National Disability Services

Community Participation in Action

**A Resource Guide for Disability Service Providers**





Table of Contents

[SECTION I. Guide Overview 6](file:///C:\Users\Hp%20comp\Google%20Drive\Yudit%20Random%20Thoughts%20business\Clients\2016%20NDS\Community%20Inclusion%20project\Deliverable\NDS%20CP%20guide_issued20July2016.docx#_Toc456793159)

[Who is this guide for? 7](#_Toc456793160)

[What is the main goal of this guide? 7](#_Toc456793161)

[How was this guide developed? 7](#_Toc456793162)

[Using this guide 8](#_Toc456793163)

[SECTION II. Why are things changing? 9](file:///C:\Users\Hp%20comp\Google%20Drive\Yudit%20Random%20Thoughts%20business\Clients\2016%20NDS\Community%20Inclusion%20project\Deliverable\NDS%20CP%20guide_issued20July2016.docx#_Toc456793164)

[Community participation: what is changing? 10](#_Toc456793165)

[Community participation and the NDIS 10](#_Toc456793166)

[Embracing Co–design 11](#_Toc456793167)

[SECTION III. Understanding Community Participation 13](file:///C:\Users\Hp%20comp\Google%20Drive\Yudit%20Random%20Thoughts%20business\Clients\2016%20NDS\Community%20Inclusion%20project\Deliverable\NDS%20CP%20guide_issued20July2016.docx#_Toc456793168)

[What do we mean by Community Participation? 14](#_Toc456793169)

[Role of disability service providers 15](#_Toc456793170)

[From segregation to participation 16](#_Toc456793171)

[Meaningful roles 19](#_Toc456793172)

[Relationships and Social Networks 23](#_Toc456793173)

[Student 24](#_Toc456793174)

[Volunteering 25](#_Toc456793175)

[Employment 27](#_Toc456793176)

[Community Development and the NDIS 31](#_Toc456793177)

[Local Area Coordination (LAC) 35](#_Toc456793178)

[SECTION IV. Making the change 38](file:///C:\Users\Hp%20comp\Google%20Drive\Yudit%20Random%20Thoughts%20business\Clients\2016%20NDS\Community%20Inclusion%20project\Deliverable\NDS%20CP%20guide_issued20July2016.docx#_Toc456793179)

[Community participation: are you ready? 39](#_Toc456793180)

[The Role of leaders 42](#_Toc456793181)

[Creating the climate for change 44](#_Toc456793182)

[Enabling and implementing change 45](#_Toc456793183)

[1. Involving everyone in a shared vision 45](#_Toc456793184)

[2. Getting the right workforce 47](#_Toc456793185)

[3. Bricks and Mortar: Thinking differently about buildings 53](#_Toc456793186)

[4. Transport: Facilitating access and mobility 59](#_Toc456793187)

[5. Understanding financials 72](#_Toc456793188)

[Community Inclusion Initiative: Join the Conversation 77](#_Toc456793189)

[APPENDIX 1: Additional resources 78](#_Toc456793190)

[APPENDIX 2: Implementing Co-design 82](#_Toc456793191)

[APPENDIX 3: Community inclusion initiative projects 86](#_Toc456793192)

Welcome

The National Disability Insurance Scheme (NDIS) is a fundamental shift in the way people with disability are supported to live a life of their choosing.

After three years of trial implementation, community participation continues to rank amongst the most requested supports under the NDIS demonstrating the importance of inclusion and participation to the lives of people with disability.

As the NDIS prepares for a surge in new participants, disability service providers need to be ready to respond to this demand. This means examining how they currently deliver community participation opportunities and whether this matches what people with disability and their families are seeking.

*Community Participation in Action* has been created to assist disability service providers to think about the way they support community participation for people with disability. It provides information, questions and reflections from service providers to help start the conversation with people with disability and staff.

We hope this resource will help ensure a clearer transition to the NDIS, and contribute to a society where people with disability can participate in the community as equals.

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* Autism Association of Western Australia (Perth, Western Australia)
* Bowen Flexi Care (Bowen, Queensland)
* Community Living Australia (Adelaide, South Australia)
* Inclusion Melbourne (Melbourne, Victoria)
* Karingal (Geelong, Victoria)
* Northcott (Tamworth, New South Wales)
* Possability (Tasmania)
* RED Inc (Lismore, New South Wales)
* Scope (Melbourne, Victoria)
* YouthworX NT & Step Out Community Access (Katherine, Northern Territory)

Information on each organisation and their projects can be found in Appendix 3 of this guide.

NDS would also like to thank the range of experts who worked with the Community of Practice throughout the year, including:

* Susan Fitch from The Nucleus Consulting Group
* Cat Sutton Long, Zaana Howard and Kristina Skov Aagaard from Huddle Academy
* Tim Flowers from Saward Dawson
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**Guide Overview**

**Who is this guide for?**

This guide is intended for program managers and disability support workers to help better understand issues associated with increasing opportunities for community participation for people with disability and to explore ways in which their own organisation can play a role in supporting change.

**What is the main goal of this guide?**

This guide has been developed to help service providers to think about ways to support community participation for people with disability in a changing environment. It explores some of the issues, challenges and barriers, as well as offering ideas, solutions and real life examples from service providers that are engaged in this transition already.

**How was this guide developed?**

This guide was developed as part of National Disability Services’ Community Inclusion Initiative through a community of practice with 11 disability services from across Australia.

The group met every six weeks to discuss topics seen as critical to creating new opportunities for people with disability to participate in the community. Follow up conversation took place online, by telephone and in person to explore the topics in depth and create meaningful, accessible and useful resources for the disability sector more broadly.

This guide brings together information developed through the community of practice and feedback from the disability sector so that organisations can understand the need for change and be guided through actions that can make a difference.

The information in this guide is not intended to be comprehensive to every situation. It reflects the experiences of a group of service providers from across Australia who have been looking at ways to increase community participation opportunities in the context of the NDIS.

## Using this guide

To make this guide easy to use, information is labelled with helpful icons.



This icon highlights personal or team reflection questions for topics included in this guide. These questions can act as conversation starters for team discussions, with service users and their families or prompts for planning future changes.



This icon highlights reflections, suggestions and recommendations by Community of Practice participants.



This icon is used with real life examples of community participation in action, where people with disability move from just being physically present in the community to participating in it.

SECTION II: Why are things changing?

## Community participation: what is changing?

QUOTE: “It’s around me saying this is the support I like, this is the support I need and this is what I would like to do with this support, and this is when I would like to have it.’ Catherine from Newcastle (http://www.ndis.gov.au/)

The United Nations Convention on the Rights of Persons with Disabilities is clear that people with disability have a right to ‘full and effective participation in society on an equal basis with others.’

The National Disability Insurance Scheme (NDIS) principles recognise that people with disability have the right:

* to realise potential for physical, social, emotional and intellectual development
* to participate in and contribute to social and economic life to the extent of their ability
* to exercise choice, including reasonable risks in the pursuit of their goals

Although some disability service providers actively and successfully support people to pursue their goals and ambitions in the community, many more such services will be needed to meet demand under the NDIS.

## Community participation and the NDIS

Throughout the NDIS trial period, community participation has consistently been in the top three most requested support needs identified by people with disability. This highlights how important being involved in the community is for people with disability.

Disability service providers need to think about ways they currently support community participation and whether this matches what people with disability and their families are looking for. In some cases providers may need to modify what they offer in order to meet customer demands and to attract more business.

Service providers are increasingly being asked to play a facilitating role, supporting people with disability to access mainstream and community services rather than providing activities themselves. New NDIS functions such as [Information, Linkages and Capacity Building](http://www.ndis.gov.au/community/ilc-home) and Local Area Coordination will also play a significant role in connecting people within their communities.

The move from block funding to individualised funding under the NDIS is also changing the way service providers can support people with disability. Providers will need to explore the most cost effective ways to meet people’s support needs.

## Embracing Co–design

The National Disability Insurance Agency (NDIA) places a strong emphasis on co-design in their development of the NDIS. For the NDIA co-design means “involving the end-user of the service or experience in the design phase of a project or piece of work that aims to improve outcomes, such as service quality or solving a problem.”

In the Community Inclusion Initiative we took this to mean that people with disability and families should always be involved where possible in the thinking, planning and implementation of ideas and services which meet their goals and lifestyles.

Doing this well requires a range of skills that people with disability, families and organisations may need to develop. Many people with disability may not have experienced real choice or been asked to consider possibilities outside of their immediate experience. Some may not be aware of how to achieve certain goals, or even describe them. People may need specific supports to engage in conversation – or use alternative and augmented forms of communication.

Co-design is principally about partnerships. Service providers that can demonstrate capacity to engage, listen and work in partnership with people with disability and their families to design and implement new service models will be well positioned to deliver on the principles of the NDIS.

The Community Inclusive Initiative explored co-design with the community of practice. We wanted to better understand co-design in a disability context, how it works and what it means for disability service providers supporting people to be part of the community.

Participants used co-design principles in their individual projects, in their work with people with disability and in developing these resources. More information on co-design approach and process can be found in our report and on the NDIA website:

* <https://www.nds.org.au/images/events/files/huddle_report.pdf>
* Appendix 2 also provides some useful reflection tools to promote and use co-design in your work

Text Box: Co-design is ‘deliberately engaging users of the system, delivers of services and other experts to actively understand, explore and ultimately change a system together’.(quote from Huddle Academy)

SECTION III: Understanding Community Participation

*‘If ordinary citizens see people being ‘occupied’, ‘programmed’ or ‘minded’ in the community, then they are likely to assume that that is all they can cope with, and that they need a special worker to be with them to do those things. This squeezes out the possibility of an ordinary citizen being in an accepting relationship with the person (Sherwin 2008)’*

## What do we mean by Community Participation?

Community participation is not something many people have reason to think about. Many people participate in their community every day without thinking about it.

They might:

* go to work
* go to the shops
* go to school, or places of further education
* travel using public transport or their own transport
* see and talk to friends, family, colleagues, strangers, shop assistants, café and bar staff and other professionals
* volunteer or join clubs and groups with others who share similar interests and where they feel like they can make a contribution and belong

These things are all part of participating in the community.

Many factors can affect our participation in the community. These might be:

* **personal** (such health and mobility, poverty, support from family and friends, confidence, life experience and interests)
* **societal** (such as distance, the physical accessibility of buildings, transport and the community; accessibility of information; attitudes and actions of others in the community)

For people with disability, community participation can also be affected by **systemic** factors, such as availability of supports for disability needs, and support to access education or employment. For some people this can mean reliance on support from disability service providers.

## Role of disability service providers

The changing role of disability service providers in supporting community participation mirrors the broader rights movement for people with disability.

In the past, people with disability were supported using an institutional approach and often treated as patients. Supports were mostly provided in segregated settings such as special schools, large institutional accommodation and onsite centre-based day services.

Recent decades have seen deinstitutionalisation with people moving from institutions to smaller group homes in the community. Disability service providers have increased focus on people being part of their local community with more emphasis on developing life skills, employment opportunities and independence. Funding agreements with governments tied activities to people’s plans and goals to better connect people with mainstream and community services.

