

National Disability

OUTLOOK

2024

OPENING INTERVIEW

Rebecca Falkingham

CEO of the National Disability Insurance Agency

INTERVIEW

Catherine Myers

Deputy Commissioner,
Regulatory Operations,
NDIS Quality and
Safeguards Commission

SPECIAL FEATURE

NDIS Review

Professor Bruce
Bonyhady AM,
Panel Co-Chair

PLUS

Plan Management and
Support Coordination

Technology Unlocks
Benefits

Aspect Self-Compassion
Program for Autistic
Adults

Behaviour Support
Toolkit

Disability Housing,
Specialist Disability
Accommodation
and Homecare

THERAPY

Manifesting Change with Choice and Control

Dr Joseph Randolph Bowers and
Dr Dwayne Andrew Kennedy

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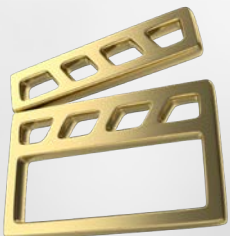
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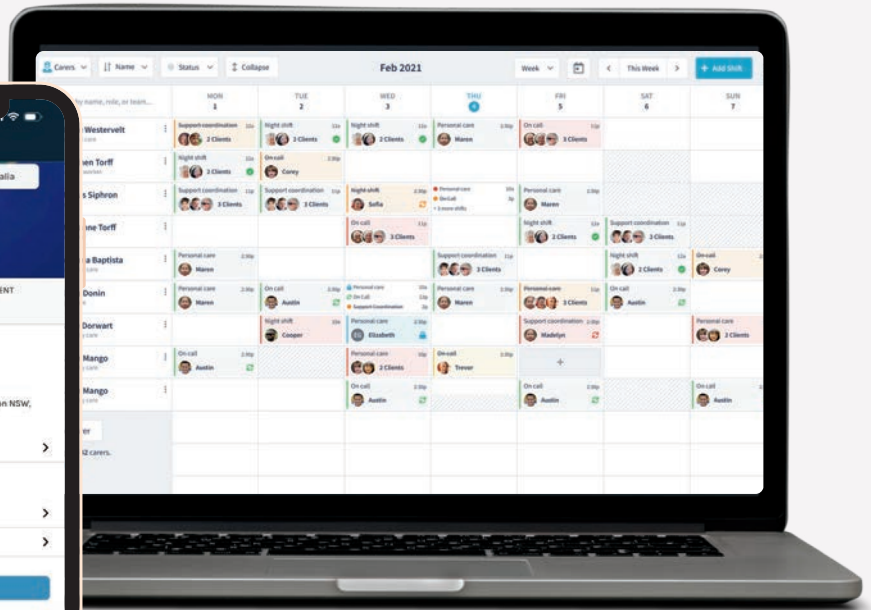
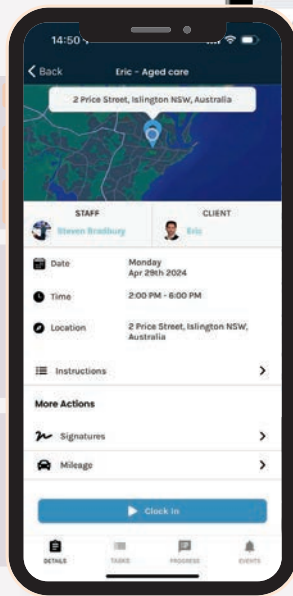
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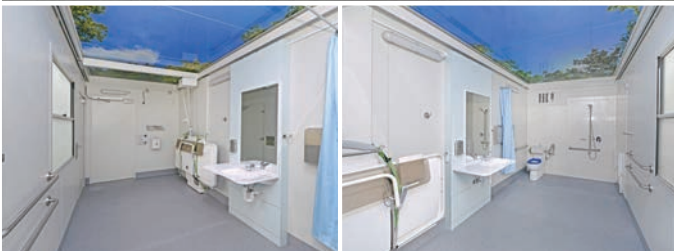
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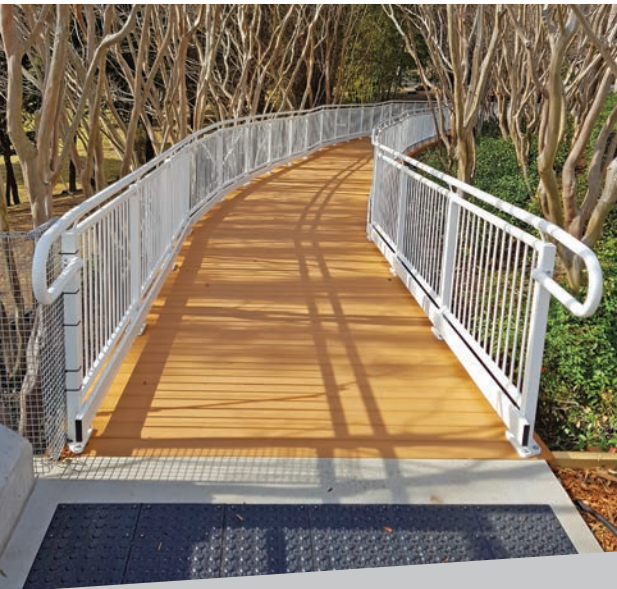




