

Submission to the National Disability Strategy and NDIS Outcomes Frameworks

Achieving better outcomes under the National Disability Strategy requires greater commitment from all governments and transparency about what they have done and how effective it has been. We need a well-designed outcomes framework with an agreed set of reporting measures. And we need to measure the things which can demonstrate whether or not Australia is making progress.

In its current form, the draft framework is too long, includes duplicate and at times, over described sub-outcomes and too many example indicators. Reducing duplication, refining and clearly defining the relationship and linkages between the outcome, sub-outcome, indicator and the measure is recommended.

How best to track the effectiveness of the Strategy and the NDIS?

Recommit to the National Disability Agreement (NDA)

As no single government has sole responsibility for delivering the Strategy, there needs to be a substantive re-commitment by all governments to the social and economic imperatives that underpin it.

As a funding agreement, the NDA is potentially an important mechanism to ensuring the success of the Strategy. Unless it is replaced but another structure that commits investment, it should be re-negotiated and released alongside the Strategy. NDS is pleased that Disability Ministers have agreed to establish a new National Disability Strategy Advisory Council. It will be important that consideration of economic drivers of the Strategy is a priority of the new Advisory Council.

Hard and Soft Measures

Measuring progress should comprise a mix of quantitative and qualitative elements. The framework should include consistent hard measures for each domain which are agreed by all states and territories. They should include already available measures on employment and participation rates, and education attainment levels but new ones will need to be introduced.

These hard measures should be balanced with more descriptive, qualitative measures which give contextual and person-centred insights. The NDIA's approach to measuring outcomes draws frequently upon the participant experience through surveys and returns rich data. Similar to the Prime Minister's annual report to Parliament on 'Closing the Gap' for Indigenous people which is commended by the Productivity Commission, the approach should draw upon both qualitative and

quantitative assessments towards progress, building the profile of disability in the Australian community and the influence of the Strategy (2019, p. 23).

Annual Reporting

The <u>Productivity Commission's Review of the NDA</u>, calls for a single person-centred performance reporting arrangement across the NDA and the Strategy (2019, p.2). Now is the perfect time to respond to the report's recommendations and develop a framework which is simplified, standardised and underpinned by clearer roles and responsibilities.

Reporting should occur annually to Parliament at the state and territory level and then consolidated to the Federal Parliament. Where targeted action plans are introduced, they should be ambitious - yet achievable – and performance against them visible to the Australian community.

A new Strategy provides the opportunity to produce an annual report which combines the objectives of the NDA, the Strategy and the NDIS thereby allowing us to track how people with disability are faring in the Australian community. Knowing how we are tracking will highlight the areas where program and policy responses should be targeted and support the taking of well-informed steps to respond to issues, improve program and policy responses and achieve better outcomes.

Publically Available Information

The action plans, program responses and reports should be available on a centralised website. Governments, stakeholders, people with disability, carers, families and the wider community should be able to view the way in which each state and territory has chosen to respond to the Strategy, track progress and be able to search for government and non-government initiatives and improvements in their local community.

What you think about the different elements in draft structure for the Outcomes Frameworks?

Acknowledging the framework is attempting to use a person-centred approach to describing the sub-outcomes, some are either ill-defined or too descriptive and at times, repetitive. Consideration should be given to how consolidating the sub-outcome areas into the critical elements of the outcome and developing more person-centred indicators.

Inclusive and accessible communities

NDS's submission to the Strategy outlined the need for a stand-alone domain – Housing.

This remains our preference. If, however, it does not eventuate, we have made comment on how the housing component under this domain and under the economic security domain might be strengthened.

The outcome relevant to inclusive and accessible communities should include the word 'homes' and read:

'People with disability live in accessible and well-designed **homes** and communities with opportunity for full inclusion in social, economic, sporting and cultural life.'

If housing is to be split across two domains, it needs to be clear what aspects of housing are being measured and reported under each. The example indicator 'Housing (choices that are flexible, suitable, affordable and accessible)' should remove the word affordable, as this is included under economic security domain. The duplication is an unnecessary confusion which may lead to inconsistent data collection and reporting. Reference to housing options in desirable locations, close to public transport, shops and mainstream services, should be included.

The sub-outcomes should be better designed to capture the critical element it is describing. For example, 'move around my home' is too narrow and speaks only to dwelling accessibility. The critical element that related to this sub-outcome is the availability of suitable housing options and the language used to describe this needs to be improved.

