SPECIALIST DISABILITY ACCOMMODATION ALLIANCE

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Monday 22 February 2021

National Disability Insurance Agency
To be lodged online at; Participant in a NDIS Consultation (ndia.gov.au)

Which paper are you responding to?

☑ Access and eligibility policy for independent assessments

☑ Planning policy for personalised budgets and plan flexibility

To whom it may concern,

Re: SDA Alliance submission as a combined response to both NDIA Consultation Papers - 'Access and eligibility policy for independent assessments' and 'Planning policy for personalised budgets and plan flexibility'

The Specialist Disability Accommodation (SDA) Alliance wishes to thank the NDIA for its interest in continuous improvement in the areas of planning policy for personalised budgets and plan flexibility and access and eligibility policy with independent assessments and the opportunity to make a submission. Participants and the market could benefit significantly by improvements in these areas.

The SDA Alliance has prepared the attached submission following consultation with our Members, Associates and Supporters.

Whilst the NDIA has sought feedback on a number of questions, the SDA Alliance has particularly made a submission relevant to our focus on SDA and supports for participants seeking to explore home and living options. Our submission is targeted advice in relation to these aspects of the Scheme.

The SDA Alliance would welcome further engagement, collaboration and discussion about this submission and opportunities for improvements in independent assessment, planning, provision and use of funded supports in the area of Home and Living.

Yours faithfully,

Melanie Southwell
Chief Executive Officer

Attached: SDA Alliance submission as a combined response to both NDIA Consultation Papers - 'Access and eligibility policy for independent assessments' and 'Planning policy for personalised budgets and plan flexibility'

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SDA Alliance submission as a combined response to both NDIA Consultation Papers:
- ## Access and eligibility policy for independent assessments
- ## Planning policy for personalised budgets and plan flexibility

Introduction

This submission provides a direct response to some of the pre-set questions posed by the NDIA and also some additional areas of feedback relevant to the policy areas under consideration. Our response covers areas most directly related to our areas of expertise (i.e., SDA, broader Home & Living support, YPIRAC etc.).

About us

The SDA Alliance (SDAA) brings together some of the nation's most committed SDA providers, investors and downstream market supports (including specialist SDA Support Coordinators, Allied Health professionals, online platform providers, builders, developers and architects). In doing so, the SDA Alliance provides a unified voice to better support development of a diverse and sustainable SDA market in alignment with the NDIS Act.

Current SDA Alliance Membership (including Members, Associates & Supporters):

- Ability Housing
- Ablelink Pty Ltd
- Access Housing Australia Ltd
- Accesible Homes Australia Ltd
- ARC Health
- Common Equity NSW Ltd
- Community Housing Ltd
- Conscious Investment Management Pty Ltd
- DDA Consulting Pty Ltd
- Guardian Living Pty Ltd
- DPN Casa Capace Holding Pty Ltd
- EG Funds Management
- Greenlight Human Capital
- Housing Choices Australia Ltd
- Hume Community Housing   Association Co Ltd
- Kirby Littley
- Optimal Therapy Pty Ltd
- Purposed Housing Australia Pty Ltd
- SDA Housing Australia Pty Ltd
- SDA Services
- Summer Housing Ltd
- Synergis Fund
- Thomas Daniel Butler

- Ability SDA Pty Ltd
- Access 2 Place Housing
- AccessAccom Pty Ltd
- Adaptive Housing
- Anand Group Homes
- Bank Australia Ltd
- Community Housing Canberra Ltd
- Court Walters
- Design Develop Certify Group Pty Ltd
- Disability Services Consulting Pty Ltd
- Good Housing
- Housing Hub
- Illowra Projects Pty Ltd
- Inspire Impact Pty Ltd
- Inclusive Housing Australia Pty Ltd
- Liveable Home Builders
- MC Two Pty Ltd
- Northcott Innovation Ltd
- Pa-Ra Cooperative Ltd
- Santorini Services Pty Ltd
- Sana Living
- SDACCOM Pty Ltd
- Spinal Cord Injuries Australia
- Synapse Australia Limited
- YoungCare Ltd

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Specific overarching feedback

The following items of feedback are provided in addition to the responses to questions below as they do not neatly fit the questions being asked. Nonetheless, they are considered vitally important feedback for consideration by the NDIA for the policy areas under consideration, specifically at the intersection point with SDA and other H&L supports.

Expertise to conduct Independent Assessments

Although independent assessors will have minimum qualifications and certifications from professional bodies, further expertise than this minimum standard is required to assess the functional impairment (disability-related needs) and individual circumstances (environmental factors) of the majority of Participants who are eventually found to be eligible for SDA.

Although IA may rollout effectively as proposed for the approximately 90% of participants with low complexity (and therefore low budgets), the IA framework as proposed is not fit for purpose for the approximately 10% of participants with high complexity (and therefore high budgets). The SDA eligible participant cohort is characterised by very complex needs and very high cost packages. SDA Alliance members have identified a risk to participants in the proposed approach to IA's in cases where the appointed assessor is not appropriately skilled or qualified to advise on the extent of functional impact of a person's disability. This risk extends to those cases of participants with multiple disabilities and/or other rare or complex individual circumstances (environmental factors), whereby the skills and expertise of multiple expert assessors may be needed to fully articulate the functional impact. The design of the IA process must be re-designed for this cohort in concert with key expert stakeholders to make explicit provision for additional assessments and tailored processes to be available to protect the interests of participants with highly complex needs and situations.

Recommendation: The SDA Alliance recommends that:
- **Rollout of the proposed IA process be delayed for participants with very complex needs or high existing package costs until further development of the IA process to tailor to the needs of this group is completed through engagement with representatives of the group and market stakeholders (e.g. SDA Alliance, ECSN Pathway providers, complex needs specialist AHPs, complex needs specialist SCs, Specialist Behaviour Support Practitioner representatives etc)**

Usage of IAs for testing SDA eligibility

The proposed approach to Independent Assessment is not suitable for SDA eligibility testing. Although with additional re-work and amendments (as per '*Expertise to conduct Independent Assessments'* section above) the proposed independent assessment approach could be expanded to act as an initial screening tool for SDA, through solely assessing whether a participant is likely to have an 'extreme functional impairment and/or very high support needs', this is the extent of the potential usefulness of the proposed IA process for testing SDA eligibility.

