

National Disability Services Submission:  
NDIS participant experience in rural, regional and remote Australia

# About National Disability Services

National Disability Services (NDS) is Australia's peak body for disability service organisations, representing more than 1000 service providers. Collectively, NDS members operate several thousand services for Australians with all types of disability. NDS provides information and networking opportunities to its members and policy advice to State, Territory and Commonwealth governments. We have a diverse and vibrant membership, comprised of small, medium and larger service providers, supporting thousands of people with disability. Our members provide a full range of disability services, from supported independent living and specialist disability accommodation, respite and therapy, to community access and employment. NDS is committed to improving the disability service system to ensure it better supports people with disability, their families and carers, and contributes to building a more inclusive community.

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# 1.0 Overview

National Disability Services (NDS) welcomes the opportunity to make a submission the Joint Standing Committee on the National Disability Insurance Scheme (NDIS), focusing on the experiences of participants in rural, regional, and remote Australia.

This submission is also made against a backdrop of significant reform underway in the disability sector, including recommendations from the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (or ‘Royal Commission’) and the National Disability Insurance Scheme (NDIS) Independent Review Panel (NDIS Review). These major reform agendas, alongside growing economic challenges that continue to be exacerbated by COVID-19, sees the disability services sector cautiously optimistic about the future whilst still grappling with significant and long-term reform.

# 2.0 Scope of submission

This submission will address key areas including the state of the disability sector, payments and pricing, workforce issues, and disaster management.

The submission will provide an overview of the current state of the disability sector in these areas, highlighting the unique challenges faced by individuals and service providers. It will identify areas for improvement and recommend strategies to enhance service delivery and support for NDIS participants.

Payments and pricing under the NDIS will be examined, with a focus on the adequacy of funding and the sustainability of current pricing models. The submission will also address workforce challenges, including workforce shortages and training needs in rural, regional, and remote areas.

Considering the increased impact of natural disasters and emergencies in these areas, the submission will also consider the impact of such events on NDIS participants and propose strategies for effective disaster management and support.

The submission will also explore the experiences of applicants and participants at all stages of the NDIS, the responsiveness and effectiveness of the National Disability Insurance Agency, participants' choice and control over services, and the experiences of specific groups such as Aboriginal and Torres Strait Islanders, participants from culturally and linguistically diverse backgrounds, and those from low socio-economic backgrounds.

NDS makes the following recommendations:

* Recommendation 1: Establish a NDIS Reform Taskforce that is sector-led
* Recommendation 2: Enhance NDIS services and supporting structural adjustment
* Recommendation 3: Develop and deliver a risk-proportionate model for the visibility and regulation of all providers and workers
* Recommendation 4: Develop an integrated approach to workforce development for the care and support sector
* Recommendation 5: Attract, retain and train a workforce that is responsive to participant needs and delivers quality supports
* Recommendation 6: Sector support for industrial relations reform
* Recommendation 7: Establish a National Plan and Roadmap for Disability-Inclusive Disaster Preparedness, Resilience, and Recovery
* Recommendation 8: Invest in multi-sector targeted responses supported by collaborative and inclusive research
* Recommendation 9: Establish a disaster payment scheme for NDIS providers to ensure continuity of support and services during natural disasters or public health emergencies
* Recommendation 10: Reform pricing and payments frameworks to improve incentives for providers to deliver quality supports to participants
* Recommendation 11: Strengthen market monitoring and improve access to supports through alternative commissioning

# 3.0 State of the Disability Sector

The NDS 2023 State of the Disability Sector annual survey and report (National Disability Services 2023), done in collaboration with the Centre for Disability Research and Policy at the University of Sydney, sheds light on the current challenges faced by disability providers. With 432 respondents ranging from sole traders to large multi-state organisations, and not-for-profit (69 per cent) entities, the findings depict a sector teetering on the brink.

The report found:

* 72 per cent of not-for-profit providers and 67 per cent of for-profit providers are worried that they won’t be able to provide NDIS services at current prices
* 34 per cent of providers made a loss in FY 2022-23. 18 per cent broke even
* 82 per cent of respondents received requests for services that they could not fulfill
* 78 per cent reported extreme to moderate difficulty finding support workers, with availability of allied health professionals ranging from low to non-existent

As the provider sector responds to Royal Commission and NDIS Review recommendations, the State of the Disability Sector report findings point to the urgency and significance of addressing the issues at hand in a way that will foster and build a sustainable sector for people with disability.

**Organisation finances and general operating environment**

In the last three surveys, between 19 and 23 per cent of providers reported a loss. This year, a concerning 34 per cent of providers reported a loss and just 18 per cent broke even. This is the worst year for financial viability in the history of the survey.

Opinions about general operating conditions remain poor, with 70 per cent saying that they have worsened in the last 12 months. When asked about the wider Australian economy, 68 per cent say that conditions have worsened.

This underscores the challenging financial situation faced by many disability providers, with organisations having to make tough decisions about whether they can continue offering services in the current environment, emphasising the need for strategic interventions to ensure the sustainability and financial well-being of service providers in the disability sector.

**The state of the workforce**

Disability providers, particularly within the NDIS, continue to face chronic challenges in the attraction, supply, and retention of workers. Recruiting staff remains a significant challenge, especially for roles such as occupational therapists (92 per cent report difficulties in recruitment), psychologists (91 per cent), behaviour support practitioners (88 per cent), speech therapists (86 per cent), physiotherapists (78 per cent), and disability support workers (78 per cent).