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Rebecca Falkingham

CEO of the National Disability Insurance Agency

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Rebecca commenced as CEO of the NDIA in October 2022 and has over 20 years' experience as a senior public servant, in all aspects of social policy and service delivery in the fields of family violence, disability, housing, child protection, health, education, justice, climate change and supporting First People's reforms.

From 2018, Rebecca was the Secretary of the Victorian Department of Justice and Community Safety, and led the department in its broad scope of work, which included a significant focus on service delivery and improvement, along with the development and implementation of laws, rights, regulations and policies.

From 2014 to 2018, Rebecca was Deputy Secretary (Social Policy) for the Victorian Department of Premier and Cabinet and, prior to this, Rebecca was Deputy Secretary for the New South Wales Department of Premier and Cabinet, where she coordinated the New South Wales transition to the

NDIS and the commencement of the NDIS trial site in the Hunter Valley.

Rebecca is passionate about genuine co-design and working to ensure that government services are connected and put people at the centre to deliver the best outcome possible for all Australians.

The National Disability Insurance Agency (NDIA) has a huge remit and is a key pillar of human services in Australia. As a maturing organisation, some issues around growing pains are to be expected, but at the same time there is significant work being done to positively impact the lives of Australians living with disability. Can you tell us about some of the good work the National Disability Insurance Scheme (NDIS) is doing and something of its impact?

I'm really proud of the hard work and commitment of NDIA staff and our partners in supporting the Scheme's near 650,000 participants.

We know we have a long way to go, but there has been some really positive improvement to ensure we have a Scheme that meets the needs for all those who rely on it.

We know that people with disability are the experts in their lives, and we are investing in co-design to drive improvements to the NDIS.

Internally, the Agency's commitment to driving a culture of accessibility and inclusion is delivering important outcomes not only for our staff, but for participants as well.

With the NDIS now supporting over 51,000 First Nations participants, we established a First Nations Group and appointed Dr Janine Mohamed as Deputy CEO and First Nations Champion.

The Group has prioritised the Agency's attention on the experiences, perspectives and interests of First Nations peoples, and on ensuring every person eligible can get to access to a culturally safe Scheme that values and respects First Nations peoples.



IMAGE: Unaihuiziphotography from istock

The NDIS is genuinely benefiting hundreds of thousands of Australians with disability, many of whom are receiving funded supports for the first time.

Like Angelica who was recently featured in a story on our website, who is well on her way to achieving her goals of getting her driver's licence and employment with support through the NDIS.

Angelica is just one example of all the wonderful participants we are supporting to achieve their goals. As I said we have a way to go, but as we strive forward with the participants at the centre of everything we do, we want to make sure the Scheme is there for the future.

We will continue to work on important reforms to deliver better outcomes for NDIS participants in partnership with people with disability and the disability community, collectively our work together will make the NDIS stronger and sustainable for generations to come.

In the 2023-24 Budget, the Federal Government invested \$720 million towards the NDIA's Reform for Outcomes Program. How is this progressing and how has the disability community been involved in this process?

We have been progressively establishing this program of work in collaboration with people with disability and the disability community. Disability representative and carer organisations, who collectively represent thousands of people with disability and their families, were recently boosted through an additional \$10.7 million of funding to assist with co-design activities.

The additional funding is building on the co-design work already being done on reforms and improvements to the NDIS, such as working groups on workforce capability and culture, informing the crackdown on fraud initiatives and making improvements to planning processes.

This approach means the voices of people with disability will be at the centre of how the Agency designs, implements and monitors NDIS reforms. I am buoyed by our ability to strengthen our frontline services to be able to meet the needs of our participants and their supports.

We welcomed more than 400 staff to our service delivery teams and have recruited to our National Contact Centre, which has continued to exceed disability workforce inclusion targets with 43% of our operational staff identifying as having a disability, and 55% as having lived experience of disability.