Such opportunities are still not widely available. Community participation services for many people with disability continue to operate from purpose built day centres.

Client choice of activities is often limited to established programs and timetables typically run during the day between 9am and 3pm, Monday to Friday. These block-funded programs often emphasise group activities and service efficiency over individual outcomes.

**Medical Model**

* Person as patient
* Institutional services
* Meet basic needs
* Segregated settings

**Deinstitutional Model**

* Person as ‘client’
* Community based specialist services
* Build skills and competencies
* Present in Community

**Community Participation Model**

* Person as citizen
* Homes, communities and neighbourhoods
* Create enabling inclusive communities
* Participation

Under the NDIS the role of disability service providers in supporting community participation is changing again. People with disability want more choice and control over their supports. Individual funding means that people with disability are becoming empowered consumers and service providers must adapt to show they can meet people’s needs.

The wider community is also starting to recognise their responsibility to make communities more inclusive through accessible housing and transport.

## From segregation to participation

The move from an institutional approach to community inclusion can be thought of as a move from Segregation to Participation.

This sounds simple. However there can be many steps involved in supporting one person to make this journey, and even more for a whole organisation.

‘**Participation**’ can mean different things to different people. It can mean:

* the nature and number of our personal relationships,
* making a contribution and feeling valued

Having a community role based on your skills and what make you feel good. Participation does not stop people being in groups but they should be groups that people choose to be part of and reflect their interests.

Encounter

Encounters are everyday interactions with others. It might be talking to a barista whilst buying your daily coffee, catching up with people after a yoga class, engaging in a conversation with your hairdresser, being introduced to someone new at work, or even helping someone with directions.

We might have many interactions like this in our day. However, people with disability have fewer of them. There are often many reasons for this but there are ways to increase opportunities for people to have more encounters.

‘Encounters’ can be seen as a step towards developing relationships and friendships. They can turn into a person being recognised and greeted and perhaps invited to other things. An encounter one day can become a connection, and then a relationship and maybe a friendship. This breaks down isolation, segregation and leads to participation.

However an encounter can also be a good thing in itself. There is pleasure and a value in interaction with other people in the world and in our community.



Max’s Story

Presence

Max is a support worker at a day service. He loves cooking and TV cooking shows so decided to do a course in hospitality and food management. Max and his boss realised they could use his new skills to run a cooking program at the day service. Each Thursday Max takes a group of people from the service to his old TAFE to use the commercial kitchen. They spend a few hours cooking at the TAFE using Max’s menu idea and then go back to the day centre.

Encounter

Max starts going to the local market with some of the group to buy fresh ingredients. As the weeks pass the local stall holders start to chat to the group members.

Participation

Max realises that each member of the group has different cooking ambitions so he uses local networks to explore possible community connections:

* Ash gets work experience at a local cafe to learn pastry cooking
* Bonnie attends a ‘Cooking for 1’ class at the neighbourhood house to help prepare for moving out of home
* Tran volunteers at a meals program for homeless people

Max provides different levels of support as each person participates in their cooking choice. Initially this support is intensive but reduces over time as each person learns more skills and becomes more confident.



* Can you think of an example of someone using your service which represents ‘presence’?
* What opportunities do people have for random encounters?
* How could participation happen for these people?

## Meaningful roles

*“If a person with disability has few or no valued social roles, there will be limited opportunity to grow personally, be seen positively and connect with others”* (Sherwin)

An important factor in community participation is doing things that are meaningful to you. Meaningful can mean different things to different people, for example, Meaningful” can mean…

* A sense of contributing
* Having purpose
* Acceptance
* Belonging
* Recognition
* A sense of pleasure

It’s also important to remember that people can have a number of different roles at home and in the community.

Think about your own roles and which ones are meaningful to you, such as partner, parent, family member, worker, friend, volunteer, home keeper, student, religious, spiritual or political participant, hobbyist or member of a civic, political or sporting organisation.

The Role Checklist by Frances Oakley[[1]](#footnote-1)

What roles are meaningful for you? Take a moment to complete this activity for yourself and repeat with people who use your service.

Tick if you performed these roles in the past, present or intend to in the future.

|  | **Past** | **Present** | **Future** |
| --- | --- | --- | --- |
| Student at school part or fulltime |  |  |  |
| Worker part or fulltime employment |  |  |  |
| Volunteer regularly for a community group, school, political campaign |  |  |  |
| Care giver regularly for a family member or friend |  |  |  |
| Home maintainer regular doing housework or yard work in your home |  |  |  |
| Friend regularly spending time or doing something together |  |  |  |
| Family member regularly spending time or doing something with a relative |  |  |  |
| Religious participant in activities associated with your religion |  |  |  |
| Hobbyist involved regularly in a hobby (e.g. sewing), activity (e.g. playing a musical instrument), participate in a club (e.g. stamp collecting) |  |  |  |
| Participant in organisations regularly as a member of a group or club (e.g. committee member), civic or political organisations |  |  |  |
| Other: any other role not already listed (give details) |  |  |  |



* Do you have a choice about what roles you do and when?
* Do you know what roles are important to the people you support?
* How different are your meaningful roles to those of people you support?
* Which roles can help increase community inclusion for someone? Why?

Meaningful roles can lead to good outcomes for people

* They help build community connections
* They increase friendships
* promote a sense of achievement and self-respect
* Contribute to good physical and mental health
* Learn new skills
* Increase independence and reduce reliance
* Exercise rights and encourage self-advocacy
* Increase lifestyle options

Under the NDIS, disability services will have to market services to people to maintain financial viability. People will purchase services that are **meaningful to them** rather than choosing from a range of timetabled activities offered by a service.

| **In the past – Focus on Activities** | **In the future – Focus on Interests** |
| --- | --- |
| * Busy days filled with group activities * Activities don’t interest everyone – people fit the group * Have a limited purpose * Rely on paid support * Expectations are set low and people ‘settle for less’ | * Personally chosen and have purpose * Tailored to passions, abilities and values * Culturally significant * Build connections with the community and informal supports * Lifelong learning |

Support worker responsibilities

* Think broadly about all the different roles a person can have in life
* Build peoples’ capacity over time for decision making and risk taking
* Look out for opportunities where people can contribute through volunteering
* Identify organisations and services that are funded to make disability inclusion part of their business, e.g. neighbourhood houses, state sporting associations, libraries, council run recreation and leisure centres, TAFE
* Understand your role as a facilitator and community connector
* Encourage new opportunities to explore new interests
* The first connection or group might not be the right one. Be ready to try something else
* Plan to withdraw support over time as informal supports increase



* What challenges has your organisation faced in creating meaningful roles?
* How have people been supported to have meaningful roles through your organisation and move from Presence to Participation?

## Relationships and Social Networks

The relationships in our lives are an important aspect of our participation in the community. Having diverse relationships in the community can be a form of community participation. Diverse social networks can also increase opportunities for different kinds of community participation. They help people:

* Make connections with a range of people across different areas of interest (informal supports)
* Decrease time spent in group or specialist activities for people with disability
* Can be facilitated by paid supports by routinely going to places where friendships are more likely to happen

Disability service providers and disability support workers can play a role in supporting people to increase their social networks.

Actions for service providers

* Work together to think broadly and creatively about community options
* Assess people’s close social networks – do informal supports outnumber the paid supports?
* Look at people’s interests and think laterally
* Support people to make informed decisions about taking reasonable risks – nothing will change by doing the same thing over and over
* Ensure staff understand a person’s right to take chances and make mistakes – we all do
* Make sure there is a backup plan in case something goes wrong
* Engage family in discussions about choices, potential risks and how they can be managed

Support worker responsibilities

* Get to know the person you are supporting
* Ask people about their relationships and how they feel about them
* Be honest with organisations about how much support a person needs to fully participate and ensure that support is available. Use the back-up plan if something goes wrong
* Help the person to become a good contributor/member, e.g. arrive on time, help with setting up and packing/cleaning up



* Help the person learn the names of key people
* Think about people who use your services and their social networks. How many close people are in their networks?
* Do you know the important people in their lives?
* What are the possibilities for strengthening their social networks?
* Who is best placed to facilitate new social networks and relationships for people?

## Student

This is about providing support and information for people to learn new skills or knowledge. It might be about doing a course, or going to TAFE or university. It might be about learning a new skill to be more independent. It might be about learning for fun and to meet people. It’s about recognising the importance of learning new things all through life.



* Think of any studies you have done in the past few years. What steps did you take to make this happen?
* How did you feel about studying and learning? Did you meet any new people?
* How might this apply to people you support? How can you assist them to participate in study and adult learning? What supports might they need?

## Volunteering

Volunteering can be a pathway to employment by providing opportunities to learn new skills and gain work experience, especially when formal work and education opportunities might be limited. Volunteering is also a great way to get involved in the local community, increase ‘encounters’ and develop friendships. Volunteering is good for health and well-being – it builds a sense of satisfaction, pride, purpose and accomplishment.

Volunteering is a ‘win, win’ for everyone. It plays a critical role in supporting community organisations especially not for profit organisations that rely on volunteers to deliver services – think meal delivery services, reading programs in schools, sporting competitions, visitor guides in cities, social clubs and groups.

Volunteering helps to build social networks, connectedness and community resilience. Volunteering is social inclusion in action; and community development one person at a time



Sarah’ Story

Presence

Sarah loves completing jigsaw puzzles. Staff at the day centre bring out simple puzzles every day for Sarah to complete in the quiet period before she goes home at the end of the day. Staff occasionally take Sarah to the local library where she can borrow different puzzles. The puzzles are mostly targeted to young children and Sarah is disinterested in them.

Encounter

Sarah and the support staff start stopping by the local op shop while on their way to the coffee shop. They look for reasonably priced puzzles Sarah can purchase. The op shop volunteers start to chat to Sarah each week as she becomes a regular in the shop. Sarah tells the volunteers that she likes completing puzzles but is bored doing the same ones over and over. She also tells the volunteers that some of the puzzles they are selling have pieces missing and that she doesn’t like this. The op shop staff tell Sarah and the support worker that they never know if they are selling complete puzzles or whether pieces are missing as they do not have the time to check each one.

Participation

The op-shop volunteers ask if Sarah is interested in spending time in the sorting room with the other volunteers to complete and check the donated puzzles. Sarah is interested but a bit anxious about coming to a new place where she does not know anyone. The support worker offers to come for a while until Sarah feels more confident about coming on her own.

Sarah now spends three mornings a week at the op shop checking and completing a range of different puzzles. She completes the easy ones in the shop and takes the complex ones home where she has time to complete them. The op shop is happy because the stock of puzzles is turning over regularly and ones with missing pieces are binned. Sarah enjoys her volunteering, attends independently and is included in all the volunteer celebrations and events. She is no longer accompanied by a support worker.

## Employment

Having a job is one of the most common ways that people participate in the community. It is a way to meet new people, have a valued role, and do something that is related to our interests, to grow and develop and build independence and confidence. Paid work can also further expand opportunities by increasing financial independence.

People with disability are less likely to be employed than those without disability. This can impact on people’s self-esteem and sense of wellbeing as well as their general independence.

