Joint Standing Committee (NDIS) Housing Submission

Sundale is a community based not for profit charitable organisation, which came about through an initiative of the APEX club of Nambour and the support of the local community. We started as an aged care provider; these services were borne out of community need. We continue to work with community to assess need and whether there is a role for Sundale to offer services that will meet these needs. Services to people with a disability on the Sunshine Coast of Queensland is one of the communities we are currently working with. In particular we have been looking at housing services.

We understand that the NDIS is intended to provide financial support to Australians with a disability. A principal goal of the NDIS is to maximise participants' choice and control over the services they receive which is a major shift away from block funding to services towards funding eligible individuals on the basis of their support plans.

- What this will mean for consumer demand for housing is still unclear. It will be a changing market and the current demand for group homes and current housing and accommodation options is likely to disappear as equipment becomes more affordable, support is more readily available and technology brings some efficiency for people to remain with their family and friends should their abilities diminish due to illness, accident or age. For those that have been born with a disability staying at home with family and moving into independent living with friends will become more normal.
- What this will mean for those that currently provide housing and accommodation for people with a disability is also unclear. Data is either not available or not shared. There have been a number of pilot projects looking for a magic bullet, but the reality is that that due to the lack of investment in the past, the system will require a significant injection of resources to meet housing demand from people with a disability. An added uncertainty is that the demand will change as innovative options become more feasible, or people are enabled to stay living in their homes in the community.

Keeping with the theme of uncertainty, it is still a bit of guess work as to who will get tier 3 packages through the NDIS or how many service and support options there will be available to those in the tier 2 service category. The pricing for these services are published but the demand for the services and the location of the eligible participants is not readily available. We believe that tier 2 participants will be expected to utilise mainstream housing options. Tier 3 participants are more likely to be looking for supported accommodation or individualised housing options – the more innovative solution.

ABS data states that of the 4 million Australians with a disability, 43% are over 55. To be eligible for NDIS the person must be under 65. A person who is a NDIS participant and turns 65 can choose to remain a participant or transition to the aged care system. People cannot move back to NDIS once they have left.

The NDIS is expected to provide up to 460,000 people (97,000 Queenslanders) with tailored and individualised supports. The Productivity Commission suggests that 190,000 (41%) of the 460,000 people will have significant or profound disabilities, 28,000 of those will need specialist built accommodation (Specialist Disability Accommodation SDA).

There is a clear synergy between the skills, equipment, technology required to deliver efficient services to people with medical and social support needs. However, there is that apprehension that having one provider will mean that older people and people with a disability would be treated the same. In some communities the markets may be too thin to separate the two service types and yet retain a viable business. I would question whether it could be politically palatable for aged care services, to offer specialist accommodation to younger people (under 65) in segregated parts of their buildings and with appropriately trained staff. The culture of the center would need to age appropriate. Many years have been spent promoting age appropriate services to people with a disability, but does that mean one organisation cannot deliver to both groups of people? We believe that with appropriate safeguards that respect individual choice there is a justification for having joined up disability and aged services - especially when there is a thin market.

Of the 28,000 that need Specialist Disability Accommodation SDA there is no break down of where these people live or where they want to live. The Regional Manager of Disability Services (Sunshine Coast) has advised that Queensland has not been able to identify the 97,000 people with significant or profound disabilities using their "register of need" and current residents in group homes and nursing care services. This register of need has identified the following:

- There are 19,877 individuals on the Register Of Need state-wide.
- 3731 people are currently listed as wanting accommodation support state-wide.
- Of those wanting accommodation support 650 are from the North Coast Region.

The regional manager has suggested the real figure may be less than half. Yet when I have met with parents on the Sunshine Coast they see the 97,000 as understated and believe the figure will double as many parents have not participated in the register of need process. Once again questions are raised:

- who will be eligible for the tier 3 funding and have access to Specialist Disability Accommodation (SDA)
- who will be eligible for SDA but will want a more innovative housing option?
- who will not be eligible for tier 3 and will they all need to be reliant on mainstream housing options?

Tier 2 participants will be left with the current market and the face the barriers that exist, including:

- Accessing mainstream finance when on a pension.
- Facing discrimination from real estate agents.
- Finding suitable design and location in affordable areas.
- Competing in tight rental markets for appropriate properties.
- Undertaking home modifications when there is no security of tenure.

Affordable Housing

As the system moves towards a tiered NDIS there is uncertainty around the number of people in each tier and as a result a lack of understanding around the demand for housing types. However, it is clear that there is an enormous lack of affordable mainstream housing suitable for people with a disability. The mainstream system needs investors and investors need some surety.

There are discussions going on with the big banks, but it is hard to know who is included in these discussions. State governments are being pushed to release suitable land, but they first need to identify suitable housing models. We have seen a few rounds of pilot money becoming available for politically sensitive groups but I'm not sure the models are giving government the outcomes they want. That is sustainable housing projects without the need for further funding.

Options for people with access to some money is starting to grow, but creating individual home ownership/shared equity models (particularly amongst people with impaired decision making) is creating its own set of issues around long term property management and tenant relationships if the property is shared with other people.

Leveraging of parents/family wealth to create housing co-ops or mutual societies may work, but these projects require ground up planning at a local level. We can learn from others, but the work to develop local level project still requires investment of time, knowledge and skills. These options will not be suitable for all families. Many children with a disability are raised by single parents or single income families so this leveraging off family wealth will not be possible.

