

**DISABILITY CARE AND SUPPORT
PRODUCTIVITY COMMISSION DRAFT REPORT
FEBRUARY 2011**

SUBMISSION BY THE CITY OF YARRA

BACKGROUND

Yarra City Council has adopted a human rights approach to disability access and inclusion and promotes this within the Yarra community.

Council carries out a range of roles aimed at ensuring that its community is inclusive of, and accessible to all community members. These roles are:

- Service provision through Council's Home and Community Care (HACC) program - available for people of all ages with moderate, severe or profound levels of disability;
- Service coordination and service planning;
- Integrated local area planning;
- Access and Inclusion planning through the development and implementation of Council's Disability Action Plan;
- Support for participation by residents in participatory democracy by the provision of advice and advocacy through Council's Disability Advisory Committee;
- Community Building activities through the MetroAccess program in partnership with the State Government; and;
- Policy advocacy and civic leadership.

In the preparation of this response Council has sought the advice of its Disability Advisory Committee. It has also been informed by its knowledge of local service provision and service planning for residents with disabilities.

The city of Yarra is an inner-city municipality of Melbourne with a culturally and socio-economically diverse population of 79,500 people. It has the largest number of public housing units of any Victorian municipality. Through its close relationship with public housing tenants, Council is aware of the cumulative effects of long term poverty. People with disabilities who are not able to enter the paid workforce and who rely on the disability support pension on the long term are amongst the poorest residents. This can have profound effects not only on the lack of financial and educational assets but on other resources needed to maintain family and social relationships and community participation. Council has invested significant resources in the development of community infrastructure and responsive services. Local knowledge of the needs of residents is an important ingredient of this submission.

GENERAL COMMENTS

Council supports the thrust of the Report in reforming care and support for people with disabilities by designing a national disability service system. Council endorses the

principles of the reforms to achieve greater equity, efficiency, cost effectiveness and accountability.

Council supports the proposal for the implementation of greater choice and control for people with disabilities over the services they receive through individualised support packages. Council agrees that portability and consistency of service entitlements will benefit people with disabilities.

Council supports the role of the National government in establishing the NDIS as a consolidated, national source of funding for disability support services. Council has some concerns about the National government as service provider and questions how it can 'oversee the system at the local level' through the operations of the National Disability Insurance Agency and its employment of local case managers.

Council supports the recommendation to increase substantially the funding for support and care by doubling the amount available so that: 'Most people currently getting disability services would receive more support under the NDIS' (The Report p 14).

This submission addresses a number of issues of the proposed National Disability Insurance Scheme (NDIS) and the National Injury Insurance Scheme (NIIS). While acknowledging the significant benefits of this reform, Council is concerned that the new system will not diminish the benefits that local residents receive by being part of a locally accountable service system where they have rights to participate in decision making, and where the service delivery system is part of local networks and local resources.

TITLE OF NATIONAL DISABILITY INSURANCE SCHEME

Council endorses the overall purpose of the national scheme which is to address the substantial inadequacies of the existing system, particularly the prevalence of paternalism and the difficulties of service navigation. The NDIS is intended to make the system simpler and easier to use, more equitable and less welfare-based. In this regard the new system will be an 'enabling' system. The term National Disability Insurance Scheme promotes the belief that disability is a misfortune or a risk to be minimised or its effects remedied. The use of the term 'enabling' in the title would promote an alternative framework that the scheme is designed to assist and enable people to achieve their optimum potential.

Recommendation 1: *Council recommends that the title of the scheme be: National Enablement Scheme.*

SCOPE OF THE SCHEME

Members of Council's Disability Advisory Committee expressed concerns that the NDIS assumes only a marginal role in some areas of great importance to people with disabilities: access to paid employment and access to adequate income. Despite the first function of the NDIS listed in recommendation 3.1, 'to...maximise the social and economic participation of people with a disability...', little detail is given as to how this might be achieved apart from the comment that the NDIS could: 'recognise and encourage employment of people with a disability' (page 11), that the support services will include 'specialist employment services' (page 21); and, that the 'Australian Government should reform the DSP to ensure that it does not undermine the NDIS

goals of better economic employment and independence outcomes...' and 'provide incentives for work' (Recommendation 4.6).

