

Community and Public Sector Union

Beth Vincent-Pietsch ◆ Deputy Secretary

3 September 2019

Joint Standing Committee on the National Disability Insurance Scheme PO Box 6100
Parliament House
Canberra ACT 2600

By email: ndis.sen@aph.gov.au

Dear Committee Secretary

NDIS Planning

As the union representing staff at the National Disability Insurance Agency (NDIA), the Community and Public Sector Union (CPSU) welcomes the opportunity to make a submission to this Inquiry into NDIS Planning.

The CPSU has been a strong supporter of the NDIS but has significant concerns about its operations and the restrictions that have been placed on the NDIA by the Commonwealth Government which has affected the implementation, performance and governance of the National Disability Insurance Scheme (NDIS).

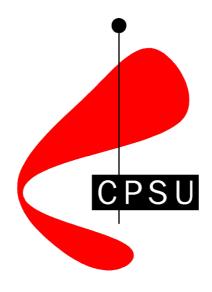
The CPSU is happy to provide information on the matters raised in this submission and supplementary information on other relevant issues.

For further information, please contact Osmond Chiu, Policy and Research Officer via email

Yours sincerely

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Community and Public Sector Union (PSU Group)

NDIS Planning

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Introduction

The NDIS is an essential part of our social infrastructure. The scheme aims to replace state-based approaches and to put people with disability at the centre of a national scheme.

We want expertise, skills and capacity built into our NDIA. This must include the expertise, skills and capacity building of people with disability, so the NDIA can deliver on the promise of the NDIS to people with disability.

Inadequate staffing levels and insecure employment have resulted in high staff turnover and a loss of expertise within NDIA. The experience for participants, far too often, is deficient plans and significant delays when requesting reviews. This ultimately affects the ability of NDIS participants to have true choice and control through every step of the NDIS process.

Addressing problems with the planning process will not be possible without scrapping the Average Staffing Level (ASL) cap, bringing NDIA work back in-house and properly funding the NDIA to do its work. Automatically rolling over plans, using templates or having longer plans will not address the root causes of these problems.

The CPSU is far from alone in advocating for scrapping the staffing cap. People with Disability Australia, the Benevolent Society, the inaugural chair of the NDIA Bruce Bonyhady and state governments have also called for the staffing cap to be removed. Even the Productivity Commission has recommended the removal of the ASL cap on directly employed NDIA staff:

The Commission recommends that the Australian Government remove the cap on directly employed staff. This is on the basis that the NDIA is best placed to determine the most effective and efficient staff mix to deliver the scheme, within the constraints of its capped operating budget.¹

When the NDIA was created, there was a belief that after the 'build' phase, the NDIA would need less staff. This belief assumed that after an initial plan was created and implemented, subsequent planning meetings and reviews would require minimal changes. In reality, the goals and supports needed by participants change. The goals of a participant at age 18 are likely to be very different to when they were 10. Additionally, disability is not static and support needs can change rapidly.

The overall number of planners relative to the demand for plans

There are two components of success for the NDIS: access to the scheme and participants having the right plan. The NDIA has not been provided with adequate staffing or resources to reach everyone who needs the scheme and to have the right plans in place.

The NDIS was designed to be fully funded with an initial estimate of 10,595 public service staff in 2018-19 to properly deliver the NDIS. ² However, under the Coalition Government, the scheme has been pared back in scope, pushed to roll out in less time, and jobs and services have been outsourced. The current staffing cap of 3,500 people means the NDIA has been forced to

¹ Productivity Commission (2017, October). National Disability Insurance Scheme (NDIS) Costs, Study Report, Canberra. Retrieved from http://www.pc.gov.au/inquiries/completed/ndis-costs/report/ndis-costs2.pdf

² Commonwealth Government (2016, May). 2016-17 Budget Paper No.4 – Part 2: Staffing of Agencies. http://www.budget.gov.au/2016-17/content/bp4/html/09_staff.htm

outsource much of its work. Over 7,000 NDIA staffing positions have been outsourced to Local Area Coordinators (LACs) and private labour hire companies.³

Recent information provided by the NDIA indicates that of the 11,000 people doing NDIA work, 3,500 are NDIA employees and of those, only half are in ongoing roles. A further 2,300 are employed through labour hire companies on fixed term contracts and 5,300 work for outsourced partners.