There are lots of different ways to think about work including:

* Open Employment
* Self-employment
* Supported Employment
* Part-Time and Full Time Employment
* Casual and Contract Employment
* Permanent Employment
* Paid and Unpaid employment
* Volunteering
* Work for wages or salary, in exchange or in kind
* Internships and apprenticeships

Your organisation can play a critical role in supporting people to think about, find out about and to explore employment opportunities.

Think about how well your own organisation does this:

Day Service actions

* Employment is seen by all as a real option for people
* Career planning forms part of individual plans
* Opportunities are provided for people to know what work is
* Job readiness skills are taught
* Clear pathways are developed for people to transition from volunteering to work experience and job placement
* Close connections are built with community and local businesses
* Do your staff or do you, believe people with disability can work?
* What does your organisation do to assist people to think about employment?
* What opportunities does your organisation provide for people to know what work is?
* What opportunities are there for your organisation to facilitate employment opportunities under the NDIS?
* How do organisations balance government expectations of people having a job with people’s right to choose not to work?



*The following quotes were made by our Community of Practice reflecting on meaningful roles*

Successes

* “’Meaningful roles’ is like throwing mud that sticks. We need to try many different options to see which ones people are most interested in.”
* “We ask people who they want to be their friend, think about why they like that person and we help them become a friend and be a friend, like calling them up. We include friendships on Individual Plans.”
* “Recreation and leisure are great ways to build skills and confidence. They build networks, people can take on volunteer roles which help them to practice their skills and realise their strengths and interests.”
* “Helping people find meaningful work is really important. Even two or four hours a week of employment can make a difference. We are getting NDIS plans with this specified.”
* “We are using the meaningful roles checklist (p20 of this guide) in training staff. We’re also using it when developing individual plans to help people think about the different roles they can have.”

Challenges

* “Many schools and families don’t have expectations of employment. We need to start much earlier putting employment forward as a real option.”
* “Some people limit their work hours because they don’t want to lose their Disability Support Pension.”
* “Many people with autism don’t want to spend time with others. Finding a meaningful role in the community can be difficult.”



Bec’s Story

Presence

Bec attends a day service which is close to her home. She likes many of the activities she does at the service but her real dream is to work with children. Each day she travels past a local child care centre, looks in and wishes she could work there. Bec tells her support worker of her dream to work with children and together they make a list of all the different ways this could be achieved.

Participation

Bec and two other women take part in a kid’s education project run by the disability service, designed to develop positive attitudes of disability through education. Bec learns how to plan lessons for pre-schoolers and develops a program on inclusion using art and craft as a way to engage the children. Bec then delivers six lessons on inclusion at a local childcare centre. During the sessions Bec tells the child care co-ordinator of her dream to work with children. She is offered a period of work experience to get to know the children, understand the child care role and understand how childcare centres operate. Bec is now a paid employee at a local childcare centre and is realising her dream. Her Facebook status: ‘Employee of (name) Childcare’. A girl from the childcare centre was really excited to introduce her Mum to Bec when they met in the street the other day.

## Community Development and the NDIS

Even the best disability support workers and service providers cannot bring about community inclusion on their own. An inclusive society needs nurture through community development. This involves all community members taking collective action to identify and create solutions to common problems.

Disability service providers play an important role in community development by working with local businesses, sporting organisations, mainstream services, local government and others to create connections, support relationships and build bridges between specialist and regular community settings.

It is important for service organisations to continuously reflect on how they support people to be valued members of their local community.

| **Community Development is:** | **Community Development is not:** |
| --- | --- |
| * Addressing a common issue * Owned by the community * Led locally and collaborative * Experimental and opportunistic * Focussed on objectives | * Service delivery (but services can participate in community development) * Social work * Advocacy on behalf of individuals * Tokenistic or just a “feel good” exercise |

There are many benefits to successful community development

* More accessible communities
* Encourages change in societal views about disability
* People with disability feel empowered and valued
* Increase in personal wellbeing
* Increase in social connections and relationships
* Diversity and rights are celebrated
* Increased return for the whole community on investments
* Reduced dependence on specialist supports
* Integrated planning with other services increases accessibility and returns

Actions for service providers

* Send clear messages about role of community development in your organisation
* Develop a clear plan to decentralise services and use community settings
* Know your organisation’s strengths, gaps and opportunities
* Listen to service users & families and solve problems through co-design
* Support leaders and champions in your organisation
* Share information and educate others on ways to increase inclusion
* Connect with local businesses, volunteer organisations and mainstream services in your community and get to know who are the influential people
* Establish formal agreements with community organisations
* Lobby for community infrastructure changes
* Connect with volunteer networks
* Initiate and support volunteer drives to bring volunteers into your service

Actions for support workers

* Facilitate and empower people to self-advocate
* Listen and get to know the people you support
* Help people envision a better life for themselves
* Network with like-minded people to initiate change
* Be creative and opportunistic
* Think personal: what role do you play in your community?
* Create opportunities for people you support to have random encounters
* Use your unique perspective in your organisation and share your experiences
* Don’t give up – true participation and community building takes time and effort to facilitate and sustain
* Be generous - share ideas and practice with others



* What community development activities is your organisation involved in?
* What other actions can we all take? Whose responsibility is it?
* What actions are the most important?

**Using volunteers to increase community development**

Volunteers are a key link to building social networks. They:

* Run most sporting, cultural, spiritual and recreation clubs and groups
* Can be found in every community
* Have a shared interest they are passionate about
* Are motivated to contribute to their community
* Keen to welcome new volunteers
* Enjoy valued status in the community

People with disability and disability service providers can benefit though engaging volunteers to support people’s community inclusion by:

* Broadening a person’s informal support networks
* Teaching new skills based on interests e.g. photography, sailing, IT, bushwalking, cake decorating, campaigning
* Helping make connections to shared social, cultural, spiritual, political and recreational interests
* Providing opportunities for social events, e.g. meetings, nights out, meals, fundraising, holidays
* Introducing new people who may become friends



* Does your organisation work with volunteers to increase community inclusion for people?
* What challenges has your organisation faced in working with volunteers and how have these been overcome?
* Have you explored volunteering opportunities for service users as a way to increase community inclusion?
* What challenges did you all face?

What messages can be conveyed to the community?

* Recognise people with disability as an important part of your community
* Look around your own environment for ways to improve accessibility
* It’s not just ramps! Think accessible information and communication too
* Consider ways to increase employment of people with disability in your own workplace
* Consider opportunities for people with disability to participate in leisure activities
* Use contracts to require inclusive practices
* Embrace universal design and accessibility approaches in all that you do – start small and see the rewards!
* Volunteer and support people with disability who want to volunteer

**Community Development and the NDIS**

Under the NDIS, community development will take place in the context of the emerging Information, Linkages and Capacity Building (ILC) framework.

ILC activity will increase across Australia during the transition to full scheme. It has five funded streams:

* **information, linkages and referrals** to connect people with disability, families and carers with appropriate disability, community and mainstream supports
* **capacity building** for mainstream services
* **community awareness and capacity building** to ensure greater inclusivity and accessibility of people with disability
* **individual capacity building**
* **Local Area Coordination**: designed to support people with disability to explore and build an ordinary life within their communities.

## Local Area Coordination (LAC)

* develops relationships between NDIS, people with disability, families, carers and the community
* connects across all streams of ILC
* works with individuals to enhance supports
* works with communities and mainstream services to promote and facilitate community inclusion
* services ‘hard to reach individuals and communities
* explores alternative options to funding or limit to low cost one off supports
* supports people to build new networks

Providers will need to engage with these NDIS initiatives in order to maximise community inclusion outcomes for people with a disability. For the latest information on ILC and LAC visit the NDIS Information, Linkages and Coordination page on the NDIA website: <http://www.ndis.gov.au/community/ilc-home>



*The following quotes were made by our Community of Practice reflecting on community development*

* **Persistence**: “A young person wanted to volunteer at a local shop so started visiting with a support worker who helped facilitate communication. Initially the business owner was not engaging or very supportive but after a few casual visits something just clicked and now the person is a regular volunteer.”
* **Confidence building and ongoing support**: “A person with an interest in photography was supported to go to the local camera club. Over time the person became more confident and the members more engaging. When the support worker was unable to attend the person was encouraged to go on their own with an ‘escape plan’ if they felt uncomfortable. The person has now joined the club and is posting photographs on social media. The disability service checks in from time to time to make sure everything is still working well for the person and the club.”
* **Time and adaptability**: “Recognise that it takes time for relationships to build between community members and people with disability. The first thing a person tries may not be successful for a range of reasons but that means we try something else, until we find the right fit for everyone.”
* **Planning:** “Factor in sufficient planning time to think creatively about how a person’s goals can be reached. This helps to think of everything that is required including contingency plans in case things don’t go as expected.”
* **Mutual benefit:** “For the relationship to work, it must be a ‘win-win’ for the person and the community organisation or business. There must be positive outcomes for both.”
* **Formal Agreements**: “We developed formal agreements with other agencies to ensure their messages are accessible to the full community.”
* **Network**: “Use the networks of staff, the board and families. It is much easier getting into an organisation if you have a personal contact.”
* **Ownership**: “Multiple departments within the organisation have responsibility for community development initiatives. This makes us responsible to each other and also minimises the risk of work ceasing if one person leaves.”
* **Think beyond your own boundaries**: “A photograph resource was developed with many different options for employment, training and recreation. One young person chose boxing and regularly attends at a local centre. No one would ever had thought of that as an option.”
* **Transition**: Plan transition time that is individualised to the person and the works for the group or organising they are joining. Maintain support staff until the person and the group are confident.”
* **Support the support staff**: “Staff often say the community is not ready but often we find it is the staff who are not ready for a range of reasons: concern there may be a behavioural incident which the staff member isn’t confident to manage; lack of confidence on how to facilitate conversations between the person and members of the community; and sometimes, the extra work involved to ‘work differently’ from historical practice. We provide lots of support to the staff to help them change.”
* **Volunteers**: “Volunteers are hugely valuable. They enable so many different interests to be met and come with skills, networks and potential broader opportunities. They work best where they are engaged for a specific task for a set period of time. If the relationship works well during this time it will continue naturally. However, volunteers are not free. They need to be screened, trained, supported and supervised. We need to negotiate what a volunteer can and cannot do, such as personal care. There can be industrial issues if volunteers are putting people out of a job.”

SECTION IV: Making the change

*“A leader takes people where they want to go. A great leader takes people where they don’t necessarily want to go, but ought to be”. Rosalynn Carter*

**Community participation: are you ready?**

Under the NDIS, participants will have a plan containing Social Participation & Independence goals which include:

* What I want to achieve (my objectives)
* How I will know that I have achieved it (measure)

Ask yourself if your organisational culture is conducive to change and doing enough to create inclusive opportunities and spaces for people with disability in the community? For example:

* Does your service provide your clients with the opportunity to develop their skills, hobbies or abilities in a more participatory way?
* Are there regular opportunities to share new ideas and effective strategies?
* Do you apply group problem solving?
* Are outcomes shared?
* Are people with disability part of the team?

Even if you answer yes to the above, you should still be considering whether your current vision and strategies are sufficient to compete with other providers under this new market reality.

