



Queensland Advocacy Incorporated

Our mission is to promote, protect and defend, through advocacy, the fundamental needs, rights and lives of the most vulnerable people with disability in Queensland.

Systems and Individual Advocacy for vulnerable People with Disability

SUBMISSION TO

THE JOINT STANDING COMMITTEE

ON THE

NATIONAL DISABILITY INSURANCE SCHEME

NDIS PLANNING

“If you have a dream, you can spend a lifetime studying, planning, and getting ready for it. What you should be doing is getting started.”

Drew Houston

“Men often oppose a thing merely because they have had no agency in planning it, or because it may have been planned by those whom they dislike.”

Alexander Hamilton

“Many people spend more time in planning the wedding than they do in planning the marriage.”

Zig Ziglar

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QAI endorses the objectives, and promotes the principles, of the Convention on the Rights of Persons with Disabilities.

Patron: His Excellency The Honorable Paul de Jersey AC

About QAI

Queensland Advocacy Incorporated (QAI) is a member-driven and non-profit advocacy organisation for people with disability. Our mission is to promote, protect and defend, through advocacy, the fundamental needs, rights and lives of the most vulnerable people with disability in Queensland.

Queensland Advocacy Inc. (QAI) is an association of persons with concern for the needs of people with disabilities with a constitutionally designated committee comprising a majority of people with disability; their wisdom and lived experience of disability is our foundation and guide.

QAI undertakes systems advocacy aimed at changing policies, laws and attitudes in ways that will benefit groups of people with disability rather than individuals alone.

QAI strives to maintain its complete independence as an organisation and to restrict its function solely to advocacy.

QAI has an exemplary track record of effective systems advocacy, with over thirty years' experience advocating for systems change, through campaigns directed to attitudinal, law and policy reform and by supporting the development of a range of advocacy initiatives in this state.

We have provided, for almost a decade, highly in-demand individual advocacy through our individual advocacy services – the Human Rights Legal Service, the Mental Health Legal Service and the Justice Support Program and more recently the National Disability Insurance Scheme Appeals Support Program and Decision Support Pilot Program.

Our Human Rights and Mental Health services offer legal advice and representation on guardianship, administration and mental health matters. Our Justice Support and NDIS Advocacy programs provide non-legal advice and support to people with disability in the criminal justice system and engagement with and access to the NDIS. This individual advocacy informs our campaigns at state and federal levels for changes in attitudes, laws and policies and assists us to understand the challenges, needs and concerns of people with disability.

QAI's constitution holds that every person is unique and valuable and that diversity is intrinsic to community. People with disability comprise the majority of our board and their lived experience of disability is our foundation and guide.

The following submission is based on the values, beliefs and aspirations that Australians with disability can have a good but ordinary life when they have personal power and control and are supported to exercise their autonomy and rights as other Australians

NDIS Planning

As part of the committee's role to inquire into the implementation, performance and governance of the National Disability Insurance Scheme (NDIS), the committee will inquire into and report on NDIS Planning, with particular reference to:

- a. the experience, expertise and qualifications of Planners;
- b. the ability of Planners to understand and address complex needs;
- c. the ongoing training and professional development of Planners;
- d. the overall number of Planners relative to the demand for Plans;
- e. Participant involvement in planning processes and the efficacy of introducing draft Plans;
- f. the incidence, severity and impact of plan gaps;
- g. the reassessment process, including the incidence and impact of funding changes;
- h. the review process and means to streamline it;
- i. the incidence of appeals to the AAT and possible measures to reduce the number;
- j. the circumstances in which Plans could be automatically rolled-over;
- k. the circumstances in which longer Plans could be introduced;
- l. the adequacy of the planning process for rural and regional Participants; and
- m. any other related matters.