The demand for plans and inadequate ongoing staffing levels has resulted in a focus on the quantity of plans over quality. This focus on intake has led to NDIA processes being geared towards meeting targets in the Bilateral Agreements. It has resulted in timeframes blowing out, creating significant workload pressures on staff.

The CPSU has also been informed that the blowout in timeframes has affected the quality of plans as staff are pressured to process as many plans as possible to meet key performance indicators (KPIs). There is an acceptance that many of the plans will result in participants requesting reviews, rather than taking the time to get the plan right.

The Productivity Commission raised similar concerns in its inquiry into NDIS costs, which found that "the National Disability Insurance Agency's (NDIA) focus on participant intake has compromised the success of the scheme."⁴

The ability of planners to understand and address complex needs

The planning process needs to be sufficiently 'deep' so that participants and their carers are genuinely engaged and included. Planners need to have meaningful information about an NDIS participant, including their short and long-term life goals, in order to make decisions about reasonable and necessary supports. A focus on quantity over quality has meant this is not occurring.

Most planning conversations are now taking place over the phone using questionnaires that have been designed to be administered by call centre employees with no prior knowledge or experience with disability. It was designed in this manner to increase the number of new plans approved due to the high number of plans that are required to be completed.

Often it is done by labour hire workers who have been provided with little to no training. For example, a worker from the Serco call centre reported to the CPSU that:

The training was insufficient in the beginning and I had to beg for training on new systems over my time there, training rarely happened. No one knew how to advise callers correct information, we just 'winged it' and figured it out as we went along. Staff dropping off was high, around 50% of my training group in the first few weeks. They are constantly recruiting.

The experience, expertise and qualifications of planners

While all staff are motivated to work at the NDIA because of a deep commitment to people with disability and the work of the NDIA, inadequate staffing levels, the reality of insecure

³ Luke Bo'sher (2015, 15 September). 7,000 NDIA jobs to be outsourced. Disability Consulting Services http://www.disabilityservicesconsulting.com.au/resources/7000-ndia-jobs-to-be-outsourced/# edn2

⁴ Productivity Commission (2017, October). National Disability Insurance Scheme (NDIS) Costs, Study Report, Canberra. Retrieved from http://www.pc.gov.au/inquiries/completed/ndis-costs/report/ndis-costs2.pdf

employment and an agency focus on quantity over quality has left many workers demoralised and looking for secure work elsewhere. This has resulted in high staff turnover and a subsequent loss of planning expertise and knowledge.

Participants work with a Planner to identify reasonable and necessary supports the participant needs to engage in their community in a meaningful way, and to meet their short and long-term goals. Members commented that due to turnover, they often must deal with multiple Planners, which affects the consistency of support and further delays the process.

With the constant turnover you have inexperienced planners and as a result, participants who come in are often dealing with more than one person.

Our goal as an agency is to have a high performing NDIA, with the participants at the centre of everything we do, but wait times are high, communication isn't consistent across the staff both internally and externally, so participants trying to access the scheme are getting confused with the complexities of information.

With the turnover of BSOs, planning appointments are not getting done properly and there are often cases of meetings getting missed.

Having a NDIS planner as a contractor for participants is problematic – if they leave the agency then there is often no one assigned to take over the participants pathway and if there is a planner available, they are pushing to meet KPIs so are unable to meet the participants basic needs.

Constant change over of staff, so lack of continuity with their case, which further delays the process.

Participants are having to tell their story over and over again.

Participants want to know that the staff completing their planning meeting will be around for further questions. This cannot be promised if you are unsure of contract dates.

Participants feel like a number anyway, the high turn-over of contract labour hire staff means that participants often do not have a familiar face for their planning meetings.

I asked a participant why they didn't have the supports that were already in their plan. They replied, "all the staff left, and you probably will too".