People with disabilities are seeking reassurance that a new scheme would not make it more difficult for them to move in and out of employment should their health and disability level fluctuate and expose them to the uncertainty and anxiety of reinstating service eligibility due to factors beyond their control. Incentives to enter the paid workforce are very helpful to people with disabilities. In contrast, difficulties in moving between paid employment and services act as strong disincentives to entering the workforce.

Recommendation 2: *That the NDIS develops evidence-based strategies as to how it can achieve the goals of better economic, employment and independence outcomes.*

SERVICE DELIVERY

Eligibility: Recommendation 3.2 of the Report identifies that people with significant difficulties with mobility, self-care and/or communication would be eligible for support services. While it is not clarified in the Report, it is possible that the eligibility criteria would be narrower than the current Victorian HACC criteria (people with moderate, severe or profound levels of disability) if the NDIS criteria excluded people with moderate levels of disability. In addition, the eligibility criteria for the Victorian Aids and Equipment Scheme covers moderate levels of disability in the following categories: ... a child or adult with a long-term or permanent disability, and/or are frail aged, and are a permanent resident of Victoria, or on a Permanent Protection visa ... or an asylum seeker... Entry into this program follows an assessment process.

Recommendation 3: *Council recommends that the eligibility criteria for NDIS services match the existing Victorian HACC eligibility (people assessed at a moderate, severe or profound level of disability) and the criteria for the Victorian Aids and Equipment Scheme.*

Services for people as they age: Council supports the proposal that the NDIS would become a 'lifetime scheme' (page 16) and that flexible arrangements would be in place to enable people with disabilities to choose whether to opt in to the age care system or remain with the NDIS. This choice would require the provision of adequate information to enable people to accurately determine what would be in their best interests.

Interface between HACC and Disability Services: Currently Yarra City Council provides a locally integrated service system through its HACC services and its other roles specified above. Council's HACC service provision to residents with disabilities enhances its service planning, service coordination and advocacy roles through democratic representation and decision making. While these services are individually tailored, especially to residents with high and complex needs receiving long-term case management through the Linkages Case Program, they are not at present run on an individualised support care package model. Council is currently researching residents' views on how to enhance choice and control in its HACC service provision. An example of integrated service provision is the role of Council's Linkages program in providing intensive support to enable people to access Department of Human Services Individualised Support Packages where this is necessary to enable them to remain living independently at home.

Recommendation 4: That the NDIS considers the role of locally integrated services such as those provided by Victorian local governments. In particular that the NDIS seeks information on the impact on local HACC services of the national scheme on the service coordination and service development roles of Victorian local governments.

Recommendation 5: Recommendation 3.4 of the Report recommends the introduction of Memoranda of Understanding with other sector providers. Council strongly recommends that sector interface issues be discussed on a state by state basis, prior to implementation to ensure that these are addressed in the program design.

Qualities, skills and payment of personal care workers: where personal care and home care workers are employed by organisations such as local HACC services, there is a need for ongoing training and skill development to assist workers who are providing services to multiple people, to avoid injury, to be able to relate to different people with different health needs and behaviours and to provide regular support when the care they provide is very demanding. This training and support builds on to the natural qualities of empathy, good listening skills and social skills and is not seen as a substitute for these. Where personal support workers are chosen to provide care to one or more people they know, they will be required to get to know the needs of a few people and the 'training' may well be most effective if provided by the person with disabilities or their carers.

The claims in the Report on page 39 that the 'new system will relate to greater pay, more jobs, better working conditions.....' is questionable. It will relate in part to the unit price set for hour of care. Research on self-directed care has raised some questions about the possibility of lower pay and lack of support and protection on the long term which is common for the occurrence of injury.

CORPORATE MODEL OF GOVERNANCE

The corporate governance model of the NDIA model would ensure good fiscal management, accountability and probity. Council notes that people with disabilities as the key stakeholders would not necessarily have direct representation by appointment to the Board, but would have input through an advisory capacity only. As well as direct stakeholder representation in governance and policy development, the NDIA, would need ongoing access to high level knowledge on human services planning and operations. This would be a necessary component of its direct service provision role. This would be critical to balance the imperatives of sustainable funds management with achieving the aims of service user empowerment through sensitive and responsive service delivery.

Recommendation 6: Council recommends that the NDIA appoints direct representation of stakeholder interests on its Board.

