

National Disability Services Submission

Disability Royal Commission and NDIS Review: Current and emerging issues, challenges, and opportunities for the Victorian disability sector

March 2024

# About National Disability Services

National Disability Services (NDS) is the peak body in Victoria and Australia for non-government disability service providers, with over 270 members in Victoria and over 1000 members nationally. We provide information and networking opportunities to our members and policy advice to State, Territory and Commonwealth governments. Our members collectively offer the full range of disability services; from personal care and individual support, supported independent living, specialist disability accommodation, short-term accommodation, medium-term accommodation, therapy, community participation, group activities, support coordination, plan management, assistive technology and employment supports.

NDS is committed to improving the disability service system to ensure it better supports people with disability, their families, and carers; and to building a more inclusive community. NDS has a deep commitment to supporting the implementation of a successful National Disability Insurance Scheme (NDIS) and is supporting service providers across Victoria as they work to thrive within this contemporary and constantly evolving landscape.

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For attachments contact paul.bourke@nds.org.au

# Introduction

This paper is a companion document to the [NDS DRC submission](https://www.nds.org.au/index.php/policy-library/nds-submission-the-australian-government-response-to-the-royal-commission-into-violence-abuse-neglec) to DSS provided to DFFH on 25 January 2024. This document provides additional local context, analysis, and commentary about current and emerging issues for the Victorian disability sector and highlights opportunities and challenges.

As part of this analysis, we compared and summarised the DRC and NDIS Review recommendations and have provided this as Attachment 1.

Last year was a landmark for change and proposed change in the disability sector. Federally, the Disability Royal Commission produced 222 recommendations, which if implemented would profoundly transform Australia and the disability sector to be safer and more inclusive for all people with disability. This was followed by the NDIS Review final report that recommended changes which would have repercussions beyond the Scheme. In Victoria, the new *Disability and Social Services Regulation Amendment Act 2023* and the amended Social Services regulations also change the operating environment.

These systemic changes occur at a time of uncertainty. For disability service providers in Victoria, there is a sense that NDIS settings and deteriorating economic conditions are significantly impacting the sector. Our recent [State of the Disability Sector Report 2023](https://www.nds.org.au/index.php/about/state-of-the-disability-sector-report) found that in Victoria:

* 75 per cent of providers viewed operating conditions as worse in the last 12 months than the previous year.
* 41 per cent of providers made a loss in FY 2022-23. 13 per cent just broke even.
* 89 per cent of respondents said they had received requests for services that they could not fulfill.
* 76 per cent are worried they will not be able to provide NDIS services at current prices.
* 76 per cent reported extreme to moderate difficulty in finding support workers, with availability of allied health professionals ranging from low to non-existent.

This was the highest rate reporting a loss since the survey began collecting financial data in 2016.

Most providers would place the root of this problem in pricing, especially with the rising cost of doing business.

# General comments

The NDIS review highlights some critical issues with the design and implementation of the NDIS. It is seen as an important opportunity to achieve system-wide change.

NDIS Review outcomes have been aligned to much of the Disability Royal Commission recommendations released in September 2023 and while there are differences between the recommendations of the two which befit the differences in their scope there are also many commonalities. The aim is to create an effective ecosystem that has embedded outcomes, quality and safeguards, and does not create further gaps.

For some the 5-year transitional plan, as suggested in the NDIS review, outcomes are considered too long. There are issues with potential market failure (outlined in the NDS State of The Disability Sector 2023 results highlighted in the Introduction) and swift action is required to address key issues. (Support Coordination as an example is already nearing crisis point). For others looking at the extent of the changes proposed the time frame is insufficient. The pressure for speedy change needs to be balanced with the need for robust sector consultation on implementation plans for each of the swathes of potential system changes. Another critical issue relates to the sequencing of implementation, which will impact on success.

Victoria has been widely acknowledged as a disability leader, with the early adoption of individual support packages, the strong focus on quality and safeguarding mechanisms, zero tolerance initiatives, worker registration and substitute and supported decision making and so forth. The state also has a particularly broad and deep community services sector. The long-term commitment to inclusion and people with disability is reflected in successive State Disability Plans, and current consultative mechanisms such as the Victorian NDIS Community Advisory Council (VCAC). These Victorian approaches together provide many opportunities, which can be leveraged, with good design to effectively implement reforms.