Barriers to recruitment include a tight labour market, lack of qualified staff, competition from other sectors, pay expectations, job security concerns, and challenges in accommodation availability, especially in regional areas. Facilitators of recruitment include positive word of mouth, organisational reputation, relationships with educational institutions, and fair pay.

On retention, organisations are finding it increasingly difficult to retain professionals like psychologists (81 per cent), dieticians (69 per cent) and other allied health professionals, as well as behaviour support practitioners (65 per cent), early childhood educators (61 per cent), Local Area Coordinators and planners (60 per cent).

Barriers to retention encompass competition, low pay rates, burnout, lack of career pathways, and the complexity of work. Facilitators for retention include a positive organisational culture, flexible working arrangements, competitive pay, training and development opportunities, manageable workloads, and recognition programs.

Strategic interventions are needed to address recruitment and retention challenges effectively. Without the essential workforce in place, implementation of significant reforms becomes even more challenging and may pose risks to both participants and existing workers. A workforce strategy is imperative, including the strategic staging of reforms so that providers have the right staff, and the workforce is adequately equipped to implement changes. Collaborative efforts with providers are crucial to ensure that policy changes, which encompass training, skills development, oversight, and remuneration, can be effectively and safely implemented.

# 4.0 Current issues in delivering services in regional, rural, and remote Australia

NDS recognises the distinct challenges that people with disability encounter in rural, regional, and remote areas of Australia when seeking essential disability services to achieve their full potential and enhance their quality of life. The intricate interplay between structural and physical isolation, coupled with the diverse and individualised needs of these communities, presents a formidable barrier.

Additionally, the difficulty in attracting and retaining a qualified workforce exacerbates the situation, particularly affecting Aboriginal and Torres Strait Islander populations in these regions.

Despite the daunting circumstances, these communities exhibit remarkable resilience and unique strengths. Historically, residents of regional and remote areas have demonstrated a collective ability to come together during challenging times, fostering practical solutions that alleviate isolation and mitigate risks faced by people with disability.

**Unique Community Characteristics**

Disability service providers face significant challenges in delivering NDIS services in regional, rural, and remote areas. These challenges include limited infrastructure, geographical barriers, a shortage of skilled workforce, limited access to specialised services, social and cultural isolation, the digital divide, and issues related to disaster preparedness and response. These challenges are particularly acute for First Nations and remote communities, leading to gaps in service delivery and leaving many participants without essential supports. Addressing these challenges requires a comprehensive approach that includes investment in infrastructure, workforce development, access to specialised services, social inclusion initiatives, digital inclusion efforts, and disaster preparedness planning tailored to the unique needs of rural and remote communities. By addressing these barriers, disability service providers can improve the accessibility, quality, and effectiveness of NDIS services for individuals living in regional, rural, and remote areas.

**Pricing and cost of service delivery**

Pricing presents a significant challenge for disability service providers delivering NDIS services in regional, rural, and remote areas. Key factors contributing to these challenges include the higher cost of service delivery due to increased travel time, transportation expenses, and the need for specialised equipment. Additionally, rural and remote areas often lack economies of scale, leading to higher operational costs and the need to charge higher prices for services. Funding disparities, market dynamics, and transportation costs further compound these challenges. To address pricing challenges, a nuanced approach is needed, considering the unique characteristics of rural and remote areas. This may involve adjusting pricing mechanisms, providing targeted funding and support, promoting competition among providers, and exploring innovative service delivery models. Addressing pricing challenges is essential for ensuring the sustainability of disability service providers and the affordability of NDIS services for participants in these areas.

**Thin markets and funding underutilisation**

Thin markets and funding underutilisation are significant challenges for disability service providers in regional, rural, and remote areas under the NDIS. Thin markets occur due to low population density, limited infrastructure, and a lack of service providers, leading to reduced competition, higher prices, and gaps in service availability. Funding underutilisation happens when allocated funding is not fully utilised due to barriers like limited service availability and stigma. To address these challenges, a collaborative approach is needed, including market development initiatives, incentives for providers, community engagement, flexible funding models, and partnerships.

## 4.1 The NDIS Independent Review

The NDIS Review is a critical examination of the NDIS, focusing on key aspects such as foundational supports for all people with disability and system navigation support. These elements are pivotal in ensuring that people with disability, regardless of their location or circumstances, have access to the necessary foundational services and support systems. The review emphasises the importance of establishing a robust framework that not only provides essential services but also facilitates easy navigation through the complex disability support system. By addressing these aspects, the NDIS Review aims to enhance the overall effectiveness and inclusivity of the scheme, particularly in regional, rural, and remote areas, where access to services can be more challenging.

**Foundational supports for all people with disability**

The panel envisions a connected system of support for all people with disability, including accessible mainstream services, foundational supports, support from a navigator, and individual support funded through the NDIS.

The problem lies in the unavailability or difficulty in accessing these services and supports, leading to poor outcomes for people with disability and placing undue pressure on the NDIS. To address this, the panel recommends that all governments work together to improve the accessibility and inclusivity of mainstream services and invest more in foundational supports.

These foundational supports should be available to all NDIS participants, people under 65 not eligible for the NDIS, and their families. General foundational supports would include information and advice, capacity building, peer support, self-advocacy, and disability employment supports. Targeted foundational supports would cater to individuals with more intensive support needs (less intensive than NDIS support needs), providing home and community supports, aids and equipment, psychosocial disability support, early supports for families and children, and transition supports for young people.