Understaffing in NDIA has also led to insufficient staff with full delegation to approve plans:

None of the labour contract employees can gain full delegation to approve plans, require all of our plans to be audited by ongoing staff. This is adding to their already overwhelming workload.

With the planners being Labour Hire Contractors, they do not have the delegations to approve therefore can't do their jobs properly.

Many CPSU members comment about the loss of expertise from staff turnover due to insecure employment. When staff are not retained, the positions then need to be refilled and new staff

must be trained again. The constant loss of staff leads to increased workloads for remaining staff. As one member explained:

If a Planner is on a contract, our team risks losing the skills and expertise a contracted Planner has acquired over their contracted period. This has a negative impact on the remaining team members who then have to pick up additional tasks/planning. This causes great stress to them when they are often not notified if their contract will be extended until very close to the contract end period. I have seen so many contracted staff come and go, only then to see a bulk recruitment and the cycle starts again.

Another CPSU member explained how the insecurity and turnover associated with use of labour hire not only affects the individual worker but the entire team:

Labour hire contracts create uncertainty, not just for the person impacted but on the entire team. At the NDIA in our teams we depend on the consistency that regular and reliable staffing has on the delivery of supports and services to participants in the NDIS. A team mentality and commonality are created recognising strengths, experience and knowledge. When this is under threat of being destroyed by losing good people who are on labour hire contracts, this is unsettling for everyone. It lowers morale and performance, which ultimately reflects on the participant experience in not getting the outcomes they deserve.

The review process and means to streamline it

Participants have the right to request reviews of their plans including where they disagree with the level or type of supports in the plan or where their circumstances have changed. This can include their accommodation no longer being appropriate, their carer no longer being able to care for them, or their disability having changed.

By October 2018, there were over 10,000 requests for reviews in 'backlog'.

The NDIA National Review Team (NRT) came into operation as a result of recommendations made by the NDIA Ombudsman, Michael Manthorpe, in his report into the NDIA's administrative review process in May 2018. In this report he pointed to the huge back log faced by participants in obtaining a review of their plans and the effect this was having on the scheme.⁵

Workers in the NRT are deeply committed to achieving positive outcomes for people with disability. They take their role of reviewing participant plan decisions very seriously and understand the real impact an incorrect decision may have on a participant, their quality of life, and their ability to participate in their community in a meaningful way.

CPSU members report anxiety prior to calling participants that have been waiting months, for sometimes urgent reviews.

It's distressing when you have to call someone you know has been left in an awful situation for a long time. There's a lot of anger from participants and their carers'. I shake every time I go to make a call.

⁵ Michael Manthorpe (2018, May). Administration of reviews under the National Disability Insurance Scheme Act 2013. Commonwealth Ombudsman. Retrieved from https://www.ombudsman.gov.au/ data/assets/pdf file/0029/83981/NDIS-NDIA-Final-report-on-administration-of-reviews-under-the-Act.pdf

It's upsetting that participants think I don't care.

Requests from participants to have their plans reviewed is increasing. There are currently over 10,000 reviews waiting to be actioned.

Staff are under pressure to churn through the large numbers of backlogged requests for review. The staffing cap and high turnover of staff - caused by insecure work and unreasonable workload pressure – means that there are not enough reviewers.

Hundreds of reviews are 'dropping off' because the scheduled 12-month review has been conducted before their request for review has been actioned.

The majority of staff in the NRT are on non-ongoing contracts and are actively seeking secure work elsewhere, not because they want to leave NDIA, but because they need certainty to provide for themselves and their families.

Conclusion

Inadequate staffing levels and insecure employment in the NDIA has resulted in high staff turnover, high workloads and loss of expertise. This is directly affecting the participant experience and the quality and timeliness of supports provided.

Changes to the planning process such as streamlining reviews, using templates or rolling over plans will not address the problems with the NDIS that are preventing it from being responsive to the needs of Australians with a disability and providing them with support they need to fully participate in their communities.

The staffing level cap is the driver of these problems and needs to be removed to enable the NDIA to function effectively and build expertise, skills and capacity. This must include the expertise, skills and capacity building of people with disability, so the NDIA can deliver on its promise of the NDIS to people with disability.