NDS has identified ten priority areas from the DRC final report and NDIS review which we wish to highlight within the Victorian context. These priorities are the basic foundations for a diverse, high-quality disability sector that delivers effective and outcome-focused services, in a manner that is sustainable.

# Executive summary of Priority Areas

1. **Need for structural adjustment funding**

While the move to an independent pricing authority for NDIS supports is positive, multiple recent financial benchmarking results demonstrate that a significant cohort of providers are experiencing a sustainability crisis now. Such providers tend to be registered, often not for profit, supporting people with more complex needs. They arguably cannot hold on with current price settings for the time expected for Review implementation.

NDS urges Victorian government advocacy for structural adjustment funding to providers to prevent market failure.

1. **Engagement of service providers and other stakeholders in Review implementation codesign**

The Review Report recommends engaging all stakeholders, including people with disability and service providers, in codesign of implementation of reforms. The DRC and Review recommendations are broad and far reaching and will involve complex legislative and service transformations. It is critical that the design of such reforms, and then the implementation of agreed changes in Victoria, occur with input from the sector. People with disability and their advocates working together with disability services and NDS are important stakeholders to be involved in engagement.

NDS recommends that the Victorian government implement robust consultation and codesign processes for system redesign and reform implementation, with involvement of disability service providers along with people with disability and other stakeholders.

1. **Alignment of Victorian legislation/regulation with national quality and safeguarding**

There needs to be good alignment between national and state requirements. NDS is keen to see Victorian regulatory requirements being aligned in the future to take account of expected changes to the national disability quality and safeguarding framework, authorities, and requirements. The instigation of robust federal-state data sharing protocols and mechanisms for organisations to report once and have information shared across state and federal agencies within disability and across sectors will be important to reduce the current confusion and compliance burden.

1. **Significantly invest in driving Inclusion in mainstream services**

To fulfill the objectives of the DRC and Review recommendations as well as the State Disability Plan for inclusion and equality, roadblocks to the utilisation of mainstream services need to be removed. Strategies to coordinate navigation between multiple systems of support need to be designed and funded. NDS is looking to the Victorian government to significantly step up the drive and investment to make mainstream services more inclusive and accessible.

1. **Opportunity to build foundational supports on Victoria’s existing service system:**

Victoria has a particularly deep and broad community services sector as compared to other jurisdictions. This includes several programs and services well suited to underpin foundational supports. NDS urges the Victorian government to engage with and explore opportunities to extend and build upon existing mainstream services including the Mental Health Locals, Maternal and Child Health services, community health services, and the HACC PYP program.

1. **Opportunity to link new navigator roles with mainstream services**

The positioning, scope, and timing of the rollout of the new navigator roles recommended by the Review will be important to the ultimate cohesion of the service system. Safeguarding of participant choice and ensuring the role does not become a cost management strategy are important, and positioning the navigator roles within communities with close connections to local mainstream and specialist service systems will be important. The messaging regarding the timing of transition to these new roles is also critical to maintain existing support coordinators and plan managers in the sector.

NDS urges particularly careful consideration of the implementation and timing of the navigator roles in Victoria, to ensure ease of access, close connections with mainstream services and avoid perverse outcomes on the existing support coordination market.

1. **Plan for an available, skilled workforce to support reform**

Disability services are facing significant workforce shortages. Recommendations for new foundational supports and navigator roles will require significant numbers appropriately skilled and available workers. The lack of such workers poses a major risk to the success of the reforms. NDS recommends the government develop a strategy to address the disability workforce challenges associated with the reform agenda in Victoria, noting that this will need to encompass professional allied health roles as well as disability workers, and all within the broader context of widespread workforce shortages in allied health and community services.

1. **Need for a robust disability housing and support plan**

As many DRC and NDIS Review recommendations relate to housing and support options and services, the NDS recommends that the Victorian government collaborate with key stakeholders to create a 5-to-15-year Victorian housing and support plan that considers the transition away from larger scale group homes, SDA, SIL and ILO supply and demand, tenancy arrangements, support models and regulation.

