ndis

National Disability Insurance Scheme

Consultation Summary Report: An Ordinary Life at Home



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1. CEO introduction

The National Disability Insurance Agency (NDIA or 'we') are developing a new home and living policy that will inform the way we support National Disability Insurance Scheme (NDIS) participants to pursue their home and living goals.

We want to support participants to have more choice and control over where they live, who they live with, and the supports they use. We also want to support you to build the skills you need to live as independently as possible.

We have been hearing that the NDIS is not always achieving the best home and living outcomes or delivering a quality experience. We realise that fixing it will be a big job and will take time. So to make sure we get it right we wanted to hear from you to find out more about what you want the NDIS to deliver. While we work with you to figure this out, we will keep working with, and improving on the models we have now.

The first big step we took on this journey was releasing our consultation paper: An Ordinary Life at Home. We also gave you the opportunity to tell us more about your experiences through a national consultation over 12 weeks from 21 June to 10 September 2021.

During the consultation period we spoke to more than a thousand people and heard from hundreds more. We have been really encouraged by the high ratio of participant voices, and the voices of your families and carers, among the responses to our paper and online survey.

This report aims to show you what everybody told us during the consultation. With your help, we are building a shared understanding of the key barriers and address issues relating to home and living. Some of the things you raised are not things the NDIS has control over. Commonwealth, state and territory governments also have a role to play, for example, by providing financial assistance to pay rent or bonds, or ensuring there is affordable and accessible housing for people with disabilities to live in. We will work together through codesign to find solutions for what we can control and engage with others on some of the things we cannot. We look forward to continuing to work with you on improving home and living in the NDIS.

We would also like to thank everyone who helped with the development of the consultation paper, animation and survey, and everyone who participated in the national consultation.

Regards,

Martin Hoffman

Chief Executive Officer

What we will do with your feedback

We have produced this report to provide a summary of the feedback we have received during the consultation period. It does not draw conclusions or define a solution for a home and living policy. We have also made available the submissions from people who have provided their consent to do so. These submissions are available on our website.

We have done this so you are able to see what people have told us during consultation. We encourage you to have a look at these submissions to see what others have said.

The feedback you have provided will be an important part of what we will be using to develop a new home and living policy. We explain our next steps below.

2.1 Next steps

Following the release of this report and the submissions we received, we will continue our co-design process by drafting a policy, testing it with the sector, and finalising the Agency's new home and living policy. The image below shows where we are up to on this journey.

Home and Living co-design process



We will undertake the co-design process in line with our ongoing commitment to include people with disability when developing changes to the NDIS. We will be guided by the work of the Co-design Advisory Group, which is made up of members of the NDIA, the Independent Advisory Council, and Disability and Carer Representative Organisations. You can read more about our approach to co-design on the NDIS website.

During the co-design process, we will use the feedback you gave us during the consultation period to build a strong and shared understanding of problems you experience and difficulties you face in your home and living situation. Throughout the co-design process, we will have an in-depth look at the recommendations and potential solutions you provided, in the context of what you told us is and is not working in the NDIS.

We understand that some of you may feel that we need to act quicker to make improvements to home and living now. We recognise that co-design can sometimes take a long time, but we think it is important to deliver the large-scale reform required to improve home and living for NDIS participants. In the meantime, we will continue to make improvements to our existing home and living systems, processes, and decision making to improve the current NDIS experience. We are also working on how we can provide opportunities for participants and providers to try new ways of receiving and delivering home and living supports. You can find out more about our <a href="https://www.home.no.in/home.no.in

Following the co-design process, we will release the home and living policy. It will include set actions and detailed action plans that will help us to deliver on the vision we all have for home and living under the NDIS.

We are committed to working towards better outcomes for participants, and improving how the NDIS works now and into the future. We look forward to continuing our work with you to deliver a new home and living policy that supports you to pursue your home and living goals.

3. How we received your feedback

You shared your thoughts with us in different ways, including through:

- Online survey
- Email
- Online events across Australia
- Direct conversations with sector representatives and peak bodies
- Direct conversations with participants living in Supported Independent Living, with Complex Communication Access and Support Needs, and through our Participant First Initiative.

We asked you to give us your thoughts in ways that worked for you. Some of the feedback included video and audio, direct email correspondence, creative responses (such as sharing poems), and one-on-one conversations.

3.1 Consultation events

During the consultation period, we held **5 public general information and feedback sessions** for communities across Australia. Our community engagement teams also held **22 sessions directly with participants** and engaged with members of our Participant First Engagement Initiative with **7 focus group sessions** that included participants and family and carers of participants.

We hosted **12 workshops specifically for providers**. We also engaged with stakeholders by providing information and gathering feedback through **21 stakeholder meetings and forums.**

With a **total of 67 engagement activities**, we spoke to over 1,000 people about home and living and the vision and ideas outlined in the consultation paper: An Ordinary Life at Home.

In the creation of the consultation paper and the survey questions, NDIA representatives also held discussions with participants, nominees, families and carers as well as national peak bodies, academic experts and other stakeholders including the **Independent Advisory Council**, its subgroups, and members of our <u>Participant First Engagement Initiative</u>.

In recognising the major impact of COVID-19 on your ability to provide feedback, we extended the consultation period by 2 weeks. We also increased the opportunities to conduct information sessions virtually, or in person with adjustments based on restrictions and COVID-safe practices.

3.2 Online submissions

In response to our request for feedback, we received **447 unique online submissions**¹. This included:

- 304 survey responses
- 56 email responses
- 87 survey portal responses

Of these:

- 327 responses were from individuals
- 120 responses were from organisations.

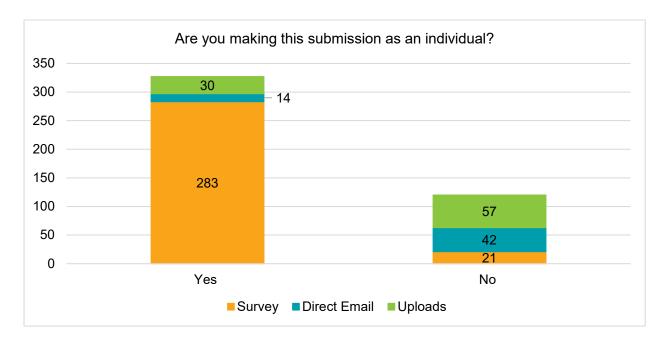


Figure 1. Graph of submissions made on behalf of an organisation or group

Responses from individuals

Table 1 below displays responses from 447 people. It shows we mostly heard from people identifying as participants receiving home and living supports (30.4%) and family, friends, or carers (29.5%). In this question, even if you selected you were making a submission on behalf of an organisation or group, you could choose to identify in other ways. Other response groups included: a representative of an organisation or group (24.4%); a participant who does not currently access home and living supports (8.9%); a disability support worker, health or allied health worker (4.3%); other (2%); or not specified (0.4%).