**System navigation support**

The introduction of navigators will play a vital role in supporting people with disability and their families to understand, find, and use mainstream and community services, as well as foundational supports. They would also assist NDIS participants in finding, using, and paying for NDIS-funded services from their budgets, like the role of support coordinators.

The need for navigators arises from the complexity of the current system, where various roles (such as Local Area Coordinators, support coordinators, and others) sometimes overlap or leave gaps in support. LACs, for example, often focus on access and planning, lacking the time or local knowledge to connect people to community activities or programs. Additionally, support coordination is not available to all participants, and its quality and outcomes are inconsistent.

Navigators would bridge these gaps by providing local knowledge and support to all people with disability, including those not eligible for the NDIS. They would help individuals find and use foundational supports and connect them to mainstream services. For NDIS participants, navigators would also assist in developing action plans for using their budgets, coordinating services, and monitoring progress. Different types of navigators would cater to various needs, including those with complex support needs, psychosocial disability, housing and living needs, and children and families requiring specialised support.

These recommendations are vital for people with disability and services in regional, rural, and remote areas of Australia. These areas frequently face challenges with limited access to mainstream services and disability supports, making it difficult for people with disability to obtain necessary assistance. Enhancing the accessibility and inclusivity of mainstream services and investing in foundational supports can help individuals in these regions access essential support closer to their homes. Navigators will be crucial in enhancing access to and coordination of disability supports in regional, rural, and remote areas, enabling people with disability to lead fulfilling lives within their communities.

## 4.2 Recommendations

### Recommendation 1: Establish a NDIS Reform Taskforce that is sector-led

The NDIS Review and Disability Royal Commission present a unique opportunity for significant reform in disability services, although sector capacity is currently limited. According to NDS State of the Disability Sector data (2023), the majority of providers are focused on improving their productivity but face challenges meeting service requests and adapting to reforms. Achieving these reforms will require transformation across service delivery. Co-designing the roadmap with providers is critical. Establishing a sector-led NDIS Reform Taskforce is proposed to advise governments and develop a Transformation Roadmap, ensuring providers have a seat at the table and supporting a sustainable industry focused on innovation and adaptation.

### **Recommendation 2: Enhance NDIS services and supporting structural** adjustment

Establishing a structural adjustment fund to enhance NDIS services and rollout measures to support transformation over the next five years is crucial. Funding for providers is required to support the implementation of new navigation models, enhance housing and living supports, invest in infrastructure, and meet regulatory requirements.

Funding could be directed towards projects that increase utilisation, improve services in thin markets, and promote new and innovative services, particularly in regional and remote areas. Additionally, it is essential to ensure NDIS Pricing Arrangements in 2024-25 reflect the transformative period in the sector. NDS is calling for pricing that supports sector sustainability, pricing that secures continuity of support, and independent pricing in future to ensure a fairer, best practice approach to pricing NDIS services. Developing business support programs in partnership with industry is also vital to assist providers with strategy development, governance, review of operating challenges, and positioning organisations for investment and growth.

# 5.0 Workforce

## 5.1 Strategies and funding mechanisms for workforce development

The challenge facing the disability sector workforce is widely recognised and significant, making it one of the fastest-growing workforces in Australia. Projections by the [NDIS Review Paper: Building a more responsive and supportive workforce](https://www.ndisreview.gov.au/resources/paper/building-more-responsive-and-supportive-workforce) (Department of the Prime Minister and Cabinet 2023) indicates that within the next three years, an additional 128,000 workers (a 40 per cent increase in the current workforce size) will be necessary to meet the demands of the NDIS. This challenge is compounded by high turnover rates, with an anticipated loss of between 198,000 to 292,000 workers by 2025.

In March and April 2023, NDS conducted its [Workforce Census](https://www.nds.org.au/resources/all-resources/nds-workforce-census-key-findings-report) (National Disability Services 2023) survey, gathering workforce data for the 2022 calendar year. This dataset stands as the most comprehensive and up-to-date report on issues and trends within the disability workforce.

The results from the survey suggest that although the worsening conditions of recent years may have stabilised, the disability sector workforce remains precarious and workforce challenges are chronic and acute. There continues to be undersupply and higher turnover rates compared to the national average. Respondents cite difficulties in hiring workers across all categories, and recruitment and retention persist as major challenges.

The NDIS Review has made several recommendations to address workforce challenges. [NDS Submission: Draft National Strategy Care and Support Economy](https://www.nds.org.au/index.php/policy-library/nds-submission-draft-national-strategy-care-and-support-economy-1) recommendations complement those outlined by the NDIS Review. While addressing supply and recruitment is crucial, it is equally vital to identify opportunities for supporting retention and capability. Despite strong worker satisfaction in the disability sector, pressures such as wages and conditions, shift coverage, infection control management, lack of supervision, and limited training opportunities impact well-being, job satisfaction, and retention.

Severe and chronic workforce shortages force many service providers to reluctantly turn to casual or agency staff, contributing to job insecurity, reduced training and investment in workers, inconsistent wages and hours, and high turnover rates. Simultaneously, issues with the predictability of income, economic uncertainty, and ongoing reforms make workforce planning challenging for disability service providers. The lack of workforce plans further contributes to a reluctance to employ staff on a permanent basis, even amid growing retention issues. Targeted initiatives are also needed to address challenges in allied health and rural and remote workforces.

This a critical time to design and implement disability sector specific workforce strategies, as well as coordinate reforms across the care and support economy, to ensure the sector remains viable and can deliver vital services now and into the future.