1. **Employment**

NDS expects a greater focus on participation of people with disability in the workforce to be a key part of the reform agenda. We welcome the current review of Victoria’s Social Procurement Framework and call for further work to foster employment as an enabler for inclusion. We note that employment needs to be driven by participants and not systems to be most effective. Systems needs to understand individual accommodations and use inclusive employment practices.

1. **Regional and rural services**

The disability reform agenda in Victoria needs to include a focus on the needs of regional and remote Victorians with a disability. Workforce shortages with both disability workers and allied health are exacerbated in regional areas, transport costs are not adequately covered by NDIS pricing and there are extremely thin markets for many service types.

NDS argues that such issues require targeted strategies which take account of the characteristics and opportunities of regional locations and service systems, such as allied health incentive programs, funding for collaborate initiatives across services etc.

The following sections discuss these recommendations in greater detail.

## Need for structural adjustment funding

Achieving the reform agenda will require structural adjustment across most aspects of service delivery. Careful deliberation, collaboration and codesign will be necessary to implement its recommendations effectively. To ensure high-quality, equitable and sustainable supports that provide choice, control, and independence to people with disability all stakeholders must work together, with people with disability and providers having a seat-at-the-table to ensure changes can be safely and practically implemented.

Funding is required to support sector structural adjustment over the next 5 years. This could assist, for example, with the introduction of new navigation models and supports for homes and living, managing vacancies, investing in/divesting infrastructure, new regulatory and training requirements for workers, delivering trauma informed supports and adapting to new systems, including enhanced incident reporting, digital platforms, e-markets, and payment systems.

Recent financial data benchmarking shows that the provider sector is struggling. The [Stewart Brown Chartered Accountants Benchmarking Survey](https://www.stewartbrown.com.au/images/documents/StewartBrown_-_FY23_Disability_Services_Financial_Benchmark_Report_final.pdf) found that 55 per cent of responding organisations reported an operating loss for the financial year 2023; with an average operating loss of $1.25 million per disability service provider in that year. The [Ability Roundtable’s Financial and Workforce Benchmarking Results](https://www.abilityroundtable.org/post/white-paper-fy23-financial-and-workforce-benchmarking-results#:~:text=The%20benchmarking%20results%20from%20the,participating%20organisations%20reporting%20a%20loss.) FY23 drew data from organisations with $6.04 billion in total revenue, representing nearly 70,000 NDIS participants and over 55,000 workers across core supports, therapy supports and support coordination. These services reported a median profitability of -2.1 per cent, with 63 per cent of participating organisations reporting losses.

The benchmarking surveys’ respondents tended to be registered, often not-for-profit providers, supporting people with more complex needs. As a cohort they are critical to the system. They arguably cannot hold on with current price settings for the time expected for Review implementation.

NDS urges Victorian government advocacy for structural adjustment funding to registered providers to prevent market failure.

## Engagement of service providers and other stakeholders in Review implementation codesign

To implement the reforms outlined in the DRC and NDIS Review will require development of a series of implementation plans, integrated within an overall well-developed roadmap. It is critical that the disability sector is involved right from the start, with regular communication between all stakeholder groups.

We note that existing Victorian consultative mechanisms are well placed to contribute to the reform agenda, including the Victorian Community Advisory Council (VCAC), the Disability Workforce Working Party, and the Department of Education’s Disability Stakeholder Reference group.

NDS recommends that the government applies evidence-based codesign elements, as codesign with stakeholders is more than consultation. It is important that any power imbalances are well-managed. People with disability should be reimbursed for their involvement. It is also important that a mix of providers and people with disability are involved to ensure any new reforms and service models consider the range of urban and regional, cultural, and socio-demographic contexts, and are applicable to the broadest cross section of Victorians with disability.

## Alignment of Victorian legislation/regulation with national quality and safeguarding

**Legislative change**

The DRC and NDIS Review have both highlighted areas where strengthening, aligning, and changing legislation can be used to drive change to ensure quality of life and quality of service provision for people with disability. For many recommendations to be realised, changes must be made to legislation. It will be important to ensure legislation and accompanying regulations across federal and state governments are mindful of ensuring quality and safeguards whilst also not adding duplication and burden to compliance with regulations.