¹ Analysis of responses was also undertaken on transcripts and notes taken at 63 of the engagement activities. However demographic data was not captured for every attendee and therefore not included in this count.

Table 1. Identity of individuals who responded to the online survey

Who responded	Number	% of individuals
A participant who does not currently access home and living supports	40	8.9%
A participant currently receiving home and living supports	136	30.4%
A family member, friend or carer of a participant or person with disability	132	29.5%
A disability support worker, health or allied health worker	19	4.3%
A representative of an organisation or group	109	24.4%
Other	9	2%
Not specified	2	0.4%

When designing the survey and the consultation questions, we wrote them specifically for participants. We asked you to think about:

- How your family member, friend, or person you care for, would respond
- · How the people with disability you support in your work, would respond
- How the participants that access your organisation or group, would respond

So while we received large numbers of responses from people who were not participants, the participant voice came through strongly in responses.

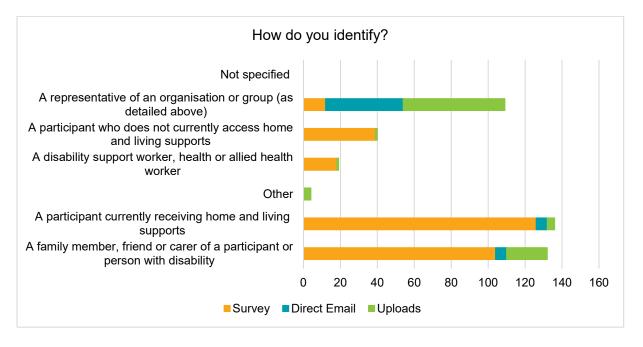


Figure 2. Graph of how individuals identified

How individuals identified themselves

Table 2 below displays information from 208 responses to this question in the online survey². It shows we mostly heard from people who identified as having a psychosocial disability (45.7%), were from rural or remote regions (26.4%), and who identified as Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Asexual, Plus (LGBTIQA+) (13.5%). We had a lower response from people who were from a culturally and linguistically diverse background (10.6%) or identified as Aboriginal or Torres Strait Islander (3.8%). In this question, people could select more than one identity, or could choose not to disclose.

Table 2. Individuals who identified as part of a particular community

Who responded	Number	% of individuals
Aboriginal and Torres Strait Islander	8	3.8%
Culturally and Linguistically Diverse	22	10.6%
Rural and Remote	55	26.4%
LGBTIQA+	28	13.5%
Psychosocial disability	95	45.7%

Responses from organisations

Table 3 displays information from 120 organisations who responded to the online survey. It shows we mostly heard from organisations identifying as a disability service provider (44.2%) and peak body / advocacy group (40%). Other respondents included government department or services (5.8%) and allied health providers (1.7%). We did not have any responses from groups who identified as a research organisation.

² This data was not captured specifically through engagement activities; however, there were specific events focussed on particular communities.

Table 3. Responses from organisations by 'organisation type'

Who responded	Number	% of organisations
Government Department or Service	7	5.8%
Allied Health Provider	2	1.7%
Disability Services Provider	53	44.2%
Research Organisation	0	0%
Peak Body / Advocacy Group	48	40%
Other	10	8.3%

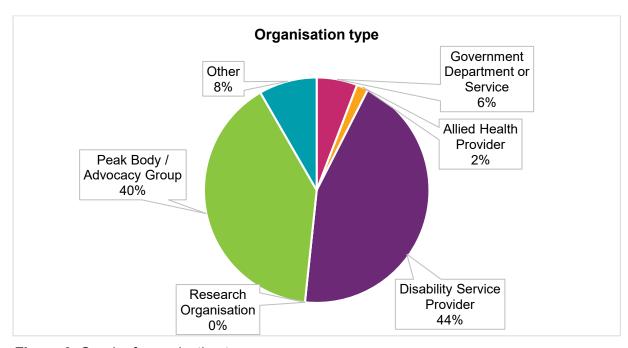


Figure 3. Graph of organisation type

Responses by location for individuals and organisations

Table 4 below displays information from 447 people who responded to the consultation questions. It shows we mostly heard from people who live in New South Wales (27.7%), Victoria (22.6%) and Queensland (20.1%). Responses from other locations included Western Australia (12.3%), South Australia (8.1%), Australian Capital Territory (3.8%), Tasmania (2.7%) and Northern Territory (0.2%). We also had responses that did not specify a location (2.5%).

Table 4. Responses by location

Location of response	Number	Percentage of total
Australian Capital Territory	17	3.8%
New South Wales	124	27.7%
Queensland	90	20.1%
South Australia	36	8.1%
Tasmania	12	2.7%
Victoria	101	22.6%
Western Australia	55	12.3%
Northern Territory	1	0.2%
Other jurisdiction ³	0	0%
Not specified	11	2.5%

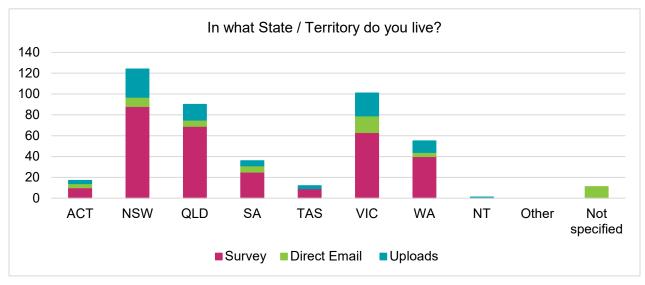


Figure 4. Graph of response by location.

³ Other jurisdictions – includes the territories of the Indian Ocean and Norfolk Island.