A holistic sector strategy must also give precedence to tackling housing and accommodation challenges for workers, a notable obstacle hindering workforce development and limiting provider choices, as highlighted by our members across various regional areas. In addressing concerns related to rural and remote areas, NDS’ submission recommends a NDIS Remote Worker Housing Strategy, to cover the costs of worker travel to locations where suitable and affordable accommodation is scarce. Additionally, key worker schemes for housing, ensuring the inclusion of disability workers, and providing support for Allied Health roles in regional and remote areas through initiatives like regional universities, housing programs, the use of allied health assistants (AHAs), and incentives are recommended to enhance workforce conditions in these areas.

## 5.2 Attraction development and retention

The existing workforce shortages in the disability sector are widely acknowledged, and it is imperative to formulate effective strategies to augment the supply of suitable workers. This issue is particularly acute in regional and remote areas across Australia, where providers struggle to fill shifts due to both supply and suitability issues. The recent [NDS Submission: Draft National Strategy Care and Support Economy](https://www.nds.org.au/index.php/policy-library/nds-submission-draft-national-strategy-care-and-support-economy-1) identified that as a consequence NDIS participants are at risk of missing critical supports, facing delays, or receiving services at a diminished level. The ramifications of workforce recruitment and retention challenges are distressing, with some providers citing extended wait times for therapy services, ranging from six months to up to two years in certain locations.

To address critical workforce challenges in the disability sector, NDS makes several recommendations. Firstly, establish disability workforce connectors to mobilise investment in employment and training programs, engage underutilised workforce cohorts, such as people with disability, those from culturally diverse backgrounds, and the long-term unemployed, to pursue careers in the disability sector. Efficient processing of NDIS worker screening checks and mandatory requirements for all workers delivering NDIS services are needed, alongside campaigns to promote careers in disability and raising awareness of career pathways.

Regarding Allied Health (AH) professionals, there is a call for increased enrolment opportunities in regional universities. The proposal also advocates for the inclusion of disability-related units and the incorporation of supervision for AH Assistants (AHAs) as part of AH training. Recognising and supporting AHAs as integral members of the disability workforce is underscored, along with facilitating placements for third year/final-year AH students in disability organisations. Additionally, early career AHP workers are encouraged to undergo professional formation to build experience and networks across care sectors, including disability, health, and aged care.

In terms of retention and capability, funding for adequate supervision and training should be funded outside of a participant's plan. Training budgets should encompass areas beyond compliance, including leadership, culture building, courageous conversations, and well-being initiatives. Recognising the costs associated with workers attending training and backfilling positions is essential.

NDS is currently undertaking research on mapping and gapping the current VET course offerings against the NDIS Workforce Capability Framework. NDS workforce project teams have heard of many instances where workers are utilising free-TAFE schemes to access individual course units, rather than intending to complete entire courses, which contain units perceived as superfluous to their needs. These students/workers are then unable to access free TAFE in future for an equivalent level qualification.

TAFE course design needs to be more flexible and cater for the range of student and NDIS participant needs. The current Certificate III and IV courses are not aligned with the NDIS Practice Standards or the NDIS Workforce Capability Framework. These gaps need to be addressed by VET accreditation authorities. In the fast changing NDIS landscape at present, it may be worth reducing the course accreditation period to 3 years, from the current 5 years. Allowing flexible course design (such as stackable units on a National Skills Passport which may contribute over time toward a certificate qualification) would improve course accessibility and efficiency of delivery.

Inflexible course design is also a barrier to people with certain disabilities from being able to access the Cert IV in Disability Support, because from 2024 onward, it is a prerequisite to have completed the Cert III in Individual Support. The Cert III in Individual Support contains a core unit “CHCCCS041 - Recognise healthy body systems" which includes a significant work placement and manual assessment requirements around provision of personal care. Yet provision of personal care for people with complex needs is not a requirement for many support work jobs in the disability sector.

Furthermore, there is a need to establish visible career paths for disability workers and a reconsider the decision to make Cert III Individual Support a prerequisite for Cert IV in Disability. These comprehensive recommendations aim to address the multifaceted challenges in attracting, training, and retaining a skilled and diverse disability workforce.

In addition to addressing wages and conditions across the sector, initiatives aimed at fostering the growth and support of the care and support workforce must align with current awards and enterprise agreements. Recent variations to the Social, Community, Home Care and Disability Services Industry Award (SCHADS Award) impact direct labour costs and widen the gap between price and costs. Changes to split shift allowances, minimum engagement periods, remote working, and sleepovers not only affect direct costs but also contribute to increased back-office costs as rostering and payroll become more complex.

The Fair Work Commission determination for the aged care work value case in March 2023 provided a 15 per cent pay increase to aged care workers, creating a pay rate disparity between home care employees in the aged care sector and disability sector. This poses additional workforce challenges, especially for providers offering household services to both NDIS participants and aged care recipients, as workers may be drawn to the higher pay rate in aged care.

Given that NDIS pricing is fixed by the NDIA using the disability worker cost model, which assumes a low-mid pay point in the SCHADS Award, there is extremely little ability for workers and employers to bargain anything above the SCHADS 2.3 pay rate.

Feedback from recruitment firms indicates a recent surge in frontline workers from the disability sector applying for positions in aged care. Ongoing collaborative efforts with government, unions, NDIS employers and participants are essential to finding a balance that meets the needs of participants while addressing the concerns of individual workers. NDS strongly recommends a review of the SCHADS Award to bring it into line with the contemporary NDIS work setting and pricing mechanisms.

