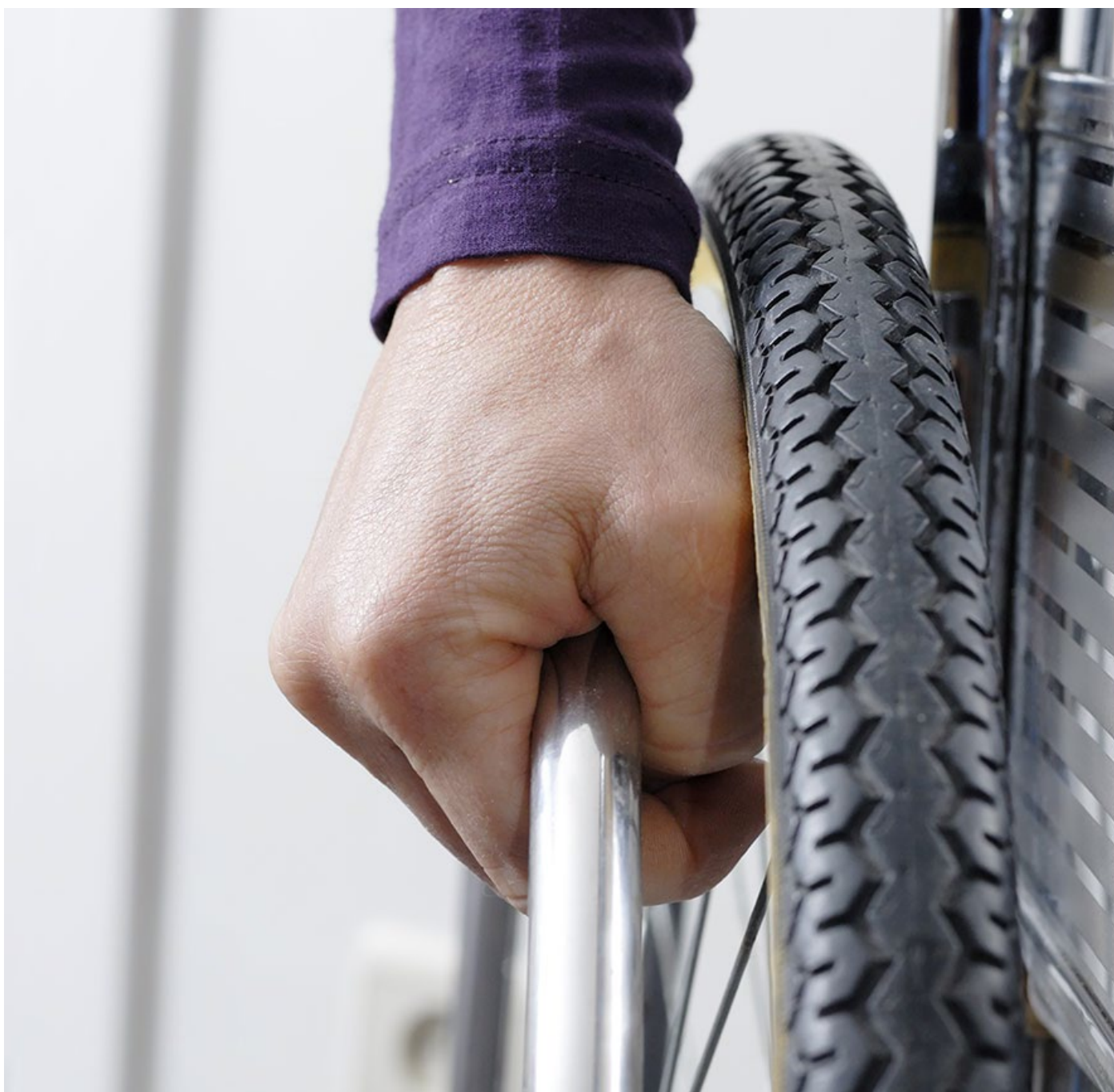


**SCIA RESPONSE TO PARLIAMENTARY JOINT STANDING
COMMITTEE – NDIS WORKFORCE OR GENERAL ISSUES**



About Spinal Cord Injuries Australia

Spinal Cord Injuries Australia (SCIA) is a not-for-profit organisation working for people with spinal cord injury (SCI) and neurological conditions. We are passionate about continually improving our service offerings and driving innovation to provide maximum opportunity for those lives affected by disability. Our purpose is to create a world where people with spinal/neurological conditions and their loved ones thrive.

What we do:

- Enhancing people's functionality and health through exercise
- Offering a one-stop-shop for information on services, advice and support available
- Sharing the lived experience of having an SCI through peer support
- Influencing social change on a systemic and individual level
- Providing temporary and emergency care to people in their homes as required
- Supporting people back into employment, education or training
- Operating an Australian Disability Enterprise (ADE) that employs people with disability and pays full award wages
- Providing accommodation for people transitioning home from hospital, or who need a break
- NDIS Services including support co-ordination and plan management.

