



JFA
Purple Orange

Submission

**in response to the NDIS consultation paper,
Proposal for a National Disability Insurance
Scheme Quality and Safeguarding
Framework**

Submitter details

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About the Submitter

JFA Purple Orange is a non-government, social profit organisation. Anchored on dialogue with people living with disability, their families, service providers, government and other stakeholders, we seek to identify policy and practice that has the prospect of advancing peoples chances of a good life. Our work is anchored on the principles of Personhood and Citizenhood. Our work includes research, evaluation, capacity building, consultancy, and hosted initiatives.

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Submission

in response to the NDIS consultation paper

Proposal for a National Disability Insurance Scheme Quality and Safeguarding Framework

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1.0 Purpose

The purpose of this submission is to assist the National Disability Insurance Scheme (NDIS) in its considerations for a quality and safeguarding framework.

It is difficult to cover all the detailed considerations in a submission like this, and therefore we welcome the opportunity to further assist senior officers associated with the Scheme as they continue their work in this mission-critical endeavour.

2.0 Structure of the submission

This submission is anchored on the ideas and elements within our Model of Citizenship Support¹. We have also submitted a separate submission, based on the contribution of a focus group comprising a number of people living with disability, that attempts to provide response to the range of questions posed in the consultation paper.

3.0 Fundamental principles

We believe the fundamental principles underpinning a quality and safeguarding framework should reflect what we understand to be the goals of the overall scheme, ie information and supports that:

- maximise people's control and choice, so they have authentic *authorship* of their own lives (termed *Personhood* in our Model)
- advance people into valued roles in community life and economy (termed *Citizenship* in our Model)

Further, we believe that every human being is vulnerable and no one is truly independent from a reliance on the efforts of others. This is why people form communities, to generate mutual benefit through people contributing via valued roles and in turn gaining benefit from the valued roles of others.

The principal issue facing people living with disability is that their disabling circumstances currently create increased vulnerability compared to the rest of the population. Such vulnerability may not be limited to the nature of disability but to the way our communities currently respond.

This signals the need for investment to assist people into valued roles in community life. The NDIS represents a major focus of such investment, in addition to what might reasonably be expected from the successful implementation of Australia's National Disability Strategy.

¹ Williams, R. (2013). Model of Citizenship Support, 2nd Edition. Julia Farr Association Inc. Adelaide.

As for all of us, the journey to valued roles and a good life is marked by uncertainty; we make decisions and take actions without knowing for sure whether our efforts will definitely bring the benefits we seek. This uncertainty is also known as *risk*, because the possible outcomes include those that are undesirable.

Such risk cannot be removed without removing the opportunity itself, and this would run counter to the goals of the NDIS and the National Disability Strategy and what happens in most people's lives.

Therefore, the emphasis needs to be on how best to manage risk so as to tip the odds in favour of success.

The proposed framework's inclusion of *developmental* safeguards reflects the above logic and this is very pleasing.

A successful safeguard is a measure that manages the risks associated with vulnerability without undermining access to opportunities for a good life. If a measure to manage a person's vulnerability can be seen to reduce or hinder a person's access to valued roles, then that measure is unacceptable and should not feature in any NDIS arrangement. We believe this principle should be a cornerstone of the framework, underpinning developmental safeguards, preventative safeguards and corrective safeguards.

4.0 Commentary on the three proposed domains – developmental, preventative and corrective

We commend the consultation paper authors on these proposed domains as they offer the prospect of a sound and systematic approach. In particular, we are encouraged by the references to building natural safeguards in people's lives and building capacity at various levels.

The presence of natural safeguards in a person's life – such as those that come from community visibility, participation in valued roles, having rich networks of connection with other local people – are the most important outcome of a Quality and Safeguarding Framework.

Therefore, we believe this is where the 'centre of gravity' of investment should lie. In other words, as a detailed strategy and budget is crafted for the NDIS Quality and Safeguarding Framework, the greatest part of the budget should be allocated to the *developmental* domain. A lesser portion of budget should be allocated to the *preventative* domain, and the least part of the budget should be allocated to the *corrective* domain. Not only does this send the right signal about the NDIS priorities in safeguarding, it also makes the most sense because it is the developmental domain that is most directly related to the building and sustaining of natural safeguards in people's lives. It is proactive.

By contrast, the *corrective* domain is reactive, seeking to resolve and remedy situations when things go wrong. This is of course an important feature of the overall framework but should not be the one where the majority of funds are invested. From our experience, most health and social welfare

systems are more likely to be successful when they are proactive not reactive, on the ‘front-foot’ not the ‘back-foot’.

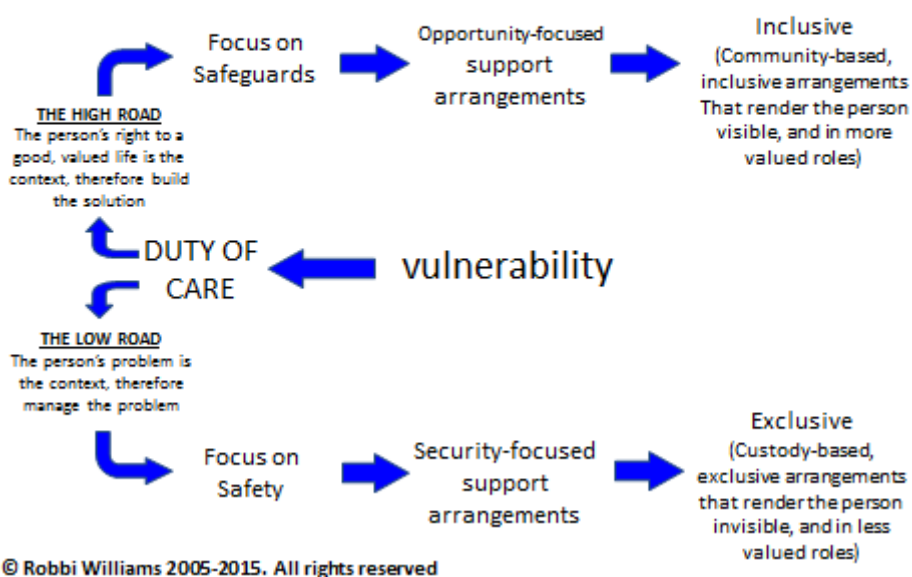
The *preventative* domain is proactive, which means its budget should trump that of the corrective domain, but whereas the developmental domain might be seen as a direct investment in people’s lives, the preventative domain is an *indirect* investment in people’s lives because it attends to the capacity and practice of service agencies. It remains an important area for investment but it should not trump the developmental domain.