Since October 2023, we have been transitioning participants to our new computer system, it is faster and easier to use and will help us deliver better outcomes for participants.

We have put new processes in place such as multi-year plans for participants with stable supports and established regular check-ins with participants to take a proactive

approach to making sure their supports are working for them.

Everything we do, the first question is, how can we make it a better experience for our participants? I believe the changes we are making are doing this.

The NDIA recently released its Annual Pricing Review (APR) for 2023-24. Some providers hoped to see more pricing changes in their sector. How does the NDIA work with the sector, including providers, to determine NDIS pricing? And in the future, how will the NDIA continue to strengthen NDIS pricing?

The APR is informed by a combination of market data, research, public consultation and regular industry engagement, and is based off extensive consultation and feedback from the disability community, including participants and providers.

For this year's APR, the Agency invited submissions from providers, community and government stakeholders and, for the first

time, also invited submissions from participants.

We received 912 unique submissions and, of these, the majority came from participants, with 546 unique participant submissions received via the survey option alone. These submissions were crucial as a key component of the Scheme in the price limits we set for services provided to our participants.

Those price limits need to ensure participants and the Australian taxpayers get value for money, while at the same time supporting the development of a strong marketplace of providers that can deliver quality services.

Additionally, this year's APR takes place alongside the NDIS Review which recommended a total of 26 recommendations and 139 actions, including a focus on reform to the pricing and payments frameworks.

We are aiming to deliver a new approach to pricing in 2025 to reflect the evolving environment, to be more transparent and sustainable. An

independent expert will be appointed to oversee a review of our pricing structure ahead of next year's APR.

As we develop this new approach, we will work closely with providers and other stakeholders to ensure that they have the information, support and resources needed to successfully navigate transformation and continue delivering vital supports to participants.

The NDIA also announced significant funding for self-advocacy and peer support programs. How will this funding positively impact people with disability?

It's a very exciting opportunity for eligible organisations who run peer support and capacity building programs to apply for this one-off grant round, with the Government providing up to \$40 million over two years, with the possibility of a one-year extension.

We recognise the crucial role these organisations play in the disability ecosystem, helping people with disability to connect with others who

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have shared similar experiences and build their skills.

These services will not only encourage people with disability to connect with each other, but know more about their rights and help them speak for themselves, and to access and benefit from the same services and participate in the same activities as everyone else.

There has been a big focus on fraudulent providers. Can you outline the measures you are taking to address this and how you are protecting the NDIS?

We are committed to protecting all NDIS participants' safety and wellbeing and safeguarding the integrity of the NDIS.

The Fraud Fusion Taskforce, co-led by the NDIA and Services Australia, is a great example of how government agencies can work together, with 20 agencies working together to find and stop fraud in the NDIS.

The Government also recently announced a further investment of

\$83.9 million for a program focusing on implementing a new strategic capability within the NDIA, making it easier for participants and providers to get it right and harder to get it wrong.

This funding will go towards a number of ICT [information and communications technology] system improvements and activities to be able to better assess, process and pay over 400,000 NDIS claims per day.

On the legislative front, new legislation before the Federal Parliament aims to create 'NDIS 2.0' through a five-year timeframe of reform. We hear that this legislation, at its core, is about restoring the original intent of the NDIS.

The NDIS Review's recommendations outlined the changes and improvements needed to appropriately support all Australians with disability, not just those eligible for the NDIS.

We're focused on making sure participants have a better experience and the Scheme is there for the future.

The proposed legislation is Government's first step, following the NDIS Review, to put in place the scaffolding needed to start making the NDIS stronger and to improve outcomes for participants.

Many participants feel uncertain about the upcoming changes. What can you say to them to reassure them during this period of change?

I can assure participants, and their families and carers that we are listening to the disability community and they will continue to strongly contribute to how reforms are being implemented. We all know we're at a critical point of the Scheme's history, and we also know the future of the NDIS is in peer-led work.

With support for decision-making and deep engagement at the heart of that belief, participants do, and will remain at the centre of everything we do, as we collectively work together to make the NDIS stronger. ●



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IMAGES: Supplied



Hannah, NSW and Kathryn, NSW
 "Lite n' Easy takes one more thing off our plates to worry about."

Making it easy to eat well

14

While Lite n' Easy is best known for its calorie-controlled meal plans, its individual meals and meal plans are suitable for people with a range of needs. Made from high-quality ingredients and produce, Lite n' Easy offers plenty of variety and choice with over 235 meals to choose from all delivered to your door.

Lite n' Easy's dedicated team of dietitians is central to the meal development process and work collaboratively with their chefs to ensure meals are as healthy as they are tasty.