From an organisational point of view:

* Are your policies and procedures supportive of the NDIS changes and requirements, especially community inclusion?
* Are staff ready for change and supported to show innovation?
* Do your staff policies support staff discretion and exercise of judgment?
* Do staff feel and know that the organisation will support them?
* Are successes celebrated?
* Is poor practice used as a learning opportunity?

Do your support workers:

* Understand the NDIS principles and planning process
* Know how to support people to implement their plans
* Have the necessary technical and soft skills
* Understand their role and the roles of family members, informal supporters, volunteers and specialists



* Does your organisation have a community inclusion vision for people with disability?
* Is your vision consistent with what your customers want, and the goals of the National Disability Strategy and the NDIS?
* What steps are you taking to implement your organisation’s vision?
* How can your organisation find out what people want and need from you?
* How ready is your workforce and organisation for increasing community inclusion?
* Can your organisation answer yes to the above points?
* Are there any industrial relations and rostering implications?



Thoughts on Organisational Readiness

* “Staff need to understand their role as a facilitator, step back and withdraw support and see a world where they are no longer required in that person’s life.”
* “People with disability and families are a key part of our change process in training staff. We get them to tell their stories of the change in their lives.”
* “Organisations have nothing to fear if they are delivering what people want. We must work as a customer service organisation by responding quickly to their requests and delivering exactly what they want. We take time to build natural supports and then reduce paid support over time. This takes a lot of time.”
* “It’s really important to do what you say you are going to do and to do it in a timely manner. We are also realistic and honest about the services and support we can provide.”
* “We no longer have EBAs but employ solely on the Award. We’re reasonably confident the Fair Work Commission won’t award big pay increases so that is helping set our salaries budget.”
* “We have a mix of casual staff who can work for an hour to do specific tasks and permanent staff who can work regular shifts.”
* “Enabling dignity of risk is essential and part of our mandatory training. We use therapists to help increase independence such as mobility and communication.”
* “Our pathway training for support workers includes monthly modules with competency components to be completed. The training is a way of valuing and enhancing the great role our support workers perform and staff comments indicate they appreciate the opportunity to learn and develop in their role.”

Challenges

* “How to be an ethical organisation? How to balance the needs of people with disability with the needs of generally low paid staff? We have lost several good staff to completely different sectors because we transferred them to casual contracts and now they cannot get loans or mortgages because of their employment status. It’s just not sustainable to have an all casual workforce. We cannot invest training in people who can leave at the end of a shift. It also leaves us open to poaching – we train people and other services take them.”
* “Casual staff incur a 25% on cost. This can’t be recovered through smart rostering. And there are big risks to quality if the workforce is nearly all casual.”
* “It’s almost impossible to fund training within the NDIS funding.”
* “It’s really difficult to supervise staff when they are working out in the community. It can take days out of a manager’s week to assess and supervise staff working across large areas.”
* “Dealing with industrial issues is very challenging and emotionally draining.”
* “There is still tension around what community inclusion looks like within a day service model. Presence, Encounter and Participation is helpful to understand the difference.”
* “We don’t have the number of networks or level of volunteer support in small communities. There are less and less people available to do this work.”
* “We need to improve the way information is given to support workers”

## The Role of leaders

For change to be successful, leaders need to create a sense of urgency, recruit powerful change agents among their teams, build a vision and effectively communicate it, remove obstacles, create quick wins, and build on the momentum.

They should be involving relevant stakeholders in the conversation and managing resistance to change.

The role of leaders is making change happen

* Have a vision for full community participation and how to get there
* Listen to stakeholders - customers and staff – and reflect feedback in vision and process
* Encourage and support all staff to ‘push up’ their ideas
* Take reasonable risks and be innovative in pursuit of vision
* Resource ideas properly to become practice
* Recognise leaders and champions of change are present at all levels of an organisation and their skills are vital to drive innovation
* Manage the ‘no’ – be able to respond to naysayers, resisters and blockers

Convincing people that change is necessary can be challenging. It takes strong leadership and visible support from key people within the organisation to drive the change. The following section contains information and suggestions on how this change can be implemented.

This section aligns with John’s Kotter Change approach and provides practical suggestions from the Community of Practice discussions.

Kotter’s model proposes a series of steps and actions that if followed have a high probability of ensuring change is successful.

**Key actions to work on include**:

* Creating a climate for change
* Engaging and enabling the organisation
* Implementing and sustaining the change

## Creating the climate for change

As leaders it is important to have honest conversations about what is happening in the marketplace and with the competition. The more people are talking about the need to adapt and change, the more sense of urgency that can be built.

Service provider responsibilities

* Examine and discuss community participation opportunities that should be, or could be, exploited
* Start honest discussions, and give dynamic and convincing reasons to get people talking and thinking about the need to do things differently
* Involve people with disabilities, their families and other key stakeholders to strengthen your argument and bring more value to the conversation
* Identify threats and develop scenarios showing what could happen in the future if some measures or changes don’t happen

## Enabling and implementing change

Enabling and implementing changes in your organisation will involve communicating vision, empowering people to action, and building changes that everyone can commit to.

Below are thoughts and suggestions on topics that were of importance to our community of practice members when considering improving community participation opportunities for their clients.

Topics focus on:

1. Involving everyone in a shared vision
2. Preparing and upskilling workforce
3. Bricks and Mortar: Thinking differently about buildings
4. Transport and mobility
5. Financials

## 1. Involving everyone in a shared vision

What can support workers do?

* Facilitate service users to self-advocate - become their champions
* Represent service users’ ideas in planning sessions & team meetings
* Challenge conventional practice – ‘if it didn’t look like this what could it be’?
* Share good practice with colleagues and lead by example – walk the walk
* Be the positive person excited about change. Be creative about how it can happen

What can team leaders and managers do?

* Create an authorising environment – encourage staff to be innovative
* Commit to a rights based approach – no management decisions unless directed by people who are impacted
* Understand and practice co-design – it’s essential under the NDIS
* Provide resources to facilitate service user and family engagement, mentoring and peer education
* Be clear about what the organisation can commit to and what it can’t
* Ask ‘what is working’ and ‘what is not working’ and be open to all ideas
* Only accept a level of service you would agree to – if it’s not ok for you, why is it acceptable for someone else?

What can CEOs and Boards do?

* Know how the vision for community participation is put into everyday practice
* Establish clear mechanisms for input from service users, families & staff
* Always respond to keep the authorising environment ‘open’
* Review systems and processes – do they enhance or stymie practice?
* Commit resources and time
* Use evidence to plan the future and transition to the NDIS
* Seek continuous improvement – ask “what can we do better?”



**Engaging people with disability and families**

* Service users and families are experts – work together
* Engage people with disability as peer educators, mentors and change agents
* Have a clear message about change – the same message for all audiences
* Provide information in accessible formats to fill knowledge gaps and help people make informed choices – Easy English, pictorial, translated, video
* Communicate using preferred styles – 1:1 chats, group discussion, email
* Have responses ready for positive and negative feedback

## 2. Getting the right workforce

Under the NDIS the demand for skilled disability workers will increase significantly. Roles and skill mix will change in response to consumer demand. Staff will need a different balance of workforce skills to support community inclusion.

A key question will be: do you have the right people in the right place with the right skills?

| **In the past** | **In the NDIS future** |
| --- | --- |
| * Emphasis on technical or ‘hard’ skills – people hired for set roles such as instructing, teaching, qualifications, and hobbies. These skills are easier to measure. * Activities often based on staff skills * Work to a regular timetable | * More emphasis on behavioural or ‘soft’ skills which maximise independence * Capacity to support different individuals * Flexible work hours |

Critical workforce skills for the future

The types of skills people will need to support community inclusion are changing. Do your staff have the ‘soft skills’ they will need?

| **Examples of ‘Soft Skills’** | |
| --- | --- |
| Person Centred   * Always has the person at the centre of decision making * Uses a strengths-based approach based on human rights | Can support participation & inclusion   * Provides just the right amount of support to enable education, employment, recreation and lifestyle choices * Knows how to step back from providing ongoing support |
| Innovative   * Flexible, creative and resourceful * Thinks outside own experience and knowledge * Always looking for ways to improve outcomes * Uses time and resources effectively – a good researcher | Good customer relations   * Communicates appropriately with people with disability * Works cooperatively with families, the organisation and other important stakeholders * Respects culture and diversity of people and their families * A team player |
| Personal accountability & awareness   * Takes responsibility for own work practices, learning and skill development * Reflects on own practice and can change approach * Understands how own values and attitudes can increase or decrease community inclusion opportunities * Understands the role of facilitator of community inclusion – they are not a ‘special friend’ | Community engagement & education   * Develops networks * ‘Gets’ community inclusion * Presents disability positively to community, volunteers and stakeholders |



* What does your current workforce look like? What skills do they have?
* Do their skills influence the services you provide?
* Is there a match between skills and what people with disability and families want?
* Do you have strategies in place for filling skills gaps?
* Have you started implementing them?

Workforce Skills Assessment Matrix

Below is a skills assessment matrix that can be used to start identifying the skills within your workforce.

* Step 1: Identify the workforce members you want to assess and the skills you are looking for (both hard and soft skills)
* Step 2: Plot these into the matrix (see sample below)
* Step 3: Rate each person against the skills using the below rating scale.

**Rating Scale 1 to 4**

4. Highly skilled: expert who can train others

3. Skilled: competent and does not need assistance

2. Partially skilled: some gaps in skills and requires assistance

1. Not skilled: skill gap and cannot perform work

Only people with scores of 2 and above should be counted as having the skill.

Sample completed matrix

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Skill / Staff member | Betty | Bob | Bruce | Bindi | Brenda | Bowen | Number of people with skill |
| Medical Administration | 4 | 1 | 2 | 3 | 1 | 2 | 4 |
| Sewing | 3 | 4 | 3 | 1 | 3 | 1 | 4 |
| Using an iPad | 4 | 2 | 3 | 3 | 3 | 3 | 6 |
| First Aid | 4 | 4 | 4 | 4 | 4 | 4 | 6 |
| Behaviour Management | 3 | 3 | 2 | 2 | 1 | 4 | 5 |
| Graphic Design | 1 | 1 | 1 | 1 | 1 | 1 | 0 |

Workforce Skills Assessment Matrix Template

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Skill / Staff member | Insert name | Insert name | Insert name | Insert name | Insert name | Insert name | Number of people with skill |
| Insert Skill |  |  |  |  |  |  |  |
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**Determine soft skills**

* Ask ‘real life questions’
* Role play different scenarios
* Observe performance over a period of time
* Ask staff to self-assess
* Ask service users to assess staff
* Review complaints data and ‘compliments’

**Identify good coverage and gaps**

* Assess existing skills
* Determine whether skills available match service users’ choices
* Identify additional skills required
* Include service users in the assessment
* Recognise skills and attributes need to be relevant to the organisation as well as the individual client

**Develop strategies to address gaps**

* Be clear about expected behaviours
* Always model best practice
* Reward good practice and act immediately on poor practice
* Provide internal & external mentoring opportunities
* Use active coaching to change behaviours
* Review policies & procedures to support community inclusion

Community of Practice ideas and suggestions icon. On the left: Light bulb illustration.Text beside it reads: Community Of Practice and Suggestions.