If significant improvements were made to the proposed IA and new planning approach (as outlined in other parts of this submission) this could streamline the process of identifying those likely to be SDA eligible in the following manner:

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- The initial IA identifies and flags all those with likely 'extreme functional impairment and/or very high support needs' for the draft budget setting purposes. Noting, however, that an independent assessor under the proposed approach is not equipped themselves to flag whether someone may be eligible for SDA or whether the Planner should consider additional assessments/funding for AHPs and SCs.
- When a Participant's IA results and draft budget are flagged as likely 'extreme functional impairment and/or very high support needs', the Planner is then required to ask specific prompting questions about a participant's H&L situation and ascertain whether the participant has a H&L goal, that may be met effectively by SDA and/or other H&L supports.
- If so, the Planner provides an immediate release of fixed funding for additional supports to the participant (E&D and/or H&L targeted SC – independent, not delivered by a SIL Provider – plus AHP hours for assessments) to support the participant to develop their R&N housing vision and if SDA is suitable to this vision, allow use of these funds to get their SDA eligibility tested via collection of evidence by expert SDA eligibility AHPs and SCs.
- The regular Planner also immediately streams the Participant to be managed by the 'Operations - Housing & Support Branch' specialist H&L Planners from that point forward.
- The AHPs used for the secondary assessment could be independent or selected by the Participant. However, if the AHP is independent:
  o The assessments for SDA must be a secondary assessment, and stand-alone from the standard IA approach
  o The secondary independent assessment framework for gathering evidence to inform SDA eligibility testing, including the tools and expertise must be designed in concert with the SDA Reference Group and/or H&L Advisory Panel
  o It must not just rely on the existing standard AHPs used for standard IAs
  o The pool of secondary SDA eligibility assessors must be a panel of AHPs with proven expertise (experience, skills and qualifications) in working with complex needs participants and SDA eligibility separately contracted by the NDIA (not part of the standard IA contract or standard IA pool of contractors)
  o Secondary independent assessment results must also be provided to the participants E&D practitioner or H&L Targeted SC to allow this professional to gather the additional non-AH evidence required to test participant eligibility for SDA.

The proposed Independent Assessment approach alone must not be used to fully test participant SDA eligibility and develop a draft SDA budget. The IA is not equipped to do this and cannot be repurposed to this task. Independent Assessors are generalists, not specialists. As such utilising the Agency's proposed IA approach for SDA is too high risk to the Scheme and the Participant. Reliance on the Agency proposed IA alone would result in very uneven SDA decision-making that would then provide ongoing cost impost to the Scheme through poor SDA funding decisions, and also potentially poor outcomes for participants that endanger safety, health and independence gains. In contrast, utilising a secondary assessment approach as outlined above would ensure that very high risk, very high cost participants are housed and supported appropriately with the least possible ongoing cost impost to the Scheme, and the greatest chance of participant independence gains.

Recommendation: The SDA Alliance recommends that:
- **The above proposed approach for SDA eligibility evidence collection and internal NDIA streaming be considered by the NDIA, and that the SDA Reference Group and H&L Advisory Panel be further consulted in the development of the approach relating to each stage of eligibility testing for those who may be found eligible for SDA.**

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Capacity to alter Draft Budget

SDA Alliance members wish to flag significant concern with the language used in the Consultation Paper that implies the draft budgets set following the Independent Assessment (IA) and prior to Planning Meeting will not be altered except in "specific circumstances", with very little detail provided around the bounds of those specific circumstances. Given that the IA is not subject to review, this poses a significant risk to participants.

A very common experience of participants and support providers today is the fact that many participants likely eligible for SDA have insufficient support funding properly explore their home and living support options (including testing their eligibility for SDA) and then move-in successfully (i.e. lack of AT funding, insufficient capacity building funding to support transition, insufficient ongoing care funding). This is a significant barrier to accessing and moving into appropriate SDA. For example, there are frequent examples under the existing system whereby participants provide quotes for support coordination and allied health assessments ahead of their Planning Meeting to enable them to test their eligibility for SDA, but receive a plan back with less than the quoted necessary hours and an amount of hours inadequate to source the evidence required. This is particularly stressful to the participants, delays the process, adds cost and ultimately frustrates the journey of participants into SDA for which they should otherwise be eligible.

It appears the proposed new system limits debate and discussion on matters pertaining to the draft budget and could therefore create an even greater barrier for the approximately 6% of participants likely eligible for SDA.

Recommendation: The SDA Alliance recommends that:
- **In the first 18 months post initial roll-out of the IA and personalised budgeting process, the NDIA expressly allow for a fully transparent and unencumbered discussion about the draft budget and ultimately allow for negotiation and agreement on a Reasonable and Necessary budget at the initial planning meeting should the participant/their representative have evidence that the draft budget will not meet their disability-related needs, and require that a formal response be provided by the NDIA to the participant in regard to any budget issues raised.**
- **The NDIA provide further detail outlining the parameters of the specific exceptional circumstances (e.g. what constitutes 'substantial behavioural support needs', an 'extreme high value' plan or 'an emergency', what is the average and maximum time that 'temporary supports' will be funded?)**

Addressing the likely funding vs needs mismatch

SDA Alliance members have significant concerns about the absence of detail explaining how IA's that establish a personalised budget will ensure that 'environmental factors' – including the unique living circumstances and unique support networks of individual participants – will be accounted for in a system that determines support levels based on standardised tests that are designed only to measure disability-related needs, and which are not designed to assess the impact of environmental factors influencing the individuals circumstances. It is impossible to determine what is 'reasonable and necessary' and set a related budget for a participant unless due consideration has been given to such elements, in addition to the disability-related functional capacity testing within the IA.

