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BUILDING THE NDIS IN REGIONAL AUSTRALIA

A REVIEW OF KEY POLICY APPROACHES

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THE NDIS IN AUSTRALIA'S REGIONS

The National Disability Insurance Scheme (NDIS) represents Australia's most comprehensive change to the disability services sector. The scheme completely transforms disability services from a system facilitated by block funds allocated to service providers to a market-based system with personalised levels of funding moving from the Commonwealth government directly to the client.

The architects of the NDIS argue that the scheme has the potential to replace a fragmented set of one-size-fits all services with an empowering model of user choice and controlⁱ. In allocating budgets to participants to spend on services they deem appropriate for their needs, the system aims to stimulate and create a disabilities services market place. The idea behind this approach is that increased social and economic participation will lead to positive health outcomes and economic growth for communities.

However, the NDIS poses a unique set of challenges for those living in regional and remote Australia. Geographical remoteness may inhibit the intended goals of consumer choice and business growth. In places that are rural or remote service offerings may be scarce, particularly for people with complex and long-term needs. This pushes up prices as providers struggle to build viable businesses in areas with fewer and more disperse clients. These environments – where there is a gap between the needs of the participants and the services that are available – are known as thin markets. Many places in regional Australia are at the forefront of these service delivery gaps.

The challenges associated with thin markets and the roll out of the NDIS have been recognised by key national-level bodies prompting a number of major reviews to date. The Joint Standing Committee on the NDIS released their report into an inquiry on market readiness under the NDIS in late 2018ⁱⁱ. In 2019, the Committee continue an ongoing inquiry into the implementation and performance of the NDIS. The Committee have identified specific challenges faced by regional Australia as the scheme is rolled-out. Recommendations from these inquiries have included market intervention in various forms including alternatives to a fee-for service delivery model, grants and seed funding.

The National Disability Insurance Agency (NDIA) commissioned an Independent Pricing Review in 2018ⁱⁱⁱ which aimed to address the challenge of striking the right balance between facilitating business profitability and growth, while ensuring affordability and access in regional areas. The review recommended implementing a range of measures to shift pricing structures in regional areas including allowing providers to charge a fee to travel for up to 45 minutes to provide services in rural areas and allowing providers to quote on the delivery of services in isolated regions. The NDIA has accepted all recommendations made in the report and established a process to continue to monitor and adjust pricing and related market settings.

The Productivity Commission's 2017 NDIS Costs Study Report^{iv} recognised that the scale and geographical spread of thin markets may require some degree of government intervention. The report recommended the reintroduction of block funding in some rural areas and recommended facilitating a collaborative approach to skills development and shared workforces in regional Australia to overcome service gaps.

The Department of Social Services (DSS) and the NDIA have commissioned an NDIS Thin Markets Project^{iv} to develop strategies to address the supply gaps in regional Australia. A national-level consultative process concluded in July 2019 with service providers, participants and peak bodies invited to provide suggested solutions to meeting the challenges of the roll-out while maintaining the objectives of the NDIS.

These recent reviews indicate that the significant challenges of rolling out the NDIS in regional Australia have been recognised by all levels of government as well as those who work within and depend on the disability sector. Across regional Australia, governments, communities and service providers have been responding to these challenges. This RAI paper pulls together the main responses – or policy tools - that have been implemented or considered as the NDIS rolls out across the country.

The RAI has identified six policy tools either take a market-based or community-based approach to addressing these challenges. In other words, the policy debate centres on the degree to which the market should be managed from the ‘centre’ via pricing, funding and regulatory mechanisms and the degree to which place-based and flexible community approaches are a more suitable location for intervention. The suite of policy tools outlined here does not advocate taking one perspective over the other. Holistic approaches to thin markets are taking into account both funding and regulatory mechanisms and localised structural development.

6 POLICY TOOLS



At this early stage, as the true extent of the supply gaps and access issues are still becoming apparent, both market-led and community-led approaches are being considered by different levels of government and communities. The specific approaches taken by the programs outlined here, to a large extent reflect different jurisdictions and government agencies placing a different emphasis on defining “the problem”.

As the NDIS is still in its early stages, many of the initiatives described here have not been evaluated and are still in their trial stages. The examples we present are not a comprehensive list as responses from communities and governments to these challenges are ongoing. Instead, this document provides an overview of the spectrum of types of responses being implemented and, in doing so, highlights the potential spaces for intervention that have been identified in various parts of regional Australia.