The following quotes were made by our Community of Practice reflecting on their current workforce and readiness for the NDIS

Recruitment

* “We changed from a three day orientation course to a three day paid training course prior to employment to assess suitability for positions and a match with the organisation’s values. Not everyone is offered a position at the end of training.”
* “Potential staff complete a one page personal profile that tells us about them and their strengths. People with disability are always on the interview panel.”
* “We employ people on a contract to provide support to just one person. They know they have work for as long as the person with disability wants them.”
* “We offer TAFE placements to students and get a good idea of whether they will be a fit for our organisation when qualified.”
* “Six weeks is the critical point in employment. If a person is not performing by then, waiting for the three month probation period to end is too late.”

Hard and Soft Skills

* “Both hard and soft skills need to be balanced but soft skills are more important.”
* “We’re in a remote region and rely almost exclusively on a casual workforce. The right soft skills are essential; we provide training for the technical skills.”
* “We get our really good staff to mentor new staff. They see good practice and how it meets our values.”
* “Position descriptions list the required soft skills.”
* “We need people who can make good decisions in the grey areas, where there is no clear right or wrong answer.”
* “Our staff must be culturally aware, take time to build trust with families, not make assumptions and always ask questions if they are unsure.”

Transitioning existing staff

* “We have some great staff who really get community inclusion. We ask them to share their experiences with other staff.”
* “We are taking a person-centred approach to our staff now. We asked staff why they were resistant to change. They told us they don’t feel valued and couldn’t play to their strengths.”
* “We have put in significant effort to buddy, mentor, supervise and train existing staff. Some end up leaving and in many cases this has been the best outcome for everyone.”
* “We run regular temperature checks with staff to see how they are coping with change. We engage ‘difficult’ staff in the solutions and also make sure they can attend external events such as conferences.”

## 3. Bricks and Mortar: Thinking differently about buildings

“*We shape our buildings; thereafter they shape us”.* [*Winston Churchill*](http://www.goodreads.com/author/show/2834066.Winston_Churchill)

For many people with disability their experience of the community is limited to using day centres. Many day services still run from buildings or sites which operate between the hours of 9 am and 3 pm and are used exclusively by people with disability.

These sites can result in people being segregated from the community instead of participating in it.

There are many reasons why services still rely on old fashioned ‘bricks and mortar’

* Seen as financially economical to operate
* Offers respite and sense of security for families
* Meets some family expectations of ‘a place to attend’ (like school)
* ‘A safe place’ where people with disability can mix with peers
* Lack of essential community infrastructure (bathrooms, hoists) to go elsewhere
* Allows for planned activities five days-a-week
* Logistically easier for transport arrangements
* Often co-located with other service provider buildings
* Tradition (a sense of ‘this is how it has always been done’)
* Funding contracts which require number count of people attending centres
* Suits shifts of shared accommodation staff
* History – honours fundraising of past members who ‘built’ the centre
* Boards who may be risk adverse about support being provided in the community
* Asset on the balance sheet - security for loans
* Too hard to change – too expensive to change

Under the NDIS, the switch from block to individualised funding will impact on the way that providers are able to invest in and maintain buildings.

Service providers will need to find alternatives arrangements and promote new thinking around buildings and facilities in order to be competitive, flexible and meet customer demand.



* If you had no buildings what could your service look like?
* Do you need or use all your current buildings? Could they be used by the community?
* What is the cost of providing centre based services compared with those in the community?
* What support needs are difficult to meet in the community?

Finding ways to reduce reliance on bricks and mortar can be challenging - especially where alternatives in the community are hard to identify - but the impacts of segregation on people with disability can be significant:

* Adds to stigmatisation of people with disability
* Often geographically distant from the community
* Limits choice about who people spend time with
* Reduces opportunity to socialise with other community members
* People required to fit in with timetabled activities
* Significant funding spent on maintaining buildings and providing transport
* Staff uniforms can create a sense of unequal relationships
* Increases reliance on paid support
* Applies restrictions that others in the community would not accept
* Creates low expectations, where people ‘settle for less’



Making the change from reliance on a building or centre can be challenging for people with disability and organisations. Focus on one person at a time, and one brick at a time, to increase community inclusion options. Here is what some of our community of practice organisations are doing as alternatives to relying on ‘day centre’ buildings.

Ideas for change: one person at a time

* People out and about as active members of their local community
* Encourage use of community facilities, e.g. gyms, clubs, libraries
* Supporting someone to go home during the day to rest if needed
* Meeting up with friends to have a barbeque, go fishing, see a movie
* Support some to be a volunteer in an area or organisation of interest
* Participating in community venues e.g. Men’s Sheds and Neighbourhood Houses
* Using free WiFi locations in the community to join online community forums or gaming

Ideas for change: one brick at a time

* Hiring venues for a specific purpose, e.g. commercial kitchen, music studios
* Rebuilding a new fully accessible community centre on a former day service site
* Use infrastructure of other disability services in local areas e.g. accessible bathrooms, hoists.
* Lobbying governments for accessible toilets, public buildings, footpaths
* Share/hire resources with other groups, e.g. pottery kilns, music studio
* Offering accessible toilets to others in the community, e.g. older people, parents with young children
* “Bringing the community in” converting segregated services into community hubs – hire out rooms to other groups, e.g. community choirs, U3A (University of the Third Age)
* Having a shop front and ‘hub’ drop in centre in the heart of town



**Your mission and service model**

* How do buildings fit with your mission?
* Whose interests do your buildings serve?
* What percentage of your service relies on your buildings?
* Is your building a central ‘hub’ (starting and finishing point for going out) or do most activities occur there?

**Service Users and Families**

* Are all your service users engaged and satisfied with your services?
* Can you meet their goals at the centre?
* Do families expect that people will attend a ‘day centre’?

**Leadership**

* Is your leadership team committed to finding alternatives to dedicated buildings?
* Is there interest in exploring other ways to use your buildings to bring the community in? If not, why not?

**Human Resources**

* Do staff believe community participation is preferable to segregated settings?
* Will staff travel to work in the community?

**Finance**

* How much do your operations rely on a group funding model?
* How does increased funding for 1:1 support change things?
* What portion of your budget is spent on building overheads?
* What are the transition costs?

**Risk Management**

* Is unequal weight given to the risks of community options compared with the ‘benefits’ of buildings?

****

**M**oving beyond Bricks and Mortar

**Presence**

Through a day service people participate in a range of activities that are linked to the goals in the individual plans. There are some outings into the community but these are mostly conducted as a group.

**Story 1**

**Participation**

The Board of Directors sets a strategic direction to sell off the service’s buildings and offer all services in the community. Gradually more people access community based programs.

The Board set key performance indicators and once they reached a critical mass of supports being conducted in the community the buildings were sold. A church hall was leased for 12 months until the full transition was made. (*Inclusion Melbourne*)

**Story 2**

**Participation**

The day service had a major flood so the service was temporarily closed and people did activities in the community. The day service never returned to the building mostly due to the participants indicating a strong wish not to. All people now attend a range of options in the community (*Outlook*).

**Story 3**

**Participation**

The day service building was old and no longer met the needs of people who attended. There was no other local accessible community facilities that met the needs of the people who attended the day service

The former day centre buildings were demolished and a new fully accessible community centre is being built on the site. The building project is overseen by a Community Reference Group comprising many partners. A funding application has been made for a Neighbourhood House co-ordinator. (*Karingal*)

## 4. Transport: Facilitating access and mobility

Being able to get around conveniently, cost effectively and safely is critical to people with disability increasing their participation in the community.

For the NDIS to work properly, people with disability, families and carers, service providers, community transport providers and mainstream services must work collaboratively to explore, design and promote new ideas and options.

Transport can offer challenges for disability service providers facilitating community participation including:

* People worry travel is not safe (assume the worst)
* ‘Never again, not after last time’ (risk averse)
* Travel training not offered to everyone



Accessibility of transport

* Many forms of transport are not accessible for people with physical disability.
* Limited audio and visual signage limits accessibility for people with sensory disability
* People with cognitive disability may need other travel supports to aid with perception, comprehension, learning memory, and concentration

Is your service located in an area accessible by multiple forms of transport?

* What are the most commonly used transport options for people you support?
* What are some common journeys e.g. travel between activities, travel to centre, travel home?
* How will transport issues affect time spent in activities?
* How can people use their funding to increase transport flexibility?
* Can you support participants to get their drivers’ licence?
* Does your community have power points for recharging chairs?
* Are transport issues different in rural and remote areas?
* How accessible is your public transport network?
* What is your government doing to increase accessibility?

Some transport options increase the possibility of encounters with others

* Carpooling,
* Cycling,
* Walking and meeting local residents and businesses,
* Connecting with walking groups.

Getting around: these tables highlight some advantage and disadvantages of different types of transport from the perspective of people with disability, and service providers

**For people with disability**

| Modes of Tranport | Self-powered (walking, wheelchair, bicycle) | Car | Taxi | Provider Bus | Public Transport |
| --- | --- | --- | --- | --- | --- |
| Advantages | You’re in charge – not reliant on others  Cheap and Healthy  Come and go anytime  Convenient  Get to know locals en route | Convenient  You/your family is in charge  Come and go any time | Independence  Get to know your driver(s)  More flexible than public transport  Taxi subsidies | Prearranged  Pick up and deliver door to door  Cheap | Independence  Normal  Develop skills  Meet people  Increases community options and interactions |
| Disadvantages | Limits access to local area and facilities  Weather!  Inaccessible footpaths  Cycling on unsafe roads and hills | Cost to purchase  Cost of vehicle modification  Expensive  Petrol costs  Time for families /carers  City traffic  Lack of parking options | Reliability  Cost, especially if limited transport funding  Wait times can mean less service hours  Limited supply of maxi taxis (no seat-to-seat transfers) | Public perception of ‘big white bus’ and disability  Segregation  Long commute times on routes | Inaccessibility (steps, few lifts, poor shelter, platforms, communication)  May need support to use  Not for everyone  Limited routes and services (especially. in the country) |

For Disability Service Providers

| Modes of Tranport | Self-powered (walking, wheelchair, bicycle) | Car | Taxi | Provider Bus | Public Transport |
| --- | --- | --- | --- | --- | --- |
| Advantages | No cost  Nothing to arrange – liaise with the person and family | No cost  Nothing to arrange – liaise with person and family  Carpooling increases options | No fleet costs  Bulk bookings gets priority status and requests  Shared rides reduce costs | Hoists, lifts and ease of accessibility  Logistic control  Start and finish times assured | Normal  Good for travel training  Improve ‘reputation’ for community norms  Educate public |
| Disadvantages | **Self-powered (walking, wheelchair, bicycle)**  Punctuality may impact on activity start time  Limits choice of activities providers can suggest | **Car**  Delays can impact on start and finish times | **Taxi**  Duplicate / different bookings made by families for the same journeys  Staff coverage during waits  Late starts to activities  Safety concerns | **Provider bus**  Cost to operate & maintain  Logistics to organise  Difficult to charge full cost recovery  Bus size limits accessible parking | **Public transport**  Timetables may not align with day service schedules  Logistics of identifying shared routes and modes for people |



The logistics of transport – questions to ask and things to consider:

* Do you agree with the advantages and disadvantages described above?
* What else could you add to the list?
* What initiatives has your organisation tried to address transport issues?
* What was the result?