The main challenge in running the preventative domain arrangements will be to minimise the risk of it becoming characterised by a culture of bureaucracy and compliance. It needs to do more than tell service providers what they need to do to comply with the framework. We have seen this happen before in relation to restrictive practices, where a framework that hopefully was intended to reduce and remove restrictive practices instead became one where well-intentioned providers became adept at crafting restrictive practice proposals that met the compliance requirements of the framework but did not necessarily help advance the person’s life chances.

5.0 Taking risk safely – a suggested mantra for the NDIS Quality and Safeguards Framework

In our own capacity building work with people living with disability, their families, service providers and other stakeholders, we have made use of an illustration to explain the difference between the two main ways of responding to the risks associated with a person’s vulnerability. This illustration is reproduced below.

Thinking about taking risk safely (instead of making safety risky)



The illustration attempts to convey the difference in service responses to people's vulnerability depending on what is seen as the focus – the goal of a valued life or the management of a problem.

We have had consistent feedback that this high-road/low-road illustration has helped stakeholders rethink their approach to working with people living with disability who have raised vulnerability in areas like health, behaviour and communication. Stakeholders have also found illustration helpful in explaining why 'safeguards' founded on safety measures can sometimes deliver the opposite outcomes to those intended. Institutional care is a long-standing example of such a 'safeguard'.

We believe the preventative domain should be anchored on a set of arrangements that orientate service providers to maximise 'high-road' support arrangements and to minimise, and ideally remove, 'low-road' support arrangements.

We would welcome the opportunity to work with the designers of the NDIS quality in safeguarding framework to explore how the high-road/low-road concept might be woven in to the preventative domain arrangements.

6.0 The Four Capitals – a way to systematically build safeguarding capacity

Our Model of Citizenship Support² sets out how people can be supported to author their own choices and move into valued roles in community life and economy. In particular, the Model asserts this happens by investing in growing the person's life chances, arranged in four domains, termed the *Four Capitals*.

The first, *Personal Capital*, attends to matters of the person's identity – their gifts, strengths, potential, the extent of hope they see in their own future and how they might plan for it, the extent of their central role in the decisions that affect their lives and, importantly, the degree of courage they have in approaching the uncertainties (risks) that lie ahead in their quest for the life they want.

The second, *Knowledge Capital*, attends to how a person makes the best use of the knowledge and skills they have, how they can continue to grow their knowledge and skills and, critically given the nature of the world in their lives and, how they can access information.

The third, *Material Capital*, looks at the material assets the person has control over. This includes *personal* Material Capital like money (important for funding choices), personal effects, a place to call home, personal transport, etc. Also there is *public* Material Capital covering material assets the person can use but other people use them too. This includes things like public transportation, shopping malls, cinemas, beaches, parks, community centres, cafes, etc.

² *ibid*

The fourth, *Social Capital*, looks at the connections and friendships a person has and, critically, the extent to which a person routinely has opportunities to meet new people, and not just other people living with disability or people who are mandated to be there (such as paid staff and volunteers).

One can identify highly intentional attention to one or other of these domains in any current example of successful approaches to safeguarding and authentic notions of quality.

Therefore, we believe the Four Capitals could be a helpful system for build the details within the NDIS Quality and Safeguarding Framework. We have had success using them to assist people living with disability and their families build personal capacity across a range of life issues; this resonates with the *developmental* domain in the consultation paper. We have also had success using the Four Capitals to assist service agencies develop their approach (including strategy development, staff training, audit and benchmarks) to building individual supports and safeguards; this resonates with the *preventative* domain in the consultation paper. Finally, we have had success using the Four Capitals to diagnose issues and frame solutions when arrangements go wrong and complaints emerge; this resonates with the *corrective* domain in the consultation paper.

Therefore, we would welcome the opportunity to meet with the designers of the NDIS quality and safeguarding framework to further explore how the Model of Citizenship Support and its Four Capitals might be of assistance.

7.0 Concluding remarks

We commend the authors of the consultation paper, which contains many helpful elements in support of a successful quality and safeguarding framework.

As always, a clear and coherent value base is of the utmost importance, and the balance of investment should reflect those values. Therefore we believe the centre of gravity for the framework should be in the *developmental* domain.

We believe that any formal supports, including arrangements designed to safeguard the person in relation to risks, should be anchored on the goal of measurably advancing the person's journey to valued roles in community life, and therefore any 'safeguarding' arrangement but cannot demonstrate this should have no place in the framework.

Finally we believe that if the NDIS quality and safeguarding framework is primarily focused on building each person's capacity, and calibrating service agency support in support of this, then that capacity growth should be understood and measured in terms of life chances. In support of this, we believe the *Four Capitals* model can provide a comprehensive and systematic approach in the detailed design of the NDIS Quality and Safeguarding Framework.