QAI Recommends

1. LAC's and Planners must have intensive training to understand the social and other impact of disability and what makes people with disability vulnerable. The NDIA must undertake intensive training for Planners and Plan reviewers to ensure that the Scheme is implemented as it was envisioned and not as a cost savings exercise. This training must also encompass respectful engagement with Participants and plan nominees to overcome the fear and distrust that is being experienced as a result of bullying by Planners
2. The NDIA should hire people with lived experience of disability and or people with experience from the disability advocacy sector.
3. Invest in appropriate Pre-Planning (with independence from direct service provision organisations) so that there are fewer Plan Reviews and Appeals, and to enable LAC's to return to their intended functions of linking and connecting people with generic and specialist services. Foster smaller and consultative community-based services that engage local staff particularly with pre-planning activities.
4. The NDIA must randomly audit Plans developed by NDIA Planners to determine consistency of content and supports.
5. Participants should be asked to submit a self-assessment about what they need in order to attain their goals and should be incorporated into the planning process. Planners must have skills in 'active listening' rather than self-promotion of their own experiences or purported expertise.
6. Planners must focus on inclusive approaches to supports while respecting the wants and wishes of Participants.
7. Informal Supports must not be factored into Planning as a cost-savings exercise.
8. The NDIA should provide funding for translation services for CALD Participants in planning and to engage with support coordination services.
9. Abolish SIL from Plans.
10. Supports that Participants and nominees discuss and agree to at planning meetings must be included in the Plan.
11. Draft Plans should be sent to Participants and Nominees for agreement and or negotiation.

12. Abolish Typical Support Packages (TSPs) to reduce internal reviews, AAT appeals and Participant dissatisfaction.
13. Ensure that there are no service/support gaps and provide early intervention to Participants and Nominees to ensure that supports are not withheld even if funds are expended before end of Plans.
14. Plans must not be reduced unless Participants disclose they no longer require specific funds or support types.
15. The NDIA must cease the manipulation of reviews under Section 100 by either refusing the review request or instead attempting to thwart the process by deception and inserting the review under Section 48.
16. The NDIA must ensure equitable access to all forms including review request forms and not restrict word limitations by the use of PDF or other means.
17. The NDIA must ensure that reviews are free from conflict of interest and breaches of confidentiality by warranting that no staff members involved in the original decisions are involved. Strict penalties for breaches must apply.
18. Whitelist formal advocacy organisations to reduce red tape and better enable Advocates to assist Participants and Applicants.
19. NDIA should provide a readily available means to track progress of reviews for Advocates and Participants.
20. Mandate an enforceable maximum time frame within which the NDIA must respond to reviews.
21. Improved decision-making by the NDIA in the first instance to reduce review and AAT applications.
22. Improved liaison between the internal review team and the Early Response Team (ERT).
23. NDIA staff members provide advice to Participants at critical moments such as denial of review applications, how to best utilise current Plans and gather evidence to improve their next approaches.
24. NDIA staff give greater attention and consideration to the issues impacting Participants, Nominees and supporters in regional and remote areas particularly with issues and costs associated with transport, thin markets and alternatives to traditional service provision.

Introduction

This submission is informed by QAI's experience in delivering non-legal advocacy for people engaging with the NDIS, through its National Disability Insurance Scheme Appeals Support Program and Decision Support Pilot Programs, as well as our systems advocacy, collaboration with our allies in advocacy, and the lived experiences of members and staff.

The experience, expertise and qualifications of Planners

The purpose of the National Disability Insurance Scheme has been subject to various interpretations that have resulted in deviations from the intended and promised "choice and control" for people with disability and their families and supporters.

One of the major contributors to this deviation is not only the planning process but the skills, knowledge and expertise of NDIA Planners. It is not surprising that the experience of Participants and advocates working with them have made commentary or allegations about directives from the NDIA to Planners to take an actuarial approach to planning, given that NDIS Plans are used as cost mechanisms, acquittal tools and performance measurements of Participants.

However, given that this is the implementation directive that is the current approach, it is the one with which stakeholders must engage.

QAI recommends that LAC's and Planners must have intensive training to understand the social and other impact of disability and what makes people with disability vulnerable. The NDIA must undertake intensive training for Planners and Plan reviewers to ensure that the Scheme is implemented as it was envisioned and not as a savings exercise. This training must also encompass respectful engagement with Participants and plan nominees to overcome the fear and distrust that is being experienced as a result of bullying by Planners

Many Planners do not have adequate understanding of the lived experience of people with disability, do not have adequate knowledge of what supports and services are required to meet the needs of individual Participants, or have the skills to conceptualise articulated goals into appropriate 'categories' of funded supports.

