.

There needs to be some mechanism in place to deal with inequities in the system. In the past, ECI providers were able to support families attending planning meetings but this is no longer the case although it is one mechanism that could help to overcome inequities.

ECIA VIC/TAS recommends that NDIA investigate putting in place an appropriate mechanism to ensure quality, consistency and equity in plans.

Support coordination funding

There has been a lack of clarity and guidance around the function, allocation and use of support coordination funding. This has led to an unnecessary waste of dollars that could have been used elsewhere. Providers also report a wide variation in the quality of the support provided. ECIA VIC/TAS believes that this situation could be remedied with better guidance and communication between all parties delivering the NDIS ECEI approach.

Collaboration and communication

The ECEI approach is a relatively new and specialised response for children aged 0 to 6 within the NDIS. Efficient and effective delivery of this approach relies on good channels of communication and collaboration between all those involved – NDIA, LACs, Early Childhood Partners and the ECI sector. At this early stage ECIA VIC/TAS members report some difficulties in this area.

In particular, the inadequate flow of information and data to providers about the numbers of children in the scheme (particularly those on waiting lists) is making planning difficult. Emails and phone calls to NDIS and the LACs for information are not always answered in a timely manner and this is frustrating for

both clients and providers and adds additional cost in follow-up. One ECIA VIC/TAS member spoke of being unable to register for NDIS because they have been unable to make contact – the 1800 number makes it particularly difficult to contact the appropriate person/section.

The ECI sector is keen to work collaboratively with all partners to deliver a best practice NDIS ECEI approach. At present there are no mechanisms in place for all parties to engage, share information, resources and expertise. Continuing to operate in silos will mean that children and families miss out on best practice and the best possible outcomes for them. There are also real cost savings to be made through improved communication, collaboration and networking including a reduction in the costs required to review plans.

To improve communication and collaboration ECIA VIC/TAS recommends establishing a working group with members from all organisations working to deliver the ECEI approach including NDIA, LACs, Early Childhood Partners and the ECI sector.

Recommendations:

- NDIA to investigate putting in place an appropriate mechanism to ensure quality, equity and consistency in the planning process.
- NDIA, LACs, Early Childhood Partners and ECI sector representatives to participate in a *Collaborative Partners in NDIS ECEI* working group facilitated by ECIA VIC/TAS to improve collaboration and communication between those working to deliver the NDIS ECEI approach.

Market readiness

ECI workforce

ECIA VIC/TAS members report that the ECI professionals working within their services are doing so because they are committed to the delivery of best practice for children and families. Team members are anxious about working in a diminished model and ECI services are worried about an exodus of staff. It is essential that current issues with NDIS ECEI policy, funding and practice be addressed as a matter of urgency to retain the existing highly skilled, professional ECI workforce and attract new committed staff.

For the future ECI workforce there are also issues around training and recruitment that will need to be addressed including the need to:

- work with universities to progress teaching at the undergraduate level to enable graduates to deliver best practice
- provide placements for students when many small services are unable to do so
- undertake and fund Professional Development training

Concern has also been expressed that funding constraints might lead to the employment of graduates with lower level qualifications and/or less experience. Early childhood teachers in particular may miss out as their qualifications require higher level remuneration.

Conclusion: sustainability versus benefits for children and families

Investing in the delivery of best practice early childhood intervention services will ensure the best possible outcomes for children with disability and/or developmental delay and their families.

As this submission outlines there are some significant areas in which cost savings can be made within the current NCIS ECEI approach by streamlining processes and reducing wastage. Investing early also has significant health, well-being, educational, social, and employment outcomes for children and families and this in turn will ease on the NDIS over time.

While the economic sustainability of the NDIS scheme is an important consideration for government there are other more significant considerations, such as the rights of the child (and the family) to be able to maximise their full potential. Delivering best practice early childhood intervention services will enable them to achieve this.

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