The Victorian government has enacted a number of disability safeguarding legislative changes in recent years, in contrast to other jurisdictions. These have plugged some perceived gaps in the national safeguarding framework but also added to the environment's complexity for Victorian based disability services. Victoria should consider future adjustments to some of this legislation to ensure alignment as the national legislative environment changes with any agreed DRC and NDIS Review recommendations.

**Information sharing**

Since the NDIS began to be rolled out 11+years ago the sector has seen the creation of silos between different agencies with limited information sharing. This is resulting in duplicative compliance and reporting requirements, and at times hampering the delivery of high-quality and safe services. NDS recommends that efforts be made to increase information sharing in the following areas:

* NDIS Commission (or new agency) and the Victorian Social Services Regulator regarding disability registration and complaints information.
* NDIS Commission (or new agency) and the Office of the Senior Practitioner on both authorisation and use of restrictive practices, both authorised and unauthorised in behaviour support plans. This information needs to be reciprocal.
* Office of the Public Advocate (OPA) and NDIA and Consumer Affairs Victoria to supply address information to facilitate safeguarding role of OPA’s Community Visitors Program.
* NDIA and service providers where there is known risk to safety to both participants and service providers if information is not provided. This may include but is not limited to the existence of specialised treatment order, health, and behaviour support needs.
* Reduce regulatory burden by having report-once mechanisms that facilitate sharing across agencies e.g., NDIS Commission incident reports shared with Victorian Disability Worker Commission as appropriate, CAV RTA agreement lodgment triggers notification with Community Visitors program

**Worker screening and provider registration**

A key NDIS review recommendation was that all providers are to ‘register,’ allowing full visibility of the market with four levels of registration proposed (Currently > 150,000 providers are not registered). Additionally, all workers who have more than incidental contact with participants and/or deliver specified direct services are to have a NDIS worker screening clearance.

There is currently a federal Taskforce examining these recommendations in further detail.

The registration levels proposed are as follows:

***Advanced registration***: for supports that are considered high-risk or require high-level technical competence, e.g., shared / SIL home living. This will require providers to have observational audits against both general and support specific standards - similar to the current approach;

***General registration:*** for medium risk supports, applying graduated approaches to regulatory requirements based on risk. Audits may be observational and/or desktop auditing. E.g., Non-SIL high intensity daily personal activities and supports that include significant 1:1 contact with participants;

***Basic registration:*** lighter-touch registration requirements for lower-risk supports, possibly similar to the current verification pathway with a greater scope that would include sole traders and small providers, social and community participation, and services that involve limited 1:1 contact with participants. Rather than audits, self-assessment, and attestation of compliance with Practice Standards would be the pathway to registration.

***Enrolment:*** a simple and light-touch online process for providers of the lowest-risk supports such as consumables, equipment, technology, and home and vehicle modification. Compliance with practice standards required but nil audit/ assessment.

(See Attachment 2 for registration table from NDIS review recommendations and Attachment 3 for NDS’s policy position on provider oversight, accountability, and enablers.)

It needs to be clarified if a provider can have more than one level of registration. For example, Advanced if offering SIL but only Enrolled for the low-tech equipment it may provide as well. This would reduce the cost of registration and audit for those who provide both types of services.

There also needs to be clarification around whether a provider can register their services according to risk level, or must they register the whole organisation based on the highest risk service they offer. The NDIS Commission has indicated that if tasked with developing the model this will be determined by its own understanding of the organisation in question. Sector collaboration needs to be a key component of modelling to ensure broader exploration of the possible outcomes of the new registration system are considered.

The cost of registration and consequent compliance requirements is significant and the cost of developing registered supports costs a further ~6 to 8 per cent. Adequate timelines need to be set for the market to make any relevant registration change.

**Worker Registration**

The DRC recommended that there be national registration of disability workers and cited the example of the Victorian Disability Worker Commission (VDWC). NDS has previously expressed concern that ‘registration’ of workers can be confusing for consumers who do not recognise the difference between registration of service providers and registration of workers and may believe that a ‘registered worker would be subject to the same level of safeguarding as employees of registered providers. That said, NDS has welcomed the professional and collaborative approach of the VDWC and recognises the merit of having some form of recognition for disability workers.

## Significantly invest in driving inclusion in mainstream services

Mainstream services have been identified in the review as a focus for improved access and inclusion by all people with disability. This aligns with the State Disability plan priorities with Victorian already engaged in strategies to address these needs, such as the Disability Liaison Officer (DLO) program, Pathways to Home and Mental Health and Wellbeing Diverse Communities reform processes.