The Consultation Paper does not articulate any mechanism for these aspects to be formally considered. Even if at a Scheme-level Plan amounts appear to average out, there appears to be significant risk of some

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participants being over-serviced and some participants being under-serviced by such an approach. This is of concern to the SDA Alliance as:

- the risk of under-servicing through this approach is likely for those with most complexity. A significant proportion of SDA eligible participants have high complexity in both their disability-related needs and their individual circumstances (e.g. Robust SDA eligible participants, those leaving residential aged care and long-term hospital settings)
- under-servicing of SDA participants could put their long-term wellbeing, health and independence gains at high risk

In addition, if the independent assessment is based on where the participant currently lives and that is no longer suitable (i.e. hospital, RAC, justice setting, homelessness service, aging parents home) there is no information available currently on how the budget will be set for this and adjusted for the new dwelling setting. For instance:

- Will there always be a new IA completed once they move home?
- In advance of this, how will the participants budget respond to the costs to move (i.e. transitional costs such as reports to test SDA eligibility, finding a home, finding support providers, moving in costs, capacity building and settling in etc.)?

Recommendation: The SDA Alliance recommends that:

- **The NDIA fully and transparently articulate the mechanisms that will be used in IA and draft budget preparation to account for 'environmental factors'**
- **That independent assessments be connected to personalised draft budgets only after formal consideration of a participant's unique individual circumstances and available support network, and that this assessment of 'environmental factors' and it's impact of the draft budget be automatically be provided to participants to ensure greater transparency and trust in the new system is fostered.**

Protecting vulnerable people with disability

SDA Alliance members are concerned the Consultation Paper fails to describe mechanisms to protect vulnerable participants in proposing a system for determining eligibility for the Scheme or in considering some specific components, including SDA.

In describing the standardised IA process and budget setting system, there is no acknowledgement that for some participants there will be an inability to properly advocate for themselves or to properly articulate their needs (or have someone available to do this for them), through no fault of their own.

For example, some participants are unable to access doctors, unable to provide a medical history or do not have access to doctors or other support network who understand the NDIS and how to properly describe the needs of a person with disability. For people with psychosocial disability, low cognitive capacity or severe communication difficulties, for instance, a failure to acknowledge and articulate the value of a housing solution, such as SDA, will inevitably lead to failure of support systems for that person.

Recommendation: The SDA Alliance recommends that:

- **The NDIA establish a protocol to identify and further support vulnerable people with disability (i.e. those with no or limited informal supports and disability or health-related vulnerabilities as described above) who may not be well served by a system of standardised individual assessments.**

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The risk around Operation Guidelines

SDA Alliance members are concerned the Consultation Papers makes reference to Operational Guidelines to support delegate decision making in relation to fixed budgets without any significant details or checks and balances.

The Consultation Paper describes that "Home and living exploration and design support may be specified" in Operational Guidelines. There is no detail about how these guidelines are prepared or monitored for efficacy. Given that delegate decision making will be directly influenced by such guidelines and this will directly impact participant support levels and their capacity to achieve goals, much greater detail is needed before any support to this concept can be provided.

Recommendation: The SDA Alliance recommends that:
- **The NDIA describe a formal and transparent mechanism for the establishment of Operational Guidelines that directly influence delegate decision making or Scheme operation with the capacity to influence the level of funded participant supports.**
- **The NDIA further engage with the SDA Reference Group and H&L Advisory Panel to support effective development of the Operational Guidelines for Independent Assessment, Planning, personalised (flexible and fixed) budgets as these related to H&L supports including but not limited to SDA.**

Standardised Independent Assessments

Although there is a basic mechanism described for exemption from IA, SDA Alliance members are concerned that standardised independent assessments will not work for all participants and that it may be difficult for participants/their representatives to seek and be granted an exemption. The policy needs to articulate a mechanism to properly support participants with very complex needs, behaviours of concern triggered by meeting new people, or severe psychosocial disabilities, for instance, for whom the standard IA process and practitioners are not suitable. Participants in this situation will often need support decisions based on expert advice from multiple assessors with specialist expertise (not simply standard qualified allied health professionals) to properly inform budget and Plan decisions. Some may need an exemption from the standard IA process, while others may need a bespoke enhancement or addition to the standard IA process.

Recommendation: The SDA Alliance recommends that:
- **The NDIA provide further detail surrounding exemption from the standard IA process and make formal provision for additional or alternative assessments to be undertaken by expert professionals outside of the standard IA process and practitioners as necessary to properly articulate a person's disability and the impact of that disability and individual circumstances in order to properly determine the level of supports necessary for those whose situation makes IA unsuitable or insufficient.**

Safety risk to participants

SDA Alliance members wish to make it clear to the NDIA that any failure to properly identify the support needs of participants as a result of a poorly operating IA process will pose a very serious safety risk to certain participants. Inadequate supervision, care, equipment or housing can be life threatening for some

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participants. Appropriate risk mitigation measures are critical to establish in a system-wide change such as this. Above and beyond the basic proposal for check-ins and a QA and monitoring framework, a process must be developed to identify vulnerable and complex needs participants and put in place further resources to ensure the new process is meeting their needs at all points (e.g. an enhanced check-in schedule and funding of minimum amount of ongoing SC funding).

In addition, some SDA Alliance members have raised the potential for participants being exposed to safety and wellbeing risks as a result of misuse of funds by the participant and/or their representative. For instance, it is unclear how the Agency will ensure a participant continues to receive life-enabling supports, should their full release of funds be expended early. This may occur for example, due to deliberate misuse of funds by a family member or due to accidental misuse of funds as a result of lack of financial management capacity or experience on the part of the participant.

