

Attachment "A" now attached.

On 20 Jun 2025, at 11:22 am, [REDACTED]

Dear Supported Employment Policy Team,

Thank you for the consultation process enabling a thorough and thoughtful consideration of the key issues we face with Supported Employment.

Below are comments from [REDACTED] There is some overlap with Question 1 and some other questions. We thought it more helpful to state some of the key strategic issues which we feel are either missing or need greater clarity in Appendix 3. Having made these points we didn't repeat these in providing more detailed and technical answers to the remaining questions.

Question 1. Is there any other existing work that is missing from the table at Appendix 3?

Yes.

(a) Financial Offsets to Fund High Value Strategic Initiatives

It is all too easy to propose higher investment into important initiatives without identifying areas of cost-saving to offset this. [REDACTED] believes this is unhelpful. [REDACTED] has already been active in advocacy proposing various measures to improve both delivery and better apportion funding within the NDIS System. A key recommendation - action on reassessing fees paid to Allied Health Professionals has already commenced although [REDACTED] has proposed further reforms in this area. A new structure to grade Disability Support Workers recognising the actual level of work required has also been proposed. Details of both proposals are in Attachment "A".

(b) Whole of Community Participation

There needs to be seamless transition of adolescent (aged 18) high care services provided by states into supported employment arrangements and adult community life.

Key components of this would include:

- ~ NDIS providers ideally with well developed contacts with state high care youth services including accommodation arrangements;
- ~ where possible continuous accommodation provision from state to NDIS;
- ~ maintenance of support worker ratios;
- ~ initial ready ADE work options and related support services;

- ~ whole of community commitment to community belonging targeting key community and local business groups as partners;
- ~ mentoring through these groups of individual supported employees and development of individual transition paths including employer payment contributions leading to increased open employment arrangements where possible ;
- ~ working through community groups developing arrangements for employees to participate in broader community life eg sport, recreation, volunteering and arts and culture pursuits;
- ~ developed community partnerships to include aged services providers with the objective of providing transition into care with these providers when appropriate.

Suggested implementation:

- ~ highly flexible models of transitional employee payment arrangements within the supported employment system enabling a gradual progression from ADE employment to more open employment through individual employment agreements. Trained specialists would need to be available to Registered Providers to guide the development of these agreements;
- ~ a program of incentives would need to be developed for business and community groups to participate in these arrangements. These incentives need not be of high cost but be perceived to be high benefit to the recipient groups. Possible inclusions would be facilitation costs and suitable awards and recognition
- ~ this program would lend itself to pilot program arrangements. Those pilot programs would be funded not only for the estimated program implementation and delivery costs but also to commit to share the learning from the pilots openly.

██████████ is well positioned to be a pilot for this initiative. It has well developed links with state high care provision; a range of accommodation designed for various needs including high care; and well developed and supported business and community group links.

(c) Social Enterprises.

██████████ agrees that the development of social enterprises form a critical element in the next steps of supported employment and believes this area should be given key priority.

Clearly the mix of skills and capabilities as well as business backgrounds available in social enterprises are high value drivers of creating open employment opportunities or significantly transitioning towards this goal. Put simply this should sit near the top of the value creation tree.

The development of the SEDI program has been a significant initiative. The availability of grant under the SEDI program up to \$120,000 needs to be urgently reviewed. ██████████ proposes that the grants be both increased but also awarded to reflect the capacity of the applicant.

Clearly registered providers in major cities or in higher socio economic communities who are applicants should have a stronger capacity for fund raising to meet establishment costs of social enterprises. Those from regional and rural communities have a significantly reduced capacity.

██████████ proposes that social enterprise grants be available to support both planning and implementation. Planning grants should be comprehensive enough to include extensive consulting provision and the development of draft agreements with social enterprise partners.

The current grants of \$120,000 would be suitable for this purpose. Implementation grants for approved applications should reflect the applicant contribution including capital investment. A ratio of \$1 (applicant) \$1 (NDIS) would be appropriate for cities and higher socio economic communities. For regional and rural communities and low socio economic communities the proposed ratio would be \$1 (applicant) \$2 (NDIS).

(d) Commonwealth Outcomes Fund Projects.

This fund is an important opportunity for innovation and new high value solutions to challenging issues.

██████ accepts that individual states may have some priority areas but believes that the states should collectively agree with the Commonwealth the aggregate list of priority initiatives for grant funding and those should be open to registered providers in all states and territories.