Participants have informed QAI advocates of a lack of consistency from Planners and Local Area Coordinators ('LACs'). Some have displayed good levels of knowledge and appropriate engagement around Participants' reasonable and necessary support needs, many have not.

Some interactions between QAI and the NDIA have that there are few Planners with reasonable experience and most have limited expertise. For example, one QAI advocate attended a meeting at the NDIA, where a new Planner was being supervised as she had recently commenced employment. This Planner had previously been employed in the hospitality industry. Six weeks later, this QAI advocate attended another meeting with the same Planner. At this meeting, the Planner was supervising a newly commenced Planner.

QAI recommends Planners are trained in 'active listening' to note what people need and want rather than what the Planner perceives is related to their disability. For example, one QAI client obtained access to the NDIS after an 18 month process including recourse to the Administrative Appeals Tribunal ('AAT'). Subsequently, the Planner made comments questioning whether this person's disability was significant enough and expressing uncertainty about what to fund in that person's first plan.

It is the experience of QAI advocates working with Participants that the focus of Planners relates to the cost of support, rather than the quality of life that support would provide. This appears to be part of a broader trend towards Planners demonstrating a commercial attitude. QAI perceives that KPIs, staffing caps and time pressures impact what Planners do. The preponderance of this attitude of commerciality means that Participants feel like they are being judged on their worth.

Planners must have skills in 'active listening' rather than self-promotion of their own experiences or purported expertise. For example, in regional Queensland QAI's NDIS Appeals advocate was informed of Planners boasting to Participants and their supports of their own background and "expertise". This self-promotion by the Planner was viewed as intimidation by the Participant/s.

Participants report to NDIS Appeals advocates that Planners have suggested or expected them to undertake specialist and segregated supports, services or activities with other people with disability. This expectation or suggestion is clearly based on personal prejudices and lack of understanding or knowledge about the intent and objective of the NDIS.

This coercive pressure by Planners includes using transport as a financial incentive for people to attend group support and Planners suggesting group activities '*with people like you*'. This does not respect the person's freedom of choice and control, and promotes marginalization and institutionalization.

Cassandra¹: Case example of commercial attitude of Planners

Before the NDIS, Cassandra had 10 hours per week of support (funded by DSQ). In the first plan, the client was given 7 hours per week. A Planner tried to suggest that the client engage in group activities. It appears that the Planner suggested this as a cost-saving exercise. At the first plan review / internal review, the client requested 23 hours per week and received 10. After appealing to the AAT, she was successful in obtaining 30 hours per week.

QAI recommends that Participants should be asked to submit a self-assessment about what they need in order to attain their goals and should be incorporated into the planning process. This is clearly a high priority given the dearth of knowledge or understanding in the Planner workforce about the social model of disability and support needs for individuals as mentioned above.

The ability of Planners to understand and address complex needs

Plan items for supports for some Participants with psychosocial disabilities may be unsuitable. For example community access is not always appropriate for someone experiencing severe agoraphobia. The results of this type of planning anomaly results in some people spending little or none of their funding, and the response from the NDIA is to revoke the funding altogether.

As both a provider of NDIS Appeals support and a systems advocacy organisation, QAI is aware that many Participants are being denied home modifications within their Plans, prompting external reviews to the AAT.

Attributing small amounts of funding to Participant Plans for accommodation rather than delivering on the promised and promoted Specialist Disability Accommodation (SDA), is not only deeply disappointing but confounding and instils further distrust in the Scheme and its implementation.

¹ Name changed to protect client confidentiality.

However, there must not be any conflation of providing SDA with provision of direct personal support.²

Participants residing in their parents' homes who want to live independently have received Plans structured around Supported Independent Living ('SIL'). The supports have been priced accordingly. They have little choice but to agree to shared-care arrangements or to continue living in the homes of their aging parents.³

The assessment of informal supports is a major flaw in the implementation of the Scheme. This is most evident for Participants who have Participant children accessing the NDIS. Any family living within 30 minutes of a Participant is often the determining factor that a family is perceived to have informal support. This results in a plan with dramatically reduced funding. There is little consideration that grandparents may not be willing or able to provide that support. If a family has no or very little informal support this is ignored and not addressed within the plan. Informal Supports must not be factored into Planning as a cost-savings exercise. Instead, informal supporters must be considered as enhancing the Participant's life if well-fortified. Where those informal supports are tenuous or struggling, Planners must ensure that the Participant and their supporters are offered other funds to augment or replace that informal support depending on their wants and wishes.