Recommendation: The SDA Alliance recommends that:
- **The NDIA urgently provide further details on risk mitigation measures, above and beyond the proposed check-ins, to be put in place as part of the IA roll-out to ensure the ongoing safety and wellbeing of vulnerable and complex needs participants is not compromised as a result of the new approach.**

Full disclosure of independent assessments & budget calculation inputs

SDA Alliance members have identified that full disclosure of all outputs of IA's and budget calculations is not proposed. Providing a summary of the result of the IA in an easy-read format is essential for accessibility. However, providing summaries of IA's alone will likely erode transparency and confidence in the system as the full basis for decision making about funded supports will not be available.

Recommendation: The SDA Alliance recommends that:
- **The NDIA provide both an easy-read summary of the result of the IA, as well as providing the full, formal IA report (incorporating the full, formal results of each individual assessment) and all budget calculations and inputs used to arrive at the draft budget.**

Limited evidence for independent assessments

SDA Alliance members have expressed concern that IA's may not always support good decision making about the funded supports needed by participants with complex needs and high risk. Questionnaire-based assessments used as a tool in isolation cannot deliver a high-quality functional assessment typically delivered by expert Occupational Therapists and other allied health professionals working hands on with participants over a significant period of time.

It is noted in the September 2020 Independent Assessment Evaluation Report following the pilot of the IA tools that: *"Generally, independent assessors found the instruments to be comprehensive and reflected a participant's functional capacity."*

Some SDA Alliance members are concerned that the use here of '*generally*', is an indication that examples in fact arose whereby IA tools were not always comprehensive and not always reflective of a participant's functional capacity. This must be addressed as a priority prior to the implementation of any new system of IA's.

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Recommendation: The SDA Alliance recommends that:
- **The NDIA openly disclose further details of the IA pilots, and put in place systems to address the identified examples of shortcomings in the IA process that came out of the pilot testing of IA tools.**
- **The NDIA undertake a further trial the IA approach specifically with participants with very complex needs, very high cost plans, and high risk factors, and unpack and utilise learning from this trial before rolling out IA's with this cohort.**

Defining a permanent disability & difference between disability and health conditions

The SDA Alliance welcomes work to better define and transparently share information better defining the 'permanency' of a disability and clarifying the difference between disability and chronic, acute or palliative health conditions. This is of particular relevance to the YPIRAC cohort, and as such we recommend that the YPIRAC JATF and SRG be consulted in regards to this continuing work.

Recommendation: The SDA Alliance recommends that:
- **The NDIA utilise the expertise of the YPIRAC Stakeholder Reference Group to support work to better define and share definitions and clarifications regarding disability permanency and the difference between a disability vs health condition.**

Discontinuing Access Lists

The SDA Alliance recognises that the access lists were designed to only be used during transition to full Scheme, and that the formal transition period has now ended in almost all jurisdictions. However, due to unexpected behaviour and delays on the part of some state/territory governments and some disability service providers (particularly SIL Providers), based on anecdotal evidence it is understood that there still may be some individuals on Access List C, who have not formally entered the Scheme or been grandfathered into SDA payments in the property in which they are currently residing and were already residing in pre-Scheme. This is of concern.

Recommendation: The SDA Alliance recommends that:
- **Before ceasing of use of Access List C, the NDIA Specialist Markets Branch Accommodation Team be tasked with identifying any such 'missing participants' and providing this information to specialist Housing Planners in the 'Operations – Housing & Support Branch' to facilitate urgent Scheme access and grandfathered SDA payments for all such identified individuals.**

Location of Independent Assessments

The SDA Alliance is concerned that based on the information provided in the IA consultation paper, some IA's will not be undertaken in the participant's home. The SDA Alliance maintains that at least part of the assessments undertaken as part of the IA must be undertaken in the participant's home. If not, it is likely that the IA results will not reflect the participants disability-related needs or individual circumstances within their current living environment, therefore leading to under- or over-servicing of the participant's needs in their living environment. As currently, the majority of participants spend a disproportionate amount of time within their home (i.e. most spend more time at home than in any other environment) this is the most appropriate environment for IA's to take place.

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Further, some SDA Alliance members have raised concern about the availability of a choice of appropriate assessors in some locations (i.e. remote/rural, ATSI communities), and the need for further mechanisms to ensure assessors are available (i.e. travel allowance, videoconference assessments, contracting of ATSI AHPs etc.).

Recommendation: The SDA Alliance recommends that:
- **As standard, IA's are undertaken within the participants current home, unless the participant/their representative identify this is not possible**
- **Measures are out in place by the Agency to ensure choice of suitable IA in all locations/communities**

Diverse communities

The SDA Alliance notes that very little information is provided in either consultation paper on how the new approaches has or will be tailored to meet the needs of CALD and ATSI communities. The SDA Alliance would encourage the NDIA to undertake further work with representatives of such communities to ensure that the new approaches are able to be tailored to the needs of participants from diverse cultural/linguistic and Aboriginal and Torres Strait Islander backgrounds before progressing.

Recommendation: The SDA Alliance recommends that:
- **The NDIA consult representative experts (such as Synapse IAC Rep, FPDN, NEDA) to understand how to tailor the new approaches to the needs of CALD and ATSI participants before progressing**

Note on consultation approach

The SDA Alliance thanks the NDIA for this opportunity to be part of this important consultation, whilst noting that the allied health industry and representative peak bodies for people with disability have expressed great concern with the consultation approach. The SDA Alliance suggests that in future the NDIA provide greater transparency of intentions (i.e. breadcrumbing/sign-posting) and consultation opportunities earlier in the process of policy design (i.e. co-design), so as to develop shared ownership and trust in the end policy outputs enabling more successful implementation.

