



PO Box H189 Hurlstone Park NSW 2193 Telephone: 1800 643 155 E-mail: admin@asorc.org.au www.asorc.org.au ABN 81 442 528 153 ACN 616 971 138

The Australian Society of Rehabilitation Counsellors Ltd. (ASORC)

Submission To

The National Disability Insurance Agency (NDIA)

On

Review of the NDIS Act and the new NDIS Participant Service Guarantee

October 2019

Emailed to:

NDIS Consultations Department of Social Services GPO Box 9820 Canberra ACT 2601 NDISConsultations@dss.gov.au

Contents

Introduction	3
Recommendations	3
ASORC and the Profession of Rehabilitation Counselling	.4
The Value of Rehabilitation Counsellors to the NDIS	5
The Assessment Tools of Rehabilitation Counsellors	6
Opportunities for the NDIS to use Rehabilitation Counsellors to Improve Services	6
Meeting Access Challenges for NDIS participants	7

Introduction

The Australian Society of Rehabilitation Counsellors Ltd. (ASORC) thanks the NDIA for the opportunity to provide consultation on its *Review of the NDIS Act and Development of the Participant Service Guarantee*.

We note that this consultation is about reviewing the NDIS Act 2013 and developing a Participant Service Guarantee. The discussion paper calls for feedback on participant and provider experiences with the NDIS, input on what should be included in the Guarantee and information to consider in reviewing the Act.

Rather than focus on the barriers for participants and providers in engaging with the NDIS, our submission uses an over-arching solution-focused approach to provide an outline of the specific benefits of Rehabilitation Counselling, demonstrating how the utilisation of Rehabilitation Counsellors within the NDIS framework will assist in addressing many of the issues raised in the discussion paper provided.

To date ASORC has engaged with the NDIS on submissions during 2016-2018 regarding:

- The implementation of the National Disability Insurance Scheme and the provision of disability services in NSW
- The provision of services under the NDIS for people with psychosocial disabilities related to a mental health condition
- The provision of hearing services under the National Disability Insurance Scheme

Recommendations

- 1. That the NDIA includes the profession of Rehabilitation Counselling in the NDIS framework and Participant Service Guarantee
- 2. That the NDIA lists Rehabilitation Counsellors as a profession capable of delivering Support Coordination services
- 3. That the NDIA engages in consultation with ASORC to discuss attracting and retaining Rehabilitation Counsellors within the NDIS
- 4. That the NDIA formally invites ASORC to participate in relevant steering committees, taskforces, planning groups and/or panels

ASORC and the Profession of Rehabilitation Counselling

The profession of Rehabilitation Counselling is an independent allied health profession that has been recognised in Australia since the mid-1970s and internationally since the 1950s. Tertiary courses in Rehabilitation Counselling commenced at the Cumberland College of Health Sciences (Sydney) in 1974 and are currently delivered at universities nationally.

<u>ASORC</u> is the peak professional body representing rehabilitation counsellors throughout Australasia. Established in 1976, ASORC is a non-party political, non-sectarian and not for profit organisation.

ASORC members have fulfilled specific tertiary academic requirements, possess well defined professional competencies, are bound by a specific Code of Ethics and are qualified to deliver services across compensable and non-compensable jurisdictions.

Rehabilitation Counselling is a specialised and distinct mode of Professional Counselling that empowers diverse individuals who are impacted by social disadvantage, physical, psychological, mental health or other adverse health conditions, to set and accomplish goals in assisting their return to optimal function within their community. Rehabilitation Counsellors work with clients on strategies to overcome obstacles and personal challenges that they are facing.

The aim of Rehabilitation Counselling is to assist clients to improve their quality of life in the physical, psychological and social domains in order to optimise their vocational, economic and community participation. Rehabilitation Counsellors especially understand the important contribution of work and education to an individual's financial security, sense of community engagement, independence, optimism and self-efficacy.

Often the work of Rehabilitation Counsellors is centred around assisting people with adverse medical conditions or disadvantage to commence or resume employment or to undertake education leading to either paid or unpaid employment. Compared with other allied health professions within the rehabilitation industry, the key points of difference for Rehabilitation Counsellors are their specialised skills in: vocational assessment, labour market research and analysis, job task analysis and case management expertise in co-ordinating and engaging other allied health and medical professionals to optimise outcomes for their clients.

