

14 September 2018



## Submission to the Joint Standing Committee on NDIS:

### ICT systems

Develop Therapy Services is a private practice that provides occupational therapy, physiotherapy, podiatry and aquatic therapy services to children and adults in metropolitan and rural./remote South Australia. We have been a registered provider of the NDIS in South Australia, since the inception of the NDIS providing services since the initial early intervention trial site to the state in 2013.

We welcome the opportunity to provide this joint committee with response to the terms of reference:

**a. *The participant and provider experiences of the MyPlace Portal;***

The continuing improvements to the interface and workings of the *MyPlace Portal* have been noted and appreciated.

It has been useful to have the new 'tiles' added once ready, with the system gradually becoming more complex. This complexity may be daunting to some who are entering the NDIS at this later stage when they are confronted with the many options.

The *MyPlace Portal* is consistently used by staff for claiming fees for services provided. To do this we regularly make service bookings with the participant for an agreed service provision package that is linked to their current plan.

- It is useful that we can now see the annual plan dates to know when a funding cycle is coming to an end.
- However, when plans are not reviewed in a timely manner, participants fall into a "plan gap " that interrupts service provision, or "plan extension". Both of these delay additional funds to be released into the system, despite being promised making it impossible to make revised/new service bookings to enable claiming of funds. Without this service booking, our organisation

is unable to make any claims and carries a financial liability. As children move out of the Early Intervention Stream of NDIS there are no guarantees that they will continue to receive support. Some do, others are rejected and a lengthy appeal or review process of the decision occurs.

- The service booking quarantines funds to an organisation. The ICT system does not allow us to see how the service booking is reducing over time as claims are made. Despite attempts to budget the funds appropriately over the year, it does result in suddenly funds being insufficient for services, particularly if there are unexpected needs towards the end of the plan date.
- Parents of participants have reported that they are able to see their package of funding, and how much has been spent, e.g. 70% has been spent. However, they are unable to see how this expenditure has occurred over their package of supports. For example, After 9 months ( $\frac{3}{4}$  way through year), they may be able to see they have 70% spent but not know that they have spent only 50% on core supports, but 95% on therapeutic supports, or visa versa. This makes it hard for participants and their parents/carers to plan appropriate services for the remaining time.
- Some service providers have book up large chunks of the budget, that are then needed to be released for other service providers to be able to provide input. The *MyPlace Portal* does not enable an organisation to see who else is involved, or made the booking. This requires negotiation back through the parents and NDIS to enable releasing of funds. This release of funds seems to be unduly lengthy.

**b. the impact of the role of other Government agencies on the ICT infrastructure;**

No comment

**c. the appropriateness of the MyPlace Portal and agency facing IT systems;**

Our organisation uses a Mac platform to interface with NDIS. Initially this created some issues but these seem to have been resolved over time.

**d. the impact of ICT infrastructure on the implementation of the NDIS; and**

This has been a complex process where NDIS has been creating systems whilst attempting provide services.

Initially with the National roll-out on July 1 2016 with new systems to what had been used during the trial periods there was a massive crash, particularly in the ability to make claims that created a period of extreme financial hardship for providers, and issues that have taken many months to resolve. It has improved significantly since then. Making the necessary changes and modifications to the ITC systems has meant that there have been changes to the user interface that staff discover unexpectedly when they log in on the next working day. Some of these changes have been easy to negotiate, others have been challenging. There has not always been clear, simple to read communications about changes.

**e. any other related matters**

**Telephone Communications:** It is now great that when ringing the 1800 number for an enquiry, it is not likely that you will be on hold for over an hour before speaking to someone, and the staff answering are polite, courteous, and helpful. The additional staff have assisted in this, however they are not always able to answer specific enquiries. They then send an email to someone more knowledgeable to whom you are expecting will reply to answer specific enquiries. The name of this 'someone' is not given, nor their personal email. This causes waiting times for all issues, including financial, therapeutic, and assistive technology. There is no way of directly following this up, instead the process begins again with the call centre when responses have not been received. EG A question was raised two weeks ago and we are still waiting for a response to this. We have no way of continuing the initial discussion, instead need to raise the question again if we want to escalate a response.

**Email Communications:** Email communication appears to be the preferred method of communicating, and NDIS has a system of using generic addresses for external providers and participants. They also use this as a method for internal communications. Issues that our organisation, and participants have experienced are

- after an automatic reply that the email has been received, there is a delayed response of 2 weeks or most frequently more, if at all. *For example a 5 year old participant with a rare neuromotor developmental condition and his family have been waiting since mid July for approval of his current plan. Despite emails sent they only received one reply with general information directing them to a fact sheet.* The waiting for a response, and then gaining inadequate

information has been frustrating, and increased the stress and emotional distress the family has experienced.

- There is no way to have urgent emails attended to within a 24 hour period. *This has an impact when there is a sudden change conditions in a participant's abilities, supports, or living situation and safety issues become evident.*
- Emails have become lost. *This has resulted in potential participant's applications being lost, and in re-sending of information required for AT Requests.* As time is given waiting for contact from NDIS, time becomes drawn out, and delays issues being solved which become more complex to resolve by the delay in time.
- Delays in responding to emails of over 90 days has resulted in appeals against decisions closed without action.
- At times individual names and contact details are shared for specific issues, e.g. to solve financial issues, or a planner may request some direct interactions. This is not consistent, and if there they are away, there is no notification for the end user, who is left waiting for reply.

## **Recommendations:**

### ***MyPlace Portal***

#### **1. Service Bookings / Financial:**

- Amounts to show decreasing balance as funds have been spent, in line with plan dates
- Enable Participants to see how their budgets are being spent over the differing areas of support.
- Reduce time for release of funds from one agency to another

### ***ICT Systems***

- Filtering and responding to emails needs to happen in a more timely manner.
- Methods for noticing and covering for NDIS staff leave of greater than 2 days with an automatic out of office address, or diversion to an alternate staff member who may be able to resolve the issue. Life happens with events such as sickness, leave interrupting work.
- Creation of an urgent response system for providers with concerns to be able to contact and gain a response. This is particularly when urgent support is needed

for example assistive technology or core supports. Definitions of urgent would assist this process.

- Continuing to develop the communication systems which inform organisations of changes to the portal

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