Lite n' Easy Senior Dietitian Ashleigh Jones shares, "The single most important dietary change anyone can make to be healthier is to eat five serves of veggies and two serves of fruit each day.

"But it can be hard, so at Lite n' Easy we make sure you can enjoy the right foods, in the right portions throughout the day and that you get your daily 5+2 with our complete meal solution."

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There are no contracts or joining fees and online ordering is straightforward and can be done 24/7 by visiting liteneasy.com.au once an account is set up. Payment is by secure credit card only. Lite n' Easy's goal is to make eating well easy, email ndis@liteneasy.com.au or call them on **13 15 12** if you have any questions! ●



David, 53, WA
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Alan, 25, QLD
 "Lite n' Easy and daily exercise has changed my life."



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Catherine Myers

Deputy Commissioner, Regulatory Operations,
NDIS Quality and Safeguards Commission

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National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission, Deputy Commissioner, Regulatory Operations, Catherine Myers answers vital questions.

Myers is an experienced regulator and passionate about people and performance. She has a focus on building strong organisational culture, leading transformation and inspiring teams to deliver outstanding results. Myers has leveraged her experience in change management and communication to deliver practice improvements in regulation. She has overseen the design of risk-based regulatory tools and implemented significant change programs resulting in improved capability, service delivery and regulatory outcomes.

What are the priorities and key principles of the NDIS Code of Conduct?

The **NDIS Code of Conduct** (the Code) promotes the delivery of safe and ethical NDIS supports and services by setting out expectations for the conduct of NDIS providers and workers.

The Code requires workers and providers who deliver NDIS supports and services to:

- Act with respect for individual rights to freedom of expression, self-determination and decision-making in accordance with relevant laws and conventions.
- Respect the privacy of people with disability.
- Provide supports and services in a safe and competent manner with care and skill.
- Act with integrity, honesty and transparency.
- Promptly take steps to raise and act on concerns about matters that might have an impact on the quality and safety of supports provided to people with disability.
- Take all reasonable steps to prevent and respond to all forms of violence, exploitation, neglect and abuse of people with disability.
- Take all reasonable steps to prevent and respond to sexual misconduct.

- Not represent or charge a higher price for goods supplied to an NDIS participant than would be supplied or charged to a person who is not an NDIS participant without a valid reason.

The Code applies to both registered and unregistered NDIS providers, providers delivering information, linkages and capacity building activities, and providers delivering Commonwealth Continuity of Support Program services for people over 65 years.

It is crucial that NDIS providers and workers understand their obligations under the Code, to ensure NDIS participants are treated with fairness and respect, maintain choice and control, have their needs met, and are kept safe from harm.

The NDIS Code of Conduct was amended in December 2023 with new provisions to control prices charged by providers. How are you working



NDIS participant Alia and her support worker Shabana

with other government agencies to identify businesses overcharging NDIS participants?

We expect all registered and unregistered providers to act with honesty, integrity and transparency, including when they price their products and services for NDIS participants.

While charging fair prices to NDIS participants has always been covered under a provider's responsibility to act with honesty, integrity and transparency, an amendment to the Code was introduced at the end of last year to make it clear beyond doubt that unfair pricing—when a provider charges participants a higher price for the same product compared with other customers—is a breach of the Code.

We are very focused on what we call 'sharp practices', or practices that, while not technically illegal, are dishonest, unethical, unscrupulous, or not in the best interests of NDIS participants. This includes unfair pricing, and we've done a lot of work to educate both participants and providers about our expectations

We've been working with Minister Bill Shorten, the ACCC and the NDIA [National Disability Insurance Agency] to crack down on businesses that are unjustifiably charging NDIS participants more than other customers.

that providers deliver safe, fair and honest NDIS supports and services.

We've been working with Minister Bill Shorten, the ACCC and the NDIA [National Disability Insurance Agency] to crack down on businesses that are unjustifiably charging NDIS participants more than other customers. Commencing in April 2024, our co-branded '**Fair Pricing**' campaign has seen more than 660,000 letters from the Minister go out directly to NDIS participants, sharing guidance on what people can do if they think they've been overcharged for NDIS products or services.

We commonly receive complaints and referrals relating to unfair pricing and actively monitor social media to identify

providers who may not be complying with their Code obligations.

What are the potential consequences of a breach of the Code?

The NDIS Commission has a wide range of regulatory tools and powers for responding to non-compliance. Providers or workers found in breach of the Code can face a range of different compliance actions depending on factors such as the seriousness of the issue, the appropriateness of their response and the risk of further harm.