The NDIA should provide funding for translation services for CALD Participants in planning and to engage with support coordination services.

Supports that Participants and nominees discuss and agree to at planning meetings are not always reflected in the Plan. When some Participants have contacted Planners to discuss discrepancies in Plans or areas of disagreement they have been told that this is seeking a review, and have threatened that Plans will be reduced at each successive review. Other Planners have returned Plans to Participants with no changes or only minor ones. Participants have not got the Plans to which they believed they had agreed.

The personal bias, experience and perception of the Planner and their personal prejudices and beliefs seems to prevail over the legislation and expert opinion at times (for example, medical reports).

Bert⁴: Case study: understanding and addressing complex needs

Bert's application for access included more than fifteen medico-legal reports. The decision to deny the client access was made in four hours. It is QAI's opinion that a person would not have been able to read through all the supporting documentation within this timeframe.

QAI has observed the NDIA compartmentalizing Participants' needs according to their diagnoses. This makes it difficult to understand why one person might need certain supports whilst another might need something completely different, or not have that need at all.

There is also mystery surrounding the existence of "expert teams" to whom Planners apparently can or do defer when they are uncertain about some matters. There is a need for transparency about what these teams do, where they are based and what expertise they are deemed to possess.

² QAI Submission to The Joint Standing Committee on the National Disability Insurance Scheme INQUIRY INTO SUPPORTED INDEPENDENT LIVING 2019

³ *ibid*

⁴ Name changed to protect client confidentiality

The ongoing training and professional development of Planners;

QAI submits that there is a need for transparency and accountability regarding the requisite base level training Planners must undertake, along with the additional training provided. Some of the fundamentals of basic person-centred service are not practiced by staff of the NDIA. For example, the lack of return phone calls and emails to Participants or nominees is the cause of high levels of frustration and distrust amongst Participants and family members.

To address the fear and mistrust of the Planning Processes, there must be clear and transparent information about how the NDIA communicates to Planners about changes to Policy and any directives on implementation of policy.

Further to this, it is imperative that clear guidelines are published about how Planners determine what are considered to be reasonable and necessary supports.

QAI is concerned that there is a lack of training of NDIA staff in keeping assumptions in check, confirmation bias, dignity of risk, human rights, and innovative ways in which people with disabilities have their needs addressed through assistive technology.

The overall number of Planners relative to the demand for Plans;

Interactions between QAI Advocates and LACs have indicated that LACs experience high caseloads. LACs with very high caseloads do not have sufficient time to carry out their intended functions of linking and connecting people with generic and specialist services. Also, QAI considers that this lack of capacity by LACs may be one reason why there are so many requests for support coordination.

Participant involvement in planning processes and the efficacy of introducing draft Plans;

QAI considers the planning process should be led by the Participant to ensure their 'choice and control' especially in terms of identifying their current and life needs, the supports required and how they are provided.

QAI is aware that most Participants expect that they will receive a draft plan before it is approved, and are then disappointed when they discover that this is not standard practice. Even the most well prepared Participants who provide good quality information at the time of their Pre-Plan meeting to justify the supports they are seeking, rarely have their expectations met in the Plan or what they believed would be included in the Plan during the pre-Plan meeting. QAI submits that the provision of a draft plan, opportunity for discussion of any discrepancies between expectation and reality and justification provided by the Planner (or LAC), would have an enormous positive impact on the relationship with the Participant, significantly enhance transparency and accountability, and could result in a sharp decline in applications for review of reviewable decisions.