4. What you told us

We received feedback presented in a variety of ways and that represented a variety of opinions. Overall, your responses were supportive of the vision and approach discussed in the consultation paper. However, many of you acknowledged the gap between our vision and how the NDIS is currently operating.

'An Ordinary Life at Home outlines a fine vision for an improved experience of the NDIS, but addressing the significant operational and policy barriers, that people with complex disability and providers are currently experiencing, is necessary to allow participants' social and economic goals and improved life outcomes to continue to be possible' (Guardian Living Australia, disability services provider).

A number of themes emerged from your feedback. These included:

- Wanting the NDIA to take a more active role in improving access to affordable and accessible housing
- Supporting the introduction of more flexible budgets to spend on home and living supports in ways that matter to you
- Seeking more information and clarity on protecting you from conflicts of interest in relation to your housing and supports
- Increasing options to try more **innovative and creative** home and living supports.

In the below sections we have summarised the responses to the questions we asked through the consultation. We designed the consultation questions to provide us with a better understanding of your views.

The graphs show the online survey question responses from the 304 people. However, the themes and examples were taken from the online survey submissions, the email responses, as well as feedback captured from engagement activities.

Some of the words we heard or read the most were:

- people
- home
- support
- know
- need.



Figure 5. Word cloud of the most frequently used words in the consultation responses

4.1 Changing the conversation

In our vision, we talked about introducing new ways of speaking about home and living and an ordinary life. This includes changing the language we use, as well as how and when we speak about home and living with you. We want a solution to fit with your needs and wants that fits within your budget and your vision for an ordinary life.

'It is our view that the conversations need to follow a person-centred planning process' (Autism Association of Western Australia, peak body).

4.1.1 Question 1

We asked: Do you talk to people about how you would like to live?

Your response:

The majority of you said that you do talk about how you would like to live (78%), with a small number saying you do not (16%), or were not sure (3%). For some of you this question was not applicable (3%).

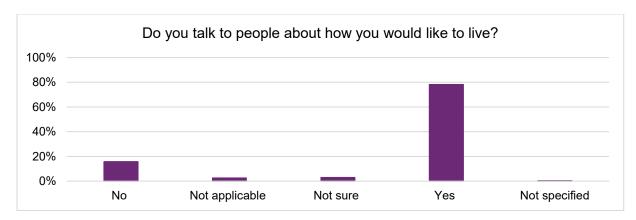


Figure 6. Graph on do you talk to people about how you would like to live

We asked: If not, why not?

Your response:

For those of you who said you didn't talk about how you would like to live, the largest response to the above question was 'other' (25%). Some of you provided reasons in your free text responses. We also heard you were happy with your current arrangements (21%), you didn't think you had the money to make the changes (21%), or you didn't know where to start (18%). Some of you said you did not want to talk about it (10%), were comfortable thinking about it on your own (1%), or did not give a response (5%). Note that for this question you were able to select more than one reason.

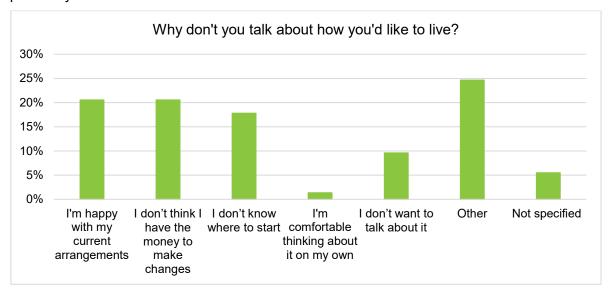


Figure 7. Graph on why you don't talk about how you'd like to live

Some of the key themes on why you don't talk about how you'd like to live included:

- Not being able to discuss home and living due to limited understanding and / or communication skills as a result of your disability
- · Feeling obligated to act on advice from other people
- Not having the support around you to get help on home and living.

Examples from submissions:

'I don't have anyone to talk to about it' (Julie, a participant currently receiving home and living supports).

'I don't know how to talk about [it]. My communication is impacted because of my disability. It is difficult for me to express my basic wants and needs' (Liz, a family member, friend or carer of a participant or person with disability).

'I don't have anyone to help' (Robyn, a family member, friend or carer of a participant or person with disability).

'My son is incapable of understanding the concept of Supported Independent Living as he has severe Autism and is intellectually disabled. He will need 24/7 support for the rest of his life' (John, a family member, friend or carer of a participant or person with disability).

We asked: What kinds of things do you talk about / would want to talk about?

Your response:

The majority of what we heard was that you talk about what options are available (22%), where you want to live (20%), and what supports the NDIS funds (20%). Other responses were: who you want to live with (18%), what others have done (14%), other (4%), not applicable (1%) or not sure (1%). In this question, you could select more than one option.

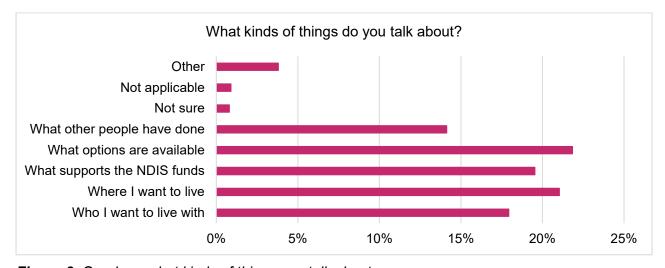


Figure 8. Graph on what kinds of things you talk about

Some of the key themes on what you want to talk about included:

- Where the Scheme connects with other services (for example health)
- The things you enjoy in your home, your wants, dreams and preferences
- The available options, the different styles of how you could live and types of homes and modifications
- Supports to live at home or consider moving out of home, but living near family
- Whether to live with other people with disability or not
- Affordability of different living options and options within the level of funding provided by the NDIS
- Early and long-term planning for key life stages (for example moving out of home)
- Having personalised housing for every participant.

Examples from submissions:

'The situation in which I want to live – with a dog and a vegetable garden, handy to the bush (Mark, a family member, friend or carer of a participant or person with disability).

'What do I do when my parents aren't around' (a family member, friend or carer of a participant or person with disability⁴).

'For [me], finances would be the number one topic. I do have concern of how long it would take to save for a deposit (and not having a job doesn't help). I also would talk about building a house vs buying a house. I would also want to talk about what the NDIS covers and what I need to cover in the home.' (Elenor, a participant currently receiving home and living supports).

