



Submission to the Productivity Commission study into the National Disability Insurance Scheme costs

March 2017



Jesuit
Social Services
Building a Just Society

Table of Contents

Jesuit Social Services: Who we are	2
Our recommendations	4
Introduction.....	5
Multiple and complex needs	6
Intellectual disabilities.....	6
Vulnerable groups facing additional barriers	7
Intersection with mainstream services	9
Service delivery and structure	9
Pricing	10
Transitional issues	10

For further information, contact:

Sally Parnell
Chief Operating Officer, Jesuit Social Services
T: 03 9421 7600
E: sally.parnell@jss.org.au

Jesuit Social Services: Who we are

Jesuit Social Services works to build a just society by advocating for social change and promoting the health and wellbeing of disadvantaged people, families, and communities. We value all persons and seek to engage with them in a respectful way that acknowledges their experiences and skills and gives them the opportunity to harness their full potential.

We strengthen and build respectful, constructive relationships with a focus on:

- **Effective services** – by partnering with people most in need and those who support them to address disadvantage
- **Education** – by providing access to life-long learning and development
- **Capacity building** – by refining and evaluating our practice and sharing and partnering for greater impact
- **Advocacy** – by building awareness of injustice and advocating for social change based on grounded experience and research
- **Leadership development** – by partnering across sectors to build expertise and commitment for justice.

The promotion of **education, lifelong learning and capacity building** is fundamental to all our activity. We believe this is the most effective means of helping people to reach their potential and exercise their full citizenship. This, in turn, strengthens the broader community. Our service delivery and advocacy focuses on the following areas:

- **Justice and crime prevention** – people involved with the justice system
- **Mental health and wellbeing** – people with multiple and complex needs and those affected by suicide, trauma and complex bereavement
- **Settlement and community building** – recently arrived immigrants and refugees and disadvantaged communities
- **Education, training and employment** – people with barriers to sustainable employment.

For nearly 40 years, we have accompanied people involved, or at risk of becoming involved, in the criminal justice system. In Victoria we work with people to prevent and divert involvement in the justice system and support people exiting prison and youth justice facilities. This includes the Corrections Victoria Reintegration Program in North and West Metropolitan Melbourne (Reconnect), the African Visitation and Mentoring Program (AVAMP), Next Steps and Perry House residential programs, the Youth Justice Community Support Service, Group Conferencing and Barreng Moorop (delivered in partnership with the Victorian Aboriginal Childcare Agency and the Victorian Aboriginal Legal Service).

Our programs also include:

- **Jesuit Community College:** increasing opportunities for people constrained by social and economic disadvantage to participate in education, work and community life and reach their full potential.
- **Community and Settlement Programs:** capacity building with Aboriginal communities in Northern Territory and NSW; and working with newly arrived migrants across metropolitan Melbourne and in NSW, including the African and Vietnamese communities.

- **Connexions:** delivering intensive support and counselling for young people with co-occurring mental health, substance and alcohol misuse problems.
- **Artful Dodgers Studios:** providing pathways to education, training and employment for young people with multiple and complex needs associated with mental health, substance abuse and homelessness.
- **The Outdoor Experience:** offering an alternative treatment service through a range of outdoor intervention programs for young people aged 15 – 25 years, who have or have had issues with alcohol and/or other drugs.

Research, advocacy and policy are coordinated across all program and major interest areas of Jesuit Social Services. Our advocacy is grounded in the knowledge, expertise and experiences of program staff and participants, as well as academic research and evidence. We seek to influence policies, practices, legislation and budget investment to positively influence participants' lives and improve approaches to address long term social challenges. We do this by working collaboratively with the community sector to build coalitions and alliances around key issues, and building strong relationships with key decision-makers and the community.

Our Learning and Practice Development Unit builds the capacity of our services through staff development, training and evaluation, as well as articulating and disseminating information on best practice approaches to intervening with participants across our programs.

We acknowledge the Traditional Custodians of all the lands on which Jesuit Social Services operates and pay respect to their Elders past and present. We express our gratitude for their love and care of the land and all life.