As an example operating in a low socio economic area [REDACTED] has a range of needs. We fully accept the importance of delivering self-determined Aboriginal employment initiatives and that this has an important place in the Commonwealth Outcomes Fund grant projects. [REDACTED] has in fact been active in a range of Aboriginal employment initiatives.

The reality however is that the catchment area for [REDACTED] does not have a significant Aboriginal population in relation to many other communities. At the same time [REDACTED] the Young Parenting Program available in South Australia would be of real relevance. Similarly the Workplace Program also available in South Australia or Get Back in the Game available in New South Wales are also highly relevant.

Greater flexibility to identify local needs from a nationally agreed list would be really helpful.

(e) Resourcing to Reflect Registered Providers in Low Socio Economic Areas

Consistent with comments made above [REDACTED] believes that the opportunities to support a wide range of Supported Employment initiatives is significantly dependent on recognising the capacity of registered providers to resource key initiatives. Quite simply

registered not for profit providers in low socio economic communities and locations will depend more on favourable grant and pilot funding which recognises their plight.

As pointed out at the commencement of this section [REDACTED] recognises that the overall NDIS funding pool has many demands on it and we operate in a constrained environment. Consequently we have been active in advocacy in terms of both improvements to the system enabling better outcomes but importantly opportunities to contain and reduce cost which in turn can be redeployed to higher value strategic priorities.

Question 2. What is your ideal future state for the supported employment sector and employment of people with disability with high support needs?

The ideal future state for the supported employment sector is one that is diverse, inclusive, and flexible, offering a range of employment options tailored to the individual needs and goals of people with disability, especially those with high support needs.

Supported employment should not be limited to traditional Australian Disability Enterprises (ADEs). It should include a broad spectrum of opportunities, including social enterprises, open employment, and roles within small and large businesses.

Crucially, adequate and sustainable funding must be assigned to support employees in whichever setting they choose to work, ensuring that support is person-centred and responsive to varying levels of need. Supported Employees funding arrangements should be more flexible to enable supported employee to nominate their hours of work.

ADEs will continue to play a valuable role as vocational training environments, helping individuals build skills, confidence, and workplace readiness. These settings can serve as stepping stones, enabling employees to transition into open employment or other meaningful work options when they are ready.

Question 3. What additional actions do you consider are necessary to increase employment of people with high support needs in open/inclusive settings?

To meaningfully increase employment opportunities for people with high support needs in open and other settings, funding must accurately reflect the intensity and complexity of assistance required. Current funding models often fall short, particularly when it comes to providing consistent, individualised support for employees with complex disabilities in mainstream workplaces. Without adequate funding, it becomes challenging to sustain meaningful employment and ensure that both employees and employers are properly supported.

Question 4. The Royal Commission recommended the development of a Plan or Roadmap to guide further reform in the supported employment sector. What would you like to see included in such a plan?

A key element for the future of the supported employment sector should be the recognition and safeguarding of individual choice for all supported employees. Supported employees who choose to continue working in traditional Australian Disability Enterprises (ADEs) should be supported in doing so, without pressure to transition into other employment models.

The plan should maintain the structured environments and tailored assistance that ADEs provide, especially for individuals with high support needs whilst allowing for transitions between employment types when and if the individual is ready, with appropriate supports in place.

Question 5. How could the sector best increase wages for people with disability while avoiding job losses?

- a. Are there examples that currently exist that can be leveraged?**
- b. Are there new approaches that could be tested?**

Increasing wages for people with disability—particularly those with high support needs—requires a balanced approach that maintains employment opportunities while ensuring fair compensation for employers. One key consideration is the potential impact on productivity, which will vary depending on the person and the tasks they perform.

To address this, employers could be subsidised to offset any decrease in productivity-related costs. These subsidies could be structured in a way that aligns with existing income support systems. For example, as an employee's wage increases their Centrelink payments (such as the Disability Support Pension) may decrease. Redirecting a portion of these government savings into employer subsidies could help maintain job viability while improving wages

Question 6 Do you see a role for workplaces which provide specialised employment opportunities for people with disability in the future? If so, what should these workplaces look like?

Yes, there is a clear and ongoing role for workplaces that provide specialised employment opportunities for people with disability, particularly those with high support needs. These workplaces are essential in creating inclusive pathways for individuals who may not yet be ready or able to participate in open employment settings

In the [REDACTED] context we operate within a low socio-economic rural region [REDACTED]—there are limited pathways for individuals with disability with high support needs to transition into open employment or social enterprises. Therefore, attending an ADE is an important option for employment for many people with complex disabilities in our community.