Rehabilitation Counsellors work within a variety of health settings. Many Rehabilitation Counsellors currently work in State and Federally funded vocational rehabilitation provider organisations to assist people with a disability, health condition or disadvantaged to return to the paid workforce wherever possible. These include Disability Employment Services, JobActive and Veterans' Vocational Rehabilitation schemes.

There are also many Rehabilitation Counsellors who work within a compensatory model, employed in private Occupational Rehabilitation organisations, providing services to people who have been injured in a workplace or motor vehicle accident or are receiving personal injury compensation.

Other Rehabilitation Counsellors may specialise in providing services to people who experience specific disability or disadvantage, such as people with mental health conditions, drug and alcohol abuse, traumatic brain injury, hearing impairments, ex-offenders or refugees.

As Rehabilitation Counsellors possess significant specialised professional and academic skills, usually underpinned by a background in behavioural science or psychology in addition to Rehabilitation Counselling postgraduate qualifications, during their careers they may find themselves working in more generalist areas such as: counselling therapy, Employee Assistance Program (EAP) counselling, youth services, mediation and conflict resolution services, human resources management, university lecturing, research, management, disability program development, diversity management, social services, injury prevention, advocacy, policy, or working as consultants in private practice.

The Value of Rehabilitation Counsellors to the NDIS

Rehabilitation Counselling is concerned with a whole of person and biopsychosocial approach, drawing on a large discipline-specific body of knowledge in health science, disability management, vocational rehabilitation and human services. This makes Rehabilitation Counsellors highly skilled in areas such as:

- personal counselling
- vocational assessment, counselling and training
- job placement and aptitude matching
- adjustment to disability counselling
- motivational interviewing
- psychosocial assessment
- case management
- service coordination
- injury prevention and management
- mental health services
- independent living planning
- hearing services
- services for the ageing
- conflict resolution and negotiation

Many of these skills have direct relevance to the 'engaged', 'expert', 'connected' and 'decisions are made on merit' principles of NDIA service standards as proposed in the discussion paper and highlighted in **Key Discussion Questions 1 to 5**. In order to enact these principles, the NDIS Participant Service Guarantee would be better served if Rehabilitation Counsellors were acknowledged as a profession capable of service delivery within the NDIS.

The Assessment Tools of Rehabilitation Counsellors

Rehabilitation counsellors are highly skilled and trained in the use of multiple forms of assessment. These include psychological assessments such as the Depression Anxiety Stress Scales (DASS), goal setting programs such as the Progressive Goal Attainment Program (PGAP), fatigue assessments such as the Fatigue Assessment Scale (FAS), vocational interest assessments such as the Occupational Search Inventory (OSI) and Self Directed Search (SDS), vocational personality tests such as the Work Aspect Preference Scale (WAPS) and Congruence Personality Scale (CPS), vocational aptitude tests such as the Wide Range Achievement Test (WRAT) and the Congruence Occupational Reading Test (CORT), as well as formal intelligence and literacy tests.

Vocational and psychosocial assessments, along with goal-setting programs are useful complementary tools in the context of other insurance schemes in which Rehabilitation Counsellors work. ASORC contends that such assessment tools used by Rehabilitation Counsellors would be empowering for the planning and plan review stages of the NDIS participant experience, especially in identifying relevant educational pathways, supports and workplace modifications. This is relevant to **Key Discussion Questions 10-15 and 16-21**.

Opportunities for the NDIS to use Rehabilitation Counsellors to Improve Services

There are two main unrealised opportunities for Rehabilitation Counsellors to work within the NDIS sector.

First, as the current NDIS framework does not appear to adequately value or recognise the profession of Rehabilitation Counselling, there are insufficient incentives for Rehabilitation Counsellors to invest in building an NDIS service delivery presence or business model.