Our recommendations

- We call for targeted, specialist care and holistic intensive support for people with disability and complex needs, to ensure their needs are met and they are able to navigate the NDIS and successfully engage with appropriate services.
- We call for the development of a coherent framework that addresses the particular vulnerabilities of people living with intellectual disabilities or Acquired Brain Injury, and ensures they are able to access the NDIS and other related services.
- We call for the NDIS to be culturally adapted, accessible in rural and regional locations, and able to meet the diverse needs of both people from CALD backgrounds, and Aboriginal and Torres Strait Islander people.
- We call on governments to ensure that people with disability in the justice system have access to disability support before, during and after imprisonment, to ensure continuity of care.
- We call for the NDIS to give particular concern to women, undiagnosed people and people in crisis, to ensure their needs are met and they are able to access and navigate the NDIS.
- We call for the NDIS to develop strong and sustainable links with other mainstream services to ensure that no person with disability goes without support, and that people requiring a multi-agency response have their needs met.
- We call for the NDIS to ensure participant plans are easily accessible with particular concern given to people who have difficulty accessing their MyPlace account.
- We call for clear mechanisms in the NDIS to ensure that service providers have adequate skills and capacity to work intensively with people with complex needs during the planning and assessment phase.
- We recommend the NDIS pricing structure be suitably flexible to ensure that it can engage highly skilled staff to meet the complex needs of the diverse range of participants supported by the scheme.
- We call for additional resourcing to ensure that adequate support is available to successfully transition participants to the NDIS.

Introduction

Jesuit Social Services welcomes the opportunity to contribute to the Productivity Commission study into the National Disability Insurance Scheme (NDIS) costs.

Every Australian should have access to the opportunities in life that will enable them to flourish – to complete their education, to get a job, to access safe and affordable housing, to raise their children in safe communities and to see the next generation thrive.

Jesuit Social Services has 40 years' experience working with some of the most disadvantaged Australians who face a range of co-occurring and interrelated issues, such as homelessness, disability, substance misuse, health problems, and involvement in the child protection and criminal justice systems.

For this vulnerable group of people, the NDIS in its current form is not effectively supporting them to address their needs. Our submission draws on our experience engaging with vulnerable people and communities throughout Australia, focusing broadly on the implementation of the NDIS including:

- Working with people with multiple and complex needs
- Working with people living with intellectual disabilities and Acquired Brain Injury (ABI)
- Additional barriers facing particularly vulnerable groups
- The intersection with mainstream services
- Service delivery and structure
- Pricing; and
- Transitional issues.

This submission uses the definition of 'disability' as outlined in the *Disability Discrimination Act*, which broadly includes physical, intellectual, psychiatric, sensory, neurological and learning disabilities, as well as physical disfigurement and the presence in the body of disease-causing organisms. While Jesuit Social Services works with people who have a range of disabilities, we predominantly work with people with intellectual disability, cognitive impairment, and high needs mental health problems.

Multiple and complex needs

From our experience working with people with multiple and complex needs, Jesuit Social Services believes a whole-of-person approach is critical in addressing the unique mix of intersecting and overlapping issues that each individual faces

Research shows that people with disability can have multiple and complex needs. People with disability can also often experience more than one disability. Of Australians under 65 years with an ABI in 2007, 42 per cent had a psychiatric disability, 39 per cent had a sensory or speech disability and 29 per cent had an intellectual disability.¹

Amongst those in the justice system, the prevalence of disability with other health conditions has been noted by a number of other studies in Australia.² NSW researchers found that 69 per cent of a sample of prisoners with cognitive impairment had multiple and complex needs.³ Aboriginal people in this study were more likely to have multiple and complex needs as well as increased interaction with the criminal justice system.⁴

People with multiple and complex needs require a specialist response to effectively address their multifaceted needs as there are often additional vulnerabilities and extra barriers that they face when accessing mainstream services. A coordinated approach is required to ensure their care is effective and impactful.

The NDIS in its current form does not lend itself to this type of intense case management. The vulnerable cohorts we work with do not necessarily have the capacity to navigate the complexities of the NDIS and successfully engage with appropriate services. They need targeted, specialist care and intensive support that works with the whole-of-the-person to meet their full range of needs and ensures they engage fully and appropriately with services.

We call for targeted, specialist care and holistic intensive support for people with disability and complex needs, to ensure their needs are met and they are able to navigate the NDIS and successfully engage with appropriate services.