## 5.3 Worker screening

NDS advocates for an improved quality and safeguarding system, including worker screening. NDS recommends all individuals who provide disability supports to NDIS participants must undergo a NDIS Worker Screening Check and receive a clearance to work. However, for the system to effectively work, improvements to the current system are urgently required. The current NDIS Worker Screening Check timelines, expense and processes pose a particular barrier for job seekers. This is particularly the case in a highly competitive labour market where job seekers can immediately commence work in other sectors with comparable pay and working conditions. Providers report cases where high-quality applicants find alternative employment in other industries or with unregistered NDIS providers due to delays of months in receiving their NDIS check.

A well-functioning NDIS Worker Screening process is pivotal to maintaining the integrity and safety of disability support provision. Awareness and adherence to the NDIS Code of Conduct for all workers and providers, including sole traders, needs to be monitored and upheld, as a prerequisite for eligibility to receive Australian Government funding for NDIS services. This includes proactive recording and monitoring mechanism to ensure robust awareness, understanding, and implementation of the NDIS Code of Conduct.

NDS welcomes the NDIS Review final report recommendations for enhanced information-sharing provisions between federal, state, and territory governments, as well as improved data-sharing among regulatory and law enforcement bodies. These measures, including defined criteria for information exchange, if enacted effectively should help streamline processes, reduce duplication and delays.

Rural and remote providers report significant delays associated with alternative lodgement of documents (where workers reside more than 2 hours round travel time from a worker screening unit office) and cases where First Nations workers experience extended delays due to their birth not having been registered. NDS is also aware of many cases whereby workers have recently provided identity and similar documents to their state/territory worker screening unit for another purpose (e.g.: getting a new driver licence, proof-of-age card, etc) however these documents are requested once more when applying for their NDIS Worker Screening Check.

NDS strongly encourages efficiencies through automation, data sharing, systems design and drawing upon existing established identification systems.

## 5.4 Recommendations

### Recommendation 3: Develop and deliver a risk-proportionate model for the visibility and regulation of all providers and workers

In line with the NDIS Review recommendations, government should design and implement a graduated risk-proportionate regulatory model for the whole provider market. The newly established NDIS Provider and Worker Registration Taskforce will provide expert advice to Government on the best approach to overhaul the current registration system for those who deliver supports while, crucially, maintaining choice and control for participants. Consideration needs to be given to the unique circumstances of region, rural and remote service delivery.

Furthermore, it is recommended that the NDIS review panel recommendations with regards to Worker Screening should be accepted and implemented. This includes:

* Improving worker screening processes to be faster, smoother, and more consistent
* Ensuring worker screening processes function effectively across the care and support sector

Action 17.4 from the NDIS review panel suggests that the Department of Social Services, in collaboration with the new National Disability Supports Quality and Safeguards Commission and state and territory agencies, should expand the coverage of worker screening requirements. This expansion would make worker screening mandatory for all individuals working in risk-assessed roles for registered providers and all individuals working for enrolled providers in roles involving direct delivery of specified supports or services to people with disability, or likely to require more than incidental contact with them. This expansion aims to support a more risk-proportionate approach to regulation, ensuring workers do not pose an unacceptable risk to people with disability. It should be accompanied by mandatory basic online training for workers to understand their obligations.

Furthermore, the Department of Finance and the Department of Social Services, along with the new National Disability Supports Quality and Safeguards Commission and state and territory agencies, should work to improve, streamline, and harmonise worker screening processes for care and support workers. This includes efforts to reduce timeframes, improve consistency across jurisdictions, and streamline and harmonise checks across the care and support sector.

### Recommendation 4: Develop an integrated approach to workforce development for the care and support sector

An integrated approach to workforce development for the care and support sector, building on the National Care and Support Economy Strategy should include:

* Minimum online training for workers to understand their obligations, followed by opportunities for career progression through micro-credentials
* Targeted strategies to increase the allied health workforce and peer workers
* Implementing a new pricing and payments framework, including independent pricing setting, to support providers in investing in workforce capability

The disability sector faces challenges in attracting and retaining workers with the right values and skills, exacerbated by low wages and conditions. The National Care and Support Economy Strategy provides an opportunity to co-design a disability workforce strategy. This strategy should focus on funding training and worker support responsive to individual participant and worker needs, provider context, and support delivery locations.

To address these challenges, an integrated approach to workforce development is crucial. This includes providing minimum online training to ensure workers understand their obligations, with opportunities for career progression through micro-credentials. Targeted strategies are also needed to increase the allied health workforce and peer workers. Implementing a new pricing and payments framework, including independent pricing setting, will support providers in investing in workforce capability. Additionally, broader requirements for worker screening and basic online training are necessary to ensure workers do not pose an unacceptable risk of harm to people with disability.

### Recommendation 5: Attract, retain and train a workforce that is responsive to participant needs and delivers quality supports

Under the recommendation to "Attract, retain and train a workforce that is responsive to participant needs and delivers quality supports," it is recommended that the NDIS Review panel recommendations should be accepted and implemented. This includes:

* Designing and trialling workforce attraction and retention initiatives, such as portable training and sick leave schemes, in collaboration with unions, disability and other care and support workers, employers, and participants/clients
* Developing targeted and flexible migration pathways for care and support workers, including skilled migration programs and industry labour agreements
* Establishing an ongoing governance function to coordinate workforce planning and ensure the development of a sustainable care and support workforce. This includes developing a data strategy, identifying workforce gaps, and monitoring and evaluating actions

Additionally, there is a need to make TAFE course design more flexible to cater to the range of student and NDIS participant needs. This may include shorter course accreditation periods, flexibility to stack units toward a qualification over time, and alignment with the NDIS Practice Standards and the NDIS Capability Framework.