4.2 Supporting you to be an informed and empowered consumer

Our vision spoke about supporting you, your family, and supporters to be informed and empowered consumers, who know all the options before you purchase. This recognises that you and your supporters are the best authority on your own needs and circumstances. Information and training for the people you interact with, planning ahead of time, and opportunities to explore options helps support you.

'Local housing and homeless services have expertise in transferable programs and experience in housing NDIS participants but not resources to contribute to and deliver NDIS

⁴ First name not provided

housing plans. Direct engagement and resourcing of these services can leverage their expertise for NDIS participants' (MC Two Pty Ltd, NDIS housing consultant).

4.2.1 Question 2

We asked: Where would you like to get information to think about where and how you live?

Your response:

The majority of what we heard was that support coordinators / LACs (65%), NDIS website (55%), and service providers (48%) are where you would like to get information to think about where and how you would like to live. This was closely followed by, internet searches (47%), and friends and family (45%). Other responses included: peers (37%), peak bodies (36%), government websites (27%), social media (21%) and other (12%).

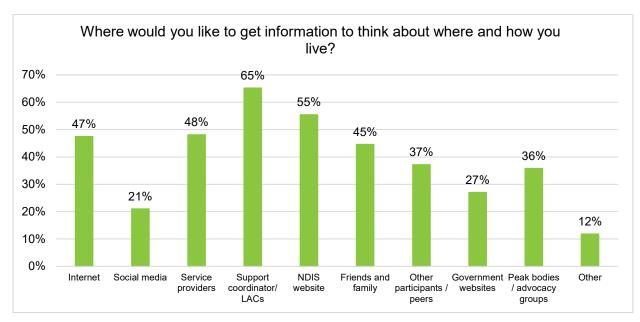


Figure 9. Graph on where you said you would like to get information

Some of the themes and ideas included:

- Information booklets given to you when you enter the NDIS
- Information designed specifically for people with Complex Communication Access and Support Needs or difficulty understanding complex issues
- Examples of what people with disability have done (including overseas examples)
- Information from formal supports such as allied health workers, support coordinators, advocates and providers
- Better connection and linkages to peer support networks
- Access to targeted support coordination (if this existed).

Examples from submissions:

'Disability Housing Providers that are separate from service providers, to prevent any conflict of interest!' (Pauline, a participant currently receiving home and living supports).

'A Home and Living database of currently accessible or used services by other participants to give options and allow everyone to find an example that is similar to their own' (Darren, a participant currently receiving home and living supports).

'Read about what disabled people overseas have done and how they live' (Ricky, a participant currently receiving home and living support).

4.2.2 Question 3

We asked: What information, learning and resources could we create to help you choose your home and living supports?

Your response:

The majority of what we heard was that someone to talk through options with you (24%), examples of what others have done (23%), and talking to NDIS representatives (19%) would help you choose your home and living supports. Other responses included: information to take away and read on your own (18%), information for providers (11%), and other (4%).

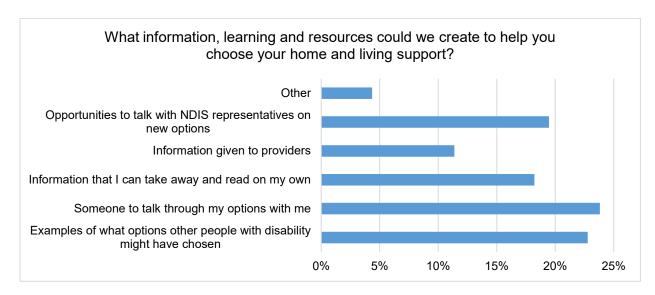


Figure 10. Graph on what information, learning, and resources we could create to help you choose your home and living support

Some of the themes and ideas on what information we could create included:

- Information on complex needs, how reports should be prepared and disabilityspecific resources
- Contact details for specialised knowledge to get answers
- Information aimed at your informal supports, which can be shared with your family
- Better website content and information on housing
- More plain English resources and the use of diagrams
- Ideas and examples of innovation from providers.

Examples from submissions:

'I wish that there was more information on rentals or shared accommodation. I would really like to move out of the house' (Lynne, a representative of an organisation or group).

'Being able to use provider finder to search for providers in our rural area, and useful search categories like [Individualised Living Options] providers' (Joanna, a family member, friend or carer of a participant or person with disability).

'REAL information, not [government] speak or fake news, clear information on what housing is actually available now...' (Clare, a family member, friend or carer of a participant or person with disability).

4.2.3 Question 4

We asked: How helpful is the NDIS website to find information on home and living supports?

Your response:

A large number of you said you had never looked at the NDIS website (21%). If you had used the website, only a small percentage of you said you found it very helpful (3%). Some people found the website somewhat helpful (29%), or neither helpful nor unhelpful (18%). A large number of you said the website was not at all helpful (29%).

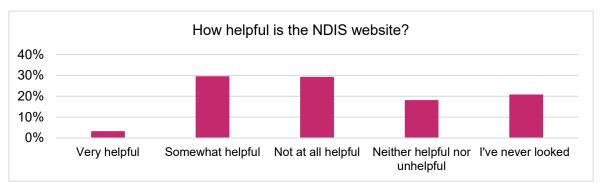


Figure 11. Graph on how helpful you have found the NDIS website

When we asked what would improve the helpfulness of home and living information on the website, some of the themes and ideas included:

- Information sorted by disability type or age, with information for families
- Details for who to speak to within the NDIA, as well as links to other participants
- Plain English and easier navigation, with information on what can and can't be funded
- Lists of available service providers by state / territory and information on mainstream community living options
- Alternatives to using the website without being disadvantaged.

Examples from submissions:

'Thinking about individuals needs and how information can be accessed. I have an intellectual disability so I need to rely on others to source information and talk to me about it. Information about my options displayed on the website that can be easily followed' (Leonie, a disability support worker, health or allied health worker).

'Links to relevant options available for people like me (location, disability need, use similar supports)...' (Michelle, a participant currently receiving home and living supports).

'There need[s] to be more clear information on what can be funded and options available, [an] interactive search engine with detailed listings and interactive map for locations' (Renee, a participant currently receiving home and living supports).