Compliance and enforcement actions available to the NDIS Commission include administrative actions such as education, corrective action requests and warning letters,



Attention all
NDIS providers or workers

Know your obligations

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If you have a concern or complaint about a provider or worker

Call the NDIS Commission on
1800 035 544

www.ndiscommission.gov.au



If you believe an NDIS provider is using unfair business practices

Call the ACCC on
1300 302 502

www.accc.gov.au





The NDIS Commission works with NDIS providers and workers to help them comply with quality and safeguard requirements, including through education and training about their obligations.

through to enforcement actions such as compliance notices, infringement notices, enforceable undertakings, variation, suspension or revocation of registration, and banning providers and/or individuals from operating in the NDIS market.

Court-based actions may include injunctions, instituting proceedings to enforce an undertaking and imposing civil penalties.

How is the Commission monitoring and driving compliance? What is the process?

Monitoring compliance is a fundamental part of the NDIS Commission's work as a regulator. It is one of the ways that the NDIS

Commission can encourage best practice among NDIS providers and manage the risk of harm to NDIS participants.

The NDIS Commission works with NDIS providers and workers to help them comply with quality and safeguard requirements, including through education and training about their obligations. There is a raft of educative tools and resources available on the Commission's website to support providers and workers.

The NDIS Commission uses data, information and intelligence holdings to inform its compliance monitoring activities. It also undertakes a range of evidence-based campaigns to target cohorts of providers or geographic

locations. For example, the NDIS Commission commenced the Victorian Supported Residential Services (SRS) Compliance Strategy in April 2022 to identify issues with NDIS providers in the SRS sector. This resulted in over 40 SRS site visits and the issuing of 112 education letters, six compliance notices, three banning orders and multiple registration refusals. The campaign increased awareness, and modified provider behaviour around service obligations, particularly those related to choice and control, and conflicts of interest. The NDIS Commission has since extended this approach to the boarding house sector nationally.

Each year we set regulatory priorities, which enable us to target our efforts towards identified areas of risk. In the year ahead, we'll be focusing on the provision of quality and safe supports in regional and remote locations, as well as on activities that intersect with other regulators. We will also continue



our focus on reducing and eliminating restrictive practices and ensuring registered NDIS providers comply with their conditions of registration, especially auditing requirements, effective incident management systems and reporting obligations.

Other priorities include ensuring all NDIS providers deliver supports and services to people with disability in a safe and competent manner, with care and skill, especially in supported accommodation settings, and we will maintain our focus on regulating the conduct of registered and unregistered providers in respect to individual participant rights, independence, choice and control.

We will also prevent and remove unscrupulous providers and workers from operating in the NDIS by focusing on pricing, false and misleading conduct, and serious and organised crime.

Have providers been penalised and can you provide some details?

While we try to work constructively with providers to resolve issues, we have taken enforcement action against many providers and individuals for breaches of the Code of Conduct.

Our compliance efforts are focused on both registered and unregistered

providers, so it's important to note that unregistered providers are not unregulated providers. Many of the complaints we receive are about unregistered providers, and a significant amount of our compliance and enforcement action relates to unregistered providers.

In the past 12 months, we've issued 120 banning orders to organisations and individuals, 11 registration suspensions, 158 revocations of registration, and we've taken two providers to court.

The civil action we take can result in very serious consequences for providers who are in breach of the Code, such as the \$1.8 million fine received by disability provider LiveBetter in April this year due to the death of a participant in its care. We've also recently commenced civil penalty proceedings against Oak Tasmania who, it is alleged, failed to comply with its conditions of registration on multiple occasions.

Is there a current focus on restrictive practices? Can you outline the NDIS view on this and the approach.

As part of our regulatory obligations to protect and prevent people with disability from experiencing harm

arising from poor or unsafe NDIS supports or services, our Practice Quality area monitors the use of regulated restrictive practices, and work to promote their reduction and elimination. Restrictive practices infringe on the rights and freedom of movement of people with disability, and providers and practitioners should be taking all reasonable steps to reduce and eliminate their use.

The five types of regulated restrictive practices are chemical, environmental, mechanical or physical restraint and seclusion.

Providers who utilise regulated restrictive practices must be registered with the NDIS Commission, and any behaviour support plans developed for participants that include the use of regulated restrictive practices must be developed and authorised in accordance with the relevant state or territory authorities.

We're continuing to work closely with state and territory governments to move towards a nationally consistent authorisation process, and while there have been a number of positive changes made in some jurisdictions, there is still some way to go before we achieve a consistent national approach.

