

Submission – NDIS Discussion Paper Support Coordination – August 2020

South Australian Disability Advocate

This submission for the NDIS Discussion Paper into Support Coordination is from the South Australian Disability Advocate, Dr David Caudrey. The Disability Advocate role is auspiced by the Office of the Public Advocate and commenced in January 2019. The role of the Disability Advocate has been to examine the experience of South Australians with the NDIS, identifying systemic advocacy issues and reporting back to the State Government and the NDIA. The process focused on three clusters of issues, basic customer service problems, operational and system design problems. During the first 12 months meetings were held with 180 individuals, groups of participants, family members and service providers. In 2020 the Disability Advocate has led the Restrictive Practices Task Group working towards consistent legislation relating to the use and authorisation of restrictive practices in South Australia. The Disability Advocate was also the Co-chair of the South Australian Safeguarding Task Force which looked into systemic issues surrounding the death of NDIS participant Ms Ann Marie Smith in April 2020.

Inclusion of Support Coordination

1. What factors should be considered when determining if, when and for how long support coordination should be funded in an NDIS participant's plan?

There are a range of factors that need to be considered when determining whether support coordination should be funded in a participants plan.

These include but are not limited to:

- whether it is the participant's first plan
- the vulnerability of the participant
- the capacity of the individual to manage, implement and make decisions around the utilisation of their plan and;
- whether there are informal supports for the individual in instances where the participant may lack the capacity to implement their plan.

The discussion paper identifies a range of factors which, for some participants may indicate that they require greater assistance to implement their plans such as being from CALD or ATSI background, limited informal support and social isolation etc. These are also valuable considerations when determining if a participant requires support coordination in their plan.

It is recommended that support coordination be included in all first plans to ensure that the participant and their informal networks are adequately supported to navigate the complexity of a new system. This includes ensuring that they are supported to access and oriented to their plan, how to implement the plan and how to use the participant portal. Table 5 in the discussion paper indicates a low level of plan utilisation for those without support coordination in their plan in South Australia (61%). There is insufficient information in the discussion paper to determine what percent of these are first plans but given the overall underutilisation it would indicate that participants require support in fully utilising their plan.

The South Australian data in Table 5 indicates that there is still a low plan utilisation rate for people who do have support coordination in their plan (62%). This needs further examination to understand the reasons for the under-utilisation as it may indicate other issues such as delay in

connecting/engaging with a support coordinator, market thinness, the need for training for support coordinators or the re-definition and clarification of the support coordination role and expectations of this role.

The Safeguarding Taskforce Report 31 July 2020ⁱ asserts that support coordination needs to be automatically inserted into the plan of a vulnerable NDIS participant. The report goes on to say that the participant must be supported by the NDIA or the Local Area Coordinator (LAC's) to engage services and that the support coordinator needs to ensure that all aspects of the plan as listed are implemented.

The capacity and vulnerability of the participant should also be assessed during the planning stages to determine whether they will require support coordination. The assessment of vulnerability during the NDIS planning process is also identified in the *Safeguarding Task Force Report (July 2020)* (Safeguarding Gap 1) and in the Independent review of the adequacy of the regulation of the supports and services provided to Ms Ann Marie Smith, an NDIS participant, who died on 6 April 2020ⁱⁱ (Recommendation one of Robertson Report). The assessment should consider a range of sources of information such as reports, observations and information from other key stakeholders involved with the participant. The Safeguarding Task Force identified that a number of participants were not aware that support coordination was available to participants. While it is noted that information about the role of the support coordinator is available in Booklet 3 – Using your NDIS planⁱⁱⁱ and the NDIS website, providing clear communication about this role and function to participants and families during the planning process will assist in ensuring participants get reasonable and necessary support they need to implement their plan.

For some participants, their capacity to manage their plan may vary over time due to a range of factors. The NDIS plan needs to be flexible enough to include a support coordinator if required when a participant's needs change without having to submit a change of circumstances. According to the NDIS website, new line items effective from 25 March 2020 allow participants to use funds more flexibly to access support coordination supports from either their Core or Capacity Building budgets which may assist participants to access support coordination. This is only of use to the participant if they are aware of this change in how funds can be used.