Intellectual disabilities

Services and systems often respond to people as if everyone has the same level and type of cognitive functioning and literacy skills, and the same is true of the NDIS.

Jesuit Social Services works with people who are living with intellectual disabilities or ABI. The information and communication provided to equip people to navigate the NDIS presumes a level of comprehension, ordered thinking and memory that people with intellectual disabilities or ABI often find challenging.

People with intellectual disability or ABI often experience difficulty functioning day to day, can struggle with memory and find it difficult to retain information. They may lack consequential thinking, suffer with depression and can be impulsive. This can impact on their ability to keep appointments, retain personal information such as log in details, proactively seek out supports and successfully identify appropriate services. Failure to fully engage with services can subsequently compound their disability and exacerbate other interconnected issues they may be dealing with concurrently.

To ensure that people living with intellectual disabilities or ABI are able to access the NDIS and other related services, a coherent framework is needed that addresses the particular vulnerabilities of this cohort.

We call for the development of a coherent framework that addresses the particular vulnerabilities of people living with intellectual disabilities or Acquired Brain Injury, and ensures they are able to access the NDIS and other related services.

Vulnerable groups facing additional barriers

Jesuit Social Services has experience working with some of the most marginalised members of society who often face additional challenges and barriers in accessing services such as the NDIS.

Aboriginal and Torres Strait Islander, and Culturally and Linguistically Diverse people

Jesuit Social Services has particular concerns about the way the NDIS will cater to the needs of Aboriginal and Torres Strait Islanders and their capacity to access the scheme including:

- The differing understandings of disability in Aboriginal communities and the potential unwillingness for people to identify with a disability label for cognitive, social or cultural reasons⁵
- The lack of a culturally specific framework in the NDIS for working with Aboriginal and Torres Strait Islanders and how the individualised approach of the NDIS will acknowledge the importance of community and family for Aboriginal people⁶
- The capacity for a marketised system to operate effectively in remote and rural Aboriginal and Torres Strait Islander communities; and
- The capacity of the NDIS to work effectively with other service systems to meet the needs of Aboriginal and Torres Strait Islanders with disability and complex needs when it is focussed on 'disability services'.

We also have particular concerns about the way the NDIS will cater to the needs of people from Culturally And Linguistically Diverse (CALD) backgrounds and their capacity to access the scheme including:

- The differing understandings of disability in culturally diverse communities and the potential unwillingness for people to identify with a disability label for social or cultural reasons
- The lack of a culturally specific framework in the NDIS for working with ethnically diverse communities and how the individualised approach of the NDIS will acknowledge the importance of community and family for some culturally diverse communities; and
- The capacity of the NDIS to work effectively with other service systems, such as settlement services, to meet the needs of people from CALD backgrounds with disability and complex needs when it is focussed on 'disability services'.

We call for the NDIS to be culturally adapted, accessible in rural and regional locations, and able to meet the diverse needs of both people from CALD backgrounds, and Aboriginal and Torres Strait Islander people.

People with disability in the justice system

People with a disability in prison are at risk of receiving fragmented and inequitable access to support compared to people with disabilities who are not in the prison system. This is in part due to the fact that the Council of Australian Governments has agreed that the NDIS will not fund individuals during their time in prison, but will fund disability-specific needs only once they return to the community.

This disjointed program response represents a significant barrier that prevents people with disabilities being able to access continuity of support. It remains unclear how former prisoners with disabilities are expected to access funding, support or even the most basic information about the NDIS once in the community.

Jesuit Social Services has further concerns about the access to disability support for people with cognitive impairment and complex needs in the criminal justice system including:

- The requirement of people with disability and complex needs to have the computer literacy, interpersonal and self-advocacy skills to gain assistance from the NDIS⁷
- The difficulty for people in prison to access and register on the NDIS portal due to restrictions and regulations relating to computer and internet access in correctional centres
- The impact of accessibility to the scheme when it is reliant on access to appropriate diagnostic services;⁸ and
- The uncertainty as to whether the presence of a mild cognitive impairment (particularly when co-occurring with mental health problems, substance misuse, and entrenched disadvantage) will meet the eligibility of the NDIS scheme of a 'substantial and ongoing disability need'.⁹

We call on governments to ensure that people with disability in the justice system have access to disability support before, during and after imprisonment, to ensure continuity of care.