Direct responses to questions posed in the Consultation Papers

Planning policy for personalised budgets and plan flexibility:

1. *How should a participant's plan be set out so it's easier to understand? How can we make it easy for participants to understand how their funding can be spent?*

The broad dissection of funded supports into Flexible (including Core and Capacity Building) and Fixed (including High-Cost Capital supports such as SDA, High-Cost Home Mods and High-Cost AT) is considered reasonable. However, the NDIA should consider important minimum requirements or changes suggested below:

SDA Funding Approval

Under Capital, the wording included in a participant's plan where SDA funding has been approved should

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not sit under the system 'tile'/sub-heading of "Home Modifications" (see recent real participant plan example below dated 14/12/20). There should be a system 'tile'/sub-heading separately entitled "Specialist Disability Accommodation".

Home Modifications	Quote required
Specialist Disability Accommodation (SDA) up to $89,132.25 per year (Quote Required). I am eligible for SDA as follows: the design category is High Physical Support, building type is Apartment -1 bedroom 1 resident, location is Adelaide South. I can access alternative SDA categories and locations within my assessed amount. **My Quote Required Stated Supports will be:** - NDIA-managed Specialist Disability Accommodation (SDA)	

SDA Alliance Members and Participants have previously reported that SDA approvals are not consistently being formally included in updated plans so that evidence can be provided to prospective SDA providers about eligibility and funding level. Frequently, informal email exchanges or phone calls between NDIA Planners and participants and/or their supports has been the only evidence of SDA funding approval available to the SDA Provider. The conflation of Home Modification and SDA in participant's plans also leads to misunderstanding on the part of Planners, Providers and Participants regarding the Participants eligibility (i.e. for Home Modification or SDA) and the process required to be followed (i.e. quote required for Home Modifications or simply Service Booking for SDA), thereby delaying vital progress towards safe and sustainable housing outcomes.

Support Coordination (SC)

SC is frequently used by participants for a range of different activities. One of the complications and confusions often faced by participants (and also providers) is that SC funding can be intended to support several different goals or activities, but this is not clear in plans. Itemising specific components of this SC funding allocation in a Plan where specific Home & Living (H&L) outcomes are required (for instance, testing of SDA eligibility) could possibly assist participants and providers ensure each area of effort does not consume more than its allocated share of support funding at the expense of another area of important effort. When this does occur, the participant is then limited in their capacity to make progress in that area.

Dissection of important targeted SC funding into component parts and dedicated to independent SC's in such circumstances may foster better budget management practices and result in better value for money for the NDIA. It would promote greater transparency between funding, outcomes and effort for specific component parts of the SC funding line. Greater dissection in such circumstances would also help participants and their supports to manage multi-service providers who are tempted to 'over-service' when they see a larger funding allocation.

In particular, this is important for SC related to H&L. In order to improve outcomes and reduce lifetime costs, SC funding specifically intended to support an expressed Home and Living goal should be specifically itemised as a component part of any SC funding allocation and treated as a 'fixed' funding element to be expressly used for that purpose and only able to be drawn down by an independent SC provider (i.e. SC not employed by the participants SIL or SDA Provider).

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Targeted H&L Support Coordination (SC) and/or Exploration & Design (E&D) funding

The Scheme is experiencing significant potential future cost over-runs relating to SIL. In addition, YPIRAC data and information provided by advocacy organisations (including PWDA) has demonstrated to the SDAA that many participants in 'closed settings' such as residential aged care and 'SIL Homes' (properties where the SIL Provider is also the property/tenancy manager) suggests that these settings are providing poor outcomes for Participants, characterised by lack of choice and control, poor property quality, sub-standard tenancy rights and increased opportunity for abuse and neglect. In order to improve outcomes for these participants while decreasing long-term SIL costs to the Scheme, it is essential that all Participants in 'closed settings' be identified by the NDIA, targeted with informational resources about the range of H&L options available, and if a H&L goal is then identified by the participant, be actively supported through an additional allocation of funding for ILO Exploration & Design Funding and/or Targeted H&L Support Coordination to develop and implement their R&N housing vision. Such a process will cost the Scheme slightly more upfront, but very significantly reduce lifetime costs associated with SIL, as participants explore and implement other less costly and more independence building H&L options (including but not limited to SDA). Such a process, supported through independent providers of E&D and/or targeted H&L SC (i.e. SC not employed by the participants SIL or SDA Provider) will well support participants to understand how their funding can be spent.

Recommendation: The SDA Alliance recommends that the Agency move towards the proposed 'flexible' and 'fixed' funding buckets, but in doing so, ensure that
- **An additional 'tile' is urgently added to the NDIA system to enable the capturing of SDA, separately from 'Home Modifications' in Plans.**
- **SC funding specifically intended to support an expressed Home and Living goal be specifically itemised as a component part of any SC funding allocation and treated as a 'fixed' funding element to be expressly used for that purpose by an independent SC.**
- **all Participants in 'closed settings' be identified by the NDIA, targeted with informational resources about the range of H&L options available, and, if a H&L goal is then identified by the participant, be actively supported through an additional allocation of funding for independent ILO Exploration & Design Funding and/or Targeted H&L Support Coordination to develop and implement their R&N H&L vision.**

2. *How can we support participants to prepare for a planning meeting? What might be needed to support participant decision-making?*

One of the challenges faced by participants in preparing for a planning meeting is understanding exactly what options are available that they should be asking for and having the capacity and/or expertise to articulate and substantiate that need. Participants without access to a skilled and knowledgeable support network are typically at a distinct disadvantage in this process as they are unable to properly advocate for the right supports to meet their needs. This disadvantage is more pronounced for participants with highly complex needs and/or psychosocial disability.

When it comes to SDA, this disadvantage is particularly pronounced and the consequences significant. Knowledge about SDA-eligibility and the process to access it by participants, family members, support coordinators, local area coordinators, NDIA planners and other NDIA staff remains very low. There are a great many instances still of participants who ought to be better supported in considering, pursuing and ultimately securing SDA, but whom due to lack of knowledge of options are instead are languishing in

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closed-settings that represent a very high cost to the Scheme and/or other parts of Government. This is borne out through the Agency's own figures in the most recent Quarterly Report showing:

- significant cost overruns on SIL allocations in Plans (much of which is provided to 'closed settings providers') vs
- only $198M (out of a projected $700M) allocated in Plans for SDA

There are also systemic conflicts of interest where SC's are also employed by SIL Providers and are not alerting existing residents to alternative (and better) housing options, such as SDA where a Participant may be eligible for this, and where the location and accessibility of an SDA dwelling (vs a 'SIL Home') may significantly reduce lifetime care costs for the Scheme through improving Participant independence. This needs to be proactively addressed by the NDIA.