The spectrum of responses presented here reflects calls across regional Australia for a new approach to regional policy^{vi}. Regional Australians – whether community, industry, education or local government leaders – are united in their call for the higher levels of government to recognise, validate and support regional priorities and initiatives. The work being done at the local level to respond to the challenges and opportunities of the NDIS is an example of the value of integrating local knowledge and expertise into the policy-making cycle. Our regions want to work *with* governments on addressing these issues and understanding and supporting the approaches taken by our regions will be invaluable to moving forward under the NDIS.

This RAI Guide serves three purposes. First, sharing examples of work being done across regional Australia can act as guidance for regions who are identifying challenges in their own communities. Second, this document brings attention the unique challenges faced by regional Australia as the NDIS rolls out and third, this document seeks to prompt debate about how best to ensure that regional people with disabilities are afforded the same degree of agency and standard of care as those living in our cities.

POLICY TOOL 1: IMPROVING FINANCIAL SETTINGS

In many parts of regional Australia, geographical distance can mean that the cost of supplying services can be high. Under the NDIS this has resulted in regional service providers lifting their fees to accommodate higher overhead costs. In order to provide services under this market-led model, services risk pricing themselves out of the market.

The 2018 Independent Pricing Review^{vii} concluded that in thin markets many providers were not making a profit, and were frequently not able to build sustainable and viable businesses due to the low price caps on services. In June this year, the NDIA announced that rural and regional service providers would receive a doubling in the loadings on price limits. With the cost of services already high, loadings were not effective for service providers in remote and disperse regions. The recommendations of the Independent Pricing Review have been reflected in NDIA Price Guides^{viii} which have increased the cap on travel claims for service providers reaching regional and rural clients.

A number of state and territories have made recommendations around the need to adjust pricing to reflect the cost of doing business in a thin market. For example, the Victorian government's submission to the Joint Standing Committee on the NDIS^{ix} recognised that prices are an important lever to addressing potential gaps in workforce supply and recommended a flexible pricing system that varies with the needs specific to thin markets.

In Western Australia, the peak body for the disability sector, National Disability Services, released the Western Australia Disability Services Sector Development Plan^x which recognised that prices for services in regional areas made it too difficult to start a business and provide services. The plan recommends a tailored regional pricing framework in each regional development area. This tailored approach would take into account unfunded expenses including travel, training costs, infrastructure and administrative services.

For many people in regional Australia, the challenge of high prices for services is being negotiated by electing to self-manage their budgets. Under this administrative option, participants do not need to use a registered NDIS service provider, thus avoiding the costs associated with providers who need to comply with quality assurance procedures. The use of self-managed NDIS programs is increasingly being advocated by some regional stakeholders as a means to use their allocated funds cost-effectively^{xi}. This approach to addressing pricing inequalities in thin markets, requires monitoring and evaluating of the opportunities for communities and participants and risks^{xii}.

Drawing these examples together, it becomes clear that disability service providers in regional Australia face difficulties building a profitable business with higher overheads and sparse clientele. As a result, many people living with disabilities in regional Australia face higher costs for services and less consumer choice under managed plans than those in the cities. These issues have been recognised at the Federal and state levels of government. Responses have included blanket pricing adjustments for those in regional Australia such as the increase of travel caps. Recommendations from state-level consultations have included a flexible approach to price regulation which would facilitate funding support for providers on a place-basis to support business development and viability.

POLICY TOOL 2: TAILORED BLOCK AND HYBRID FUNDING

Prior to the implementation of the NDIS, disability services were funded via competitive block grants to service providers. This could take the form of a contract established on a fee-for-service basis or a time-limited grant or seed funding. Under the NDIS, funding is individualised and provided to the participant directly to encourage participant control and choice and promote the building of a disability services market place.

As the scheme matures many stakeholders - including state and territory governments and service providers - believe that the complete removal of block funding in thin markets is not possible. The Joint Standing Committee on the NDIS recognised that applying an individualised funding model across all sectors of Australian society may not be reasonable. The Committee recommended the Department of Social Services establish a *Disability Sector Transition Assistance Fund* to support providers as they transitioned away from the old funding model. This recommendation has been activated and eligible organisations may apply for funding of up to \$20,000 to purchase tailored supports including business advice, professional services and software upgrades to assist in boosting capacity and capability as service providers^{xiii}.

The Productivity Commission's report on NDIS Costs^{xiv} recommended the continuation of block funding in thin market areas. The report suggests that place-based, flexible responses to thin market issues including the continuation of block funding in places where the market is failing would be the most secure way to meet client needs.