Specialised workplaces offer more than just a source of income; they provide meaningful engagement, social connection, and a sense of purpose. These

environments are essential for fostering confidence, building skills, and promoting inclusion for individuals who may not yet be ready or able to access open employment.

Future specialised workplaces should be:

- Person-centred, adapting roles and supports to individual strengths and needs.
- Inclusive and supportive, promoting dignity, choice, and opportunities for growth.
- Integrated with the community, offering pathways to broader social and economic participation.
- Flexible and innovative, embracing new models such as hybrid employment, micro-businesses, and partnerships with local enterprises.

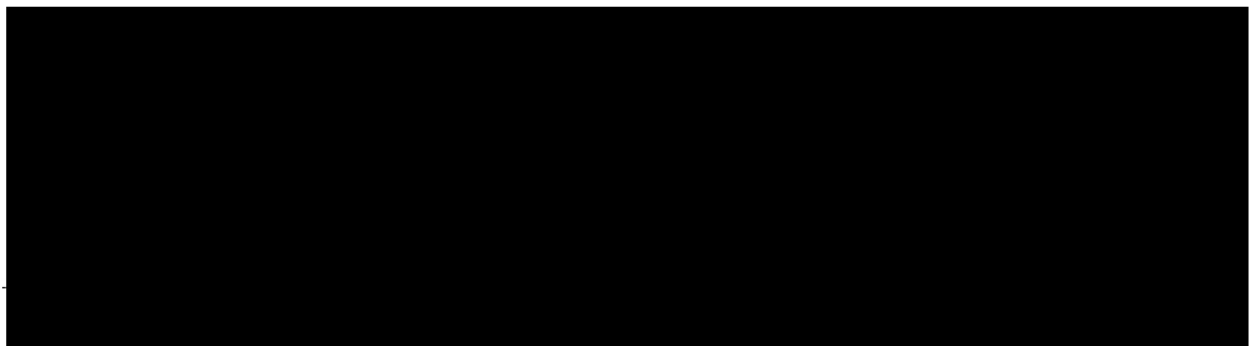
These workplaces should not be seen as separate or lesser alternatives, but as valuable and evolving employment option for a person with a disability with high support needs

Question 7. How could the benefits of supported employment settings be reflected in open employment settings?

The supported employment model offers valuable lessons for open employment settings, particularly in fostering inclusive, supportive, and flexible workplaces. In Australian Disability Enterprises (ADEs), employees with disability thrive due to consistent guidance, structured support, and a culture of acceptance. This is reflected in their attendance, willingness to learn, and overall workplace engagement.

Translating this model into open employment settings would involve embedding similar principles—such as ongoing support, mentorship, and flexibility—into mainstream workplaces. When both employees with disability and their colleagues are supported in their roles, it promotes a more inclusive culture, enhances productivity, and improves job satisfaction across the board.

By adopting these practices, open employment settings would be able to more effectively support diverse needs and foster inclusive environments where every employee feels respected and valued.



	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
Allied Health	The engagement of allied health professionals within the current system, has proven to be problematic and expensive. The fee of \$193.99 per hour, is not sustainable, particularly in rural areas, where the allied health professional charge travel time at the same rate as a 'face to face' consult as well as kilometres travelled. These high payments direct to allied health professionals to mean mainstream health settings, hospitals can't compete and community services are left with inadequate staffing levels and services. The lack of a tiered pay rate scale in line with qualifications and years of experience for allied health professionals does not recognise experience and developed capability and over rewards new graduates . This lack of recognition of experience and knowledge adversely impacts support to persons with a disability. There is a limited understanding of NDIS systems, particularly the 'reasonable and necessary' guidelines result in congesting an already overburdened system.	A further review of the Improved Daily Living supports is needed taking into consideration a 'tiered' payment structure. A section within NDIS providing consistent advice and guidance to participants and providers regarding allied health professional supports would be beneficial.	