4.3 Supporting you to make decisions

Supporting you to make decisions is about making sure you feel supported with good information, in a format that is clear and easy to understand. It includes support to look at, and think about your options, so you can choose and control your options. The vision in the consultation paper acknowledged the impact of developing and releasing the right guidance and resources. For example, enabling the people in your life to play a stronger role in helping you to look for and make a home and living solution that suits you, built on your choices and decisions.

'Establishing evidence-based, community-approved processes which enable participants to make decisions about their home and living arrangements is critical to uphold the human rights of people with disability, and to provide the 'choice and control' promised to participants by the NDIS' (Carers Australia, national peak body).

4.3.1 Question 5

We asked: Would it be helpful if your informal supports knew more about how and where you want to live?

Your response:

The majority of what we heard was that it would be helpful if your informal supports knew more about how and where you want to live (51%), with a smaller percentage of you saying it wouldn't (27%) and a similar amount saying you were not sure (20%). Only some of you did not respond (2%).

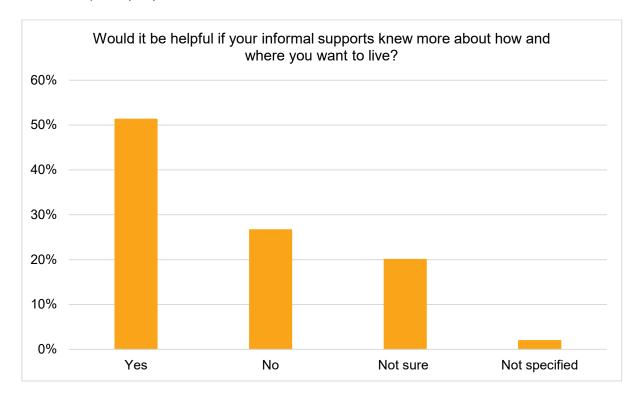


Figure 12. Graph on would it be helpful if your informal supports knew more about how and where you want to live

When we asked you how we could work better with your informal supports to help them know more, you said you need:

- Clear advice given on what information needs to be provided to the NDIA
- A central point of information to avoid confusion
- Face-to-face meetings with informal supports and options to build confidence about home and living options
- More chances to engage through meetings and forums, with clear communication on meeting dates and times.

Examples from submissions:

'Encourage open conversations with them and I when at assessment meetings etc. Booklets for informal supports on how to have the conversation with the individual, dependent on their disability needs and circumstances' (Kay, a participant who does not currently access home and living supports).

'Give me examples of how to start a conversation about it' (a family member, friend or carer of a participant or person with disability⁵).

'Ask providers to check in with us at least annually about how and where we want to live. Include family and significant others in this discussion at the time of the review. Give family/significant others the chance to comment before review via a questionnaire' (Jennifer, a participant currently receiving home and living supports).

4.4 Reforming the funding model and Improving choice and control through flexible budgets

We talked in our consultation paper about an approach to planning and budgets that would be more consistent, fair, and transparent. This included flexibility on how to spend your budget, funding for future supports, and options to fix parts of your budget to increase stability of your plan.

'The limited approach taken by the NDIA to the understanding of disability at the individual level has in turn limited what may and indeed should be funded to enable NDIS participants to access the housing they require' (Rights and Inclusion Australia, national peak body).

4.4.1 Question 6

We asked: If your NDIS funding was more flexible, would you purchase different support/s for your home life than what you have now?

Your response:

The majority of what we heard was that if there was more flexible funding you would purchase different supports (63%), while some of you were not sure (28%), and only a small number of you said you wouldn't (9%).

⁵ First name not provided

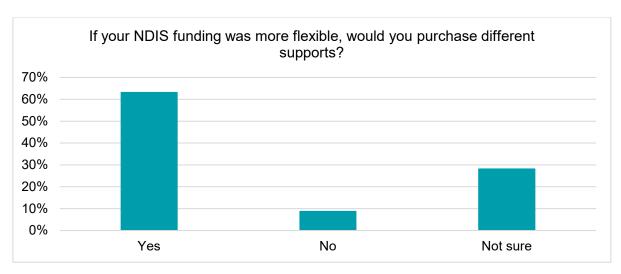


Figure 13. Graph on whether you would purchase different supports if your funding was more flexible

When thinking about your NDIS budget, some of the themes and ideas included:

- Support to develop independence away from family, and options to not have to live with others
- Modifications to car and home, more Assistive Technology, and transport options
- More services from providers, support coordinators, and increased staff training
- More sports and activities with friends
- Greater flexibility in budgets, options to trial supports
- Co-funding or co-delivery of services.

Examples from submissions:

'Trial independent living' (Les, a family member, friend or carer of a participant or person with disability).

'Flexibility between core and capacity building would enable more choice and control particularly around living arrangements in the home. Also, funding for aids and equipment makes it extremely difficult for people to get the things they need' (Cindy, a family member, friend or carer of a participant or person with disability).

'Be able to get things that help me live in a way that helps my disability' (Kym, a family member, friend or carer of a participant or person with disability).

'Different assistive technology, home modifications, alternate housing that allows more privacy with increased safety and support reliability' (Other⁶).

⁶ Name not provided

4.5 Assisting implementation and maintenance

Our vision spoke about a lifecycle approach to discussions about home and living. This included being able to explore options, design a solution, and continue to look at whether it is working for you. We spoke about taking this approach over the life of your plan, and supporting you to set up your solution for more stability.

'We don't hear enough examples of how we can spend our money when it comes to home and living options and supports. This needs to be changed to increase the ability of people living with disability to live an ordinary life' (Disability Elders of All Ages, peak body)

4.5.1 Question 7

We asked: Who helps you to organise your NDIS supports?

Your response:

The top response to who helps you organise your supports was formal supports (40%), which includes supports you have to book and pay for. This response was followed closely by informal supports (38%), which includes the support you get from the people around you such as family, friends and neighbours. Some of you said you self-manage and don't have help to organise your supports (14%), and other (8%).

