

24 August 2018

Productivity Commission
National Disability Agreement Review

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Submission lodged online:

www.pc.gov.au/inquiries/current/disability-agreement/make-submission#lodge

To whom it may concern,

RE: National Disability Agreement Review: Productivity Commission Issues Paper, July 2018

The Australian Psychological Society (APS) is grateful for the opportunity to respond to the review of the *National Disability Agreement Review (NDA)*. The APS is the largest professional organisation for psychology in Australia representing over 24,000 members of whom a significant portion deliver evidence-based psychological services to consumers, including consumers in the disability sector and participants of the National Disability Insurance Scheme (NDIS). In making this submission, the APS sought feedback from members who are or have provided services to NDIS participants.

The APS supports the need to ensure the appropriate high quality, safe services are accessible for all people with a disability. Our members report that as the NDIS pilots have progressed to full rollout, there are systematic implementation issues that are compromising the quality of care to consumers and creating a service gap in the community for people with disabilities that do not reach the threshold for inclusion in the NDIS, particularly for people who have a psychosocial disability. To improve the capability of all Australians with a disability, it is imperative that sufficient effective, efficient and accessible services are provided both within and outside of the NDIS.

The APS has two major concerns that could be addressed in the NDA:

1. Inconsistent service allocation

Feedback from APS members indicates that there is an inconsistent approach applied by the NDIS in relation to the intersection of NDIS and mainstream health services, depending upon the planner and the jurisdiction. For example, an NDIS participant whose functional capacity is affected by mental health issues related to their disability may be provided access to psychological services *either* within the NDIS *or* via mainstream health services, depending on who the NDIS planner was and in which jurisdiction they were operating. This inconsistent approach to service provision is negatively impacting on people whose disability issues are not effectively managed within the mainstream health system. There is a need to have a clear and consistent approach to the intersection of mainstream health and NDIS services to ensure that NDIS participants do not experience differential treatment in a system essentially designed to reduce stigma and inequities.

The APS recommends that the NDA incorporate appropriate measures at a federal level to ensure a consistent approach is utilised by the NDIS in relation to the intersection of NDIS and mainstream health services.

2. Emergence of new gaps in services for people with disabilities

As discussed in the issues paper, the fundamental purpose of the NDA is to be a key accountability mechanism for achieving outcomes in the disability sector across Australia. This includes all Australians with a disability, not just those who meet criteria for inclusion in the NDIS. The Productivity Commission has previously argued that “*the NDIS would generate longer-term savings through the benefits of early intervention, increased economic participation of people with disability and their carers, and the likelihood of increased productivity in the disability system*”¹. The NDIS provides specialist services to Australians with a permanent and significant disability and improved linkages to community supports for those who do not meet the inclusion criteria for services under the NDIS.² However, as the NDIS rolls out, ‘improved linkages’ is becoming an unachievable goal due to a significant reduction in the availability of community-based support services, particularly for people with a psychosocial disability.

The APS has serious concerns about the emerging gap in services for Australians with a disability, particularly a psychosocial disability, who do not meet the criteria for entry to the NDIS. While it is the responsibility of the states and territories to ensure they provide adequate community-based services for people who do not qualify for the NDIS, our members report that it is difficult for these people to find appropriate support. For example, people with a psychosocial disability who are not eligible for a package are expected to be able to seek assistance through the Information, Linkages and Capacity building program (ILC) that provides information and referrals to community and information services. However, state-funded community-based services are limited and many are being discontinued; for example, our understanding is that all such services in Victoria are closing. With minimal services at hand, particularly for people with a psychosocial disability, it is unclear where these community members will access support.

The Government has already acknowledged that “*one third of the 690,000 Australians with severe mental illness have chronic, persisting illness and most have a need for some form of social support, ranging from low intensity or group-based activities delivered through mainstream social services to extensive and individualised disability support*”.³ Approximately thirty-percent of these Australians are likely to need individualised community-based support and a large majority of these Australians will now be unable to access any supports, effectively creating a large service gap. Additionally, there is

¹ Australian Government Department of Social Services. *NDIS Quality and Safeguarding Framework*, 9 December 2016: <https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-quality-and-safeguarding-framework-0>.

² Australian Government, Productivity Commission. *Disability Care and Support, Productivity Commission Inquiry Report, Overview and Recommendations*, No. 54 31 July 2011: <http://www.pc.gov.au/inquiries/completed/disability-support/report>.

³ Australian Government (2015). *Australian Government Response to Contributing Lives, Thriving Communities – Review of Mental Health Programmes and Services*: [http://www.health.gov.au/internet/main/publishing.nsf/Content/0DBEF2D78F7CB9E7CA257F07001ACC6D/\\$File/response.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/0DBEF2D78F7CB9E7CA257F07001ACC6D/$File/response.pdf).

increasing evidence that this gap will not be filled through state-funded services without a NDA in place that protects the interests of all Australians with a disability, particularly a psychosocial disability, and not just those receiving services under the NDIS.

The APS recommends that funding for community-based services is included in the NDA and benchmarked to ensure that members of the community with a disability, particularly a psychosocial disability, who do not meet criteria for inclusion in the NDIS, are able to access appropriate services.

Thank you for the opportunity to respond to the *National Disability Agreement Review*. The APS would be happy to provide further comment about these issues. I can be contacted

Kind regards

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