

Productivity Commission

Inquiry Disability Care & Support

Who should be in the new scheme and how could they be practically and reliably identified? People whose condition adversely affects their ability to earn a living and or participate in the community.

Which groups are most in need of additional support and help? Intellectual and physical disability. The system need to be widened to enable people with less severe intellectual and physical disabilities. Those people whose employability is effected by disability.

What could be done about reducing unfairness, so that people with similar levels of need get similar levels of support? An independent body to appeal to if they are not happy with outcome.

How could people with disabilities or their carers have more power to make their own decisions (and how could they appeal against decisions by others that they think are wrong)? People could have more power by having more knowledge about what services are available. They could appeal by having independent assistance in preparing appeal against a decision and access to a qualified advocate.

How should the amount of financial support and service entitlements of people be decided (and by whom)? By determining what the cost of the supports they need to achieve financial and social inclusion.

What kinds of services particularly need to be increased or created? Services to achieve financial independence and social inclusion. For instance in the limbs scheme rather than assessing the person for the least cost alternative as is the current case e.g split hook for arm amputations. The most effective support available may include a higher cost limb such as the ilimb that enable in the long term allows participation in the employment market and ultimately financial independence. The current practice of prescribing antique technology in ineffective.

How could the ways in which services are delivered — including their coordination, costs, timeliness and innovation — be improved? The method of delivery could be devised in consultation with the person with a disability so that higher cost alternatives could be supplemented by individual earnings once employment is gained.

Are there ways of intervening early to get improved outcomes over people's lifetimes? How would this be done? - Outcomes throughout the person's lifetime

could be improved by consulting with people who have life experience with the disability.

How could a new scheme encourage the full participation by people with disability and their carers in the community and work? A new scheme that empowered people with disabilities to participate in the community through personal development and job readiness training.

How can a new system ensure that any good aspects of current approaches are preserved? - By focusing on the wants and needs of the consumer any good aspects of the current approach will be preserved.

What should be done in rural and remote areas where it is harder to get services? Applying a similar approach finding out what the client wants. Use a business approach supply what is demanded rather than a predetermined set of services.

How could a new system get rid of wasteful paper burdens, overlapping assessments (the 'run around') and duplication in the system? Adopt a business type model. Where only the services that are demanded are supplied. A flexible responsive type of service. Where the supports supplied are determined by the client. The current employment agency systems are just a disaster. The coordinator for assisting people with disabilities. The people with disabilities need to be running these systems. Rather than getting pushed around from pillar to post by career public servants.

How should a new scheme be financed? - Through existing taxes and the increased earning capacity of people with disabilities. By supplying them with effective support to participate in the workforce or develop business opportunities.

How can it be ensured that there is enough money to deliver the services that are needed and provide greater certainty about adequate care in the future? - Using a business approach will ensure supports that are effective will be continued. For example I submitted to Bill shorten a proposal where the cost of the ilimb be met by the government through a scheme similar to PELS or HECS. Once the client's income reached a predetermined level they would pay back the loan for the ilimb.

What are your views about the 'nitty gritty' aspects of a scheme that will make it work practically? For example in Qld the office of women is run by the office of women. The scheme could be administered by the people with disabilities or people with significant life experience. I believe it would be better to have a national scheme rather than a scheme administered by eight different governments. The current disability services in QLD are for people with severe disability such as quadriplegia. The overwhelming majority of people with a disability have a milder disability that allows them function from day to day, but not integrate into the workforce or community.

How long would be needed to start a new scheme, and what should happen in the interim? In the interim information needs to be collected on an individual basis of the wants and needs of people with a disability. Open up current registration of need to all people with disabilities. This could be done through the internet quickly and at low cost. It is not about just going through the list of people on the disability pension and asking them. Because there are many people who fit the profile that are not on the disability support pension for financial or other reasons.

What other ideas do you have? Services need to be provided on an individual basis using individual assessment and not based on the lowest cost option. This is the current practice in the Queensland Amputee limb service.