Several state and territory governments have also proposed a place-based reintroduction of block funding in some regional and remote areas. This approach would serve to address delayed market readiness in thin market areas. Regionally-based clients in some cases have received their individualised funding, yet there are no services available in their area to begin to use it. The NSW Legislative Council Report on the Implementation of the NDIS and the Provision of Disability Services in NSW^{xv} recommended that the state government provide block funding for up to five years post-rollout so that transitional arrangements can be maintained. The Victorian^{xvi} and Western Australian governments^{xvii} have also proposed tailored block funding for use in thin markets to ensure a supply of necessary supports and financial incentives to service providers.

Recommendations made by service providers in the Northern Territory reflect an understanding that a Territory-wide individualised funding model is not optimal. The Northern Territory Mental Health Coalition^{xviii} has recommended a comprehensive Provider of Last Resort Policy (POLR) in the Northern Territory. The Victorian government have likewise supported a POLR option whereby the NDIA can intervene in the market by obtaining equipment and services for providers that need them in thin markets^{xix}.

To summarise, the call to continue using block funding or hybrid funding in regional areas has been made by a range of stakeholders including the Productivity Commission, the Joint Standing Committee on the NDIS and state and territory governments. The questions this raises about the duration of resumed block funding and the logistics of implementing a hybrid and flexible transition funding program for regional Australia continue to be debated.

POLICY TOOL 3: BUILDING THE NDIS WORKFORCE

The NDIS is widely reported to be one of the largest job creation opportunities in Australian history with one in five jobs created in Australia over the transition period projected to be in the disability care sector^{xx}. This is a challenge in regional Australia where attracting and retaining allied health professionals and access to training and skills in regions has long been a complex and difficult issue.

The Commonwealth government has implemented grants for service providers in the disability sector transitioning to the NDIS. The Boosting the Local Care Workforce Program^{xxi} and the NDIS Jobs and Market Fund^{xxii}, for example, while not targeted specifically at regional Australia, are targeted at assisting organisations to attract, retain and optimise their workforce and improving awareness of the opportunities in the sector.

A number of initiatives have been implemented across regional Australia to build and sustain this workforce. These have been facilitated by state governments and by local communities, NGOs and service providers. While such initiatives are in their early stages and there is little evaluation data available, these examples demonstrate the work being done at various levels to address complex workforce issues.

The Victorian Department of Health and Human Services (DHHS) has funded a Disability Workforce Innovation Connector (DWIC)^{xxiii} team to be based across four regions in Victoria. The DWICs are responsible for engaging with stakeholders across their region and facilitating connections between the workforce and stakeholders and building capacity and capability, leading workshops, analyzing workforce data and supporting organisations to apply for workforce grants. The Victorian Regional Readiness Fund (VRRF) is a one-off grant program of up to \$130,000 to help communities create innovative and place-based responses to workforce challenges under the NDIS^{xxiv}.

In South Australia, Regional Development Australia York & Mid North has established Disability Workforce Hubs to contribute to building workforce capacity and facilitate local employment. This program includes the establishment of a working group to identify disability sector labour market failures and review initiatives in their region to address these. The model adopted by the group relied on the capacity to identify and recruit underemployed people in the region, who are willing and available to provide support services within their local communities^{xxv}.

Alongside building a ready and available regional disability workforce, many regions are noting that the NDIS workforce is increasingly casualised, with many workers not able to maintain the full-time hours in sparse service markets^{xxvi}. Local initiatives are also being trialed in regional Australia to address the challenge of casualised and underemployed labour in this sector. For example, Community Solutions, a not-for-profit community service provider operates along a shared workforce model. This organization facilitates the connection between communities with service gaps, service providers and disability sector professionals^{xxvii}.

The increased demand for disability sector workforce in regional Australia has placed an emphasis on support occupations that can provide routine elements of care in places that lack a consistent professional presence. Allied Health Assistants, for example, support the delivery of allied health services under the direction of an allied health professional. Allied Health Assistants can facilitate a continuity of service with a stable workforce sector and provide opportunities to develop a local workforce where tertiary education is not a viable option^{xxviii}. Local initiatives in regional Australia are focusing on building this workforce locally. For example, in parts of the Derwent Valley in Tasmania, NDIS participants were needing to travel to Hobart for treatment. Anglicare Tasmania facilitated a hub and spoke therapy model whereby allied health assistants were employed in the regional area to work together with the allied health professional in Hobart to provide comprehensive care^{xxix}.