While these initiatives begin to address the health mainstream needs, significant gaps remain resulting in poor health outcomes resulting from delays in treatment, misdiagnosis or lack of accessible and appropriate supports especially associated with hospital admission, outpatient care and fragmented service pathways.

NDS urges attention on mainstream health systems as a priority focus for immediate capability building and improvement to occur alongside the focus on foundational supports and the introduction of Navigators to enable the integration of codesigned solutions and workforce capabilities to be duplicated where appropriate, maximising the resources needed for the improvements to occur.

NDS urges a significant step up in investment to drive greater inclusion across all government funded mainstream service systems, including education, health, public and social housing, transport, and justice, in line with the vision of the State Disability Plan.

## Opportunity to build foundational supports on Victoria’s existing service system

NDIS Review report uses the term ‘foundational supports’ which covers information and services outside the Scheme. These supports are the responsibility of the Commonwealth and the States and Territories and are intended to create an ecosystem of support people. As part of this ecosystem mainstream supports which are the responsibility of the States need to more inclusive. Foundational supports will include strategies for children and young people particularly in education and early intervention.

The NDIS review report describes four layers of supports for people with disability:

* universal and mainstream services available to everyone in the community,
* general foundational supports available to those under 65
* targeted foundational supports for people with disability under 65 who are not eligible for the NDIS, and
* individual supports provided through the NDIS.

Foundational supports should be available to all NDIS participants and people with disability aged under age 65 who are not eligible for the NDIS and their families.

The role of these foundational supports for children and families (particular in early intervention) and people with psychosocial disability will be critical. They will also provide supports to those with significant disability who do not meet the NDIS residency criteria such as permanent residents who are not Australian citizens and those on visas not covered by the relevant criteria (for example refugees and international students).

In line with the recommendations of the DRC and the Review, the Victorian Government needs to continue to drive mainstream services to be more accessible and inclusive. This is particularly evident in Health, where access to mainstream services leads to better health outcomes for people with disability and reduced costs. We urge the Government to consult with the sector on ways connections could be formed across all mainstream services

Victoria already has a social services infrastructure which could underpin foundational supports and ensure improved integration with mainstream services. For example, the new Mental Health Locals, our extensive network of Maternal and Child Health services, Community Health Services, and the Home and Community Care Program for Younger People.

A support strategy is required which coordinates both National and State programs to create an integrated whole rather than the states plugging holes. While further Victorian funding from the Commonwealth is likely, strong advocacy is required to ensure this is adequate and targeted. Victoria will need to assemble a strong evidence base to support this advocacy.

In addition, Information Linkages and Capacity Building (ILC) strategies, which have not been considered in the NDIS Review, need to be evaluated. The ILC program provides information and capacity building supports for all people with disability, regardless of whether they are NDIS participants. As such, they already provide many services that could be part of the new foundational support ecosystem if focused and enhanced.

Closely linked to the call for foundational supports, NDS wants to see greater support for children with disability and their families in line with both the recommendation of the DRC and the NDIS review. Both include a call to safeguard the right to inclusive education for children with disability. To facilitate this, the NDIS review report recommends better connecting the NDIS with school education systems and improving educational outcomes for these children.

NDS acknowledges that the Victoria Government is currently investing in a variety of programs which support children with disability including rolling out Disability Inclusion reforms in schools, investing in early years supports, and investing in some advocacy services. Building on this, we would like to see funding to develop a suite of integrated support to create a truly inclusive and robust early years and education system. We are keen to see the system being much more proactive with early intervention for young children with developmental delay. There is also a swathe of work required to create an education system that responds to the education recommendations of the Royal Commission, with disability inclusion reforms to increase system performance and accountability.

In all areas requiring significant reform, NDS urges the government to extend its existing consultative mechanisms, to ensure the voice of service users, families, advocates, and providers are all considered. This will be particularly important in the critical area of services for children and young people.

## Opportunity to link new navigator roles with mainstream services

Commentary in Victorian NDS networks and (social) media on the Navigator role in replacing other intermediaries has created an impression of immediacy. This has resulted in concern for NDIS participants with increased risks of intermediaries exiting the workforce and market failure for Support Coordination in the interim.