Women, undiagnosed people and people in crisis

Jesuit Social Services also has concerns about access to the NDIS for a number of other vulnerable groups that we work with including:

- **Women** - There are additional barriers to successfully engaging women in the NDIS especially where domestic violence is involved (as is the case with many of our participants). Women may have their own carer responsibilities which can also reduce their level of engagement in relation to their own health care.
- **Undiagnosed people** – Someone who remains undiagnosed will not be able to access NDIS and given other mainstream services are losing funding to the NDIS, there are fewer alternatives for these people to turn to; and
- **People in crisis** – often our participants are high needs and in crisis. The complexity of the system and the time it takes to register, plan, navigate and access services impedes and limits a timely response to crisis situations where an individual's health has rapidly deteriorated.

Better understanding is required of the issues and barriers faced by these more marginalised groups in accessing and navigating the NDIS. A new approach to engaging these groups, in addition to more funding may be required to overcome some of these challenges.

We call for the NDIS to give particular concern to women, undiagnosed people and people in crisis, to ensure their needs are met and they are able to access and navigate the NDIS.

Intersection with mainstream services

It is vital when working with people with multiple and complex needs that co-occurring issues are not compartmentalised and dealt with in isolation by numerous service providers.

The NDIS must find ways to successfully link with other mainstream services such as housing, mental health, drug and alcohol and employment, as well as to other government departments.

Conversely, the NDIS cannot become a substitute for mental health services, particularly considering the high rates of undiagnosed mental health problems. According to Community Mental Health Australia, it is estimated that as many as 10,000 Victorians living with serious mental illness will be ineligible for the NDIS and are at risk of not receiving appropriate psychosocial rehabilitation services.¹⁰ People with undiagnosed mental health problems will go unsupported as current mental health services lose their funding to NDIS funded services.

Often participants are pushed to access other services wherever possible. However the existence of the NDIS has created a number of service funding gaps meaning there are fewer services available outside of the NDIS to those who are not eligible, or who need a more nuanced response than the scheme can provide.

We call for the NDIS to develop strong and sustainable links with other mainstream services to ensure that no person with disability goes without support, and that people requiring a multi-agency response have their needs met.

Service delivery and structure

The planning stage is vital to the success of a participant's engagement with NDIS. A participant's plan has to be a 'living' and accessible document throughout the process to ensure its successful implementation. This means it needs to be more easily accessible to both the participant and their service provider(s).

Currently it is very hard to access plans for participants who have difficulty accessing their MyPlace portal account, such as people who are incarcerated, those who have low levels of IT capacity and those who do not have access to a computer.

We call for the NDIS to ensure participant plans are easily accessible with particular concern given to people who have difficulty accessing their MyPlace account.

Working with participants who have multiple and complex needs tends to be more nuanced and challenging. These instances require more time allocated to the planning stage and more face-to-face contact for assessments, where relationships can be created and trust established. An intensive level of outreach is often required even prior to service agreements being signed. This can be due to a number of reasons including, but not limited to:

- The increased need for interpersonal relationships and a relationship of trust means phone assessments are not suitable and the level of outreach required is much more intensive
- Difficulty for service providers/coordinators accessing participants who are homeless and/or have no mobile phone
- Difficulty for incarcerated participants accessing online services

- Lack of capacity to successfully navigate the system due to the severity of a participant's intellectual disability; and
- Lack of suitable/available support from trusted family, friends or personal supports to navigate the system. This is further compounded by the conflict of interest for a caseworker/case coordinator to support them in managing secure information such as log in details and passwords.

Jesuit Social Services' experience has been that participants often require a large investment of time at the outset of their NDIS journey. There needs to be clear mechanisms in place to ensure the selected service provider has the right skills and capacity to deliver the required services, particularly for participants who are highly vulnerable and facing multiple barriers.

We call for clear mechanisms in the NDIS to ensure that service providers have adequate skills and capacity to work intensively with people with complex needs during the planning and assessment phase.

Pricing

The NDIS will be accessed by a diverse range of Australians presenting with a variety of needs and vulnerabilities. For people accessing the NDIS who need flexible and intensive supports, a unique pricing structure may be required.