Know your obligations

You have obligations to people with disability under the NDIS Code of Conduct and Australian Consumer Law.



Attention all NDIS providers and workers



Safety

- Provide supports and services safely, with care and skill.
- Act when something might affect the quality or safety of supports you provide. This includes making sure a transition of care (to hospital or another provider) is safe.



Respect

- Respect the rights of people with disability. This includes their right to privacy, freedom of expression, self-determination and decision making.
- Act with integrity, honesty and transparency. You **MUST NOT** pressure or harass people with disability, or make false or misleading claims about services you can provide.



Duty of Care

- Take action to prevent and respond to violence, exploitation, neglect and abuse (including sexual misconduct) of people with disability.
- Help participants to get the supports they need if their circumstances change.



Consequences

Penalties apply if you do not meet your obligations under the NDIS Code of Conduct. This includes banning individuals and businesses from working with people with disability, issuing fines and infringement notices, and other sanctions.

Scan ►
QR code
for more
information



Who to contact

ndis.gov.au

If you can no longer care for an NDIS participant

Call the NDIA on
1800 800 110

www.ndis.gov.au



If you have a concern or complaint about a provider or worker

Call the NDIS Commission on
1800 035 544

www.ndiscommission.gov.au



If you believe an NDIS provider is using unfair business practices

Call the ACCC on
1300 302 502

www.accc.gov.au





We take strong action against providers using unauthorised restrictive practices if they are not taking all reasonable steps to engage a behaviour support practitioner and to develop an appropriate behaviour support plan.

Both the Disability Royal Commission and the NDIS Review made recommendations around best practice and consistency in the authorisation frameworks and the need to eliminate the use of restrictive practices, so we look forward to making progress in this area, guided by the government's response to the recommendations in due course.

While restrictive practices are heavily regulated, the use of unauthorised restrictive practices is an ongoing concern. The number of individual NDIS participants associated with unauthorised restrictive practices in the last quarter to March 2024 was 4,858 participants. While that is only 0.75% of total NDIS participants, it is still a concern that there are almost 5,000 individuals who are being subjected to restrictive practices that haven't been authorised and are not part of a behaviour support plan. These unauthorised restrictive practices represent an unacceptably high risk to those participants, and we will continue to focus on those areas through targeted compliance action.

We take strong action against providers using unauthorised restrictive practices if they are not taking all reasonable steps to engage a behaviour support practitioner and to develop an appropriate behaviour support plan.

Does the Commission respond to complaints? How many are received and what action is taken?

The NDIS Commission receives several thousand complaints each month, with the majority of those made by a person with disability or their support person. In the 12 months to July 2024, we received close to 30,000 complaints, with the key themes in complaints being about provider practice, worker conduct or capability, provider policies and procedures, and alleged neglect or abuse.

We have different pathways and regulatory responses depending on the nature of the complaint, including factors such as whether it:

- Includes allegations of harm or presents a serious risk of future harm to participants.

- Involves a high degree of negligence by the provider or worker or was intentional.
- Shows a pattern of ongoing conduct or non-compliance by the provider.
- Significantly reduces trust and confidence in the Scheme.

While the Commission cannot investigate every matter, it aims to action all matters, including by:

- Referring matters to the correct agency or authority.
- Providing advice and guidance to support NDIS participants to exercise their consumer rights.
- Educating providers on their obligations and requiring them to address problems and/or take specific actions.
- Collecting information and intelligence to identify emerging risks and inform appropriate responses.
- Taking compliance and enforcement action in serious matters.

The Commission will consider these factors in determining the best way to manage a complaint.

We do encourage participants to talk with their provider first about any complaints or concerns before coming to us, unless they don't feel safe doing so.

Continued on page 27 ▶

REGISTERED NDIS PROVIDER BUSINESS SALES BY RAY WHITE



PROVIDING SPECIALISED KNOWLEDGE & EXPERIENCE TO THE NDIS SECTOR

As part of the Ray White Group, the largest real estate group in Australasia, Ray White Practice Sales have the strength and scope of an international business brokerage, with the local knowledge needed to deliver your premium results.



ADELAIDE

SA

A Registered Approved NDIS Provider offering Community Family Multi-Cultural Based Care Support provider in South Australia

This NDIS business provides high quality support services to their valued participants, family and carers. Services provided include:-

- Personal Care Supports
- Supported Independent Living
- Mental Health Support
- Early Childhood Intervention Supports
- In-Home/Household Supports
- Social and Community Participation
- Development of daily care and life skills
- Community Nursing
- Daily Personal Activities
- Travel and Transport
- Innovative Community Participation
- Daily Life Activities

It is rare for an approved NDIS business such as this to come to market,



PERTH

WA

COS provider who is able to work with and provide support to individuals connected to State based services through a COS program.