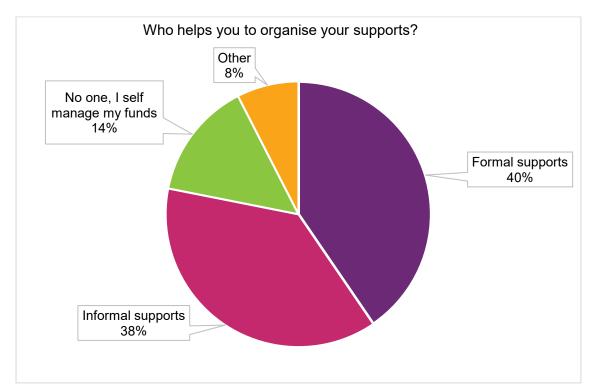


Figure 14. Graph on who helps you organise your supports

Some of the themes and ideas included:

- Using family and support providers to organise your supports
- Importance of having people with specialised knowledge of home and living options as it is very difficult for informal supports to navigate
- Planners are not the most knowledgeable about home and living
- Acknowledging that there also needs to be support to protect against conflicts of interest, either through separation of housing and support, or being subject to additional independent review (for example if limited options due to thin markets)
- Possibility of introducing case management to help organise your supports.

Examples from submissions:

'So far it has mostly been done by myself for myself and daughter who is also a participant. However we have support coordination' (Carole, a participant who does not currently access home and living supports).

'Nobody. I try to do it alone as I can't find a support co-ordinator with enough skill and people are hard work for me' (Sharna, a participant who does not currently access home and living supports).

We asked: How helpful is using formal supports?

Your response:

The majority of what we heard was that you found using formal supports very helpful (55%), or somewhat helpful (33%). Only a small number of responses said formal supports were neither helpful nor unhelpful (5%), not sure (4%) or not at all helpful (3%).

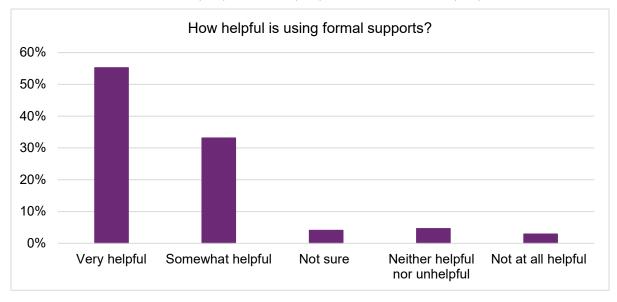


Figure 15. Graph on how helpful you find using formal supports

We asked: How helpful is using informal supports?

Your response:

The majority of what we heard was that you found using informal supports very helpful (63%) or somewhat helpful (29%). Only a small number of responses said informal supports were neither helpful nor unhelpful (5%), not at all helpful (2%) or not sure (1%).

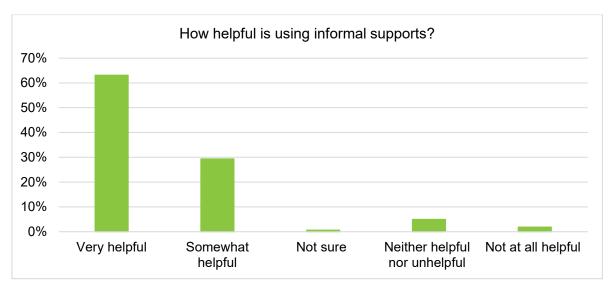


Figure 16. Graph on how helpful you find using informal supports

We asked: How helpful is using other supports?

Your response:

The majority of what we heard was that you found using other supports very helpful (38%) or somewhat helpful (25%). Only a small number of responses said you were not sure (16%), they were neither helpful nor unhelpful (13%) or not at all helpful (9%).

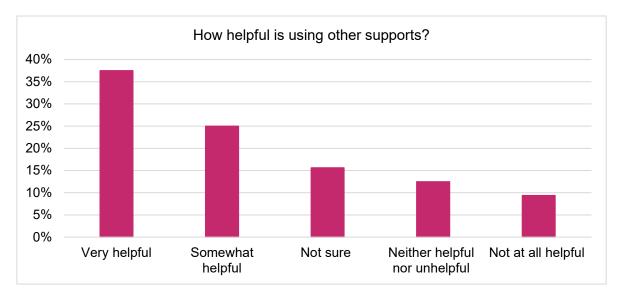


Figure 17. Graph on how helpful you find using other supports

4.5.2 Question 8

We asked: Have you ever used peer support networks or a mentor to find / access NDIS supports?

Your response:

The majority of what we heard was that you had not used peer support networks or a mentor for home and living supports (60%), followed by yes (31%) and not sure (9%).

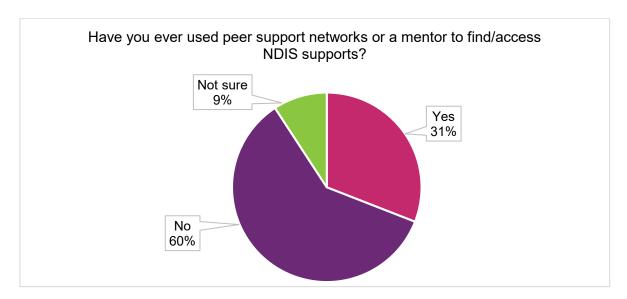


Figure 18. Graph on whether you have ever used peer support networks or a mentor

4.5.3 Question 9

We asked: Who would you be most likely to use to help you implement your plan?⁷

Your response:

The majority of what we heard was that you would like to use family and friends (28%), specialised home and living coordinators (21%), and support coordinators (20%) to help you implement your plan. Other responses were: other (19%) and using NDIA planners / delegates (13%) to help you implement your plan (the lowest response rate).

⁷ We asked you to record the likelihood of using 5 different roles to implement a plan on a scale of 1–5

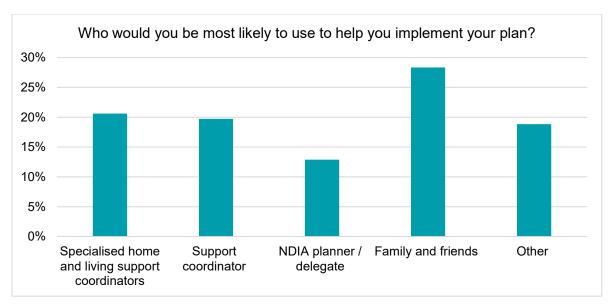


Figure 19. Graph on who would you be most likely to use to help you implement your plan Some of the themes and ideas included:

- Using formal supports such as providers, consultants, advocacy services, plan mangers, support coordinators, activity organisers, and support workers
- Using informal supports such as plan nominees, guardians and family, or a network of like-minded people
- Possibility to fund outcomes and not inputs, and learn from data on what's successful
- More education for providers on what you need and what works for you.