Some participants have informal supports who can and do assist them with the day-to-day management of their plan. As a part of the assessment of capacity during the planning process an exploration of the informal supports in a participant's life should be undertaken to determine a) the informal support available, and b) the effectiveness and reliability of that support. The Safeguarding Task Force noted that a participant may list someone as an informal support on their plan but in reality this person does not actually provide this support.

Determining the time that support coordination remains in place should be assessed on a case-by-case basis. There are some participants who will only require support coordination for their first plan or a short period of time whereas others will require this support ongoing.

The Safeguarding Task Force identified a range of issues impacting on the success of support coordination, including market failure to provide consistent, trained and knowledgeable staff who can travel the journey with the participant, and that the participant is not subject to multiple changes of staff. There is no "long-term" relationship.

The establishment of an ongoing relationship with a support coordinator for those who need ongoing support coordination is key to its success.

2. Should the current three level structure of support coordination be retained or changed?

The discussion paper notes the three levels of support coordination which are separate line items in the NDIS price guide and as such are costed differently (i.e. support connection \$61.76 per hour, coordination of supports \$100.14 per hour and specialist support coordination at \$190.54 per hour nationally). A participant's needs may vary over time from requiring just connection to becoming more complex. The system needs to be agile enough to respond to these varying needs.

Level 1 support connection is usually provided by the Local Area Coordinator (LAC). This level should be available to all participants as it involves the plan implementation process but also the connection to their local community. The LAC is the specialist in what is available in their local area through both community and mainstream supports and specialist disability services. It is noted in the paper that only 2% of participants are claiming support connection. It is not clear why this number is so low but one assumption is that participants are being provided this service by other levels of support coordination or through other NDIS supports such as Local Area Coordinators, community connectors, hospital liaison officers, justice liaison officers and recovery coaches. If this is the case, it would appear that this function is subsumed into other levels of support coordination. Level 1 support connection could potentially be removed as long as all participants have some form of support coordination in their plan. If support connection is subsumed into the other levels of support coordination it would then include *Crisis: Planning, Prevention, Mitigation and Action* as covered in other levels of support coordination which is essential in forward planning for all participant to identify a support strategy in emergency situations. Forward planning in this area will potentially mitigate further distress and anxiety to the participant at a time of crisis.

3. How should support coordination interact with other NDIS supports? For example, local area coordinators, community connectors, liaison officers and recovery coaches?

The Safeguarding Task Force report discusses the loss of the role of a "case manager" noting that, in the absence of case management, a support coordinator is the closest thing to undertake this role.

The NDIA has avoided the concept of "case management", due to concerns that it leads to disempowerment and condescension. Instead, it has created numerous players with different roles that make perfect sense to the framers in the NDIA but make precious little sense to many participants or their families.

These additional stakeholders in participants' lives can add to confusion and the support coordinator should play a role when required to assist the participant to navigate the NDIS and all its players. What the LAC does to help an individual connect to community and what a support coordinator does to help a participant connect to support services is very confusing to the participant.

Support coordinators should be aware, connected and in communication with all key stakeholders in the participants life. It is noted that in some participants' situations support connection only is required. In these instances, and when the support coordinator is confident that the participant can competently navigate and engage the supports they need the relationship with these key stakeholders may only be short term or not required.

4. How should support coordination interact with and complement existing mainstream services?

Support coordination should have a good understanding of the individual's existing mainstream supports and those available in the community. It is the role of the support coordinator to connect a participant to these services in the first instance before looking to utilise funded NDIS supports. Although identified as the role of the LAC, working with mainstream supports and agencies to build their capacity to support people with disability is also an essential piece of work. This goes towards supporting the inclusion of people with disability which is the objective of the National Disability Strategy^{iv} and locally the Disability Inclusion Act 2018^v and The Inclusive SA State Disability inclusion Plan 2019 -2023^{vi}.