Ray White Practice Sales is proud to be able to present a business established in 2017 which has an intense focus on family and community. A registered NDIS business, provides a range of services to meet the needs of those who have a disability via practical and pragmatic supports.



Working alongside people to build their capacity and independence, developing necessary skills, experiences and confidence to achieve goals and ambitions. Its workforce is consistently upskilled to deliver flexible and personable support via individually tailored programs. services, with a strong focus on empowering participants to live a more independent, meaningful and connected life.



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SYDNEY

NSW

A registered NDIS approved Disability Service Provider that facilitates supports within Australia with a team of like-minded individuals working towards creating equal standards of living for people of all abilities

This business provides an exemplary portfolio of support services to their participants including -

- A comprehensive disability support programme across a variety of disease states;
- Core supports across in-home and household personal, community and life skills and development;
- Supported independent living options including short and long term housing, assisted living, disability and respite accommodation;
- Support Coordination Services;
- NDIS Plan Management Services;
- Youth service programmes;



MELBOURNE

VIC

A quality provider of participant care and support services.

A family run disability services provider who are registered with the Victorian government and the NDIS. This business has a philosophy and vision is to be a leading provider of client care and support services, with a strong focus on empowering participants to live a more independent, meaningful and connected life.



MELBOURNE

VIC

NDIS Registered Laundry Service

NDIS-registered provider of domestic-style linen cleaning and clothing laundry services to multiple clients across an expanding region of inner and outer metropolitan Victorian communities. The hard work of establishing the business and the client base has already been done. The business provides laundry services with a pickup and delivery service for its clients, which may include washing nearly anything, including bed linen, towels, bathmats, and all types of clothing. The business has developed a reputation for reliability and trust, offering a complete laundry service including ironing and dry cleaning. This profitable business could either be maintained as a small independent service provider or be acquired and integrated into a larger enterprise. via individually tailored programs. services, with a strong focus on empowering participants to live a more independent, meaningful and connected life.

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MEET YOUR NDIS BUSINESS SALES TEAM



Brett Buckley
0432 231 630

Carl Burroughs
0416 190 000

Peter Hughes
0417 006 200

You have worked tirelessly to build your successful NDIS business. You have invested time and money, gone through the rigours of getting your business registered with the NDIS, recruited and trained your team, and probably worked more hours in the business than you ever anticipated. So, when the time comes for you to sell your registered NDIS business, you need a team that understands all the effort and risk you have taken and is committed to getting the very best outcome for you and the people you serve.



▲ Mr Brett Buckley

working with providers of all sizes, from small local businesses to multi-million-dollar national providers and everyone in-between.

The Ray White NDIS business sales team is made up of three directors who have owned, grown, and sold their own healthcare businesses in the past, so they know first-hand what is required to achieve a great outcome for all parties. Brett Buckley has been with Ray White since 2017 and has won awards for his work helping business owners sell their life's work every year since. Brett sold his first NDIS business back in 2020 and understands the sector at a profound level. Peter Hughes and Carl Burroughs both come from the healthcare sector, having owned and run dental corporations in recent years and managed mergers and acquisitions. Peter has also consulted to healthcare groups across the globe, and Carl has a passion for marketing, running a dedicated healthcare advertising agency before joining the Ray White family.

Collectively, Brett, Carl, and Peter have over 60 years' experience in running, growing, and selling healthcare businesses and have

individual skills that complement one another. This ensures you get a multi-faceted approach to the appraisal and sale of your business.

If you are considering selling your NDIS business over the next couple of years, the process starts with having the Ray White NDIS business sales team undertake an appraisal of your business. This is done with strict confidentiality, and there are no costs or obligations to this process. It is purely the way the team can get to understand what you have built and your personal needs.

If you decide to put your business on the market, then attracting as many buyers to the negotiating table is the best way to ensure you are getting the true value of the business and the best outcomes for you, your team, and your clients. This is where Carl's extensive knowledge of marketing comes in, reaching out to tens of thousands of NDIS buyers and engaging with all the corporate groups. "Presentation is key," says Carl. "We need to present a business in the best possible light, which means using professional photography, video, and drone footage in certain situations and creating an Information Memorandum that not only outlines the numbers, but also the culture of the business and its future potential. In short, we need to be as excited about your business as you are."