Since the Productivity Commission's report of October 2017⁵, Typical Support Packages ('TSP') have been introduced. This has resulted in less individualization in Plans. The process is that a Participant answers questions and then a computer creates a plan with amounts. Another equally abhorrent trial of "My First Plan" left Participants reeling with shock and dismay – after many years

⁵ Productivity Commission 2017, National Disability Insurance Scheme (NDIS) Costs, Study Report, Canberra

waiting for the NDIS only to receive the same funds and supports available under the state-based system. Prior to the introduction of TSP, the NDIA built Plans from the ground up using spreadsheets. QAI recommends removing TSPs to reduce internal reviews, AAT appeals and Participant dissatisfaction. QAI considers it false economy to consider TSPs a time saver. It would be preferable to create a good plan in the first place.

The incidence, severity and impact of plan gaps;

When Nominees have expended funds before the Plan's expiry date, there is a risk of critical services being withheld and Nominees experiencing a high degree of stress. Many have been erroneously informed by LACs or Planners that they "shouldn't worry because Plans don't expire". This treatment and lack of proactive support from the NDIA is unsatisfactory.

Support and clear information must be provided to those impacted to allay concerns and ensure that supports and services are not withheld. Similar alarm and distress is caused when service providers submit service bookings on the Participant's portal, giving the appearance that funds have been expended. This practice should be discontinued and penalties imposed upon service providers who seek to "squirrel away" Participant's funds.

The reassessment process, including the incidence and impact of funding changes;

QAI recommends that Plans not be reduced unless Participants disclose they no longer require those funds or support types. Some Participants have fully utilised their Plans, and exercised choice and control over their life yet have had their Plan reduced.

Joanne: Case Example - Client impacted by funding changes

Joanne is under 18 and had collated extensive evidence over many years of her disability. Prior to the NDIS, Joanne's family found funding received from Disability Services Queensland and Education Queensland was adequate. In Joanne's first NDIS plan, funding was less than what had previously been received, but was comparable.

Joanne's second NDIS planning meeting was attended by Joanne's parent, her direct support service provider team leader (who had in-depth knowledge of issues affecting Joanne over many years), an NDIS Planner and NDIS Planner in Training (who had specific knowledge around Joanne's disability). There was extensive discussion around:

- how Joanne might best be supported; and
- options and plans for Joanne, who was about to finish schooling in the next month.

Despite all this, Joanne's second NDIS Plan had a 38% reduction in funding, including a reduction in hours for the sole support worker. The goals set out for Joanne in the Plan were an exact copy of those in her first NDIS Plan. The short term goals were especially inappropriate. Support coordination was cut by 75%. There was no mention of support for post school transition and activities.

The review process and means to streamline it;

Section 48 – section 100 issues

It is QAI's experience that participants are often not aware of the differences between section 48 reviews and section 100 reviews under the *National Disability Insurance Scheme Act 2013* (Cth). Section 48 reviews are for a change in circumstances. Section 100 reviews are reviews of reviewable decisions (as outlined in section 99). It has become apparent to NDIS Appeals Advocates nationally that key NDIA staff have inappropriately manipulated the review processes for section 48 and section 100 to eliminate Participants rights to external reviews.

For example – a significant number of QAI clients have requested a review under section 100 (using the template on the NDIS website), yet have received a letter from the misrepresenting the review as a section 48 change of circumstances review, or a letter refusing the request for review.

Also, QAI has noticed a procedural and access issue: the template for requesting a section 100 review on the NDIS website was changed from Word to PDF. This reduced the number of words which can be included on the form and PDFs are also generally less accessible for people with vision impairments and screen readers.

Section 100 provides that the person reviewing the decision must not have been involved in making the reviewable decision. However, QAI is aware of examples where, in response to a request for a review under section 100, the person who made the original reviewable decision has telephoned the Participant to invite him or her to a meeting. This clearly is a breach of privacy, a conflict of interest and inspires no trust in the process.

QAI is aware of a number of inconsistencies and inaccurate information being relayed to Participants and applicants via the 1800 number. Often Participants are told that they cannot submit a new access request form unless they have had an internal review.

Practical suggestions

The provision of draft Plans to Participants and Nominees for agreement or further negotiation would assist in reducing the number of internal reviews.