There are ways the NDIA can better support participants preparing for a planning meeting when they have a housing need and/or goal.

Recommendation: The SDA Alliance recommends that:
- **Timely and accessible information about Home and Living options and processes be made available to all participants ahead of their planning meeting as this is currently not 'on the radar' for many at the present time. Urgently, this should be provided for all participants in 'closed-settings' (i.e. SIL Homes, residential aged care, hospitals, justice settings and other institutions).**
- **Timely and accessible information about the scale of funding typically acceptable in new plans containing specific goals be made available to all participants ahead of their planning meeting to inform their requests. For example, participants with a housing goal where SDA may be a possible solution, the NDIA should indicate it will typically support a fixed budget allocation of 75 hours for independent SC and 30 hours for independent allied health reports as standard to properly explore this option, including all aspects of SDA eligibility testing - a secondary allied health assessment (above and beyond the initial Independent Assessment) and SC support to cover other requirements such as participant exploration of options and participant statement of need.**

3. *Which supports should always be in the fixed budget? What principles should apply in determining when supports should be included in the fixed budget?*

NDIA determined 'fixing' of budget elements in a participant's plan is essential and/or useful in certain limited circumstances. The principle to be applied is that funding should only be fixed by the NDIA in cases where there is strong value in setting aside and protecting funds to ensure the achievement of a particular goal, particularly where this will build participant independence (and therefore reduce lifetime costs) and/or where a fixed budget is absolutely necessary to ensure that a particular market does not entirely collapse (e.g. SDA). In contrast, there should be a clear principle allowing participants to choose to 'fix' any additional budget areas of their choosing, implemented effectively through the Planning process and support of the Planner and/or SC to ensure Participants make well informed choices in this regard.

Fixed SDA funding

The SDA Alliance strongly supports a continuation of current practices that 'fix' the funding floor allocation for SDA. Should SDA funding be made 'flexible' in a way that enables participants to spend some of their SDA funding on other supports, this would quickly decimate the SDA market. Such a move would remove

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all confidence in NDIS SDA funding flows, resulting in investment capital completely withdrawing from the SDA market, resulting in many of the most vulnerable and complex needs participants in Australia being faced with homelessness. This is not an option.

Mechanism increasing fixed SDA funding (one-way funding fungibility)

In the interests of promoting innovation and efficiency of the NDIS, the SDA Alliance believes there is scope for a greater role to be played by SDA housing to increase participant independence amongst the cohort with housing need and extreme functional impairment and/or very high support needs. To facilitate that and in clear alignment to the proposed principles, the NDIA should consider a mechanism to allow increases to certain fixed budget allocations, particularly for SDA.

Well designed and located SDA facilitates the achievement of participant independence (both within and outside the home) and can also do this in a way that reduces other support costs over the participant's lifetime. In cases where enhanced SDA housing funds can be demonstrated to more than reduce other recurrent costs such as Core & Capacity Building Support costs, a transfer of funds to increase the fixed SDA funding allocation should be permitted and encouraged.

For example, higher SDA funding allocation enables access to different housing options for a participant. In cases where this can be demonstrated to increase access to informal supports, reduce SIL costs, reduce transport costs, reduce community access support costs and result in a more than offsetting reducing in overall support costs, this will enhance the economic efficiency of the NDIS.

If SDA funding was 'fixed' so as to ensure that the amount determined by the NDIA through SDA eligibility and funding testing as Reasonable and Necessary provided a minimum SDA payment (i.e. a funding floor) and this amount was able to be increased through one-way funding fungibility that enabled a Participant to choose to use some of their 'Flexible' budget to increase their SDA budget, this would be a most welcome initiative as it could support participants in a number of ways. For example to:
- Choose to move close to the beach (a more costly SDA location requiring higher SDA payment) to support their community participation through volunteering at the Surf Life Saving Club instead of using their 'flexible' budget allocation on an expensive day program.
- Choose to top up their '2 resident, 2 bedroom' SDA funding to '1 resident, 1 or 2 bedroom' SDA funding level to allow for an ILO option (home-share/co-residency) instead of using their 'flexible' funding on 24/7 high-cost SIL services.
- Choose to top up their '2 resident, 2 bedroom' SDA funding to '1 resident, 1 or 2 bedroom' SDA funding level to allow for a loved-one (spouse, family member, friend) to move into their SDA dwelling with them therefore reducing their SIL ratio down to 1-1 and reducing use of a concierge through use of the loved one for 2 person lift requirements and middle of the night emergencies, instead of using their 'flexible' funding on high cost SIL ratios and to cover the cost of overnight unplanned supports/concierge funding.

Fixed Support Coordination Funding (H&L Component Only)

SDA Alliance Members report frequent examples whereby participants are unable to pursue housing goals and implement housing solutions because SC funding allocations have been exhausted by SC's providing proportionally too much support for lower value goals or activities.

Where funding allocations for SC are specifically intended to support a participant in the pursuit of a H&L goal, funds for this component should be fixed by the NDIA, reserved for that purpose, and a requirement set that an independent ILO E&D practitioner or independent SC be procured for delivery of this support

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(i.e. the SC is not employed by a SIL Provider).