Examples from submissions:

'We, my daughter's family, explore, advocate, initiate, follow up, organise, arrange opportunities and supports for her' (Jane, a family member, friend or carer of a participant or person with disability).

'Mainstream housing support worker is very helpful and not on your list. Specialised [Home and Living Support Coordinator (SC)] sounds good, but would need to be able to work across all your supports. Or with your main SC. My family and friends don't know anything about my housing needs or what's available to me' (Michelle, a participant currently receiving home and living supports).

'Network of like-minded people' (Hilary, a participant who does not currently access home and living support).

'Formal allied health providers who understand me, my values, my needs, my goals, and the options available to help me. Others who have needed to go through adapting their home

and living situations as people with disabilities (or families and supporters of people with disabilities (especially NDIS participants and their families)' (other⁸).

4.6 Engaging the market and driving innovation

Our vision mentioned our role as a market steward. This means part of our role includes monitoring, evaluation, oversight and, where necessary, intervention in the market. We want to support the market to keep offering the services and practices that encourage an ordinary life for you, and also to encourage others to do this as well. We understand that we may need to provide assistance to make this happen.

'The NDIA is responsible for stewarding and developing the NDIS market, including in the NDIS home and living space. However, to date, the NDIA has not intervened in the market to a sufficient extent' (Western Australia Department of Communities, government department).

4.6.1 Question 10

We asked: How would you like to encourage providers to offer new and innovative service options?

Your response:

The majority of what we heard was that participant reviews and ratings (27%), recognition of innovative providers (26%), and NDIS pricing incentives (18%) could be used to encourage providers to offer new and innovative service options. However, there was also a consistent number of responses in free text feedback, these warned against reviews as they are often unregulated and easily manipulated. Other responses included: newsletters (12%), showcases (12%), and other (6%).

⁸ First name not provided

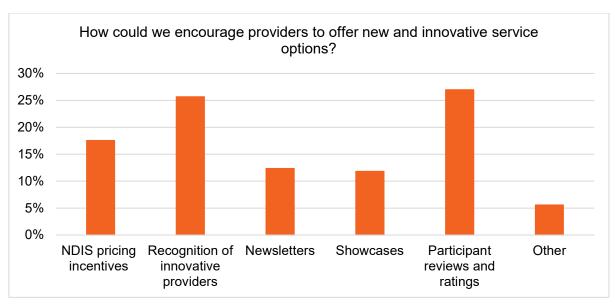


Figure 20. Graph on how we could encourage providers to offer new and innovative service options

Some of the themes and ideas included:

- Disincentives and consequences for providers who deliver outdated models of support
- Lead tenant funding to support providers who are addressing housing needs of clients
- Advocacy for people in group homes
- Support for people with Complex Communication Access and Support Needs
- More conversations and information on home and living, including journey maps
- Ability to act quickly if you are at risk of homelessness
- Consideration of impacts in areas and communities where there are not many available options
- Better articulation of market stewardship role, and better explanation of the range of home and living
- Working with housing providers to get expert industrial advice, to build confidence of providers to offer more services
- Contributing to the long-term growth in housing supply.

Examples from submissions:

'Awards given each year, published in NDIS newsletters, national, state & local newspapers, maybe cash prizes to encourage further innovations' (a family member, friend or carer of a participant or person with disability⁹).

'I would encourage providers to be more proactive in providing information on new service options. The system can be difficult to navigate/understand so it would be helpful if providers supplied me information unprompted rather than having to source the information myself.' (Aaron, a participant currently receiving home and living supports).

'Be held to account for quality of service' (Gerald, a family member, friend or carer of a participant or person with disability).

4.7 Future Home and Living policy

We provided a number of suggested ideas to make changes under the seven features presented in the consultation paper. We asked you to engage with us on whether you would like to include other suggestions, or comment on the ones we presented.

'It is clear through this paper that the Agency has heard the feedback from participants and disability organisations, and it is now taking steps to ensure the concept of 'home' is at the centre of the NDIS journey' (Blind Citizens Australia, national peak body).

4.7.1 Question 11

We asked: Appendix D of the consultation paper listed options for actions we could take to improve home and living in the NDIS. What other ideas would you like to add?

Your response:

Some of the themes and ideas included:

- NDIA engage with the health system, residential aged care and home palliative care support
- Consider all living situations
- Co-residency and encouraging contemporary and innovative housing models
- Support small innovative providers, and give recognition to encourage innovation
- Mandatory training for planners and LACs

⁹ First name not provided

- Audit where funding has been denied, with greater transparency in funding and more flexibility
- Plans that suit the participant not the NDIA
- Providers employing participants to gain insight on how you want houses to be designed (use of overseas examples too)
- Provide enough funding to live safely, and support connection to community and other people with similar interests
- More housing for semi-independent young people
- Diagram of steps for accommodation solutions, more infographics.

Examples from submissions:

'I feel that I am given a plan that suits the NDIS rather than a plan that suits me. For example, I may need assistive technology but I never have enough in my plan for that. I appreciate having some funds in reserve in other areas but I would like to be able to reallocate them to where I need them most' (Tom, a participant currently receiving home and living supports).

'My parents purchased the home that my brother and I now live in so that we could live independently in the community. Otherwise, there was NO other option... which would have been suitable for us. Support in supported residential facilities failed to keep us safe. What would have worked even better is core and cluster type housing, so that we could make friends with our peers' (Patricia, a family member, friend or carer of a participant or person with disability).

'More cooperation between states and NDIS for housing options.' (Marian, a participant currently receiving home and living supports).

'Don't apply pressure to explore the most cost effective option if that isn't suitable' (Judy, family member, friend or carer of a participant or person with disability).

'Please consider the options for people who are not able to advocate for themselves. Many people in group homes can't imagine alternatives; they and their families and advocates need opportunities to explore and discuss and perhaps try options - with personal and (at first at least) intensive support from the NDIS' (Jane, a family member, friend or carer of a participant or person with disability).

4.8 Identification with a particular community

We also asked if you identified with a specific community and if there was anything you wanted to add to your submission in relation to these communities. It is important to understand that some ideas and policy changes may require specific considerations to support these communities.