The letter from the NDIA should provide more information, not just refer to the section of the legislation cited for decisions, but also include sources of additional appropriate information relevant to the Participant. Too many people cannot interpret what is missing from their original information to meet the NDIA's interpretation of specific clauses in legislation.

A means for Advocates to check the progress of a review should be readily available. Whitelisting formal advocacy organisations to assist Participants and Applicants is crucial to supporting people in what are stressful ordeals. Current processes, whereby calls to the NDIA phone line involve long wait times whilst the NDIA staffer attempts to find the necessary information, then locate the Authority Form that verifies the Advocate's role and consent provided, are unsatisfactory.

Having an enforceable maximum time frame within which the NDIA must respond to reviews would also make a positive impact.

The incidence of appeals to the AAT and possible measures to reduce the number;

QAI is aware of at least four clients who applied for internal review and then subsequently progressed to the AAT. That is – they had lodged their application to the AAT, obtained legal advice from Legal Aid Queensland, and were booked in for a case conference. In all four of these cases, the NDIA agreed to the request and the matter was settled before the first case conference based on information provided at the internal review. No additional information was provided. This is an alarming trend. QAI asserts that best practice in decision-making must occur in the first place, thereby reducing applications for internal review and appeals to the AAT.

The Early Resolution Team ('ERT') is usually comprised of allied health professionals or lawyers. As mentioned above, Planners are not consistently well-qualified. ERT involvement begins after the AAT process is commenced. QAI suggests better liaison between the internal review team and ERT.

Should the NDIA decide to deny the Participants application for Review, the NDIS must appoint appropriately trained staff to personally contact the Participant soon after the Participant receives the letter denying the Internal Review.

This NDIA staff member should discuss in greater detail with the Participant, their nominee or advocate the reasons for the negative outcome, and provide advice about evidence that may potentially produce a successful request outcome. This staff member would then confirm the Participant's right to pursue the matter further via the AAT, and provide suggestions to best utilise the existing plan in the meantime. Further advice on using the period to gather evidence to support their Review claim.

In other words, the personal approach may reduce a person's hardline intention to "seek justice" and diffuse what is likely to be further stress for the Participant. The offer of practical suggestions about options to have unmet needs addressed via the next Plan Review or other schemes in addition to the NDIS would mitigate the antagonism and distressed caused by the current processes.

The circumstances in which Plans could be automatically rolled-over;

Overall, QAI submits that there is a lack of consistency and objectivity in the process of transition from one plan to another.

If there is no need to change any aspect of a Participant's plan, and no change of circumstances, the Participant's situation and disability is stable, then an automatic rollover option could be requested by the Participant. There should not be the assumption to automatically roll-over without the consent of Participant as they may wish to review their goals, supports, services, and or to seek a Review. QAI suggests that this option may apply if some funding is not used in one plan.

The circumstances in which longer Plans could be introduced;

If a Participant's disability is stable, and their living conditions are safe and comfortable, and they are not anticipating any change in needs or circumstances, then QAI considers the option should be offered to the Participant to be provided with a longer plan of perhaps up to 5 years, with the option to request a review through the current option of changed circumstances should such a need arise.

The adequacy of the planning process for rural and regional Participants;

Yvonne: Case Example – Client living in rural or remote area

Yvonne lives in rural area with only one service provider and no suitable therapy services. Yvonne is a school age child with a significant disability. Her support needs require 2:1 support while being driven and in the community.

Yvonne's family were satisfied with the first NDIS Plan but it eventuated that they could not use all the funding. Due to lack of local services, the family devised an ongoing plan for therapists from Brisbane to train Yvonne's support worker and parents to implement strategies, under professional direction and with ongoing professional monitoring. Funding was required in the right category and a funding management option to facilitate this.

For Yvonne's second NDIS plan, Yvonne's family requested that the plan be commensurate with funding that they had utilised in the first NDIS Plan. This would enable strategies put in place due to thin market in remote location.

Neither Yvonne's first nor second NDIS plan contained an indication of her rural location. Her support needs were not identified in her first plan. No funding for behaviour support was included in either her first or second plan. There was more funding than was possible to utilise in allocated budgets.