We are a member based organisation, with more than 2,300 members that include people with disability, their families, carers and professionals in the sector.

As a NDIS provider, we are committed to the ongoing improvement of our processes and procedures to ensure that our service delivery complies with the National Practice Principles and the NDIS Quality and Safeguards Commission.

SCIA was founded by people with spinal cord injuries. We employ and support people with disabilities - at present they make up 26% of our staff, and a majority of our Board. A number of these employees have a high level of physical disability such as quadriplegia, paraplegia, cerebral palsy and spina bifida. A number of these people have associated mental health conditions including depression, anxiety as well as physical health complications.

SCIA would like to comment on the following sections from the Issues Paper and the specific questions highlighted. Sections not included SCIA has no comment to offer.

SCIA would like to provide comments on the following areas of the Committee's Inquiry and Terms of Reference:

a) the current size and composition of the NDIS workforce and projections at full scheme

- Attracting and retaining workers with the right skills, values and attitudes will be crucial to delivering the support as per the projections at full NDIS scheme rollout
- The Disability sector does compete with the health care and aged care sector for staff and this will continue to be a challenge for Providers
- In order to attract workers there should be emphasis on the importance of the sector as an essential service e.g in the recent COVID 19 Pandemic there has been calls for workers to be classified as essential and to gain access to PPE
- Diversity in the sector is important to ensure that all people with Disability are reflected in the workforce (age, gender and gender preferences, ethnicity etc.). Are there any strategies in place to promote opportunities in the Disability Sector to people from a wide range of backgrounds?

b) challenges in attracting and retaining the NDIS workforce, particularly in regional and remote communities

- Currently the market for professionals is extremely competitive and with wages that do not keep up with operating costs of an organisation, makes it difficult to appeal to the workforce based on price point. This can result in a high staff turnover, which is not uncommon within the sector, however this still comes at a considerable cost to organisations
- The price limits for NDIS Supports does not adequately cover the pay points that the provision of service may require in terms of professional qualifications i.e. Plan Management – Bookkeeping. Further consultation is required involving Providers regarding the required price levels to maintain quality and sustainable service delivery
- These issues are exacerbated in regional and remote communities and perhaps incentives in these areas need to be considered

c) the role of Commonwealth Government policy in influencing the remuneration, conditions, working environment (including Workplace Health and Safety), career mobility and training needs of the NDIS workforce.

- SCIA adheres to the Social, Community, Home Care and Disability Services (SCHADS) Industry Award and supports the payment of Award rates as a minimum. In order to pay people market rates we do pay employees above the Award rates. As previously mentioned the price limits for NDIS supports does not reflect market rates for the experience required
- SCIA pays full award rates to Supported Employees in our Disability Employment Enterprise
- SCIA is committed to providing a safe workplace. The nature of work can be physically and emotionally challenging and SCIA has taken advantage of the free NSW Safe Work Initiative, Mentally Healthy Workplaces which offered a **free WHS expert advice program** to help NSW businesses create mentally healthy workplaces

- Further support from the Government with supporting organisations in the Disability sector with training would be beneficial
- The Online Worker Orientation Module “Quality, Safety and You”, has been implemented to the induction process and SCIA and was also rolled out to existing SCIA staff. Further training like this would be welcomed by SCIA and would be incorporated to our learning and development program

d) the role of State, Territory and Commonwealth Governments in providing and implementing a coordinated strategic workforce development plan for the NDIS workforce

- We would welcome support from the State, Territory and Commonwealth Governments to provide and implement a strategic workplace development plan for the NDIS workforce
- There is currently limited free training options for NDIS providers to access
- This would also enable staff to develop their skills and set their own career goals within the Disability Sector which would facilitate better retention within the workforce

e) the interaction of NDIS workforce needs with employment in adjacent sectors including health and aged care

- Generally, NDIS workforce competes with organisations in adjacent sectors such as health and aged care to attract and retain staff. Particularly in allied health, such as physiotherapists, where we are competing with people in private practice
- It’s important that the sector is given the recognition that it deserves in relation to adjacent sectors. As mentioned above in relation to the COVID – 19 Pandemic, there has been little consideration given about PPE for Disability Support workers
- Greater recognition from Government about the essential work done in the Disability Sector will give NDIS workforce greater confidence to work collaboratively with workers’ in adjacent sectors to provide the best possible outcome for people with a disability.

f) the opportunities available to, and challenges experienced by, people with disability currently employed, or wanting to be employed, within the NDIS workforce