There need to be immediate communications assuring participants that any change will not be immediate and will be carefully codesigned. A clear roadmap needs to be developed including timelines and demonstrate that people with disability will not be without critical support in any transition. Also, a reassurance that loss of any choice and control will not be an unintended consequence of the change.

There was concern expressed about the proposed Navigator role that if “commissioned by the NDIA” will erode participant choice and control of service provider. The potential conflict of interest where an Agency-commissioned Navigator needs to support a participant with budget/funding negotiations with the NDIA will need to be addressed.

To address the risk that Agency-commissioned Navigation might in practice become a mechanism for NDIS cost control, it is recommended that any implementation includes safeguards to protect choice and control, along with operational practices that ensure this role does not adversely influence supports in participants’ plans.

Due to the directions outlined in the review, job security and subsequent loss of skills from the sector along with risk to current business models for some providers is an emerging issue. Suitable skillsets of the Navigator role will be critical, requiring expertise to build trusting relationships, understand and network with the local community and disability services, and understand participants needs now and in the mid-term future. Current Support Coordinator and Local Area Coordination (LAC) markets are ‘personnel specific’ and outcomes that the participant choices are dependent on the individual skillset of the SC/LAC – some succeed, some fail. Concerns were also expressed about a workforce drain to Navigator roles and a diminishment of role diversity and value in provider organisations. Qualifications and expertise of Navigators need to be thoughtfully identified with participants, carers, allied health professionals, and other relevant stakeholders.

The NDIS Commission Own Motion into Support Coordination and Plan Management is not concluded, however will examine how positive contributions made by good support may be supported. Planning for implementation of Navigators will need to consider key quality and safeguarding findings from the Own Motion Enquiry once completed.

## Plan for an available, skilled workforce to support reform

Workforce shortages persistently plague the sector. Providers find it difficult to find workers with the requisite skills. The Review has proposed a set of recommendations encompassing training, workforce management, pricing structures, and community partnerships to comprehensively address the multifaceted challenges facing the disability sector. It is noted that there is currently further development of policy relating to the disability workforce occurring at the national level, and this will also frame Victorian workforce initiatives.

The disability sector grapples with a multifaceted challenge marked by high burnout rates and a struggle to retain skilled support workers, leading to a significant impact on the overall quality of care provided to people with disability. Workforce shortages persistently plague the sector, with recruitment proving challenging due to the difficulty in finding workers with the requisite skills, values, and attitudes that align with the demands of the job. For providers this may lead to canceled shifts, increased overtime costs and the need to provide unfunded on-the-job training for workers without qualifications and experience. This uncertainty can result in an inability to meet demand or grow the business.

Workers express frustration with the existing system, citing inadequate training, limited career advancement opportunities, and insufficient supervision, especially affecting allied health professionals. The pricing and payment structures in place are identified as inadequate, creating obstacles for providers in meeting the complex needs of participants. Notably, the annual turnover rate of 17 per cent to 25 per cent underscores the pressing need to address issues such as short-term employment and suboptimal working conditions.

To remedy these challenges, the NDIS Review report has proposed a set of recommendations which sacrifice detail through the level of their interaction with other policies. Examples of this are the implementation of a trial for portable leave and training aims to formally recognise the learning and training undertaken by support workers, allowing them to accumulate leave balances across the broader care and support sector and the current national consultation regarding a [national skills passport](https://www.education.gov.au/national-skills-passport-consultation).

Additionally, a call is made for improvements to worker screening processes, seeking to streamline and expedite procedures while ensuring consistency across the care and support sector.

The suggested approach to training involves establishing a minimum online training standard to ensure a baseline understanding of worker obligations, coupled with opportunities for career progression through micro-credentials—short courses and competencies- a digital skills passport and growing the number of traineeships as recommended by the Review.

While some of these recommendations are more adequately analysed from the Commonwealth perspective, others, such as portable leave provisions, have already seen some Victorian action with the introduction of the [Portable long service program](https://www.nds.org.au/images/Policy/2023_04_NDS_Submission_to_Portable_Long_Servi.pdf). NDS has long called for improvements to the current protracted screening system in Victoria. Having to wait several weeks for a NDIS worker screening check, when they could have an immediate start in retail, is a recruitment barrier. We need these important safeguarding mechanisms, but the turnaround needs to be more efficient.