### Recommendation 6: Sector support for industrial relations reform

The disability workforce faces significant challenges, and NDS advocates for an integrated approach to address these issues. The industrial relations environment, particularly the SCHADS Award, requires updating to reflect the changing nature of work under the NDIS. The Disability Royal Commission has recommended variations to the SCHADS Award to make disability work more viable as a career path and retain workers longer. The current award, developed in 2009, has undergone multiple variations but is no longer reflective of contemporary disability support work settings under the NDIS. NDS proposes shared legal representation for a wide review of the award to ensure best practices are included. This collaborative approach is seen as essential for achieving positive outcomes for participants, providers, and the government.

# 6.0 Disaster management

Disaster management involves the preparation for, response to, and recovery from disasters or emergencies, including natural disasters such as earthquakes, hurricanes, floods, and man-made disasters like terrorist attacks or industrial accidents. The goal of disaster management is to minimise the impact of disasters on individuals, communities, and the environment.

The Royal Commission emphasised the need for improved disaster management strategies and support for people with disability. They highlighted that people with disability face specific challenges during disasters, including access to information, evacuation procedures, and ongoing support after the event. The Royal Commission recommended that disaster management plans and services be inclusive of people with disability, ensuring their needs are adequately addressed and that they are not disproportionately affected by disasters.

In November 2021, the NDIS Quality and Safeguards Commission introduced a new Emergency and Disaster Management Practice Standard. They also reviewed and made additions to the existing practice standards to give NDIS registered providers more information on the expectations for how they prepare for, and respond to, distinct types of emergencies and disasters. This standard is intended to address the planning required by providers to prepare, prevent, manage and respond to emergency and disaster situations whilst mitigating risks to and ensuring continuity of supports that are critical to the health, safety and wellbeing of NDIS participants. These responsibilities include, but are not limited to:

* **Risk Assessment and Planning**: Disability service providers should conduct risk assessments to identify potential hazards and vulnerabilities that people with disability may face during disasters. This includes assessing factors such as mobility limitations, communication barriers, sensory impairments, and medical needs. Based on these assessments, providers should develop comprehensive disaster management plans tailored to the specific needs of people with disability
* **Emergency Preparedness**: Disability service providers are responsible for ensuring that people with disability receive adequate training and support to prepare for emergencies. This may involve developing individualised emergency preparedness plans, providing training on evacuation procedures, and supplying necessary assistive devices and equipment
* **Communication and Coordination**: Disability service providers play a crucial role in facilitating communication and coordination between people with disability, their families, support networks, and emergency response agencies. Providers should establish clear communication channels and protocols to ensure that people with disability receive timely and accurate information before, during, and after disasters
* **Evacuation and Sheltering**: Disability service providers must work with local authorities and emergency shelters to ensure that evacuation plans are inclusive and accessible to people with disability. This may involve identifying accessible evacuation routes, providing transportation assistance, and ensuring that emergency shelters are equipped to accommodate the needs of people with disability, including accessible facilities and support services
* **Supportive Services and Assistance**: During and after disasters, disability service providers should continue to provide essential supportive services and assistance to people with disability, including access to healthcare, medications, personal care support, and mental health services. Providers should also offer advocacy and assistance with accessing disaster relief resources and services.
* **Post-Disaster Recovery**: Disability service providers have a long-term responsibility to support people with disability in the recovery and rebuilding process following a disaster. This may involve addressing physical, emotional, and social needs, advocating for accessible rebuilding efforts, and facilitating community integration and resilience-building activities

Australia, as a signatory to the Sendai Framework for Disaster Risk Reduction 2015–2030, is committed to ensuring comprehensive disaster preparedness for all in the face of natural hazards. Both international and national reports have consistently highlighted the gaps and challenges faced by people with disability, offering recommendations for future actions to drive positive change. In 2019, the Committee on the Rights of Persons with Disabilities examined Australia's efforts under Article 11 of the Convention on the Rights of Persons with Disabilities (CRPD), focusing on Situations of Risk and Humanitarian Emergencies. Their findings emphasised the need for nationally consistent emergency management standards and improved mechanisms for engaging people with disability. Additionally, the Royal Commission conducted inquiries in 2020 and 2021 into the impacts of emergency planning and response. Their March 2021 Issues Paper recognised the heightened vulnerability of people with disability to neglect during emergencies. The Australian Government responded by accepting most of the commission's recommendations, signalling a commitment to improving emergency preparedness and response for people with disability.

Overall, disability service providers under the NDIS have a critical role to play in ensuring the safety, well-being, and inclusion of people with disability in all aspects of disaster management. By fulfilling their responsibilities effectively, providers can help mitigate the impact of disasters on people with disability and promote their full participation in emergency preparedness, response, and recovery efforts.

Disability service providers operating in regional, rural, and remote areas confront a myriad of challenges in fulfilling their disaster management responsibilities under the NDIS. These areas often face significant geographical obstacles, including limited infrastructure and vast distances between communities. Such geographical challenges can impede the ability of providers to access resources, coordinate with emergency response agencies, and reach people with disability during times of disaster. Moreover, regional, rural, and remote areas typically contend with resource constraints such as limited funding, shortage of trained staff, and inadequate equipment. These limitations can severely strain the capacity of disability service providers to meet the additional demands of disaster preparedness and response effectively.

