From: Claire G., in NSW

Date: 20th April, 2015

Re: NDIS Quality and Safeguard Framework consultation process

To Whom It May Concern,

I seek to give my input about the safeguarding mechanisms within the NDIS; I’m really enthusiastic about the opportunities that the NDIS brings for people with a disability across Australia, and I’m keen that the scheme that is developed is equitable, robust, and as effective and high quality as it can be.

I submit this letter in order to give my feedback from a variety of perspectives; I have worked in the disability sector for 20 years in a variety of roles for various not-for-profit non-government organisations, including internationally; I am aunty, godmother, and Circle of Support Co-ordinator to my 17 year old niece who experiences significant and profound physical, intellectual, sensory, and neurological disabilities; I am a person who is passionate about social justice, equality, and protection of vulnerable people; I have a Bachelor Degree in Disability Studies; I have many friends, colleagues and relatives with a variety of lived experience with disability; and I have current experience working in two disability related roles, 1) for a NSW based disability service, managing self managed service provision for people with individual funding packages, and 2) as an Official Community Visitor (OCV) in NSW.

I think the move to individualised funding (eg. through the NDIS) for all people with a disability is an important one, as it returns autonomy and choice to people with a disability themselves, about where to ‘purchase’ their services. However, even with this greater flexibility and control for individuals, many individuals remain vulnerable, and liable to “fall through the cracks”, without adequate supports and preventative measures being structured into the fabric of the scheme.

I think and external oversight body for significant incidents and complaints is vital, in order to ensure that service providers that are not well managed are compelled to improve, rather than to just have people who’ve received poor service move on, and the service move on to finding a new customer base to again deliver shoddy service to. Within NSW, this function is achieved by the NSW Ombudsman (which has oversight about a disability “reportable incidents” scheme). However I’m unsure what happens in other jurisdictions, and would be concerned if we were to lose the safety net that this provides.

Currently, within the NSW OCV scheme, certain types of accommodation services are deemed by regulations to be “visitable”. When an OCV visits such a service, it is at the judgement of the OCV (given the needs of the residents within that service) as to how the visit is conducted; the OCV may spend a lot of time talking with residents, or reviewing files, or talking with staff about their concerns for residents.

It is my understanding that under the NDIS, there won’t be specific service “types” – rather, it is hoped that each NDIS participant will be considered more holistically about their support needs. I would suggest that as part of the NDIS assessment process, individuals who are considered most vulnerable, or meet certain criteria, could be deemed as “visitable” by an independent person such as an OCV. Following, I suggest some examples of NDIS participants whom I would consider vulnerable (to abuse, neglect, poor service, “falling through the cracks”) and to be visited, and my reasoning:

* People who have no “informal supports” (family or friends) during their NDIS planning, or in general *[if supported by a support worker – even one that knows them well – that support worker has a vested interest in ensuring the participant continues to choose their current service provider (the support workers’ employer): who is providing independent oversight of services within the person’s life, including the planning service the person has received from NDIA? A visitor would be just such an independent voice.]*
* People who are subject to the use of restrictive practises *[currently in NSW, use of restrictive practises must be approved, and reviewed at least yearly. As an OCV, I always check this, as sometimes people are subject to practises for much longer than they should be, and frequently others are impacted by this, such as housemates with a locked fridge, etc]*
* People who are having their NDIS plan managed not by themselves or a service, but by a family member *[in the event of worse case horror scenario where a person with a disability is being abused by their family member, there are no services involved that could notice this and report to authorities etc]*

I imagine there are many more scenarios in which people are vulnerable. As a broader issue within the NDIS, I remain concerned that under a “market-based” model such as NDIS, there may be some participants (for example, adult males with challenging sexualised and violent behaviour) for whom, even with funding allocated, finding a service provider to assist them will be a challenge…. Manyh services may be unable to meet that person’s specialist needs (in terms of staff, or being able to ensure staff safety, etc). In order to ensure that all people are able to receive a service that meets their need there will perhaps need to be an additional safety net of a small government service provider. (In NSW currently, the government Ageing Disability and HomeCare (ADHC) department mostly funds NGOs to deliver service, but does also does some service delivery or its own. As with NGOs, ADHC services are also subject to visits by OCVs).

Whilst by no means a comprehensive Quality and Safeguarding Framework, these are some thoughts that I really wanted to contribute to this process.

Kind regards,

Claire G.