A number of regional Australian communities are viewing potential for creating local entrepreneurialism in the disability care sector, particularly under the potential for participants to directly employ staff under self-managed plans. Under this arrangement, NDIS participants become single-user service providers and can elect to use their funds to pay people in their community to provide the support that they need. This approach is seen as advantageous in thin markets, where the pool of support workers may be small in number and where the employment of family and friends who are familiar with the participants may be preferred^{xxx}. Some NDIS Local Area Coordinators in regional Australia are working with communities to harness local business growth to connect to participants according to local skills contexts^{xxxi}.

Under the NDIS regional Australia will see an increasing demand for a range of occupations within the disability sector including generalist supporting roles. The exact picture of this projected workforce and the potential gaps in regional Australia are still emerging as the NDIS continues to be rolled out across the country. Challenges of attracting these professionals, skilling a local workforce and building full-time sustainable workloads are being addressed by governments, NGOs and local communities across regional Australia.

POLICY TOOL 4: CONNECTING WITH COMMUNITIES

The implementation of a consumer-led model of disability care places a strong emphasis on ensuring that people living with disabilities are connected with opportunities and services in their regional communities. Service providers, community leaders, and people with disabilities and their families are ideally linked together to build a personalised and localised approach to understanding needs, gaps and opportunities. The importance of connecting people within places and building strong communities for the success of the NDIS has been recognised at the Commonwealth, state and local government levels.

The National Disability Insurance Agency (NDIA)'s Rural and Remote Strategy 2016 – 2019^{xxxii} established regional hubs and Local Area Coordination (LACs) to facilitate access to the NDIS for rural and remote participants. LACs have been appointed to regions as the NDIS rolls out and are tasked with working with local councils, community organisations and rural access workers to better connect people with disability and participants to these services. This 'outreach' model includes regular visits to rural locations from the 'hub' and is intended to support people with disabilities to strengthen their networks and access opportunities.

The NDIA's Information, Linkages and Capacity Building (ILC) program provides grants to organisations to deliver projects in communities that benefit people with disabilities, their carers and families. The ILC is guided by feedback from communities with the idea that there would be a flexible focus on local solutions^{xxxiii}.

The Community Connectors Program has been established by the NDIS to provide participants with the evidence they need to test their plans, their eligibility and to link them with suitable providers. This program has received a funding increase after the most recent Federal election to help families and participants in regional areas and from culturally and linguistically diverse backgrounds navigate the NDIS.

The need for increased programs connecting regional communities with the NDIS through education and capacity building across regional Australian communities has been noted by service providers and people with disabilities in regional Australia. Sharing information about the scheme is essential to raising awareness from all members of regional Australia about the opportunities for building strong communities under the NDIS. Such information programs are being used by the Regional Disability Advocacy Service across rural NSW with regular information sessions and events aimed at bringing the disability and wider communities together^{xxxiv}.

The success of the NDIS in regional Australia depends, to a large extent, on the strength of its communities and establishing local 'buy in'. Connecting people with disabilities with opportunities in their communities requires awareness and capacity building of the wider community and can facilitate the growth of local small business engagement with the program.

POLICY TOOL 5: INNOVATIVE AND COLLABORATIVE SERVICE PROVISION

Many regions in Australia are building initiatives to pool services, share staff, training and resources to offset costs. This approach seeks to resolve thin market challenges by building economies of scope whereby collaboration and bundling of services can assist with the facilitation of private business growth. It contrasts with the underlying drive within market-led service delivery models which instead finds of economies of scale.

This policy tool means bringing together key community stakeholders, people with disabilities and their families, disability service providers, and local leadership to find ways to collaborate, link and bundle together services, funding and facilities to enhance efficiency in thin markets.

For example, the Western Australian government has proposed an initiative that helps providers come together to reduce administrative costs and burdens. Investing in housing and cost of living allowances for those operating in remote areas has also been proposed by the WA government to encourage potential providers to move into thin market communities^{xxxv}.

Shared facilities such as the Multi-Purpose Service model have been used by several regions to deepen disability service markets. The Victorian Health Association has suggested an MPS program that brings together the disability services with wider health services in a community under one locally-led organisation^{xxxvi}. This model pools state and Federal funding under a local organisation and allocates where necessary. This model has been well-utilised in the aged care sector in small rural communities and has been proposed as an approach for building a collaborative approach to building and sustaining the disability sector in thin markets.