Recommendation: The SDA Alliance recommends that:
- **SDA funding be retained as an NDIA determined 'fixed' budget allocation, and**
- **The NDIA provide a mechanism to allow a fixed budget allocation for SDA to be increased (but not decreased) through participant choice to draw down on their 'flexible' budget to increase their 'fixed' SDA budget amount, where it can be demonstrated that other support costs can be more than offset and/or independence outcomes are reasonably expected to be significantly improved over the participant's lifetime as a result.**
- **The component of ILO E&D or SC funding allocation intended to support a H&L goal be set as a fixed budget component, set aside expressly for that purpose, and this support be required to be delivered by an independent practitioner (i.e. not someone employed by a SIL Provider).**

4. *How can we assure participants that their plan budgets are at the right level? (e.g., panels of the Independent Advisory Council that meet every six-months to review learnings and suggest improvements)*

Firstly, in order to assure participants that their Plan budgets are at the right level, there must be far greater transparency provided by the Agency demonstrating that Plan budgets are actually at the right level. This transparency and ground-truthing will enable the market (participants and providers) to feel assured.

The SDA Alliance believes that high quality and relevant information available to participants and their supports about plan budgets (including for fixed budgets, such as SDA) and the inputs used to develop these are the best way for participants to assess the appropriateness of their budgets. Such information could also be used by NDIA decision makers in setting future plan budgets appropriately.

There is a need for greater statistical analysis of NDIS financial data to identify many more trends, averages and outliers as a way of improving the NDIA's level of understanding and knowledge about system performance. Coupled with this, deep dives into typical and outlier case examples, will uncover better practices as well as practices that should be avoided.

The NDIA is able to multiply the value of such analysis by sharing this learning, better practices and identifying and promoting standards for efficiency and effectiveness. Doing this in a way that information is both timely and accessible, particularly as part of the plan setting process, will build confidence and provide greater transparency to participants.

The outputs of such analysis should be added to the quarterly reports currently published about the performance of the system and also written up in fact sheets or guides designed to assist participants, their supports and NDIA decision makers.

Recommendation: The SDA Alliance recommends that:
- **The NDIA undertake greater statistical analysis and deep dives into financial information and outcomes to identify standards to be used in budget setting and promoting the efficiency and effectiveness of the system.**
- **The NDIA publish a set of guides and fact sheets about appropriate levels of plan budgets, including fixed budgets such as SDA, based on statistical analysis and deep dives into case examples where goals and outcomes have been achieved.**

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- **The NDIA make all outputs of independent assessments and budget setting automatically available to participants, not just a summary. Through providing both a summary (for easy-read purposes) and the actual assessment results, assessment report, and budget setting inputs automatically available to participants, trust in the budget level will be improved through this combined full transparency and summary accessibility of information.**
- **That panels of the Independent Advisory Council that meet every six-months to review learnings and suggest improvements to Plan budgets overall, and that the SDA Reference Group meet every six-months to review learnings and suggest improvements to fixed SDA budgets, which then feeds into the IAC panel reviews of overall budgets.**

5. *What new tools and resources should we provide to support people using their plan and new plan flexibilities?*

The NDIA can support people using their plan and new plan flexibilities by publishing informational guides/ fact sheets and providing funded support to DPO's to support groups of participants to build their understanding to promote the optimal use of plan funds and clearly articulating the rules around plan flexibility.

Given that knowledge and skills in the area of SDA, MTA, STA and ILO is reported by SDA Alliance members as being typically very poor, this area of the NDIS ought to be prioritised with additional tools and resources developed for participants considering SDA, and funding allocated directly in participant's fixed budgets for independent ILO E&D and/or H&L targeted SC (see our responses to questions 1-4 and/or SDAA response to the Support Coordination consultation for more details).

SDA Alliance members also report frequent examples of insufficient SC funding to enable the proper pursuit of housing goals. Priority needs to be given by the NDIA to develop tools and resources specifically to address the way SC funding is managed in relation to housing goals and ways to flexibly use plan funds to address SC funding shortfalls.

Recommendation: The SDA Alliance recommends that:
- **The NDIA publish further informational resources (i.e. guides, fact sheets, videos etc) and fund DPO's to support groups of participants to build their understanding to promote optimal use of plan funds, particularly in relation to H&L options (including but not limited to the range of SDA options)**
- **If all participants with a H&L goal be actively supported through an additional allocation of fixed funding for independent ILO E&D Funding and/or Targeted H&L Support Coordination to develop and implement their R&N H&L vision most effectively through their new plan flexibility.**

6. *What do we need to consider for children aged 7 and above in the new planning process?*

No response.

7. *What ideas do you have for how people can use their plan more innovatively?*

Providing participants with a mechanism to allow the transfer of funds from flexible to fixed budgets provides opportunities for innovation. For example, the ability to transfer funds from care costs to SDA would allow some participants the chance to unlock alternative home and living arrangements not

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previously possible. This might take the form of an additional bedroom within SDA to accommodate family and create capacity for informal supports to provide care and offset formal support costs.

This could easily be accommodated within the existing legislative framework by allowing participants on lower levels of approved SDA support funding to access higher levels of funding when benefits can be demonstrated via overall lower scheme costs and enhanced participant benefits. Please see response to question 3 for more information.

Recommendation: The SDA Alliance recommends that:
- **The NDIA provide a mechanism to allow a fixed budget allocation for SDA to be increased (but not decreased) through participant choice to draw down on their 'flexible' budget to increase their 'fixed' SDA budget amount, where it can be demonstrated that other support costs can be more than offset and/or independence outcomes are reasonably expected to be significantly improved over the participant's lifetime as a result.**
- **The component of ILO E&D or SC funding allocation intended to support a H&L goal be set as a fixed budget component, set aside expressly for that purpose, and this support be required to be delivered by an independent practitioner (i.e. not someone employed by a SIL Provider).**

8. *How best to handle the timing of the release of funds into plans and rollover of unused funds?*

The proposed timed release of funds into plans (i.e. monthly or quarterly) may not be appropriate in relation to supports to achieve housing goals in some circumstances. Achieving housing outcomes, for example via identifying a housing goal, developing a housing vision, testing SDA eligibility, locating & securing an appropriate SDA dwelling identifying and securing other necessary H&L supports (i.e. MTA, STA, ILO, SIL, capacity building supports for transitioning etc) and subsequent transition and SDA move-in will often take longer than a single twelve month period. It typically also requires extensive support at various stages throughout that journey, often up front. Each person's housing journey is unique and will progress at different rates and require different levels of support depending upon what solutions are available in the marketplace. Any attempt by a regular NDIA Planner to time the release of plan funds without reference to a specialist Planner and a E&D practitioner or H&L Targeted SC in relation to the pursuit of housing goals risks impacting the achievement of those goals due to lack of knowledge and experience of this typical journey map.