5. What can or should be done to address the level of utilisation of support coordination in plans; and is this any different to general issues of utilisation

The discussion paper does not provide sufficient data to undertake an analysis of potential reasons for the under-utilisation in plans. It is recommended further detailed data analysis be undertaken to determine the causes for under-utilisation. The data also excludes those participants in SIL. It would be helpful to look at the data set as a whole to form some more useful analysis and recommendations in relation to addressing the under-utilisation. One could surmise that the utilisation rates for participants with SIL would be higher as potentially they might be in receipt of support coordination through their SIL provider. Further exploration of the data to look at whether the SIL provider is also providing the support coordination would provide valuable information to consider when looking at the conflict of interest between support coordination providing multiple services to the same participant.

In addition, where support coordination in a plan is under-utilised it could be because help is forthcoming from the LAC. In addition, support coordination is notoriously difficult to predict in advance so there may well be over-estimation of its need, to be on the safe side. It would also be valuable to know how often the quantum of support coordination in a person's plan is inadequate.

It would be extremely helpful if the NDIS could alert the participant when their plan is being over or underutilised throughout the year.

Understanding the role of a support coordinator

6. What functions should a support coordinator perform? Are there tasks that a support coordinator should not do?

The support coordinator should perform the tasks as outlined in the discussion paper.

Support coordination should ideally not be provided to a participant by the same organisation that provides other supports to that participant. If, pragmatically, the best support coordination is available from the service provider agency then, as the Tune Review recommends, there needs to be explicit mechanisms to handle the conflict of interest.

Any support coordinator that is employed by an agency that also provides other services for that participant is not an independent pair of eyes. Therefore there is a conflict of interest. This issue was identified in the 2019 review of the National Disability Insurance Scheme Act 2013 – Removing Red Tape and Implementing the NDIS Participant Service Guarantee, David Tune OA PSM^{vii}.

“The review recommended that the NDIS Rules are amended to:

- a) set out the factors the NDIA will consider in funding support coordination in an NDIS participant’s plan*
- b) outline circumstances in which it is not appropriate for the provider of support coordination to be the provider of any other funded supports in a participant’s plan, to protect providers from a conflict of interest.”*

Tune Recommendation 16

Members of the Safeguarding Taskforce also agreed with the Tune review recommendations.

Support Coordination and Core Supports must be separated, they must almost never be provided by the same provider. I am not saying that they should not do support coordination but they should not do it for the same client with few exceptions.

Sam Paior, Safeguarding Task Force Member

The issue of the separation of the role of support coordination from other service provision is a fraught one and the Taskforce was challenged on this matter. There is no point casting the role of honest broker on to the support coordinator if they do not know the participant well, if they see their role as mechanistically providing service provider options, or if they have little knowledge of disability matters as they affect the lives of a potentially vulnerable participant.

7. Is there evidence that participants with specific plan goals related to education, accommodation and employment would benefit from more targeted support coordination services to achieve these outcomes?

This is a topic the Disability Advocate has not explored in detail. One would surmise that having a support coordinator who is an expert in a particular area makes sense although there is hesitation in recommending involving yet another role in the ever-growing cast of characters created by the NDIS.

8. How could plan management and support coordination be more closely aligned and what would the potential benefits and risks be?

From a safeguarding perspective there are benefits of the plan manager and support coordination working more closely and collaboratively. These two roles can closely monitor plan utilisation and may be able to identify where funds are being misappropriated. The support coordinator and plan manager from the same organisation presents a potential conflict of interest and would be one less set of eyes monitoring the participant’s situation. On the other hand there may be benefits for the participant though having the one party managing payments and providing support coordination such as only having to deal with one person. This is a bit like the question of the separation of roles of “funds management” and “service coordination” in Disability SA. There is no inherent reason why the same agency couldn’t do support coordination and plan management – also we could make the case for Local Area Coordination being able to do support coordination.

Quality of support coordination

9. Should there be minimum qualification requirements or industry accreditation in place for support coordinators? If so, what might be applicable?

The NDIS Price Guide outlines that:

- Specialist Support Coordination is delivered by an appropriately qualified and experienced practitioner to meet the individual needs of the participant's circumstances such as a Psychologist, Occupational Therapist, Social Worker or Mental Health Nurse.
- The work of psychosocial recovery coaches requires lived and/or learnt experience. Recovery coaches must have tertiary qualifications in peer work or mental health (minimum of Certificate IV in Mental Health Peer Work or Certificate IV in Mental Health) or equivalent training; and/or a minimum two years of experience in mental health-related work.

