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Submission by Douglass Doherty Chief Executive Officer Family Based Care Tasmania

Chair and committee thank you for the invitation to speak to you on behalf of Family Based Care Tasmania. Family Based Care was established as a not-for-profit incorporated Association in 1986 in NW Tasmania. Originally a "Host Family Program provider" a program designed to provide respite for parent living with child with disabilities and an grant of ~\$250,000 The Association has grown to become a multi service provider operating across Tasmania with an annual turnover of ~\$15M.

Family Based Care is a non-faith, vertically integrated provider of community supports. In the last financial year the Association provide 135,776 hours of care to some 2000+ individuals with 276 staff across all categories from NDIS, Aged Care, State HACC, mental health, speech pathology, occupational health and post MVA rehabilitation.

In the NDIS space Family based care has participated in the NDIS since the initial trial in 2014, we have seen our number of hours of care provided for ADL steadily reduce over the last 3 years from a high of 6400 hours per month in 2020-21 to 4041 hours per month in June 2023. Revenues from these activities have also fallen from \$4.32M in 2020-21 to \$3.16M in FY 2022-23. Clients have reduced from a high of 267 in 2020-21 to 171 in 2023.

We believe that much of this shift has been to niche unregistered providers who do not have the same workforce issues (mostly operators with less than 10 staff).

Cost of compliance has also increased over the same period with mandated training, qualifications, and auditing costs. Wages for Direct Care Staff is now theoretically lower than that for aged care as per the recent determination of the Fair Work Commission that valued work in aged care above that of Disability care. Of course, at Family Based Care we pay all our workers the same (above the Aged Care rate) and so this become an unfunded pay rise not currently supported in NDIS pricing.

Workforce, attraction, recruitment, and retention in direct care especially continues to challenge the organisation. Workforce initiatives by Commonwealth Government appear to be having little to no effect on the available labour force. The idea of cooperation between service providers to solve some of this problem, sometimes touted by well-meaning consultants and public servants ignores that fact that since 2014 the NDIA has sort to use market forces to meet demand and therefore has made each and every disability organisation competitor. The general standard of support workers however must be improved with a minimum standard of Certificate III in Individual Care being the basic standard as it is in Aged Care and other.

In 2018 The Association recognised that there was an emerging issue with the provision of allied health service in NW Tasmania and in Positive behaviour supports. At this time the Board set about creating a number of business units to provide allied Health services, with sub-brands of My Speech Pathology Tasmania, My Psychology Tasmania, My OT Tasmania and Family Based Care Enhanced Supports. These brands that operate as internal business units have been developing over the last 5 years to support the allied health needs and PBS needs of the NDIS participants. The Association has received no support

for this initiative and this development has come at significant costs to the Association. Training a Provisional Psychologist cost in the order of \$120K per annum and we have invested in two. Speech Pathologists are also a rare commodity in Tasmania and the Association has invested \$30K over two years in scholarships with Australian Catholic University along with student placements for LaTrobe University and Charles Stuart University. These placements come at the cost of the productive time of the Speech pathologists but are seen as a necessary part of the cost of building a capability. A positive Support Practitioner costs in the order of \$20K per annum to train in order to become a functioning Core practitioner and the Association has worked hard to build an expert team of 7 professionals servicing Tasmanian disability providers.

My Speech Pathology 65.8% of revenue NDIS \$134K 2022/23

My Psychology 24% of revenue NDIS \$28K 2022/23

Enhanced Supports 100% NDIS \$584K 2022/23

Regulatory issues that present a disincentive to operate in the NDIS. The key issues that continues to occupy my mind is that as a Multi-disciplined provider of community services Family Based Care is faced with a barrage of red tape and regulation.

We are required to train, qualify, and audit our staff on the NDIS standards, Aged Care standards, HACC standards, Mental Health Standards, MAIB standards. In addition to being an ISO9002:2015 accredited organisation and certified against the ACIS Attendant Care standards.

The differing standards and reporting thresholds from both systems and the added expense of maintaining separate registrations makes little or no sense to me. Have two separate quality and safeguarding authorities and systems for the provision of safe effective community care is from my perspective like having two departments of the environment one for the land and one for the sea.

In conclusion thank you again for the opportunity to speak with the committee.