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
	Allied health professionals' hourly rate offered by NDIS is too high. The consequences of this are; 1. Shortage of allied health professionals within the health system – they make more money from NDIS participants 2. Inexperienced, often newly qualified people, often going out on their own as a sole trader, attracted to NDIS work 3. Few professionals are located in rural areas (such as Maryborough) therefore travel from places like Ballarat, Bendigo or Melbourne and charge travel time (at a very high rate) to the participants. Substantial amount of NDIS money is wasted on travel costs.	Review the hourly rate offered to allied health professionals working with NDIS participants to better align with health system standards. Ensure travel costs are remunerated at an appropriate rate which is separate and less than that provide for actual service delivery.	1. Increased number of allied health professionals working within the health system 2. Augmented quality of services provided to participants due to newly qualified professionals having access to mentors and networks of other professionals 3. Essentially a re-direction of NDIS funding to areas that directly benefit participants
Robust funding	Very onerous process for participants with high needs to receive adequate funding for robust Supported Disability Accommodation (SDA). There is an over reliance on reports of varying quality and a	There needs to be hands on knowledge of the needs and requirements of participants. Provision of advice by General Practitioners who know and treat the participants and treating specialists	Participants living in appropriate housing which is designed to allow participants to live as independently as possible, and creating a better, safer way for provision.

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
	lack of direct assessment of clients and their needs by allied health professionals.	and on status and needs of a participant and requirements for housing is one solution as this can take into account history and needs.	
	Robust SDA is one of four design standards, with specific requirements of need of a participant creating unnecessary complexity.	SDA builders work with NDIS and Supported Independent Living (SIL) providers to assess the need and location of new builds that are required	Reduction of vacant new builds. Ensuring full occupancy as soon as possible after construction.
SIL funding	Supported Independent Living funding for NDIS participants is complex to navigate. There is no easily accessible NDIS template for stakeholders to use when assisting participants to apply. The process can take many months or even years to be accepted or declined and once a decision is reached the information regarding the decision is not always provided. Stakeholders have difficulty understanding the prerequisites to qualify, the processes of application, the extensive evidence required to support the application, the costs from a participants plan to gather evidence and the prolonged waiting period to obtain a decision. If the outcome is not successful, the Review of a Reviewable Decision process also an unnecessarily time consuming process.	A clear and concise pathway provided by the National Disability Insurance Authority (NDIA) for the application process would benefit the participant and those attempting to support them. The pathway could include: · A firsthand request from the participant to apply for SIL and their reasonings why they would like to live in a SIL. · An NDIA appointed case manager/planner to consult with the participant and their support to assist with the application. · Templates for allied health and other providers to provide the targeted, necessary, concise, and accurate evidence required to support the application.	The benefits to the NDIS would be the ability of a participant to have a safe and secure home with the support they need to have an independent and meaningful life. The appointment of a Case Manager within the Housing and Living Team collaborating with the participant and provider would be more streamlined and less difficult to navigate. The process would be more expedient and provide added confidence to participants, families, and providers that individual circumstances are taken into account.

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
		· A guaranteed timeline from the NDIA for a decision and written responses outlining the success or failure of the application. · A further discussion with the NDIA appointed case manager to discuss why the application was unsuccessful and how to provide constructive feedback for future applications. · All correspondence needs to be clear and easily understandable.	
	Participants are funded within the / Australian Disability Enterprises (ADE) 48 weeks. There is no arrangements for continuous engagement for the remaining four weeks which works against the need of the employee.	NDIA builds 4 weeks into SIL funding for 1:1 so that participants can access support outside of work or groups arrangements.	Employees have continued employment arrangements and have ensuring the four weeks they are not at work is part of their continuing employment record.
	The review of NDIS, there is no direct meeting, with the participant and plan nominee to discuss specific needs or the direct opportunity to review changed circumstances.	NDIS to re implement the Roster of Care process this needs to be evidence based. Each plan requires regular review.	To ensure reasonable and necessary funding to participants to meet their needs
	There is no direct contact to a representative to discuss pathways and outcomes.	Registered organisations need to be assigned a representative to assist with queries and pathways.	Reasonable and fair timeframes for participant outcomes, informed knowledge for teams assisting participants with outcomes

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
	To resolve the issue of robust SDA (Specialist Disability Accommodation) houses being vacant due to a lack of NDIS (National Disability Insurance Scheme) funding.	- Expand Eligibility: Review and possibly broaden the criteria for accessing SDA funding, ensuring more people who require specialist accommodation can qualify for support. - Streamline the Approval Process: Simplify and expedite the process for determining eligibility for SDA funding to ensure that people who need SDA can access it quickly.	The benefits of resolving this issue are - Improved Quality of Life for participants - Better Use of Resources - Filling vacant SDA houses - Job Creation generate more jobs in the disability sector, including in housing construction, maintenance, and direct support roles. - Local Economic Boost from increased demand for local services and businesses - Community Integration enhancing participants social engagement and participation in daily life. - Independence and Dignity for participants - Stable Revenue for Providers
Continuous supported employment	Supported Employees who run short of NDIS Employment Funding before the end of their current plan, are expected to stop working until a new plan is implemented or a plan review is undertaken and the funding reinstated.	1. Supported employees funding can be reinstated (topped up) at any time during the life of the plan to allow for continuity of employment. Supported employees will have to demonstrate that	Supported employees will have continuity of employment and be able to increase their work hours as they choose especially during times of increased work in their workplace