There has been a recent rise in interest in mutual and cooperative business models as a response to market failure in regional Australia. Cooperatives and mutuals are owned and controlled by their members – their core stakeholders^{xxxvii}. This model has shown positive outcomes for producing flexible and innovative responses to social service delivery. Members can be consumers, employees, small businesses, communities or a combination of these. This approach has potential to reshape the disability services landscape in Australia and give NDIS participants the potential to partly own the business that employs them^{xxxviii}. The South Australian Government has announced that an employee mutual will operate in the NDIS providing Early Childhood Early Intervention services and other supports to children and youth^{xxxix}.

In summary, deepening the market, or building economies of scope, is a policy tool being utilised across regional Australia in order to maximise the purchasing power and choice of participants in thin markets. This approach can take a variety of forms including pooling facilities, funds or establishing cooperative models of service delivery.

POLICY TOOL 6: IMPROVING TECHNOLOGY AND DATA

Improved access to technology to assist with service provision in thin markets is being implemented in places across regional Australia. This increased use and availability of technological innovations and data tools can improve workforce planning, assist with tele-health and remote care and increase the information and awareness of NDIS participants in the opportunities available to them.

One application of technology is the NDIA's 'Provider Finder' tool that allows NDIS participants to locate providers in their area. This tool is used by LACs and regional coordinating offices to work with participants to search for registered providers ^{xi}.

The Commonwealth Department of Social Services has released the NDIS Workforce Demand Map to provide information to help providers understand the projected need for services in locations in Australia^{xii}. The online interactive map can be used to find out how many NDIS participants are expected to live in a postcode, how much participants are expected to spend and on what kind of support, and how many workers may be required to meet participant needs and preferences.

Such data tools are becoming increasingly important when building regional workforces and can be used by regional communities to facilitate approaches building skills pathways, attracting and retaining professionals and ensuring adequate facility and information provision.

The importance of data collection has been consistently addressed as a core consideration at the State level. An inquiry into the implementation of the NDIS in NSW echoed the State Government's belief that increased sharing of data between NSW Government agencies and the NDIA will help improve service provision^{xiii}. The inquiry notes the efforts of NSW agencies in collecting data that will enable providers to better track the progress of the NDIS as it continues to roll out. The Victorian Government's submission to the Joint Standing Committee on the NDIS shares a similar recommendation, arguing for increased sharing of data between the NDIA, the Commonwealth and service providers^{xiii}.

Local initiatives are being implemented which use innovative data and technology to resolve thin market issues. For example, the deaf community in regional Australia have often limited access to Auslan services including interpreters and speech therapy interventions^{xiv}. Under the Innovative Workforce Fund, Deaf Services Queensland have designed an 'Auslan Hub' to test various methods of improving access to information and services in Auslan across Queensland. The Hub also has the potential to facilitate virtual speech therapy, the loaning of iPads for Video Remote Interpreting (VRI), virtual Auslan Kiosks and training for community members.

Improved technology and data projects can address three main challenges facing regional Australians under the NDIS. First, the ability of local communities and service providers to adequately plan for the services that will be needed in their area in order to establish appropriate training pathways and recruit for the appropriate workforce. Second, technology is being used to improve the awareness of participants about the NDIS and the opportunities available in their area. Third, technological innovations are paving new ground for support and disability care using new ways to bridge distances.

WHAT DOES THIS MEAN FOR REGIONAL AUSTRALIANS?

The NDIS is Australia's largest social reform since the introduction of Medicare. It is internationally unprecedented in the speed and scale of the personalisation and marketization of public services. The shift away from collective social welfare provision in favour of markets and self-directed care raises complex challenges for those living in regional Australia. At the same time, many in our regions are noting the potential opportunities for their communities under the new system.

Our review of the key policy approaches to address these challenges and opportunities demonstrates that both 'top-down' measures such as adjusting pricing and funding models and 'bottom-up', localised measures such as building economies of scope and increased capacity are being currently used and considered by a range of stakeholders. The policy approaches outlined here feeds into discussions about the role of the government in market stewardship and the facilitation of effective place-based initiatives that can ensure that regional Australian communities are empowered to build their own responses to the challenges of access and equity in their own regions.



OPPORTUNITIES

- innovative approaches to care
- entrepreneurialism
- redefining 'choice'
- local approaches to care provision
- flexibility and person-led delivery
- community-building
- community leadership



CHALLENGES

- pricing
- workforce development
- geographical distance
- establishing consumer 'choice'
- community capacity building
- establishing local buy-in
- participants, providers and communities navigating new system and bureaucratic processes

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