- The challenges experienced by people with disability wanting to be employed within the NDIS workforce and the wider network of NDIS employers will not be significantly different to the challenges facing that same cohort in the wider open employment market. From our own research for people with severe disabilities such as spinal cord injury, those challenges fall into the following broad categories:
 - Discrimination from employers during the recruitment process
 - Fear from employers in considering the challenge of recruiting someone with a disability
 - The misconception that employers will need to provide significant additional support for all people with disability leading to a reluctance to recruit

- Employers can't see beyond the disability despite the individual having the skills and experience required
- Transport accessibility issues to work
- Building accessibility issues in general, in particular toilets
- Ineffective Disability Employment Services (DES) to support people with disabilities into work
- A lack of formal widely available and promoted structures such as work experience and internships to enter the NDIS workforce
- The above list is certainly not exhaustive but should provide a clear picture as to the challenges faced by people with disability during the job search phase, however, people with disability who are job searching as well as those already employed in the NDIS workforce will also experience the following challenges:
 - Being overlooked for different roles as well as career progression due to the employer perceiving people with disability as having limitations in skills and experience
 - Management lack of confidence in how to manage a person with disability in terms of suggesting alternative, more suitable roles where appropriate
 - Lack of understanding from employers on the flexibility required by some people with disability in regards to regular medical appointments
 - Lack of flexibility for people with disability in circumstances where travel to work may be a challenge e.g. inclement weather
- SCIA has been working extensively on developing a holistic Employment Program with a view to addressing a number of these key challenges. We have grouped these into four broad categories:
 - Creating a more inclusive recruitment process
 - Improving accessibility in the workplace
 - Normalising disability in the workplace (and wider community)
 - Building confidence and capability in job seekers with a disability
- In order to achieve an improvement across all four areas SCIA has developed a program which centres on each area. We provide early intervention support for people with severe physical disability from our Peer Support team within the spinal injury units, through to specialised employability support training from our experienced job search coaches, all the way to post placement support once the individual has found work, to ensure they successfully remain in the job for the long term.
- The employment program outlined above can only flourish within an environment that is more tuned in to the needs of people with disability. To address this we have developed a comprehensive Disability Awareness Education Program which aims to not only create more inclusive recruitment processes, but create more disability confident workplaces across all sectors

g) any other matters

General

- Although the NDIS has been in effect for some time now, the scheme remains in many ways in infancy state, given the ever changing landscape of which it operates. Providers are required to fill the gap in areas that are not being captured by the Agency, which ensures a continuity of supports for clients. NDIA efficient price methodology accounts for approximately 15% overheads on price limits, so it is unrealistic for organisations to be lean and leverage maximum efficiency in overheads given the current state of the scheme.

Transport Policy

- The NDIA made some transport policy adjustments effective from 1 March 2020 that provided some additional flexibility in how participants and providers are able to utilise core funding for transport. SCIA welcomes those changes but they have not gone far enough in broadening how participants can flexibly use their funding for transport requirements, particularly for wheelchair taxi usages.
- The current arrangements allow for service providers to charge participants for transport costs incurred when transporting the participant to and from community and centre based activities. This charge can be claimed out of the core budget of a participant's plan, irrespective if they have transport written into their funding. This is a good change that allows greater flexibility across the core elements of the plan.
- The changes announced in March will also allow participants who receive a direct fortnightly transport payment to tap into their core budget for additional transport costs over and above what their direct payment covers but only if it fits within the criteria mentioned above i.e. where a service provider directly transports the participant in their own vehicle.
- This reverses a decision made last year that stated that for any participant receiving a regular direct fortnightly transport payment, they were not allowed to tap into their core budget for additional transport costs. This was a big disadvantage for participants receiving the periodic payment as it was often not enough to cover all of their transport requirements.
- There was also an announcement last October by the Disability Reform Council that would increase transport payments for heavy users of taxi transport subsidy schemes around the country. Participants fitting this criteria were contacted by the NDIA to let them know that their periodic payments would be increased. Again SCIA welcomes this change as an acknowledgement that some participants were significant wheelchair accessible taxi users and their transport funding was not adequate to cover their costs.
- However, there was little information provided to participants on how the NDIA calculated adjustments to an individual's transport funding when increasing it. Was it based on the goals in individual plans, or workplace participation? It would be good to see transparency on how this decision was made. The participants themselves weren't given an explanation.

- SCIA would like to see further adjustments made to transport policy that recognised a far broader understanding of how participants utilise transport, including for taxi usage, by extending the flexibility in core funding to allow for this – irrespective of whether someone receives a direct fortnightly payment or not.