Provider-owned transport

* Does your organisation own its own fleet?
* What proportion of the fleet are buses compared with cars and/or people movers?
* How much funding is tied up in purchasing and operating vehicles?
* How sustainable is a fleet of vehicles under individualised funding?
* Do you coordinate with vehicles owned by other services (including mainstream)?
* What message do buses with organisation logos give to the broader community?

Taxis

* Who takes lead responsibility for bookings - people, families or providers?
* Late taxis eat into activity time meaning users get less time engaged in activities – less value for funding
* Staff waiting time and costs if taxi is late.
* Decision on who pays?

Travel training

* Individually designed programs requires time to plan and introduce
* Know the person and their travel needs, concerns and identify best local transport options
* Skills are learned: recognising stops and routes, purchasing tickets, topping up travel cards and using online maps and public transport apps prior to and during travel
* Safety training: asking for assistance and having a backup plan when things don’t go according to plan

**Other**

* What expectation is there in your current funding agreement that your organisation will arrange transport? Is this sustainable under the NDIS?
* What expectation do your service users and their families have around transport?
* What other transport issues does your service face?
* To what extent is your organisation prepared to collaborate with others or consider the use of alternative transport models?



What are the alternatives?

The following quotes were made by our Community of Practice reflecting on transport successes and challenges

Successes

* “We have an arrangement with a rental car company which gives us discounted rates. If we only need a car for a couple of hours they only charge the insurance and not the hire fee. This has proved cheaper than paying staff to use their own cars to transport people. The hire company also extends their discounted rates to staff for private hire so they get a benefit as well.”
* “Because of our bulk bookings we were able to lobby the Victorian Taxi Directorate to prioritise short runs ahead of the queue, give specific driver instructions such as escorting the person, do not drop off on the opposite side of the road, where to sit in the car and augmented communication requirements.”
* “A person has purchased and modified their own vehicle and the support staff drive it. He is responsible for all running costs but it means much greater independence.”
* “We find a buddy to ride the bus and help the person get on and off. It helps build their confidence.”
* “A support person travels to the person’s home and then rides public transport to and from various activities. This means parents can still get to work on time and the person gets travel training and experience.”
* “We work with other services and share transport wherever possible. In a small town, we know most people and staff will pick up and drop off others going to different services or locations, if it is on their usual route to work.”
* “We are working with Public Transport Victoria to run a ‘Try before you Ride Day’ to build people’s confidence to ride low floor buses and trams.”
* “Many people who do regular trips get the same taxi driver. The support staff have the taxi drivers’ numbers so they can book direct.”
* “Taxis have a PIN linked to the client and their trip which gives driver around communicating with the client, checking with the service before changing trip destinations.”
* “Always get the taxi number as a safety precaution. We had one driver who took a client on a long drive so when he was late the taxi company was able to find the driver on the GPS.”

Challenges

* “There are OHS issues where staff are transferring people in and out of private vehicles. This can come at considerable cost for an organisation.”
* “We currently subsidise travel for individuals as their travel contributions only cover a few kilometres each day. This can’t continue with individualised funding.”
* “We have buses donated by service clubs with signage on the side but they are not our preferred form of transport.”
* “Servicing remote communities can mean three or four hours of travel each way. If travel is not properly funded then people living in these communities will never receive a service.”
* “It’s easy for travel training to become an activity rather than a skills development program.”



**Story 1: Jai**

Presence

Jai’s mum drives him to his day service each morning. He is driven home on the centre bus each night because his Mum is still at work when the day service finishes. Jai hates going home on the bus. It takes over an hour because he is one of the last dropped off on the route.

Participation

Jai’s key worker, Dave, notes that one of Jai’s goals is to increase his independence.

Dave does some travel training with Jai and two other service users to help understand where and how to buy travel tickets and how to validate them on buses and trains.

Dave recognises that Jai needs more intensive travel training to help him get to and from home to the day service. Dave and Jai work out the best route, which bus to catch from which stop, how to recognise the correct route and what to do if things go wrong.

Jai’s confidence increases (as does his Mum’s) and after 6 months he travels on his own to the day service. He is now working on travelling to the local shopping and recreation centres on the weekends.

**Story 2 – Dale and Amber**

Presence

Jessica, Rohan, Dale, Kate and Amber all live at the same shared accommodation house and travel together to and from the day service in the house bus.

Dale and Amber are quite independent but if everyone travels to the centre together the house staff can finish their shift on time.

Participation

The day and accommodation services work together to walk with Dale and Amber to and from the day service - one kilometre each way. The staff help Dale and Amber recognise the route, identify ‘safe’ spots if they feel threatened or lost and provide backup phone numbers on speed dial for emergencies.

Dale and Amber regularly chat to local people they meet on their way to the day service.

Amber wants to spend more time walking to local activities on the weekend and evenings but doesn’t always feel safe. She has enrolled in a self-defence class to improve her confidence.

Dale now attends his local small pool instead of the large complex that everyone from the day service travels to by bus. This saves him money.

## 5. Understanding financials

Why is understanding Costing and Pricing important?

The National Disability Insurance Scheme Act 2013 states that a funded support must represent “value for money” in that the costs of the support are reasonable, relative to both the benefits achieved and the cost of alternative support”.

When a participant’s plan is reviewed, the planner will consider whether there is evidence that a support has helped the participant to achieve measurable outcomes. Additional funding for continued supports will not be provided by the NDIS if there is no evidence that the support is helping to achieve these outcomes.

Providers need to understand key components of costs in order to remain competitive in a growing market. Moreover, any price build in this context should be simple, transparent and easy to communicate.

The NDIS future…

* Individuals are funded under the NDIS - not organisations
* Individuals choose which organisations they want to provide them with supports
* Organisations need to know how much it costs to provide supports
* The cost of providing supports should not exceed the NDIA prices
* Costing and pricing needs to be right so the organisation is sustainable and does not go into debt

**COST** is the amount the organisation needs to spend to deliver an activity

**PRICE** istheamount the organisation charges people to receive an activity

A **sustainable organisation** is one where the cost to deliver an activity is less than the price it charges a person. A sustainable organisation means:

* people get a choice of services
* staff have jobs
* organisation can focus on mission



* Do you understand the difference between Costing and Pricing for your organisation?
* Are you able to explain these in a simple and easy way to your staff and clients?
* Do you understand why costing and pricing is essential in maintaining your organisation’s sustainability?
* Are you working in partnership with your finance team to help with costing and pricing?

Whose responsibility is it?

Everyone has a responsibility to keep the organisation sustainable and ensure it has a future. Understanding basic financials especially costing and pricing is a critical part of this.

Although finance staff can put a price on an activity, this price should come from program advice given from support leaders and staff.

To give that advice you don’t necessarily need to be a finance specialist. You do need however to understand how much a person is paying for a service and ensure it is more than what it costs to deliver it. If this is not the case, you are best placed to show where service efficiencies can be made without compromising client supports.

Costing, Pricing and Community Participation

How are these three elements linked?

Community Participation…

* Is included in 50% of all NDIS plans to date
* Enables people to contribute to social and economic life
* Can build pathways to employment and greater independence
* Must be achieved within an individual’s allocated NDIS funding

Costing and pricing…

* Tells us whether a person’s NDIS plan can be delivered within the current service model
* Makes us aware of all the costs associated with an activity, e.g. transport, staff overtime, preparation and meeting time
* Helps to explain the things people will pay for and what the organisation will provide
* Upholds people’s rights to be informed and make decisions about their plans, and manage the risk of under or over spending their funding
* Invites creativity to think of new ways to facilitate more cost effective community participation

Four simple steps to costing and pricing

1. **Define** your support model
2. **Calculate** what that model really costs to deliver
3. **Offer** the support model to clients at clear, attractive and helpful prices
4. **Review** and **refine** your support models over time

**When defining your support model, think…**

* What do we earn?
* What support has been purchased?

What do we spend?

* Who delivers the support?
* Where is this support delivered?
* What program costs are involved in this model?
* Who supervises the model?
* How does the organisation support the model?

Whatever your model, it should establish and share clear goals in terms of price, costs and profit to deliver participant goals and desired outcomes.

**Costing and Pricing: some things to consider….**

* NDIA plans, outcomes and allocated funding
* Staff costs – including non-chargeable time!
* Program costs – e.g. transport, art supplies
* Supervision costs –‘span of control’
* Facility or asset costs – e.g. computers, phones
* Organisation or overhead costs – e.g. rent, insurance
* Is there a profit here somewhere?
* Are we delivering great outcomes?



* How well can you define your support models?
* Have you and the finance team calculated what your model really costs to deliver?
* Is our support model clearly offered to clients at attractive prices?
* How quickly can you refine our model?

Transitioning to the NDIS

How does costing and pricing help organisations transition to the NDIS?

* Focuses buyer (participant) and seller (organisation) on pricing and support which is clear, attractive and helpful over time
* Identifies work practices, models and activities that drive:
  + **great outcomes …** and encourages more
  + **poor outcomes …** and how to avoid them
* Transparently communicates inclusions, exclusions, prices and additional options
* Frees staff to be creative, entrepreneurial and outcomes focussed without being financially reckless
* Ensures people can achieve their goals, grow and move forward in their lives with the most appropriate and affordable supports

Support staff responsibilities

* Help to accurately calculate hourly rates of service by including everything required to deliver a service, e.g. actual staff travel time and kilometres, actual meeting time rather than allocated time, training required, computers access
* Understand the organisation’s rate for an hour of service delivery and how that compares with the NDIA rate
* Be part of the problem solving to create efficiencies

Making changes where change is needed…

* Cut costs, e.g. pair people with same interests for joint activities; Skype for meetings rather than face-to-face
* Change the service model: e.g. use volunteers for local community activities, provide incentives so people become more independent
* Increase revenue: e.g. increase fees, develop social enterprises, increase fundraising



* What changes can make the most difference for your organisation?
* What changes can make the most difference for your clients?
* How can you prioritise action?



Quotes made by our Community of Practice reflecting on costing and pricing:

* “We have developed our own tool to cost all our supports. It enables us to key in a person’s NDIA plan and determine whether we can afford to deliver it with our model. We look at every plan from a human resource and financial perspective.”
* “The program and finance staff meet weekly to work together to get the costing of supports right.”
* “Understanding and having cash reserves to make the transition is essential. Organisations need to be prepared to go from block funding for future service provision to payment for services already provided.”
* “The challenge is where a person may be managing their own funding, accessing services from a number of agencies and we do not see their plan. If they overspend their package then we are looking at debt recovery and that is not something we have had to deal with in the past.”
* “At the annual review we found a significant underspend of some clients’ packages. Organisations need to monitor each client’s spending [with] software and systems in place to do this effectively and efficiently. Systems need to scale up or down spending to ensure NDIS supports and outcomes are delivered.”
* “The Board is holding staff to closer account. There is no more cross subsidising and cost shifting between programs across the organisation.”
* “It’s essential for all staff, clients and families to understand what can be achieved within their plan. We have to be very clear about what we will provide and how it can be provided.”