Measures may include, the percentage of:

- Domestic dwellings built to the Liveable Housing Design Standards
- Accessible domestic dwellings built in desirable locations (close to public transport, shops and mainstream services)
- Well-designed and accessible homes allowing people to age in place
- Public transport options compliant with the <u>Disability Standards for Accessible</u> <u>Public Transport 2002</u>
- Buildings that are compliant with the <u>Disability (Access to Premises</u> Buildings) Standards 2010
- Sporting venues, pubs, clubs and community centres compliant with the Disability Discrimination Act
- Communication and information systems available in Auslan, easy English and other accessible forms
- Media outlets offering accessible programing and accessible print media
- People with disability experiencing supportive relationships outside support workers and carers (friendships)
- People with disability in leadership roles
- People with disability represented in Local Council, State and Federal Government
- People with disability as organisational board members, CEOs and Senior Leaders (both within and outside of the disability sector)

Economic security

Housing outcomes under the economic and security domain should focus on affordability and secure tenure.

Measures may include:

- Engagement with homelessness assistance services
- Engagement with social housing providers and supported residential services (SRS)

- Percentage of people with disability who own their home or rent and the lease type (short term or long term)
- People with disability with an income other than the disability support pension (DSP)
- Rates of unemployment or underemployment
- Job satisfaction ratings
- The number of people with disability that have more than one job

Percentage of organisations

- With an accessibility action plan, equal opportunity recruitment practices and using recruitment tools like <u>Disability Confident Recruiter (DRC)</u>
- Compliant with the national minimum wage and other conditions

Health and wellbeing

As secure and affordable housing is included under economic security, it would be a consistent approach to include all outcomes with economic drivers under that domain. Moving 'Afford the health services I need' to the economic security domain should be considered.

Measures should be designed to respond to the issues raised through the <u>Disability</u> Royal Commission and include:

- The prevalence of physical, chemical and mechanical restraints in health facilities
- The frequency of misdiagnoses
- Reported experiences of violence and abuse in health care settings
- Poor attitudes of health staff

Measures may be designed to respond to:

- Barriers preventing seamless transition at the health and NDIS interface
- Poor discharge practices where people leave health care without adequate supports
- Health workforce trained in disability (communication requirements and meeting individual need)
- Health providers that subscribe to the <u>zero tolerance approach</u> and conduct training
- The utilisation and effectiveness of the NDIS Health Liaison Officers (HLO)

Rights, protection, justice and legislation

People with disability have the right to be safe.

Feeling safe and being safe are different things, and the outcome for this domain should not aim for the feeling of safety but the reality of it. That reality will be measurable through programs, training and cultures which are underpinned by a zero tolerance approach to abuse, neglect, violence and exploitation of people with disability.

Replace the word 'feel' with the word 'are' in the outcome relevant to this domain to read:

'People with disability **are** safe and have their rights promoted, upheld and protected.'

Use less subjective indicators. 'Respect' and 'opportunity' should be removed. Government and non-government sectors should be supported to implement disability action plans which commit to inclusivity and rights protection, and this should be reported on.

Measures may include, the percentage of:

- Government and non-government organisations with a current disability action plan registered with the <u>Australian Human Rights Commission</u>
- Funded advocacy agencies and availability of services
- Accessible complaints mechanisms government and non-government
- Justice institutions (police stations, courts and prisons) which comply with the <u>Disability Discrimination Act</u> and have a publically available disability action plan and adequately trained staff
- The utilisation and effectiveness of the NDIA's Justice Liaison Officers (JLO)

Learning and skills

Declaring that a responsive high-quality education system will, on its own, achieve a person's full potential is an overstatement and should be rephrased.

The outcome should read:

'People with disability have access to inclusive and high-quality education systems responsive to their needs and have opportunities to continue learning throughout their lives in both formal and informal settings.'

Measures should be designed to respond to the findings of the <u>Disability Royal</u> Commission (Interim Report, p. 17).

"People and organisations have also described what they see as the key factors for safe, inclusive and quality education, including:

- strong leadership
- inclusive culture
- effective workforce training
- collaboration between students, parents and educators
- accessibility
- provision of adjustments and supports
- increased disability awareness and acceptance."