Recommendations of the Tune Review

- SCIA fully supports the recommendations of the Tune Review. Implementing the recommendations would go some way towards fixing many of the current faults of the scheme that participants encounter. Planning decisions and funding levels are still currently very inconsistent with little transparency on how decisions are made, much to the frustration of those on the receiving end of those decisions. To that end, draft plans must be made available to participants with further consultation prior to a plan's approval. This decision alone would improve outcomes for participants and reduce the workload of the NDIA by decreasing the number of unscheduled reviews based on poor planning decisions.
- One of the most frustrating elements participants encounter with the scheme is the repetition in which participants have to provide evidence, from the point they make an access request, through to getting any adjustments made to plans, and seeking assistive technology decisions. At multiple points they must retell their stories, are asked to submit, and resubmit documents and wait for decisions to be made. There must be an acknowledgement by the NDIA that allows for relevant evidence to remain viable so as to not overburden the applicant/participant or the NDIA. This could also relate to how the NDIA does its record keeping. Participants often feel that documents that have been submitted are not being looked at or ignored.
- SCIA would agree that there needs to be greater clarification of what “reasonable and necessary” means in the NDIS Act and how this is interpreted. As it currently stands, the NDIA's interpretation does not necessarily accord with the participant's expectations when crucial decisions are being made on funding allocations. This then can lead to a highly contested space that sends participants down the drawn-out review pathways.
- The provision and assessment of Supported Independent Living (SIL) absolutely must incorporate the participant and recognise their right to choice and control when decisions are being made on levels of supports in plans. The current framework of SIL quoting by service providers almost always excludes the participant.
- SCIA understands that work is underway by the NDIA to look to increasing greater flexibility within plans and we would support this. This would allow capacity building supports to be utilised across core elements if and when needed.
- One of the most frustrating aspects of the NDIS from a participant perspective has been the very bureaucratic review mechanisms that are currently in place across plans. There has to be changes made that improves how plans can be adjusted when they are not meeting the needs of an individual. When minor adjustments are needed, there has to be a quicker and simpler way to make those changes without instigating a full review. When there are more significant funding problems in an existing plan, then the timeframes for an unscheduled review must be shortened and adequate communication is given to the participant when the review is being conducted – too often reviews are conducted without any input or knowledge by the participant. This is completely

disempowering. As part of this process, there should also be a requirement by the NDIA to be more transparent in how its decisions are being made on funding allocations across the plan.

- Further clarity on its powers and where possible setting time limits for external reviews through the Administrative Appeals Tribunal would improve timeframes and outcomes for participants.

COVID-19 and Other Crisis Management Provisions – *(provided in the context of the daily changes being made by Government in response to the Crisis and some issues raised may become outdated from the time of writing of this submission)*

- Australia it is currently undergoing an unprecedented health crisis in response to the coronavirus pandemic. People with disability make up some of the most vulnerable people in our community, and for this reason, their needs must be prioritised when government and its agencies, including the NDIS, develop policies in response to this and any other crisis management.
- NDIS participants, and the workforce that supports them, but most particularly the critical support workers that provide daily in-home assistance with daily living (including personal care) must be given priority status and the workforce defined as an essential service similar so how the aged care sector has been defined. Many participants in the NDIS will be highly susceptible to this virus. They are entirely reliant on multiple daily services by support workers. For this reason, both the worker and the person with disability they are supporting, need to be protected from contagion.
- The criteria for COVID-19 testing must be expanded to include people with disability and the workforce that supports them. There must be provisions put in place for contingency planning should the disability workforce be adversely affected by contracting the virus. Support workers may have a number of clients they visit in a single day and people with disability will likely have multiple support workers they rely on and a number of service providers they utilise to source workers in the home. For this reason, the sector is quite vulnerable to this current health crisis.
- Personal Protection Equipment (PPE) is diminishing at a rapid rate and we are already seeing in the community shortages of basic consumables such as gloves, sanitisers and other protective equipment. These products are essential in supporting people with a disability for their personal care needs, and so it is critical that supplies are maintained for the disability workforce. There has to be recognition by government and agencies of the need to secure adequate PPE to support people with disability.
- The government, through the Disability Reform Council made some recent adjustments in policy to be implemented across the NDIS in response to COVID-19. SCIA welcomes those changes, but feels that more needs to be done to support participants who may be affected by the virus. The NDIA must be willing to make rapid adjustments to a participant's plan should they need more support because of increased health consequences as a result of the virus; a NDIS crisis line should be set up, allowing participants to report any adjustments to service provision as a result of essential workers and services being disrupted because of infection. This would be even more critical in regional and remote areas where there is little choice in providers. Where

there are disruptions to services, there must be strategies put in place that link individuals with other supports.

- SCIA would also like to see the development and dissemination by the relevant government agencies (Federal Department of Health, Department of Social Services, NDIA et cetera) of clear guidelines outlining how supports are going to be provide to anyone with a disability should they contract COVID-19, be that in the home or within a hospital setting. People with disability must not be disadvantaged in any way in how health and disability services are provided to them, including getting access to PPE and other essential equipment. To that end, there must be a guarantee of a continuity of support to ensure services are maintained throughout the duration of this health crisis.

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