However there are no published requirement for qualifications for Support Connection or Coordination of Supports. The NDIS Support Coordination Discussion Paper documents that 98% of participants are using Coordination of Supports and therefore are using staff that may not have any essential minimum qualifications. It does not seem unreasonable that minimum qualifications should be required that require a certificate level qualification in disability services work or above. We support the notion that support coordination is a complex task whereby the practitioner needs to have an excellent knowledge of disability and a good knowledge of the service provider field – that means a tertiary level qualification in a relevant discipline like Social Work or Developmental Education.

10. How can the effectiveness of support coordination be measured and demonstrated?

During the development of the Safeguarding Task Force Report the authors met with many participants, families, advocates and service providers. There was a sense that support coordinators were not required to report on their progress or to report against KPI's. It was recommended by one family that a report should be provided to the NDIA from the support coordinator on the attainment of each goal or why goals were not achieved for each participant. There is no mechanism to advise the NDIA that goals or outcomes are being met. All issues regarding the failure to meet plan goals need to be raised as a complaint which is adversarial rather than being proactive.

As outlined in the discussion paper, monitoring of the utilisation rate for plans is also another option worth exploring. By examining a sample group of participants with under-utilisation of their plans it may be possible to identify trends and common reasons for under-utilisations e.g. remote communities and thinness in the market or in CALD and ATSI communities due to a lack of culturally appropriate services. Also it is known that under-utilisation of plans is significant for first plans but improves for second and third plans.

Under-utilisation in an overall NDIS plan should also be a red flag for safeguarding and further investigation to ensure the wellbeing and safety of the participant.

11. Are there emerging examples of good practice and innovation in support coordination?

The simplest tried and true approach to support coordination is best. A well-qualified, well-trained practitioner with excellent listening skills is able to engage in a relationship with the participant so that their life goals and support needs are fully understood and the participant is assisted to examine the support options available and make an informed choice. None of this is rocket-science but when good-practice is encountered it is such a life-enhancing boon for the participant.

12. Are the levels and relativities in the NDIA price limits across different services including support coordination working effectively in the interests of participants and a sustainable, innovative market?

Having 3 levels of payment for 3 levels of support coordination (especially when 98% of support coordination is Level 2) creates unnecessary complexity. Having all support coordination at Level 2, requiring tertiary qualifications for support coordinators and being realistic about the fact that support coordination often does not lend itself to deciding in advance how much is needed can lead to wastage – too much in a plan. Paradoxically support coordination that is open ended would actually be cheaper because there would be less conflating for the “just in case – what if I need it” worry.

13. Should support coordination pricing be determined, at least in part, based on progression of participant goals and outcomes, and how might this work?

No – far too complex – would just add far too much red tape. The NDIS is already far too transactional in its approach to participants. Support Coordination and LAC are two areas that require and thrive best on the relationship approach. You don't get a good relationship when you are having to tick utilisation boxes and meeting performance criteria that are not truly related to what is important in a participant's life.

Building capacity for decision making

14. How can a support coordinator assist a participant to make informed decisions and choices about their disability supports? What are the challenges?

There are varying skill levels and abilities of support coordinators. It is important to ensure that support coordinators are appropriately qualified/ trained and equipped with the skills to work with people with disability. This includes having the skills and knowledge around supported decision making to ensure that the participant has choice and control over their supports and services. It is also essential that the support coordinator is knowledgeable about both mainstream and disability specific supports in the participant's region so that they can present a range of options for the participant to exercise true choice over the services and supports they use.

15. How does a support coordinator build a participant's independence rather than reliance? Should support coordination pricing be determined, at least in part, based on building a participant's capacity for decision making to become more independent?

A minimum qualification for support coordinators plus targeted specific strengths based training would assist in making sure that they are equipped with the skills to support independence and capacity building around decision making for participants. A minimum qualification may assist with achieving better outcomes. Support coordination is considered to be time-limited in a plan in the current system which assumes that the person will no longer require the support of the coordinator at the end of the plan.