ASSESSMENT

Council endorses Recommendation 3.7 that support should be determined by 'an independent, forward-looking assessment process'. Considerable skill is needed to carry out this process. Council draws attention to the need for local knowledge as one of the 'multiple sources of knowledge' essential to this. People with disabilities often experience barriers to obtaining accessible information about local resources and opportunities. While local agencies and services actively promote information

dissemination, locally employed assessors such as Council HACC assessment officers and case managers, are an important source of information themselves. Local assessors not only know *what* resources are available but often know *how* these resources work and how best to access them. In regard to the assessment process being a relational process and not just a technical, 'tick box' process, Council questions whether independent assessment necessitates the use of assessors who do not have a 'long standing connection to the person' (Recommendation 5.4). While agreeing that objectivity is desired to minimise variations in assessment outcomes, the underlying assumptions in the use of the words 'tools shouldexhibit low *susceptibility to gaming*' (Recommendation 5.3); and assessors' performance should be monitored to avoid '*sympathetic bracket creep*' (recommendation 5.4) indicates a lack of understanding of the professional skill involved in the use of 'self' in assessment in the human services field. In our services we are aware of the greater prevalence of under-utilisation of services rather than over-utilisation. As well as being proficient in the use of validated assessment tools, Assessors need to be able to effectively engage with people (and this may take some time) to enable them to recognise and address their support needs in situations where they are more likely under-estimate their needs rather than over-estimate them. If NDIS assessors do not have local knowledge, and do not have time to develop a relationship with the person, it is likely that some people with disabilities, particularly if they have communication needs and/or do not have a carer, would need an advocate or helper with this knowledge.

Recommendation 7: *Council recommends that the NDIS seeks further information on the professional skills needed in the assessment role and does not assume that technical competency and the use of 'tools' in the absence of a relationship with the person, will in itself empower people with disabilities to obtain the personal support services they need.*

DECISION MAKING POWER

Council supports the principle that people with disabilities should have increased decision making power and choice and control over their service plans, their service providers, the disability organisations who act as their advocates or intermediaries and access to 'self-directed funding'. Council supports the belief that people have the right to know and determine what their own needs are and that these supports should promote their participation in the community and in employment (Recommendation 6.1).

Council notes that Recommendation 6.4 to 6.8 spell out to some extent the elements of the 'direct payments' model including the possible employment of family members as carers. The detailed administration needed to implement this model and the intensive contact with the person and their carers, indicates the need for employed workers with time available to carry out these functions. Recommendation 6.8 mentions the use of case managers to reduce the risk of neglect or mistreatment by support workers or other service providers hired in the informal sector. It is unclear what the role of the NDIA-employed case managers will be in ongoing contact with service users and how their role will be integrated with and enhance the role of existing disability case managers.

MAINTAINING THE 'MARKET' OF PROVIDERS AND THE PROVISION OF NON-DIRECT SERVICE DELIVERY FUNCTIONS

The proposal by the Productivity Commission that: 'block funding to service providers would phase out' and be replaced by the system where the NDIA would reimburse service providers or disability support organisations for those services they provide (page 40), raises the question about the implications for service providers of dealing with organisational sustainability where their funding is secured by (the insecurity of) individual purchase of service units rather than by programmatic funding.

Programmatic funding enables organisational service cross subsidisation through whole of organisation budget processes. Block funding or programmatic funding enables not-for profit or public sector organisations to have some autonomy to plan ahead, to spread funds to ensure responsive and innovative services and to invest in system resourcing activities such as service coordination where these are not directly funded.

ROLE AND FUNDING OF THE NIIS

The Municipal Association of Victoria (MAV) states in its Submission to the Report that it supports the establishment of a no fault national injury insurance scheme (NIIS); but recommends against the proposal that this be funded from council rates. The MAV Submission gives a detailed analysis of the potential negative impact on Victorian councils and concludes that this funding base would not be economically efficient. Yarra City Council supports the conclusions of the MAV and the recommendation that the Commission should re-evaluate the potential funding options for an injury-based scheme.

Recommendation 8: *That the Commission consider an alternative scheme to council rates that addresses efficiency and equity, to fund the NIIS.*

SUMMARY OF RECOMMENDATIONS

Recommendation 1: Council recommends that the title of the scheme be: National Enablement Scheme.

Recommendation 2: That the NDIS develops evidence-based strategies as to how it can achieve the goals of better economic, employment and independence outcomes.

Recommendation 3: Council recommends that the eligibility criteria for NDIS services match the existing Victorian HACC eligibility (people assessed at a moderate, severe or profound level of disability) and the criteria for the Victorian Aids and Equipment Scheme.

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