

From:
To: [Community Affairs Committee \(SEN\)](#)
Subject: Spam: Submission to the Inquiry into the National Disability Insurance Scheme Bill 2012
Date: Tuesday, 22 January 2013 12:08:47 AM

Please consider this email a formal submission by me to the Senate Standing Committee on Community Affairs Inquiry into the National Disability Insurance Scheme Bill 2012.

The current disability system has many problems that need to be addressed.

The C/Link payments do not reflect need. My child with Down Syndrome did not have such severe needs requiring financial assistance++ compared to, for example, children with severe cerebral palsy, yet a one size fits all payment applies. This needs to be graded according to need. However, my son did require far more one to one speech therapy, and no private speech therapist was available in our country area for extra paid sessions to supplement the less than satisfactory 'train the teacher' system implemented by Education Dept. speech therapists. As a result, he still cannot speak clearly enough at age 26 to attract good friendships and thus fit in more socially.

More needs to be done to attract specialist professionals to country areas, including appointments of permanency for those meeting fair criteria, and ending the endless contract positions where both professionals and country families have to deal with a disability service offering little security, continuity and acquisition of indepth knowledge and thus better treatment of each client by stable staff. If doctors can be paid extra country allowance for relocation, why not specialist nurses, teachers, speech therapists and OTs? And outreach services, particularly Autistic and Down Syndrome? Being able to purchase services required with the proposed NDIS rather than advocating for piecemeal services dependent on how much is left in each bucket would vastly improve quality of life for so many disabled, and end the frustration and helplessness I also felt as a Disability Services SA coordinator in being hamstrung in improving each client's life.

The main features of the NDIS that will make a difference to the community are:

Ensure support and equipment is available when needed, People with a disability can plan their lives and pursue their goals and dreams, The ability to receive services when needed and in the way that suits the person

The most important services for the NDIS to provide are:

Therapy and allied health services, Equipment and home/vehicle modifications, Accommodation options

I support the introduction of the NDIS.

As listed above, the provision of hands-on services, tailored specifically to each person's needs (and thus catering for carer needs) is most important. Once homes and vehicles are modified, and suitable equipment is provided progressively as a child grows to adult size, families can cope better and not face massive bills for severely disabled members.

Accommodation options is a huge area where far more options, ranging from high dependency to minimal help for the more independent, need to be provided, with accompanying appropriate service workers. This would remove the huge burden of care that so many families provide, knowing that their disabled relative is well-housed and cared for for a lifetime. Right now there is a critical need for young adults to be rehoused so they can achieve a modicum of independence

from their families, as is their natural right. So many families are buckling under because suitable accommodation is so hard to find - local, cheap rental, or affordable via a family bank loan for cheap but quality housing.

Therapy and allied services have been discussed in feedback above.

I support the NDIS as I believe it is the fairest and most equitable way to provide a sound quality of life options for all disabled and their carers. While caution will have to be exercised that people do not abuse the privilege of being able to purchase their own services, those services should be made available faster, more efficiently and more effectively than the limited system operating now. We already pay taxes to support the current system. I am sure no one would begrudge paying a little more for a far improved system of immediate response - and, in many ways, a system ensuring early intervention and prevention of many more chronic conditions, which will in turn ensure less long term expense.

I agree for my submission to be made public

Regards,

Mrs Val Braendler