Second NDIS Plan – No indication of rural location. Despite the inclusion of demeaning terms such as "aggression and behaviours" included in first goal, no Behaviour Supports were included.

In Yvonne's second NDIS plan, two of the budgets were TSP (Typical Support Plan) and did not meet her needs. Support hours were determined on what would be considered 'normal' or average for the age of client, not her needs. Funding was incorrectly allocated to enable plan utilisation and the plan was changed twice to correct it.

QAI makes the following recommendations for improvements to the planning process for rural and regional Participants:

1. That significant additional attention be paid to communication with Participants and their nominees in the lead up to the plan meeting, to afford every opportunity to be well prepared for a successful plan meeting – including provision of information resources and links to websites. The more remote the address, the greater attention should be paid to this.
2. That there be better and more communication about alternatives to the traditional service provider/Participant relationship so that the Participant and their nominee may consider all alternative service delivery in their area especially when there are no traditional service provider options available – supporting an innovative, resourceful approach which also allowed for flexibility in funding allocations and fluidity between budget components.
3. Plan reviews must take adequate account of any difficulties in sourcing service providers so there are no assumptions about reasons for unexpended funds.
4. Planners and LACs gain understanding and awareness of the much higher cost of transport due to distances involved; the higher costs of living; and the various issues related to an isolated lifestyle. These matters must be appropriately factored into the processes to produce the Participant's plan.

5. Planners (or LACs) must assume that all Participants have greatest understanding and knowledge about their needs. There must be no assumption that distance equates to ignorance. It is insulting to be patronized or to have it assumed that a Participant, family member or nominee is less well informed as a result of where they reside. The same courtesy of simply asking the question rather than assuming the answer should be afforded to all Participants, regardless of where they live.

Any other related matters.

The current approach used in assessing eligibility for the Scheme is a continuation of a deficit-based model rather than strengths based. The rhetoric and marketing around the NDIS speaks about people with disability achieving goals yet the assessment process is demeaning, disrespectful and diminishes the person and their potential.

Participants and Advocates have encountered Planners with assumptions that people with disability are out to exploit the system.

There are some language issues between the Agency and Participants. The Agency expects their language and format to be used. For example 'respite' or 'rehabilitation'. NDIA might say 'we don't fund respite'. However, further respectful discussion to determine what the person really needs, encouragement to think differently and advice on how to support the Participant to achieve goals and live their own life, mutual agreement can be attained about appropriate supports and funds to that end. Most people do not seek traditional respite if given alternatives and options in plain language.

QAI considers that Planners need to take the time to unpack carefully and skillfully what people are actually requesting.

In the *National Disability Insurance Scheme Act 2013*, sections 3 and 4 set out the objects and general guiding principles of the Act. However, as the case studies in this submission indicate, there are numerous examples of contravention of these principles and objects

QAI recommends a conscious and concerted effort made by the NDIS to improve their public image when it comes to planning. Because people talk, and given the availability of social media to spread the word about an individual's experience with the NDIS, many people now only expect they will be in a quasi-adversarial relationship with the NDIA. This is a great shame and the loss of NDIS credibility leads to dissatisfaction on both sides.

QAI considers there is a massive opportunity for the NDIS to take a much more proactive position in respect to Planning, which is where the interface between the Agency and Participants predominates.

QAI would like to see Planners (and LACs) from the very first point of contact, trained to in respectful partnership with Participants or their nominees or advocates, to work to a high standard and achieve the best possible plan to meet all of their needs. This would take into account the criteria of reasonable and necessary supports.

Planners and LAC's could use a script to state their commitment to those partnerships working within the legislative framework and Operational Guidelines.

This spirit of genuine respectful cooperation will engender sincerity and trust and vastly improve the current fear and anger generated for so many vulnerable people with disability,

Job satisfaction for Planners (and LACs) may improve and Participants will feel better supported, much more well-informed, and less likely to apply for reviews, and a greater sense of control over their NDIS experience. In turn, this should result in a reduction in the huge demand for NDIS Appeals Support and a decrease in AAT applications.

QAI would also strongly support the establishment of a central mechanism for Participants and Nominees and Advocates to submit their suggestions for the improvement of the Scheme on an ongoing basis.