Victoria could also consider developing targeted and flexible migration pathways for care and support workers, potentially through an industry labour agreement, in consultation with industry, employer associations, and unions as well as a bigger focus on peer workers. This would start with increased support for individual and family capacity building being delivered by peer workers as part of the increased investment in foundational supports discussed above.

In addition, an ongoing governance function for coordinated workforce planning, incorporating data strategy, identifying workforce gaps, and continuous monitoring and evaluation across Australian and state/territory governments could be established.

NDS recognises that Victoria has long demonstrated a commitment to the disability workforce (through funding workforce initiatives) and already has some building blocks for policy leadership in this space (e.g., DFFH Centre for Workforce Excellence, the Disability Workforce Working Party). However, we recommend development of a specific disability workforce strategy to enable and support implementation of the disability reform agenda over coming years.

## Need for a robust disability housing and support plan

The NDIS Review and DRC made some significant recommendations about the future of disability housing and support. These included wanting to separate ownership from support services, eliminating segregated settings and larger scale group homes, and more focus on share housing based on 1 staff member to 3 participants with shared support.

The critical issues for Victorian disability housing and support providers and the emerging issues flowing from the NDIS Review and DRC include:

* The viability of Supported Independent Living (SIL) services
* Specialist Disability Accommodation (SDA) supply
* SDA/SIL vacancies and vacancy management
* Ownership concerns
* The delays in SDA/SIL decision-making and lengthy NDIA processes
* The 1:3 ratio NDIS Review recommendation
* Differing views about what is best practice in the provision of housing and support
* The transition away from group homes and legacy stock
* Removing ‘Improved Livability’ from the SDA design categories
* The lack of oversight of unregistered SIL, Short-Term Accommodation (STA) and Medium-Term Accommodation (MTA) providers and the variable standard of housing
* Tenancy provisions
* The building regulations for SDA, SIL, STA and MTA.
* Safety in home and living supports

These issues are complex and multi-factorial. NDS is currently developing a discussion paper to examine these issues in greater detail.

NDS recommends that the Victorian government collaborate with key stakeholders to create a 5-to-15-year Victorian housing and support plan that considers the array of issues and factors and plots a way forward in this complex space.

## Employment

People with disability continue to experience disproportionately low levels of employment compared to the rest of the Victorian community. Employment is often not prioritised in NDIS participant plans and some participants need support to identify, explore and try a range of employment options. With unemployment at its lowest in decades, we are presented with an opportunity to empower many people with disability to enter the workforce.

* The DRC Report highlights employment for people with disability in relation to inclusion while there is not adequate attention in the NDIS Review.
* The Victorian Government has an opportunity to foster employment as an enabler for inclusion would be prudent strategy.
* Further work on a social procurement strategy would be useful. Employment needs to be driven by participants and not systems driven to be most effective.
* Systems outcomes focus can create a system that works against the needs of participants.

It is important that the State Government collect data on the number of people with disability employed in each public sector department, sharing this data publicly and reviewing the impact of inclusive policies and practices to ensure they have created more equitable and accessible workplaces.

The State Government needs to work with all stakeholders to develop a cohesive vision for employment that improves how existing supports work together, identifies gaps, and develops strategies to address gaps that supports a range of employment options for all people with disability. This should target supports for people who are long-term unemployed and training to assist supported employment providers to transition participants to open employment options.

NDS welcomes the current review of Victoria’s Social Procurement Framework but wants greater support for social enterprises whose central mission is employing Victorians with disability. We would also encourage the Victorian Government to increase government purchasing from supported employment services, including procurement and employment targets and mandatory set aside policies, like the model developed with the Indigenous Procurement Policy. This could include supporting the [Buyability](https://buyability.org.au/) procurement website for redevelopment and promotion. The Buyability website provides government and private business with an easily navigated platform to identify and source highlighted social enterprises by location or business category.

## Regional and remote services

The sector issues already identified in this document are exacerbated in regional/remote areas due to geography, lower populations, and lower socio-demographics. This adversely impacts service supply (often referred to as thin markets) in disability and the allied health sectors and infrastructure challenges.