Access to specialised services is another critical concern in these areas. People with disability often have specific needs that require specialised support, but such services may be scarce or entirely absent in remote regions. Consequently, the vulnerability of people with disability may be exacerbated during disasters, as they may lack access to essential resources and support networks.

Communication and coordination present further challenges. Sparse population density and geographic barriers can hinder the establishment of effective communication channels between disability service providers, people with disability, their families, and emergency response agencies. This lack of communication infrastructure can impede timely and coordinated responses to disasters, potentially placing people with disability at greater risk.

Transportation infrastructure and accessibility issues also pose significant challenges for disability service providers in these areas. Evacuation and sheltering efforts may be complicated by limited transportation options and inaccessible facilities. Disability service providers may struggle to arrange transportation assistance, identify accessible evacuation routes, and ensure that emergency shelters are equipped to accommodate the needs of people with disability.

It is important to recognise that the workforce delivering supports are members of their communities and as such are also impacted in the event of a natural disaster. Staff may be isolated or evacuated, be unable to access transport to get to work and communication systems may be impeded. In regional, rural and remote communities where providers may have a limited pool of workers to draw from availability of workers to support participants is an even greater issue.

There are opportunities to enhance the viability of disability service providers in regional, rural, and remote areas through strategic investments and support. This includes investing in capacity building initiatives to enhance the skills and expertise of service providers in disaster management, fostering collaboration and networking among stakeholders to share resources and best practices, leveraging technology to overcome communication barriers, and advocating for policy and funding support tailored to the unique needs of these areas. By addressing these challenges and investing in solutions, disability service providers can better support people with disability in regional, rural, and remote areas before, during, and after disasters, while also promoting community resilience and preparedness.

## 6.1 Recommendations

Government responses to emergencies have often overlooked and left people with disability behind, particularly in emergency planning. Access to disability support workers for daily living has been a challenge, as has accessing financial support from the government for essentials like personal protective equipment. Information during emergencies has been insufficient, late, or confusing, especially for those in group homes, leading to calls for regular information updates in Auslan, captioning, and tactile formats. Safeguards for people with disability in segregated settings have been lacking, increasing their vulnerability. Social isolation has been a significant issue, with many lacking face-to-face contact or internet access, potentially increasing the risk of violence and negatively impacting mental well-being. Proposals for change include more inclusive emergency planning, improved accessibility of information, maintaining community connections, and implementing systems for safety and complaints.

### Recommendation 7: Establish a National Plan and Roadmap for Disability-Inclusive Disaster Preparedness, Resilience, and Recovery

In an [open letter](https://qdn.org.au/wp-content/uploads/2022/03/Final-Joint-Open-letter-leave-no-one-behind-310322.doc.pdf) all parties and candidates contesting the Federal Election in 2022, NDS advocated for recommendations to “Leave no Australian behind in disasters and emergencies”. The key recommendation to government was the formation of a National Disability Inclusive Disaster Risk Reduction Reference Group is proposed. This group would play a pivotal role in developing a comprehensive National Plan and Roadmap. The plan would focus on setting nationally consistent standards for emergency management arrangements across all levels of government. It would also address service provider capacity building within the disability and community services sectors. Furthermore, the roadmap could provide policy guidance on shared responsibilities during disasters, ensuring that all stakeholders understand and fulfill their roles in promoting disability-inclusive disaster preparedness, resilience, and recovery efforts.

### Recommendation 8: Invest in multi-sector targeted responses supported by collaborative and inclusive research

A further proposal in the “Leave no Australian behind in disasters and emergencies” open letter recommending the government prioritise investing in targeted responses across multiple sectors, supported by collaborative and inclusive research. Specifically, resources should be allocated to support people with disability in developing their leadership and individual emergency disaster plans. These plans, including household-based plans, would address the unique complexities faced by children, young people with disability, and their families and caregivers. Additionally, policy changes should be implemented to ensure the inclusion of people with disability in emergency management decision-making processes and representation at all levels.

Capacity building efforts should also be prioritised, focusing on enhancing the preparedness of the disability and community services sectors. This would include compliance with the NDIS Quality and Safeguards Commission Practice Standards and research on the impact of service provider contributions to disaster risk reduction. An Investment should support concerted efforts to implement Australia's Disability Strategy 2021–2031 Health and Wellbeing Policy Priority 4, which aims to deliver collaborative and inclusive disability emergency action planning. This includes providing support to the emergency and disaster management sector to ensure inclusion and co-designing effective data and measurement tools with people with disability and service providers.

### **Recommendation 9:** Establish a disaster payment scheme for NDIS providers to ensure continuity of support and services during natural disasters or public health emergencies.

A disaster payment scheme for NDIS providers is needed to ensure that participants in regional, rural, and remote areas receive uninterrupted support and services during emergencies, safeguarding their personal safety and wellbeing.

This scheme should include a suite of measures that participants and providers are aware of and can rely on in times of crisis, similar to the measures implemented during the COVID-19 pandemic. These measures should allow for the flexible use of core budgets for capacity building supports such as support coordination to assist participants develop alternative support arrangements during an emergency and re-establish supports during the recovery phase. Temporary mechanisms are needed to recognise the long-term impact of emergencies on providers, including increased staffing costs, overtime, and on-call expenses, as well as challenges in maintaining adequate staff availability. Providers should be required to provide evidence to activate the scheme when a natural disaster or public health emergency is declared.