Within the NDIS framework, ASORC members have informed us that the current approach to client assessment is overly simplistic and dominated by an Occupational Therapy approach seemingly excessively focused on physical function and lacks broader psychosocial and vocational considerations. Rehabilitation Counsellors possess unique skills and assessment tools to address the complex and unique needs of people with short and long-term adverse health conditions. These include holistic assessment, individualised planning and support coordination, techniques for working with challenging behaviours, narrow focus and communication barriers.

Despite this holistic approach to assessment, as a professional group, Rehabilitation Counsellors remain underutilised within the NDIS framework. Best practice assessment for people with disabilities should be collaborative, including functional, biopsychosocial and vocational elements. Rehabilitation Counsellors approach assessments from this framework and are therefore well suited to working with NDIS participants. Consequently, there is a need for greater recognition of the role and value of Rehabilitation Counsellors within the NDIS service model. This is especially relevant to the legislative changes raised in **Key Discussion Questions 26 and 27**.

ASORC members working with NDIS participants have advised that the NDIS caseload is often encumbered with outdated and rigid ideas on how labour market attachment is defined. Rehabilitation Counsellors however are flexible and innovative in their approach to employment participation, going beyond what is currently delivered in the disability employment sector. For particularly challenging and complex cases, the disability employment sector would be well-placed to consult with Rehabilitation Counsellors and could secure funding for specialised vocational assessment services.

The second area of opportunity highlighted by ASORC members is that capacity building within the NDIS framework is currently not well understood. Strategies for this are often poorly articulated, implemented and measured in plans, inhibiting client progression towards their stated goals. To improve the quality of capacity building within the framework, Rehabilitation Counselling should be formally recognised as a specialised service performed by ASORC members with specific qualifications and experience.

Such capacity building could include more promotion and use of vocational assessments and training and education assessments as planning tools, which Rehabilitation Counsellors are well placed to provide given their professional expertise in linking clients to education and training pathways.

The unique skills and experience of Rehabilitation Counsellors makes them ideally suited for **NDIS Support Coordinators roles** (as per the NDIS provider toolkit), as support coordination forms core business for Rehabilitation Counsellors within other insurance frameworks (e.g. life insurance and compensable settings), but whose expertise appears to be underutilised within the NDIS.

Under current arrangements, many Rehabilitation Counsellors cannot find a viable or durable pathway into the NDIS sector and hence many Rehabilitation Counsellors with interest in the NDIS sector remain in more traditional work environments where their knowledge and skills are well understood and remunerated.

Attracting and encouraging Rehabilitation Counsellors to provide services and perform Support Coordinator roles within the NDIS will assist in solving the challenges of the planning and plan amendment process raised by **Key Discussion Questions 10 to 15 and 28 to 32.**

ASORC conteds that the original service delivery model of the NDIS was too narrowly constructed and needs to be revised to include Rehabilitation Counsellors as critical providers.

Meeting Access Challenges for NDIS participants

ASORC members have informed us of many challenges that NDIS participants face within the current framework. These include:

- 1. a lack of designated timeframe for the NDIA to consider a request for review
- 2. decisions communicated informally and not in writing, failing to outline which parts of the legislation a request did not meet
- 3. significant delays in reviewing information
- 4. limited protocols to contact for protected files
- 5. limited professional skill and experience in the area or request that a delegate is considering or approving
- 6. the predominant use of a "one-size-fits-all" approach in making funding decisions instead of considering the guiding principles of 'reasonable and necessary'
- 7. limited public guidelines and guidance about the evidence base used by the NDIA to make decisions

These challenges touch on issues of the review and appeal process, as well as the legislative framework as raised in **Key Discussion Questions 16 to 27.** Through provision of professional, high-quality, expert services, Rehabilitation Counsellors can assist the NDIS to tackle challenges 2, 3, 5, 6 and 7 listed above.

ASORC recommends increasing the recognition and incentives for Rehabilitation Counsellors to work within the NDIS to improve quality standards of service provision. The role of a **Support Coordinator** is just one area within the NDIS where there is a natural skill fit for Rehabilitation Counsellors.

ASORC is ready and willing to engage with the NDIA to develop a better understanding of opportunities for Rehabilitation Counsellors to work within the NDIS framework.