In addition, delays in availability of H&L supports, particularly SDA and ILO are commonplace, and therefore such funds may need to be rolled over beyond 12 months to ensure availability of sufficient funds when delays result from these thin markets and/or the complexity involved.

The following aspects are vitally important in relation to plan funds and housing:

- sufficient H&L support funds (support coordination/E&D and allied health) must be allocated to support the entire housing journey so as not to delay progression towards a housing goal due to a lack of support funds
- funds need to be accessible quickly when H&L market solutions become available to facilitate a speedy transition and ensure participants do not miss out on suitable opportunities in thin markets (particularly SDA and ILO)
- at 12month point and plan expiry date (plan reviews), unspent support funds relating to the pursuit of housing goals must be expressly considered in continued and new plans (e.g., carried over) to

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allow the housing journey to continue and be topped up or modified further as necessary to reflect the latest independent assessment of support needed to achieve the housing goal.

Recommendation: The SDA Alliance recommends that:
- **The NDIA consult with the SDA Reference Group and H&L Advisory Panel further on the timing of the release of funds into plans and rollover of unused funds when this relates to long timeframes and/or delays in relation to a H&L goal, particularly SDA.**

9. *How should check-ins be undertaken? Under what circumstances is a check-in needed? Who should be involved in a check-in?*

The consultation paper describes a reasonable basis and process for check-ins. No further response.

10. *How often should we check-in with participants in different circumstances?*

Given the complexity and immaturity of the supply market for SDA and generally low knowledge and skill base of supports in this area, participants with a H&L goal, particularly those involving SDA, should have a check-in every 6 months. This is important to ensure participants are not left waiting for months or years because this task goes into the 'too hard basket' for the participant or their supports. It is imperative that participants are adequately supported in the pursuit of their H&L goal and alternative support arrangement considered if progress is not being made.

In addition, many participants with complex needs have significant vulnerabilities to abuse and neglect. As demonstrated by the findings from the review into the death of Anne-Marie Smith in 2020, it is essential that vulnerable participants are identified and provided with more regular check-ups, including in person check-ups by NDIA personnel.

Recommendation: The SDA Alliance recommends that:
- **All participants with a H&L goal, particularly those involving SDA or other high cost supports, should be provided with a check-in every 6 months.**
- **Vulnerable participants be identified and scheduled for more regular and in person check-ins. Please see our response to the Review into the Death of Anne Marie Smith for more details;**

11. *How can the NDIS ensure positive relationships between participants and planners?*

All participants with complex support needs or very high cost plans should be supported by the more experienced and skilled Planners in the Complex Support Needs Branch. Due to the complexity of need of this cohort, the additional skill and experience of CSN Planners is essential to ensure positive relationships between these participants and their Planners.

All participants with a H&L goal should be referred immediately through to a Planner within the 'Operations – Housing & Support Branch' so as to ensure they are supported to realise their housing goal through engagement with an NDIA Planner specialising in H&L supports. LAC Planners and regular NDIA Planners are not equipped to support this specialist area, and therefore often currently do not well support participants with a H&L goal, leading to poor relationships between such participants and planners.

Additionally, as highlighted above, increased NDIA transparency of information informing decision-making would also breed trust which will in turn help to ensure positive relationships between participants and

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planners. See response to question 4 above for more information.

Recommendation: The SDA Alliance recommends that:
- **The NDIA stream all participants with complex needs or very high cost plans to the CSN Pathway.**
- **The NDIA ensure that as soon as a H&L goal is identified that the Participant is immediately referred to the Operations – Housing & Support Branch to be supported by a Planner specialising in H&L supports.**
- **The NDIA undertake greater statistical analysis and deep dives into financial information and outcomes to identify standards to be used in budget setting and promoting the efficiency and effectiveness of the system.**
- **The NDIA publish a set of guides and fact sheets about appropriate levels of plan budgets, including fixed budgets such as SDA, based on statistical analysis and deep dives into case examples where goals and outcomes have been achieved.**
- **The NDIA make all outputs of independent assessments and budget setting automatically available to participants, not just a summary. Through providing both a summary (for easy-read purposes) and the actual assessment results, assessment report, and budget setting inputs automatically available to participants, trust in the budget level will be improved through this combined full transparency and summary accessibility of information.**
- **That panels of the Independent Advisory Council that meet every six-months to review learnings and suggest improvements to Plan budgets overall, and that the SDA Reference Group meet every six-months to review learnings and suggest improvements to fixed SDA budgets, which then feeds into the IAC panel reviews of overall budgets.**

12. How can we best support participants to transition to this new planning model?

Given that Independent Assessments will deliver 'standardised' draft budgets to participants, it is critical that the NDIA provide advice and guidance to those participants on how to address shortfalls in funded supports that will inevitably arise when participants present with circumstances that are not standard and are particularly unique. This will arise in cases where participants have highly complex needs, very unique individual circumstances, live in unique environments and have different levels of informal supports, and will therefore be more likely amongst those with very complex needs, such as some of the cohort likely to be found eligible for SDA.

Recommendation: The SDA Alliance recommends that:
- **The NDIA provide funding to DPO's and other specialist stakeholders (such as the SDA Alliance) to develop resources to support participants to prepare early for their transition to this new planning model, particularly those with very unique/bespoke needs and situations and those with very complex needs who will use high cost supports (such as SDA) and potentially require bespoke solutions.**

End of submission