'The NDIA must understand that for people with a disability at risk of or experiencing homelessness, their housing and safety needs are often always related to their disability needs, as well as being interwoven with their complex social histories and backgrounds' (Hutt Street Centre, homelessness organisation).

4.8.1 Question 12

We asked: Do you identify as:

- Aboriginal or Torres Strait Islander
- LGBTIQA+
- From a culturally and/or linguistically diverse background
- A person with a psychosocial disability.

Your response:

The graph below displays information from 208 responses to the online survey. It shows we mostly heard from people who identified as having a psychosocial disability (46%), from rural or remote regions (26%), and identified as LGBTIQA+ (13%). There were fewer responses from people from culturally and linguistically diverse backgrounds (11%) and identifying as Aboriginal or Torres Strait Islander (4%). In this question, people could select more than one identity, or could choose not to disclose.

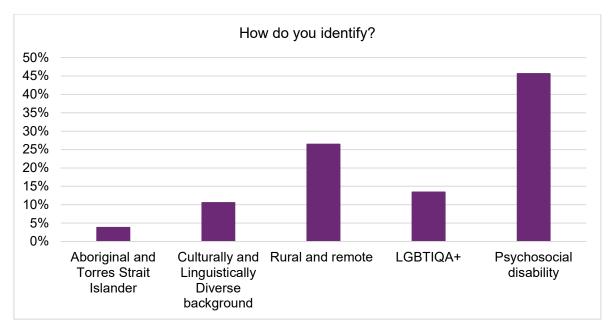


Figure 21. Graph on how you identified with different communities

4.8.2 Question 13

We asked: Is there something you would like to see in a home and living policy specific to the response to Question 12?

Your response:

Aboriginal and Torres Strait Islander

Some of the themes and ideas included:

- Specific education and training for support organisations and workers
- Policy changes to consider cultural safety and appropriateness for people from diverse backgrounds
- Tailored communication to Aboriginal and Torres Strait Islander peoples, including Elders, to understand key terms and talk about housing options.

Example from submissions:

'There needs to be a more holistic look at home and living options for First People with disability that pays particular attention to the housing crisis in our community' (First Peoples Disability Network (Australia), national peak body).

LGBTIQA+

Some of the themes and ideas included:

- Need for designated quiet spaces in homes
- Additional needs to feel safe, with accommodation taking into consideration psychosocial need not just physical
- More affordable housing, safe housing and greater understanding of selfmanagement
- Sharing a house with like-minded people
- Support for peer networks
- Ensuring staff are appropriately trained and can understand your needs and be respectful.

Example from submissions:

'Same sex live in partners should be treated the same as heterosexual married couple / de facto couple. Consideration of loving partnerships should be taken on board in all living circumstances e.g. group home and nursing homes as well as individual residences' (Jennifer, a participant currently receiving home and living supports).

Culturally and Linguistically Diverse

Some of the themes and ideas included:

- Training and education on awareness of different cultures
- Respect location and type of living required and not being forced into a group home
- Individual tailored plans to maintain connections.

Example from submissions:

'If people are supported 1:1 and treated as unique individuals these consideration should already be met' (Teresa, a disability support worker, health or allied health worker).

Rural and Remote

Some of the themes and ideas included:

- Support a regionalised workforce
- More safe accommodation and improved transport options
- · Support if you are feeling isolated
- Support to help you stay in your home for as long as you wish even if it is hard to access supports.

Examples from submissions:

'More housing options for people with a disability. Rentals are very hard to find. Low cost social housing is important for participants to feel safe' (Elizabeth, disability service provider).

'An increase to travel allowance budget for those of us living more than 15 km from the nearest town and working so that my earnings are not spent on travel!!' (Tracey, a family member, friend or carer of a participant or person with disability).

Psychosocial

Some of the themes and ideas included:

- Training for disability support workers on dementia
- More flexibility
- Options to live with people of your choosing
- Tailored support for agoraphobia
- Greater collaboration between your supports. For example, conversations with mentors, counsellors and between support workers and your support coordinator
- More focus on lifetime costs for example, understanding psychosocial needs
- Consistent points of contact in the NDIA and the ability to speak with someone who is the decision maker
- Recognition of multiple disabilities
- Home visits, face to face meetings, and mental health support at home.

Examples from submissions:

'Provision for participant's area of the family home to be modified to be robust, to avoid having to move into specialist disability accommodation' (Irene, a family member, friend or carer of a participant or person with disability).

'I would like to have more choices. Although I'm not ready yet to move out of home, I want to feel safe and secure about the transition. I don't want to feel isolated and anxious. I'm going to need time and a lot of help to help me feel comfortable about having conversations about moving out of home with my friends' (Jenny, a family member, friend or carer of a participant or person with disability).

4.8.3 Question 14

We asked: Is there anything else you would like to add?

Your response:

Some of the themes and ideas included:

- More assistance if you are on a disability or age pension
- Simplifying the participant pathway and looking at incentives to increase provider service options
- Flexibility in changes to day-to-day life, and regarding complex needs
- Training for support workers from specialists on mental health, and upskill support workers, planners and support coordinators, including on the complexities of hidden disabilities
- Options to share some supports but not share the house, and not feeling pressured to live with other people you don't know
- Addressing issues of isolation, especially for people living in rural and remote areas, or not able to engage with the community
- Introducing specialised home and living coordinators, to provide advice and who have experience in navigating home and living
- Acknowledgement that the Supported Independent Living (SIL) model provides security and that many require a level of care. Noting that SIL can feel like the only option when you cannot navigate the short-term rental market
- More consultation and advice on available housing so you know what is available to you both within the NDIS and outside it.

Examples from submissions:

'Partial funding for home modifications is a lot cheaper than putting my son in a unit or house away from us where he will need 24/7 care' (Natalie, a family member, friend or carer of a participant or person with disability).

'Treat each person as an individual without preconceptions, due to a particular diagnosis or labels. Really listen to what they experience and what they believe will assist them' (a participant who does not currently access home and living supports 10).

'This model is not a 'set and forget' model it is dynamic and needs [ongoing] support from a lifestyle coordinator to liaise with my son, his housemate, family, Support Coordinator, support staff and the agency' (Rachael, a family member, friend or carer of a participant or person with disability).

¹⁰ First name not provided