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
	Several reasons can contribute to funding running short: • Sufficient funding not placed in original plan • Centre Based costs and non-face to face funding not accounted for in plan (Often Local Area Coordinators (LACs) and Planners say that this funding cannot be added into the plan budget) • Supported employees increases hours/work rosters and a plan review takes too long to be put through to accommodate the increase in hours Stopping work can significantly impact supported employee's life by: • adding financial stress due to the reduced income and inability to manage daily bills and other financial commitments • creating feelings of social isolation by losing their workplace structure and routine as well as losing contact with work peers	their funding is being used solely for employment purposes 2. NDIS need to clearly define if Centre Based costs and non-face to face funding are an item that services can claim for, and, if they are, this funding needs to be built into supported employee's NDIS plans 3. Supported Employee's should be able to increase their hours and know that a plan review will be put through in a timely manner to allow supported employees to work additional hours if they choose to do so.	

	<u>challenges/issues</u>	<u>proposed solution</u>	<u>benefits</u>
	Supported Employees are employed under the Supported Employment Service Award and this award does not mention employees ceasing work due to lack of NDIS Support funding. Services/Employers who permit supported employees to continue employment when the funding has been depleted do so at their own cost.		
Access and expedience of the NDIS	The current NDIS Pathways for assistance are not a cost-effective for either participants or providers to access information or to seek advice to resolve matters. Wait times in contacting The National Contact Centre are lengthy. Representatives lack the level of expertise required to provide concise information and solutions to allow the user to navigate the system. No written advice is provided only a reference number, leaving the interpretation of the conversation uncertain. The NDIS enquiries email process to register does not necessarily provide a timely response.	Suggest exploration of suspending current enquiry lines and increasing State Provider Engagement Teams to improve accessibility to the expertise and information required.	

A. Allied Health Professionals (AHPs)

The rate of payment (including new graduates) of \$195 an hour which is also paid for travel time is excessive and too high for Registered Providers to offer employment given on-costs. This works against integrated service provision to participants and the professionals lack opportunity for service delivery networking and monitoring.

Proposed Future Direction (in principle)

1. Existing payment arrangements be grandfathered.
2. Future employment opportunities provided through Regional Health Networks which can offer AHPs professional supervision and service delivery networking.
3. The current rates paid to AHPs be offered to Regional Health Networks who would employ AHPs at say 60% of this amount with the remaining 40% be offered as employment package benefits.
4. Travel costs for future AHPs be reimbursed at 50% of professional service delivery rates.
5. AHP professional career structures be developed to provide future growth incentives possibly utilising savings from discounted travel payments.
6. Regional Health Networks would give priority to the needs of hard-to-staff and remote locations.

B. Robust Funding and SILS (in principle)

There is a need for greater flexibility in the system. Although 1:3 will be the standard model there will be times when increased 1:1 funding allocation will be necessary to grow independence, attend appointments and personal care. There should be discussion with the industry on ways in which this added flexibility can be provided to meet situations where 1:1 funding will be needed with offsets in efficiencies to ensure cost containment.

C. Support Workers (in principle)

1. There is a need to identify levels of Support Worker service provision working together with the industry.
2. In general terms there is a level of general participant services which includes support such as community participation and engagement and then higher levels of more complex service which require higher levels of skill, responsibility and training.
3. It is recognised that a core principle of NDIS is the opportunity for participants to have selection opportunity for support workers. However, in the interests of quality service provision and standards, there should be an agreed transition plan to employment by Registered Providers especially for more complex provision. This may involve participants choice of available workers.
4. These changes will need to take into account Award provisions and be developed and implemented in close consultation with the industry.

C. Supported Employment (in principle)

There is an existing challenge to the Supported Employment program in that there is no funding to cover the four weeks funding when Supported Employment is closed. Continuity of support is needed with SIL provision in the period of four weeks.

D. Process Simplification (in principle)

There is a need to simplify access for Registered Providers to enable speedy decisions. Presently there is unnecessary delay and that works against the interests of participant outcomes, causes frustration for staff and **leaves providers exposed**, and, importantly adds to cost.