NDIS participants in rural and remote communities may struggle to access the necessary services in their local area.

If a participant's plan is under utilised (even if due to thin markets) they may struggle to justify keeping funding levels and risk lower levels of funding in their next plan.

Transport funding is capped by the NDIS and does not account for the level of remoteness. People living in regional and remote areas often need to travel further to access local or city-based services. Some may travel 200kms or more to access daily community activities, and other services or work but currently these increased travel costs are not reflected in regional participant's plans. When their NDIS transport funding runs out this may limit their access to disability/ medical services and inclusion opportunities or increase their out-of-pocket costs. This is also compounded by the limited availability or lack of accessible public transport in many parts of regional and rural Victoria.

Overcoming regional staff shortages, inadequate skills mix, and reduced training options will be key success factors in addressing some of the regional and remote geography challenges. There is a need for more focus on incentive programs (like medical incentive programs etc.) to encourage allied health practitioners to work in regional/remote Victoria and improve access to timely services.

 Metropolitan centers to access services, particularly specialist services and this brings additional costs of travel and disconnection from local communities.

To overcome these issues, service-delivery models should be developed that give families in rural and remote areas access to disability services without forcing those people to compromise or to forego assistance.

Opportunities for improvement could include the further use of Telepractice, Allied Health Assistants (AHA’s) and Fly-In-Fly-Out (FIFO) practitioners. Telepractice is a therapy service that is delivered in-part or in-whole via remote telecommunication and can eliminate travel time and increase choice in service providers outside the local area.

AHAs are certificate-qualified individuals who can implement interventions under the guidance of an allied health professional, remotely or in-person. AHAs can have an in-depth knowledge of local community needs at the same time as having a broad knowledge of allied health services. The combination of an AHA and clinician brings expertise in the local community, and expertise in clinical practice, as well as providing a more regular and timely service to individuals, since the clinician need not be always physically present.

FIFO allied health practitioners who specialise in disability have the potential to empower rural and remote communities, and build capacity amongst generalist allied health practitioners, educators, and allied health assistants.

The outer fringes of Melbourne in growth corridors where there are new housing developments are also present with some of the issues outlined in this section.

There is a need to address some of the market issues being experienced in regional Victoria. This includes improving the spread of allied health practitioners to improve regional Victorians’ access to critical allied health and behavioural support services. The NDS recommends the government explore allied health incentive programs (like medical schemes).

Regional and rural disability services have been critical in ensuring the safety of Victorians with disabilities impacted by the recent floods, bushfires, and heatwaves etc. They have tirelessly worked with emergency services, ensuring the welfare of Victorians with disability, assisting in evacuations, and continued to deliver essential services at time when their business and workforce have also been impacted. Most of this critical emergency work is largely underfunded. Access to some government funds to acknowledge this important contribution is critical – and it will assist them to remain viable.

The recommendations of the DRC and the NDIS review have called for separation of SIL and SDA provision. While this may be desirable to alleviate concerns around conflict of interest, it will create practical problems in rural and regional areas where markets are thin and service provision may only be viable when the two are combined. Governments need to ensure when considering these recommendations, the impact they could have if rigorously applied without the flexibility to adapt to different market conditions.

# Conclusion

It is important that the views of people with disability, their representative groups, providers, and government are all considered in this next phase of work in implementing the recommendations of both the DRC and the NDIS Review. This paper has discussed the more important issues that will need to be considered by the Victorian government, in conjunction with the Commonwealth, as the reform process moves ahead.

The disability services sector is ready and willing to take on recommendations to improve the quality and safety of services they deliver for people with disability.

A skilled, capable, diverse, and sustainable provider landscape is a desirable outcome for participants. However, consideration needs to be given to matching the timetabling and resourcing of reforms and the capacity of the sector to respond.

Having the right workforce in place is the foundation to good practice. Many, if not all, of the topics raised as part of both the DRC and the Review, from governance and management practices, supported decision making, through to managing risks and complaints, all depend on the workforce. Reforms and initiatives in these areas, appropriately funded and successfully implemented, can give people with disability greater choice and control in how they live and work and give support to the providers who support them.

NDS is committed to collaborating with the Victorian government and the disability sector to ensure people with disability have access to the safe, quality and culturally appropriate services they deserve.

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