Pricing therefore needs to take into consideration the following factors:

- More tailored support requires more flexible pricing
- Funding does not cover all the work done with participants prior to a service agreement being signed which can often amount to many hours of work
- Penalty rates need to be incorporated into pricing to allow for after-hours services
- The low staff payment benchmark is often insufficient to cover the cost of the skilled staff required and does not attract new staff to the sector
- Services that do not work across various levels of need, and whose focus is uniquely on high needs participants, will find it very difficult to manage under the current funding model
- More funding is required for staff training and workforce capacity building; and
- Some aspects of the scheme would benefit from a pool of funding rather than individual funding plans i.e. crisis support, agency collaboration, staff development, systemic advocacy, and program innovation.

We recommend the NDIS pricing structure be suitably flexible to ensure that it can engage highly skilled staff to meet the complex needs of the diverse range of participants supported by the scheme.

Transitional issues

The current focus on planning for such a large number of participants as they transition over to NDIS means there is a bottle neck at the point of initiating participant plans and linking them to appropriate services.

The lack of appropriate understanding of service coordinators' roles and responsibilities is contributing to this lag. Time is required to access appropriate training and develop a more thorough understanding

of roles, responsibilities, systems and processes. While there are some positive supports available via National Disability Services, there is a lack of access to support via the NDIS contact numbers. Currently it is very challenging to contact someone on the service provider phone line.

There also needs to be recognition, particularly during this time of transition but also ongoing, that some participants with higher needs require more focus and time than others to set up and initiate their plans.

Long wait times can see intellectual disabilities compounded if support is not in place quickly. These transitional issues need to be minimised to ensure those with intellectual disabilities are not further disadvantaged due to inability to access appropriate services in a timely manner.

We call for additional resourcing to ensure that adequate support is available to successfully transition participants to the NDIS.

¹ Australian Institute for Health and Welfare, (2007). Disability in Australia: acquired brain injury, Bulletin 55. Canberra, AIHW.
<http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=6442453666>

² Rowley M. (2013). The invisible client: people with cognitive impairments in the Northern Territory's Court of Summary Jurisdiction. Alice Springs, Central Australian Aboriginal Legal Aid Service.
<https://www.humanrights.gov.au/sites/default/files/Sub40%20Appendix%20Central%20Australian%20Aboriginal%20Legal%20Aid%20Service%20Inc.pdf>; Villamanta Disability Rights Legal Service, (2012). People who have an intellectual disability and the criminal justice system. Waurin Ponds, Villamanta Disability Rights Legal Services Inc.
<http://www.villamanta.org.au/documents/People%20with%20ID%20in%20Criminal%20Justice%20System.pdf>; Salekin K., Olley J., Hedge K. (2010). Offenders With Intellectual Disability: Characteristics, Prevalence, and Issues in Forensic Assessment, Journal of Mental Health Research in Intellectual Disabilities, Vol. 3, <http://www.concept-ce.com/wp-content/uploads/2013/10/Salekin-Olley-Hedge-2010.pdf>; Brown & Kelly. Williams H. (2012). Repairing Shattered Lives: brain injury and its implications for criminal justice. Exeter, University of Exeter.
https://www.barrowcadbury.org.uk/wp-content/uploads/2012/11/Repairing-Shattered-Lives_Report.pdf

³ Baldry E., Dowse L. & Clarence, (2012). People with intellectual and other cognitive disability in the criminal justice system. Sydney, UNSW.
https://www.adhc.nsw.gov.au/_data/assets/file/0003/264054/Intellectual_and_cognitive_disability_in_criminal_justice_system.pdf

⁴ Baldry, Dowse, McCausland R., & Clarence M. (2012). Lifecourse institutional costs of homelessness for vulnerable groups, Sydney, UNSW.
<http://www.pwd.org.au/documents/pubs/adjc/Lifecourse-Institutional-Costs-of-Homelessness.pdf>

⁵ Baldry, McCausland, Dowse & McEntyre (2015). A Predictable and Preventable path: Aboriginal People with mental and cognitive disability in the criminal justice system. Sydney, UNSW.

⁶ Ibid.

⁷ Ibid

⁸ Ibid.

⁹ Ibid.

¹⁰ Community Mental Health Australia (CMHA), (2017). Submission to the Productivity Commission inquiry into NDIS costs. Canberra, CMHA.