## Community Inclusion Initiative: Join the Conversation

This guide was developed to support disability service providers to think about ways that they can increase opportunities community participation for the people they support. We hope that it is also part of a national conversation about ensuring people with disability can live full, active lives at the heart of their communities.

This guide contains some reflections from the Community Inclusion Initiative Community of Practice. Other Community Inclusion Initiative Resources can be found by visiting the NDS website (https://www.nds.org.au/resources/community-inclusion-initiative-factsheets) or through the *Telling Your Story* website (<https://www.nds.org.au/resources/community-inclusion-initiative-factsheets>) where you can read the formal evaluation of the Initiative. Here you will find videos, reports and other useful resources to help inform your thinking about community participation.

We encourage you to read, watch and use these resources. We’d also love to hear from you about other ways to increase community participation. To share information or to join our Community Participation Community of Interest please email James Bannister from the NDS National team on [james.bannister@NDS.org.au](mailto:james.bannister@NDS.org.au).

## APPENDIX 1: Additional resources

The following section provides a selection of useful articles, resources and links to videos which have a specific focus on creating opportunities for community inclusion.

**Meaningful Roles**

* *Social Inclusion and Community Participation of Individuals with Intellectual Disabilities*: Amado et al 2013 [Link](http://www.ncbi.nlm.nih.gov/pubmed/24303823)
* *Making Life Good in the Community* – Clement & Bigby 2008 [Link](http://library.bsl.org.au/jspui/bitstream/1/988/1/Making%20life%20good%20in%20the%20community.pdf)
* *Acceptance and belonging: the helpfulness of being in valued roles*. Sherwin 2008 [Link](http://www.socialrolevalorization.com/articles/sherwin/helpfulness-of-being-in-valued-roles.pdf)
* ‘*I get by with a little help from my friends*’: Adults with intellectual disability on loneliness. McVilly et al 2006 [Link](http://dro.deakin.edu.au/view/DU:30016853?print_friendly=true)
* *Mapping Natural Supports* - Golden City Support Services 2013 [Link](http://www.ndis.gov.au/sites/default/files/documents/mapping_natural_supports_full_report.pdf)
* *Making it Personal for Everyone* - Scown / Sanderson 2011 [Link](http://www.dimensions-uk.org/about-us/leaflets-and-resources/making-it-personal-for-everyone/)
* National Disability Employment Framework: Issues Paper, May 2015 [Link](https://engage.dss.gov.au/wp-content/uploads/2015/05/issues_paper.pdf)
* *Employment and Volunteering for Adults With Intellectual Disability* Trembath et al 2010 [Link](http://onlinelibrary.wiley.com/doi/10.1111/j.1741-1130.2010.00271.x/abstract;jsessionid=ABC2E48AA46D196916F31731588DAC98.f01t02?deniedAccessCustomisedMessage=&userIsAuthenticated=false)
* *Design and Implementation of a Leisure Buddy program* Fyffe & Raskin 2015 [Link](http://www.tandfonline.com/doi/abs/10.1080/23297018.2015.1004224?journalCode=rpid20)
* *Gig Buddies Sydney* where people with disability and volunteers go to live music together [Link](http://www.gigbuddiessydney.org/)
* Stella Young: *Inspiration porn and the objectification of disability*. TED talk [Link](http://tedxsydney.com/site/item.cfm?item=A83E0095E6074F5CF983ACC0FB69395C)
* Inclusion, belonging and the disability revolution. TED talk [Link](https://www.youtube.com/watch?v=VAM9nh8WC-8)
* Steve’s Story [Link](https://vimeo.com/132204907)

**Community Development**

* *Are we there yet?* A planning tool and checklist for building community connections: [Link](http://www.thinklocalactpersonal.org.uk/Latest/Resource/?cid=10722)
* Community Building Program guidelines (Victoria) [Link](http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/community-building-program-guidelines-disability-services)
* Community Tool Box: Building and Sustaining Relationships: [Link](http://ctb.ku.edu/en/table-of-contents/leadership/leadership-functions/build-sustain-relationships/main)
* *What is Asset Based Community Development -* Kral (1989): [Link](https://sustainingcommunity.wordpress.com/2013/08/15/what-is-abcd/)
* Leveraging Networks and Building Social Capital – UnitingCare Community Options (Practical Design Fund): [Link](http://www.ndis.gov.au/sites/default/files/documents/Practical_Design_Fund_Final_Report.pdf)
* Model of Citizenhood Support – JFA Purple Orange (2013): [Link](http://www.purpleorange.org.au/research/previous-research/)
* Queensland Government, *Community Capacity Building Toolkit for Rural and Regional Communities:* [Link](http://www.qld.gov.au/web/community-engagement/guides-factsheets/documents/rural-capacity-building-toolkit.pdf)
* QCOSS, Community Door: Collaboration <http://communitydoor.org.au/collaboration>
* United Nations 2008 Creating an Inclusive Society: Practical Strategies to Promote Social Integration: [Link](http://www.un.org/esa/socdev/egms/docs/2009/Ghana/inclusive-society.pdf)
* *Building Community Capacity*: *Case Studies and Resources* - Think Local Act Personal: [Link](http://www.thinklocalactpersonal.org.uk/Browse/Building-Community-Capacity/)
* Strengthening Partnerships Tools & Resources - Vichealth, 2014: [Link](https://www2.health.vic.gov.au/primary-and-community-health/primary-care/primary-care-partnerships/strengthening-partnerships-tools-resources)
* Partnering Guides (VCOSS 2008): [Link](http://vcoss.org.au/strong-sector/partnerships-decd/partnering-guides/)
* ‘Making the invisible visible’: TEDx talk by DeAmon Harges on Asset Based Community Development: [Link](https://www.youtube.com/watch?v=y6yiRXVP90g)

**Vision, Strategy and Shared leadership**

* NDIA Codesign Framework 2015: [Link](http://www.ndis.gov.au/about-us/information-publications-and-reports/codesign-framework)
* Kotter International: 8 –Step Process for Leading Change [Link](http://www.kotterinternational.com/the-8-step-process-for-leading-change/)
* *Leaders Making Change Happen* adapted from Kotter & Cohen *The Heart of Change: Real-Life Stories of How People Change Their Organizations* [Link](https://books.google.com.au/books?id=YBf3S1X8ItsC&dq=related:ISBN1885167628&hl=en)
* Co-designing for Social Good: Role of Citizens in Designing and Delivering Social Services, Part One, Centre for Social Impact, University of NSW - Dr. Ingrid Burkett [Link](http://design4socialinnovation.com.au/wp-content/uploads/2014/09/An-Introduction-to-Co-Design-by-Ingrid-Burkett.pdf)
* Some lessons concerning agency transformation towards personalised services – Michael J Kendrick (2009) ([link](http://oclinc.org/documents/Agency%20Transformation%20Final%20Copy%20IJLPS.pdf))
* Stopping the Naysayers in their tracks [Link](http://www.impressionmanagement.com/leaders-articles/416-stopping-naysayers-in-their-tracks)
* The Role of Leadership in Organisational Change – An Action Learning Approach [Link](http://www.optimumnfp.com.au/news-letter/34-the-role-of-leadership-in-organisational-change-an-action-learning-approach.html)

**Workforce**

* Carer Careers: jobs and career advice for the care sector [Link](http://www.carecareers.com.au/career-planner/family/id/10)
* “I’m here to help” : the role of the support worker in the NDIS, Griffith University 2015 [Link](https://www.researchgate.net/profile/Margaret_Ward2/publication/275224653_I'm_here_to_help_the_role_of_the_support_worker_within_the_NDIS/links/5535f6160cf268fd0015f263.pdf)
* RMIT Workforce Guide: Making it Work [Link](http://www.ndis.gov.au/sites/default/files/documents/RMIT_Workforce_Guide_Making_it_work.pdf)
* Life without Barriers, 2013. Lived Experience Recruitment Toolkit [Link](http://www.ndis.gov.au/sites/default/files/documents/Lived%20Experience%20Recruitment%20Toolkit.pdf)
* St. Laurence, 2013, GRAND Coordinated Training Manual for disAbility Support Workers [Link](http://www.stlaurence.org.au/assets/doc/publications/training-manuals/The%20GRAND%20Coordinated%20Training%20Manual%20for%20disAbility%20Support%20Workers.pdf)
* NDS Disability Workforce Innovation Network advisors [Link](http://www.nds.org.au/projects/article/187)
* *Supporting Inclusion*: a series of short videos showing how support staff can facilitate inclusion [Link](http://supportinginclusion.weebly.com/) (Password: encounter)
* Carpentaria Disability Services, online videos for indigenous workers [Link](http://carpentariadisabilityservices.org/disability-training-stories/)
* Open Future Learning, online learning modules for the disability workforce [Link](http://www.openfuturelearning.org/index.html)

**Moving beyond ’Bricks and Mortar’**

* *Adult Day Services and Social Inclusion*: Better Days, Chris L. Clark [Link](https://books.google.com.au/books/about/Adult_Day_Services_and_Social_Inclusion.html?id=KVAlOGMwXOAC&hl=en)
* *Changing Places* campaign for accessible public toilets and ‘find a toilet’ [Link](http://changingplaces.org.au/)
* Cole and William, Having a Good Day (Ch. 2) [Link](http://www.scie.org.uk/publications/knowledgereviews/kr14.pdf)
* Halton Borough Council, *Unleash the Entrepreneurs* [Link](http://www.local.gov.uk/briefings-and-responses/-/journal_content/56/10180/3479631/ARTICLE)
* *Shut Out: The Experience of People with Disabilities and their Families in Australia* 2009: [Link](https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/shut-out-the-experience-of-people-with-disabilities-and-their-families-in-australia)

**Transport**

* Australian Government: Disability standards for accessible public transport 2002 [Link](https://www.ag.gov.au/RightsAndProtections/HumanRights/DisabilityStandards/Pages/Disabilitystandardsforaccesiblepublictransport.aspx)
* Cycling Australia: Inclusive Cycling [Link](http://www.cycling.org.au/Get-Involved/Participation/Inclusive-Cycling)
* *No Way To Go: Transport and Social Disadvantage in Australian Communities* [Link](http://books.publishing.monash.edu/apps/bookworm/view/No+Way+To+Go:+Transport+and+Social+Disadvantage+in+Australian+Communities/133/xhtml/chapter07.html)
* Peninsula Transport Inc . Volunteer transport service in outer Melbourne [Link](http://www.peninsulatransportassist.org/)
* Public Transport Victoria. Travel Trainer Pass [Link](http://ptv.vic.gov.au/tickets/free-travel-passes/travel-trainer-pass/) and “Try Before You Ride Day’ [Link](http://ptv.vic.gov.au/news-and-events/events/try-before-you-ride/)
* Ridewise: A Guide to Travel Training (Portland, Oregon): [Link](https://rideconnection.org/ride/LinkClick.aspx?fileticket=dwrbjbCP7_o=&tabid=69)
* Queensland Government Translink Travel Trainer Pass [Link](http://translink.com.au/tickets-and-fares/concessions/travel-trainer-pass)
* Travel Training: Good Practice Guidance UK Department of Transport: [Link](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/4482/guidance.pdf)
* Transport Accessibility Standards: Attorney-General ([Link](https://www.ag.gov.au/RightsAndProtections/HumanRights/DisabilityStandards/Pages/Disabilitystandardsforaccesiblepublictransport.aspx)) and the Australian Human Rights Commission: [Link](https://www.humanrights.gov.au/our-work/disability-rights/projects/transport-accessibility)
* Victorian Department of Human Services, TravelSmart Getting Started, 2011 [Link](http://www.carersolutions.com.au/images/links/Travelsmart-getting-started-guide-with-DAS.pdf)