16. How can a support coordinator assist a participant in need of advocacy without acting outside the parameters of their role? What are the appropriate parameters of the personal advocacy role and the support coordination role?

A support coordinator can assist a participant in need of advocacy by ensuring that they are aware of the advocacy services available and assisting the participant to access these.

The SA Government recently committed \$1.8 million in new funding towards disability advocacy, as a result of a gap that was highlighted in the Safeguarding Task Force Report.

The Disability Reform Council has agreed to the Department of Social Services, in conjunction with states and territories to lead a demand and gap analysis of independent disability advocacy and decision making supports. The project is a result of a need to understand the impact of the NDIS on disability advocacy services including funding levels and will inform discussions on future funding arrangements between the Commonwealth and states and territories.

The Disability Advocate supports the following recommendations from the *Joint Standing Committee on the National Disability Insurance Scheme: Report into Supported Independent Living*.

Recommendation 40: The committee recommends that the Commonwealth, states and territories, through the Disability Reform Council, progress work to understand and address gaps in the availability of advocacy and decision supports services as a matter of urgency

Recommendation 41: The committee recommends that the National Disability Insurance Agency, working with the Australian Government, publish and distribute additional information on the availability of advocacy and decision making supports

Recommendation 42: The committee recommends that the Australian Government increase funding for advocacy and decision support initiatives, to ensure that these initiatives reach the broadest range of people who require these services.

Department of Human Services and Office of the Public Advocate have engaged in supported decision making projects in the past and new projects are currently underway.

As recommended the Australian Government should increase funding for advocacy and the NDIA should publish and distribute additional information on the availability of advocacy and decision making supports. It should not fall to support coordinators to assist participants with advocacy or decision making but to focus on their core role to implement paid supports in their plan, and to link the participant to community, mainstream and other government services.

Advocates outside the service system are needed because human service systems always have flaws and gaps that need to be addressed. When a person with a disability has difficulty navigating the service system or the community because the support coordinator, the LAC, the

service provider or any other part of the system is failing them and they cannot work out how to make their voice heard to the relevant agency (NDIA, the Commission or State Government Department), then an advocate is there to help.

Conflict of interest

17. In what circumstances is it more or less appropriate for a participant to receive multiple supports from a single provider?

As discussed earlier in this submission there are significant safeguarding concerns for participants receiving multiple supports from a single provider. Some organisations promote themselves as being able to provide a 'wrap around service' which is espoused to meet all of the needs of the individual. While this may sound appealing and ideal, it presents inherent risks. Service from a single service provider mean that there are less eyes to see what is working and not working for the participant. If things do not work out with the one provider the participant is at risk of losing multiple supports if all are provided through the same agency. This situation is often termed 'client capture' or 'whole of life service'.

The Safeguarding Task Force Report concentrated on identifying gaps for people with disability who were vulnerable to neglect and abuse and stated that an independent "set of eyes" in a person's life would assist. Tune stated that a support coordinator that is employed by an agency is not an independent set of eyes.

The Tune Review, Safeguarding Task Force Report and the report from the Hon Alan Robertson all raise concerns about the risks of a single service provider. As members of the general population, we do not receive all of our services from the same place so why is it acceptable for people with disability to receive services from the same place unless the individual is making an informed choice and is aware of the risks associated with this choice.

There may be situations where there is no other option but to receive services from the same service provider and these may include where a participant is:

- Living in a rural and remote area where the market is thin
- CALD or ATSI to ensure services are culturally appropriate

In these situations work should be undertaken to develop capacity within the sector to provide more choice for these cohorts to reduce the reliance on one service provider.

Where a conflict of interest cannot be avoided, and as the Safeguarding Taskforce and Tune Review recommends, there needs to be explicit mechanisms to handle the conflict of interest.

18. Should the IAC recommendation for the NDIA to enforce an "independence requirement between intermediary and other funded supports at the participant level" be adopted?