Measures may include, the percentage of:

- Education and training providers compliant with the <u>Disability Standards for</u> Education 2005
- Education and training providers with a disability action plan which is publically available and promoted to parents, students and staff
- Education and training facilities that are fully accessible and the percentage of organisations which detail how barriers in the built infrastructure will be removed, with a long-term maintenance plan including upgrades that remove all physical barriers for people with disability
- Teachers and aids who have undertaken disability specific training
- Vocational training, graduate and postgraduate teacher and aid training programs which include disability specific training

- People with disability employed as teachers and aids
- Students with disability consistently attending education programs and the learning outcomes
- Educational attainment levels and engagement in further education
- Extra-curricular programs and excursions that are accessible

Personal and community support

The outcome under this domain states: 'People with disability, their families and carers have access to a range of well-coordinated and effective services and supports that are appropriate for their needs'.

Critically, this domain should ensure adequate supports for people with disability who are not funded through the NDIS and aim to improve the connectivity, communication and interdisciplinary awareness between the NDIS and the other mainstream service systems.

The COAG Applied Principles must be updated to clarify the many grey interface challenges caused by what are now outdated Principles and to review the mainstream connection function of the NDIA's partner in the community, the Local Area Coordinator (LAC) and Early Childhood Early Intervention (ECEI) partner.

Measures may be designed to respond to:

- Issues of poor coordination and interconnectedness of mainstream service systems
- The adequacy of the Local Area Coordinator as a point of contact to facilitate engagement with varied service types
- Transitions between and responsibilities of the NDIS and mainstream service systems justice and the NDIS, health and the NDIS for example

As the NDIS largely sits under this domain, the experiences of people in achieving these outcomes will most likely be skew considering this factor.

What else should be considered?

The following information has been provided to NDS by an Aboriginal Corporation in the Northern Territory for inclusion in this submission –

A major concern in relation to the proposed strategy for Aboriginal people from the remote central Australian region is that the outcomes, measures and indicators are not appropriate for people living in these remote communities. Anangu (Aboriginal people living in remote central Australia) who experience a disability live within a culture and society that differs from mainstream Australia in many ways.

The Strategy must ensure all people with disability are afforded the same opportunities.

The communities are extremely geographically isolated. There are limited or non-existent services and infrastructure, for example:

no local public transport

- roads which may be closed for cultural reasons or because of weather events
- crowded and non-accessible housing
- a single store in each community (not necessarily accessible)
- a clinic with doctors who visit at varying intervals
- no local hospital
- limited school services
- limited employment opportunities
- no disability support workers
- therapists visit at irregular intervals and for limited periods
- specialist visits likely to require a visit to town (300 to 1500km distant)
- no regular or ongoing therapeutic programs such as for rehabilitation or behaviour modification.

Many of the example indicators are inappropriate for people living in remote NPY (Ngaanyatjarra Pitjantjatjara Yankunytjatjara) communities.

It is important to keep the achievement of progress toward the proposed outcomes grounded and person-centred. The measures and indicators need to remain relevant and relate to the situation and priorities of people with disability, in this case of Anangu from the remote Central Australian region. Progress from a low baseline such as exists in remote communities might not look like 'percentage of buildings that are compliant with the Disability (Access to Premises — Buildings) Standards 2010', but might look more like 'community store has a ramp installed'. Measures need to be established with reference to the perception of the people benefitted.

Measuring outcomes for the NPY Lands needs to involve discussions with Anangu to establish when and how they see improvements happening. It needs to take into account the fact that for many people the baseline is extremely low, with the result that the outcomes defined here can seem somewhat unreal.

For example, there is a general lack of awareness among Anangu of the concept of personal rights. Changing this will require targeted education. It will be a slow process and, on an individual basis, will no doubt include both personal growth and setbacks. It is not an easy development to measure or record.

Implementing the sub-outcomes and indicators illustrated in the introductory paper would require far-reaching changes in Anangu remote communities. For instance, people are unlikely to 'feel safe from violence, fear, exploitation, abuse and neglect' in communities where poverty is endemic and there is competition for everyday resources such as food, clothing and bedding.

Anangu living in remote communities do not speak English as a first language, and have varying levels of understanding of English. Their communication is primarily oral- there are low levels of literacy- so that

tracking progress as perceived by community members will require face to face visits and one to one explanations and discussions.

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National Disability Services is the peak industry body for non-government disability services. It represents service providers across Australia in their work to deliver high-quality supports and life opportunities for people with disability. Its Australia-wide membership includes almost 1100 non-government organisations which support people with all forms of disability. Its members collectively provide the full range of disability services—from accommodation support, respite and therapy to community access and employment. NDS provides information and networking opportunities to its members and policy advice to State, Territory and Federal governments.