**Financials – Costing and Pricing**

* NDS Costing and Pricing Learning Program: [Link](http://www.cplp.nds.org.au/)
* NDS National Costing and Pricing Framework for Disability Services: [Link](http://www.nds.org.au/asset/view_document/979324043)
* *Costing your services* – NSW Ageing, Disability and Home Care: [Link](https://www.adhc.nsw.gov.au/sp/sector_reform/financial_management/costing-your-services)
* NDIS 2015 Price Guide FAQ: [Link](http://www.ndis.gov.au/providers/pricing-and-payment/pricing-changes-2015/2015-price-guide-faqs)
* NDIA Pricing and Payment – information for providers: [Link](http://www.ndis.gov.au/providers/pricing-and-payment)
* Saward Dawson, Intelligent Unit Costing and Pricing solutions: [link](http://www.sawarddawson.com.au/)
* *Uncounted costs: choice & control for people with behaviours of concern* (Anglicare Tas/SARC)*:* [link](https://www.anglicare-tas.org.au/research-library/report/uncounted-costs-choice-and-control-people-behaviours-concern)
* *Volunteer Supported Service Models within the NDIS context*: (Interchange/HDG): [link](http://www.interchange.org.au/wp-content/uploads/Interchange-Business-Case-September-20141.pdf)

## APPENDIX 2: Implementing Co-design

Source: Co-design for Community Inclusion. Huddle Australia

Co-design is an approach for decision making in complex contexts. It’s an inclusive process, drawing on many perspectives and is outcome driven. This is because it’s a way of working requiring a certain mindset to approach different situations. Co design, requires true engagement and participation from the people involved in it, not just the key stakeholders or key service users.

We see evidence with all our clients that successful, meaningful change for people can be driven by embracing co-design and applying a positive, generative mindset to decision making.

Why invest time and energy in co-design?

* “Nothing about us without us!”
* Empowers service users – people with disability are supported to create vision and lead change as partners
* Focus is on outcomes of change
* Can deliver practical implementation solutions
* Everyone is involved so everyone has buy in
* Negotiates a pathway for everyone in the organisation
* Ideas and possibilities become visible and tangible
* Ensures informed decisions are made

Co-design uses but is not limited to these things

|  |  |
| --- | --- |
| Other forms of participation | Examples |
| Communicate  (informing people what is going on) | Letters, phone calls, email, website update, social media, brochures, advertisement, public displays, exhibitions, meetings |
| Consult (engaging with people to indirectly influence outcomes) | Individual and group meetings, hotline, surveys, presentations, community and public meetings, community event, open days |
| Coordinate  (consolidating different and multiple elements towards a shared outcome) | Facilitate stakeholders to come together. Provide training for service users to self-advocate and advocate on behalf of others |
| Collaborate  (people working together towards a shared goal) | Work together to develop solutions and incorporate advice and recommendations into decisions. Implementing what service users decide |

Tools and sample templates

Below are four practical tools that can be used during co-design. The first three, are helpful when you’re trying to understand more about a problem. A key part of a co-design approach is to interrogate the problem first to ensure the cause is being resolved not the symptoms.

The fourth can help you frame a problem in a different way to find alternative solutions.

* Five Whys
* Assumption Busting
* Empathy Maps
* How Might We

**The Five Whys**

* What is the problem
* Why is that important?
* Why is that important?
* Why is that important?
* Why is that important?
* Why is that important?

**Assumption Busting**

|  |  |
| --- | --- |
| Problem: | |
| Assumptions (we believe or assume that…) | Reframe it  (‘in a world where this doesn’t exist, this means’ OR ‘if this wasn’t true then’) |
|  |  |
|  |  |
|  |  |

**Empathy / expectation map**

Image is a rectangl divided into four sections on the diagonal. The four sections are:

* Think and Feel
* Hear
* See
* Say and Do

**How Might We**

The below ‘How Might We’ tool, can come in helpful when you’re trying to reframe problems. Being able to reframe problems is important as it opens new possibilities and opportunities. Service providers can use this to guide what to do after having identified and understood a problem, particularly as they face many constraints and their contexts are often so complex.

|  |  |
| --- | --- |
| Problem or opportunity: What problem or opportunity are you focussing on today? | How might we (insert your own text about an action here) so that (insert your text about an outcome here) |
| Actions: what are the challenges with this? What actions do you need to take and why? | How might we (insert your own text about an action here) so that (insert your text about an outcome here) |
| Outcomes: what are you trying to achieve? What outcomes do you need? How will it be measured? | How might we (insert your own text about an action here) so that (insert your text about an outcome here) |

## APPENDIX 3: Community inclusion initiative projects

Eleven organisations across Australia undertook projects as part of NDS’s Community Inclusion Initiative. Each project used co-design methods with up to five service users and families to explore innovative approaches to facilitating community participation, reflected in the brief summaries below.

Anglicare ACT and NSW (Holt, ACT)

Anglicare’s Community inclusion Initiative project provided participants and families with an opportunity of exploring their dreams and aspirations through ‘fireside chats’ facilitated by Robbie Williams from JFA Purple Orange. These provided the participants and families opportunities to explore community inclusion as a whole and choice about employment, education, recreation and civic activities. Participants were able to participate in developing connections and friendships by engaging with the community through employment or volunteer activities.

Outcomes included the establishment of small micro-business focused on one participant’s keen interest in art and providing an opportunity to share his talents with the community. Another participant increased participation as a volunteer. The project provided another participant with opportunities to participate in self-directed activities within the local community.

Autism Association of Western Australia (Perth, WA)

A project officer was appointed to work with three participants with Autism. The project included focus groups, the purchase of equipment, staff mentoring, development of a new goal setting tool and building community partnerships. Key components were regular family visits; spending non- directive time just getting to know the families; using co-design tools; looking at participants current service goals within a wider life-framework and allowing the participants to safely begin to express who they are and what they want to do. All three participants achieved goals that were beyond family and individual expectations.

Bowen Flexi Care (Bowen, Queensland)

BFC worked with five participants, holding meetings with families, carers and other stakeholders. To consider what a ‘better life’ could look like for the participants, and individual’s dreams and passions. Participants were enthusiastic to attend any educational opportunity, including Jane Sherwin’s ‘*Self Direction for Bigger and Better Lives*’, QDN Plan Ahead workshop, Community Inclusion with Ric Thompson.

BFC initiated additional staff training to enhance the general understanding of staff roles in community inclusion. BFC developed and produced of a 2 minute theatre advertisement promoting community inclusion which runs regularly in cinemas. Participant journeys were recorded on film and photobook and a dedicated Facebook page and will be shared with the broader community.

CLASS and CLP (Adelaide, South Australia)

Community Living and Support Services (CLASS) and Community Living Project (CLP) are working in partnership to facilitate a micro enterprise project. The project engaged five people with disability to become business owners through an action learning course originally developed by CLP. Participants and their family and friends had access to supporting consultants for guidance and advice. Lessons from the project were shared and the model embedded into CLASS going forward.

Inclusion Melbourne (Melbourne, Victoria)

The Inclusion Melbourne project aimed to work collaboratively with people with a disability, to assist them to establish networks and facilitate their own Circles of Support. This is where a group of people comes together regularly to assist a person to develop, support and action their goals and aspirations. Circles of Support provide a meaningful long term support; increase community participation through relationships; connect people with mainstream services and empower the person to make informed decisions and choice about their lives. The project resourced, educated and guided Circle of Support members to build sustainability. Results and individual outcomes were used to create resources and guides for people with intellectual disability, families, and disability providers to support the creation and/or maintenance of Circles of Support.

Karingal (Geelong, Victoria)

A dedicated project worker engaged participants and their natural support networks to design strategies to identify their individual inclusion goals and support their achievement. Through the project the worker built the capacity of the participants and their families to fully participate in co-design of all elements of goal setting, planning process, developing support arrangements, strategies and plan review to support the achievement of their community inclusion goals. Karingal used an action research methodology to ensure that the project contributed to better practice within the organisation and in the broader sector. This helped:

* Develop community capacity to strengthen community inclusion of people with a disability.
* Provide an evidence base to inform the adoption of co-design in service development
* Inform the development of training program for staff to embed co-design into service delivery

Northcott (Tamworth, New South Wales)

Northcott’s project supported five young adults in Tamworth to explore what a more inclusive life in their community would look like and enable them to establish the beginning of a more inclusive life on a sustainable basis. Their ‘pictures of inclusion’ informed how sustainable community inclusion can be effectively facilitated across other communities in NSW and the ACT which Northcott and other organisations support.

Possability (formerly Optia Inc) (Tasmania)

During the project Possability worked with ten participants with a mix of support needs. We worked on co-design and goal implementation through supporting participants with planning and building community connections and through skill development. To achieve this we trained key staff in co-design, plan writing and implementation. We provided a self-advocacy program called ‘The Road to Success’, in partnership with SpeakOut Advocacy and also have trialled the use of iPads to monitor outcomes through creation of visual portfolios and monitoring of goal attainment.

RED Inc (Lismore, NSW)

RED Inc explored the notion of inclusion with four participants, their families, support people and the wider community. This was underpinned by a study and comparison between what inclusion means for the person with a disability to what it means for people without a disability. This identified challenges that needed to be negotiated for the person with a disability to achieve a meaningful inclusive life.

Each participant was given a camera to document their current life story, what makes them who they are, what their passions and dreams are. Through the project RED Inc was able to support participants to develop business opportunities, go swimming, participate in adult education, build ongoing relationships, and improve self-esteem and community connectedness.

Scope (Melbourne, Victoria)

For their project called ‘Connecting Me’, Scope worked collaboratively with four individuals, their families and circles of support while transitioning from the traditional block funded services, to co-design an innovative, individualised service delivery model. This model of service was co-designed to facilitate greater community inclusion, and social and economic participation and independence.

Scope collaborated with people with complex communication needs, support workers and specialist speech pathologists to develop a tool kit for support workers to engage and enable individuals with complex communication needs to communicate choice and exercise participation, control and self-determination, in a co-design model utilising a range of tools and strategies including augmentative and alternative communication methods. A number of events were hosted to share lessons and outcomes of the project. This included webinars, seminars, information sessions, and NDS conference presentations.

YouthworX NT & Step Out Community Access (Katherine, Northern Territory)

Katherine is an isolated regional remote town in the Northern Territory with a highly transient population. In previous years, the disability community here has experienced extreme frustration with lack of resources, time and capacity for consultation. The project has provided a forum and direction to partner together as a collective and explore creative ways to develop sustainable effective pathways for young people with a disability transitioning from school. Each of our four participants had a simple goal – to try one new thing. We tried more than that; and developed stronger relationships, opportunities and pathways across the sector in the process.

1. ( [↑](#footnote-ref-1)