The Disability Advocate supports in principle the recommendation of the Independent Advisory Council to enforce independence requirements. A staged implementation period would be required to allow for the transition of participants to independent support coordinators. The discussion paper shows that as at 30 June 2020 6,468 participants would be impacted by this change. Further work would need to occur to identify the number affected in each state, determine a transition period and monitoring of the transition.

During the development of the Safeguarding Task Force Report and discussions with individuals, families' advocates and service providers the authors were challenged with alternate views on this topic. Service providers outlined the ways in which they managed conflict of

interest and advised that participants and families alike felt a measure of confidence that the service provider knew them well and were the best “person” to support and advocate for their needs. Others discussed “client capture” and advocated strongly for a number of agencies to be present in the participant’s life. The Report states that the Support Coordinator needs good familiarity with participants, their wishes and disabilities and they need to be available when the person is in strife. If pragmatically the best Support Coordinator is available from the service provider agency, then as Tune recommends there needs to be explicit mechanisms to handle conflict of interest.

19. What impacts would stricter conflict of interest requirements have on NDIS participants and the NDIS market

It is difficult to know what the impact will be on the participant and their family individually. A number of SIL service providers have expressed concerns about this separation noting that the support coordinators working within their organisations know the participants and their needs best.

Often the best support coordinators come from the service provider agency because they understand the disability and they know the participant.

*Peter Hoppo, National Disability Services
(Taken from Safeguarding Taskforce Report July 2020)*

As discussed above, if this was implemented, a staged transition period and close working relationship with each state and territory would be required to ensure that the transition occurred safely and no participants were placed at risk.

General - Submission questions

20. What would you identify now as the current critical issues around support coordination?

The key recommendations are:

- 1) Factors such as a participant’s vulnerability, capacity to manage their own plan, the informal supports who can support participants and whether it is their first plan should be considered when determining whether funding for support coordination is included in their plan.
- 2) That the levels of support coordination be simplified to only Level 2 with the requirement.
- 3) That support coordinators have a minimum tertiary qualification and specific strength-based and supported decision making training.
- 4) That support coordinators work with mainstream services and support agencies to build their capacity to support people with disability in line with state and Commonwealth initiatives such as the National Disability Strategy, and the State Disability Inclusion Plan.
- 5) That support coordinators are informed of the range of services and supports available to participants in their local area including existing mainstream, disability specific supports and advocacy services.
- 6) That further data analysis is undertaken to understand the reason for plan under-utilisation.

- 7) That support coordination is not provided by the same agency that provides other support to the participant. Where there is no other option there needs to be explicit mechanisms to handle the conflict of interest.
- 8) That where there is a thinness in markets, the NDIA works with local communities and services to build this so that more choice is available to participants, thus reducing the risk of a conflict of interest.
- 9) That the IAC recommendation for the NDIA to enforce an “independence requirement between intermediary and other funded supports at the participant level” be adopted. That it is implemented in a staged approach in consultation with the states and territories to ensure participants are not placed at risk.

21. What are the priority actions the NDIA might take to grow an innovative and effective support coordination market in the interests of participants?

- Clarification of the role of the support coordinator.
- Nationally consistent ongoing training for support coordinators.

ⁱ <https://dhs.sa.gov.au/latest-news/safeguarding-taskforce/safeguarding-task-force-report-july-2020> - Accessed 8/9/2020

ⁱⁱ <https://www.ndiscommission.gov.au/sites/default/files/documents/2020-09/independent-review-report-commissioner-public-310820.pdf> - Accessed 8/9/2020

ⁱⁱⁱ <https://www.ndis.gov.au/about-us/publications/booklets-and-factsheets> Accessed 8/9/2020

^{iv} <https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/national-disability-strategy-2010-2020> Accessed 8/9/2020

^v <https://www.legislation.sa.gov.au/LZ/C/A/DISABILITY%20INCLUSION%20ACT%202018/CURRENT/2018.1.AUTH.PDF> Accessed 8/9/2020

^{vi} <https://inclusive.sa.gov.au/> Accessed 8/9/2020

^{vii} https://www.dss.gov.au/sites/default/files/documents/01_2020/ndis-act-review-final-accessibility-and-prepared-publishing1.pdf Accessed 8/9/2020