Additionally, mechanisms similar to the suite of COVID-19 payments should be implemented for providers of Assistance in Supported Independent Living supports. This support should cover expenses such as higher intensity support, and additional workforce costs where rostering pressures due to staff being unavailable result in increased overtime or use of agency staff. Providers should be able to make a direct billing claim for this support on behalf of all participants in the same household, per day, when specific criteria are met.

# 7.0 Pricing and payments

A key issue for the NDIS Review was addressing sustainability issues within the scheme and the market. The Review highlights the lack of information in markets for making informed decisions and proposes that an independent pricing authority, guided by best practice approaches and existing data, could improve market signals for investing in the workforce, outcomes, and innovation. The review identifies several issues with current pricing and payment methods, suggesting that the market is not ready for deregulation or the removal of price caps. Financial sustainability of the NDIS is a significant concern, with reports indicating that the sector is struggling financially. The review also acknowledges difficulties participants face in accessing information on quality and prices, with concerns about price gouging and overcharging. It suggests core reforms to price regulation to align incentives, ensure pricing appropriateness, and support efficiency and value for money.

The NDIS Review Panel have made several recommendations to reform pricing and payment frameworks and incentivise providers to deliver quality supports that are crucial for participants and services in regional, rural, and remote areas of Australia. Additionally, by ensuring NDIS prices better reflect the real costs of delivering supports, including in different regions, the recommendations seek to implement fair compensation for organisation, which can help attract and retain providers in these areas. The preferred provider arrangements for capital supports would streamline access to these services for participants in remote areas, reducing barriers to access.

Transitioning responsibility for advising on NDIS pricing to the Independent Health and Aged Care Pricing Authority should improve transparency and alignment in pricing decisions, ensuring fairness for participants and providers in all areas of Australia.

Independent pricing in the NDIS is important because it ensures transparency, fairness, and efficiency in the delivery of disability supports. By basing pricing decisions on objective criteria, independent pricing promotes trust among participants, providers, and the community. It also helps ensure that providers are fairly compensated for their services, encouraging innovation and efficiency.

**Access to supports for First Nations communities and all participants in remote communities**

The NDIS Review also emphasises the importance of local First Nations communities and governments working together to design alternative commissioning arrangements for disability services. Alternative commissioning, when driven by communities, would mean that First Nations communities have more access to culturally safe supports, and all people in remote communities would access more supports where they live. This roll-out should start as soon as possible with interested communities, enabling them to build skills and confidence to design and implement alternative commissioning approaches. The design and roll-out should be done in genuine partnership with communities, building on their strengths and capabilities. This approach can contribute to Closing the Gap by strengthening the community-controlled sector and creating a more sustainable, localised workforce. Effective governance, including shared decision-making with First Nations communities and sustainable place-based governance arrangements, is crucial for the success of alternative commissioning.

## 7.1 Recommendations

Recommendation 10: Reform pricing and payments frameworks to improve incentives for providers to deliver quality supports to participants  
Implement/prioritise the recommendations of the NDIS Review to develop a new NDIS pricing and payments framework to be administered by the NDIA and the Independent Health and Aged Care Pricing Authority, including better ways to pay providers to promote the delivery of efficient and quality supports and continuity of supply.

This reform is particularly important for regional, rural and remote disability service providers under the NDIS that often face unique challenges such as higher service delivery costs, workforce shortages, and limited market competition. By implementing reforms that improve incentives for providers to deliver quality supports, these regions can benefit from more sustainable and efficient service delivery. Transitioning responsibility for NDIS pricing to the Independent Health and Aged Care Pricing Authority, and developing, reviewing and refining a new pricing and payments framework need to be prioritised.

### Recommendation 11: Strengthen market monitoring and improve access to supports through alternative commissioning

Implement/prioritise the recommendations of the NDIS Review to improve access to supports for First Nations participants across Australia and for all participants in remote communities through alternative commissioning arrangements.

The Australian Government should engage in more active, evidence-driven market monitoring to identify issues with access to quality supports early and take timely and appropriate action. Concurrently, the NDIA should progressively implement provider panel arrangements for allied health supports in small and medium rural towns or areas where participants face persistent supply gaps. Additionally, the NDIA, in collaboration with First Nations representatives, communities, participants, and relevant government agencies, should commence the gradual rollout of alternative commissioning arrangements for both First Nations communities and remote communities, starting as soon as possible.

# 8.0 Conclusion

To enhance the NDIS participant experience in rural, regional, and remote Australia, an integrated approach is essential. This includes establishing a sector-led NDIS Reform Taskforce and enhancing NDIS services to support structural adjustment. Developing a risk-proportionate model for the visibility and regulation of all providers and workers, alongside an integrated workforce development approach, will ensure a responsive and high-quality workforce.

Investing in disaster preparedness, resilience, and recovery, as well as implementing a disaster payment scheme for NDIS providers, is crucial for ensuring continuity of support during natural disasters or public health emergencies. Additionally, reforming pricing and payments frameworks, strengthening market monitoring, and improving access to supports through alternative commissioning will incentivize providers to deliver quality supports to participants.

Collaboration and co-design with the disability community, including providers, is essential to developing practical, locally tailored solutions to enhance the NDIS participant experience in rural, regional, and remote Australia.

# Contact

Laurie Leigh

Chief Executive Officer

National Disability Services

0437 107 851

laurie.leigh@nds.org.au

[NDS website](http://www.nds.org.au)

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