All of the discussions to date lack clarity as to whether the government and community housing providers are only involved when the NDIS participant is a welfare recipient. There is no definition of affordable housing and the draft SDA pricing framework uses "social housing" rental payment schedules to identify returns.

Allowing co-payments, or above social housing rates, to ensure the purpose built properties are in the right location maybe another solution. On the surface this may not be fair, but we need to test these markets. We need to think outside the box and stop thinking there is a magic bullet that will work in Sydney metro area the same as it would in Nambour. There is not one housing market in Australia nor will there be one housing solution for people with a disability.

Changing demand

People with a disability are not a homogenous group. My work in disability housing on the Sunshine Coast identifies three distinct groups of people that are looking for housing.

- 1. People with aging parents that can not live alone due to lack of skills and capacity to manage themselves and basic living skills without support or prompts. This is a very political group as an ageing parent (without other familial support options) only has the option of putting their child on the wait list for access to a group home or (if they can not continue to support them, or when they die) relinquishing their adult child to the state. If an adult is relinquished they will go into "emergency housing options" which can be quite isolating. Whilst their priority on the wait list is escalated they can be living in very unsuitable situations until a place becomes available. We would not be told how many people in the Sunshine Coast/Queensland are living in these circumstances.
- 2. People in institutions or young people in Nursing Care Centers. This group is clearly identified as the priority for financial support in all NDIS documentation. I have not been able to identify how many people there are in this category in Queensland, and certainly not on the Sunshine Coast.

There are many Disability Services (government and non government) that provide support and accommodation. I have been given a scenario of the current funding for these services; a three person house would receive \$390k block funding to operate. For this money there is an expectation that there are at least one or two people on staff 24/7. If a person dies/leaves DSQ will do a quick match from those on the wait list. The outcome is not always a good mix of residents and as one parent put it; levels of dispute between residents increase when there is a mismatch of residents and as a result the requirements for restrictive practices being placed on a person with a disability increases.

My reading on the young people in care would suggest there are about 6,500 Australia wide. The younger people in this group (under 40) are declining as home care services improve and technology and equipment is more affordable. The growth area tends to be Aboriginal and Torres Strait Islanders whose families do not have the security of tenancies to care for family members and those over 55. The current National Injury Insurance Scheme (NIIS (another very unknown)) is likely to meet the cost of people whose disabilities are caused through accidents – however the nexus between NIIS and the NDIS is not even in public conversations.

Keep in mind one of the distinct objectives of the NDIS was to separate Housing and Support. Therefore many of the block funded services are having their viability challenged by the concept that a resident may choose a different support service, rendering the viability of the current house unsustainable.

3. There is a wave of people with a disability who have been integrated into mainstream community as a result of the "normalization principle". Developed by Wolfensberger the normalization principle means making available to all people with disabilities patterns of life and conditions of everyday living which are as close as possible to the regular circumstances and ways of life or society". These people are now starting to leave school and the next milestone will be to leave home and be independent. It is unclear which tier these people will fit into, or whether additional access to housing supports will be available to tier 2 people under the NDIS. This includes the delivery of Independent Living Training in specialist training center's which are or simulate a home and allow for extended stays for people to gain necessary living skills.

Conclusion

In the Sunshine Coast the lack of a transport network to connect people to services, work and family means we have multiple markets and a persons "choice" of service will be restricted by their NDIS package – if they are eligible.

Housing providers and not for profits like Sundale are perceived to be part of the solution, but the current conversations are about these providers taking all the risks. Given the number of NDIS participants is still unclear, stepping in with capital to be a part of the overall solution could be risky.

Sundale is currently working with parents of people with a disability, local disability services and housing providers to run a workshop in April that will focus on listening to what parents want in terms of housing for their child. This is the start of place based planning which I believe will be a

great opportunity for innovation. We assume that State and Federal governments are talking to large housing providers and disability services about suitable models for SDA and mainstream housing options. We are not apart of these discussions and not sure how we can afford to be included, so our approach is place based planning.

For further information please contact Gail Middleton

Summary

Data necessary to undertake appropriate planning of a housing solution is either not available or not shared.

Due to the lack of investment in the past, the system will require a significant injection of resources to meet housing demand from people with a disability. However, it is expected that the demand for certain housing types will change as innovative options become more feasible, or as people are enabled to stay living in their homes in the community it is assumed that the demand for group homes will drop.

With appropriate safeguards that respect individual choice there is a justification for having joined up disability and aged services - especially when there is a thin market.

The current mainstream housing market has many barriers for people with a disability, including: Purchase:

• Accessing mainstream finance when on a pension.

Rentals:

- Facing discrimination from real estate agents.
- Finding suitable design and location in affordable areas.
- Competing in tight rental markets for appropriate properties.
- Undertaking home modifications when there is no security of tenure.

There is an enormous lack of affordable mainstream housing suitable for people with a disability. The mainstream system needs investors and investors need some surety.

Leveraging of parents/family wealth to create housing co-ops or mutual societies may work, but these projects require ground up planning at a local level.

Allowing co-payments, or above social housing rates, to ensure the purpose built properties are in the right location maybe another solution. On the surface this may not be fair, but we need to test these markets. We need to think outside the box and stop thinking there is a magic bullet that will work in Sydney metro area the same as it would in Nambour. There is not one housing market in Australia nor will there be one housing solution for people with a disability.

Gail Middleton

Manager Housing and Community Engagement