One of the motivations for Brett, Peter, and Carl to join forces was their collective experiences using brokers to both buy and sell businesses for themselves. "Many business brokers act like dating agencies, introducing buyers with sellers and then running for the hills," Peter states. "It is when a buyer has been found and a price agreed, when much of our work starts," and this is where Peter's experience really kicks in. Peter has negotiated and bought over 100 healthcare businesses over the past 15 years and has witnessed countless deals fall through as the broker has not stayed engaged with the transaction and just left it to the accountants and lawyers to battle things out. "Our job is to successfully get the transaction to the finish line in a way that all parties are satisfied," Peter continues.

It takes heart and compassion to run a successful NDIS business, and when it comes time to let someone else be the custodian of all your hard work, you need a team who knows how to value all your hard work, find the very best buyers, and nurture the transaction to a highly successful conclusion. With Carl, Peter, and Brett's help, you now have a team that truly understands how to maximise your NDIS business.

For an initial private and confidential discussion, call Ray White Practice Sales on 1800 032 801, complete the 'Appraisal Form' on the website www.raywhitepracticesales.com.au, or reach out to Peter, Carl, or Brett directly on their mobile numbers above.



▶ Anyone with concerns about the way in which NDIS services and supports are being provided can make a complaint to the NDIS Commission by:

- Phoning: 1800 035 544 (free call from landlines) or TTY 133 677. Interpreters can be arranged.
- Contacting the National Relay Service and ask for 1800 035 544.
- Completing a [complaint contact form](#).

More complaints may not necessarily mean that the system is failing—it could mean that there is greater confidence in coming forward to report issues. Do you have a view on that?

We've seen a steady increase in the number of complaints being received over the past few years, which we see as a positive thing. It means that more people in the community are aware of the role of the NDIS Commission and understand that it is important to let us know about things when they go wrong, so that we have information and intelligence to be able to support improvements in the quality and safety of supports and services provided within the NDIS market.

In our Contact Centre, we switched on a new Interactive Voice Recognition (IVR) system earlier this year, replacing a legacy system that was incredibly frustrating for both incoming callers and our Contact Centre agents. More than half of the callers to our Contact Centre actually need assistance from other organisations, such as the NDIA or state-based worker screening units, which meant that a lot of time was being taken up having to redirect calls. The new IVR has a triage system that automatically redirects callers where they need to go, which has made an enormous difference to the number of calls we can handle and has resulted in a much more positive experience for callers. In the first month after the new system went live, 11,000 calls were rerouted to the correct organisation and our agents were able to handle double the number of calls from the previous month.

The new IVR system also increases our ability to respond to inquiries from participants and providers, while enabling better data collection, which we can subsequently use to improve the way we work. ●



Swiping right: How to stay safe from romance scams

After multiple chats on dating websites, you feel like you have finally found ‘the one’. They are perfect and you message them every day. When they ask you for money or to copy their investment approach, you do exactly as they instruct. But after they receive the money, your ‘partner’ suddenly disappears.

Sound familiar? You are not alone.

In 2023, [Scamwatch](#) reported that Australians with disabilities lost over \$4 million to romance and dating scams. [Monash University researchers](#)

believe it may be especially difficult for people with an acquired brain injury, in particular, to spot and deal with romance scams. Their studies showed that of 101 clinicians in the brain injury field, half reported they had clients who had fallen victim to romance scams.

But not all hope is lost—we are going to guide you through what a romance scam is and how to spot one, so you can date safely and confidently.

What is a romance scam?

A romance scam is when a scammer gains your trust online, over a period of time, ultimately gaining financial

influence over you. These scammers often use fake names, photos and identities, with many claiming that they are from Australia but are ‘working overseas’.

Once they gain your trust, the scammer might ask you for a financial favour; for example, asking for hundreds of dollars to help pay for a flight to visit you or for urgent medical treatment. Alternatively, they may encourage you to invest, like they have, offering to help with the process. The scammer will either disappear without a trace (and with your money) or keep asking you to transfer money.

How can you spot a romance scam?

If you have just matched with someone online, there are several signs to look for to protect your wallet and your heart:

- The scammer expresses strong feelings very early in the relationship. They also progress the relationship a little too quickly.
- They move the conversation you are having on a dating app or website to a private messaging app.
- They never appear on camera or meet you in person and always have an excuse as to why.
- They keep making and breaking promises to see you in person.
- The scammer will encourage secrecy and try to isolate you from friends and family.
- Their online profile and what they tell you do not add up.
- They ask you for money either directly or more subtly.

Six common romance scam scenarios

After the scammer has spent time gaining your trust, they might have one of these reasons for requesting your money:

1. They tell you that they have just made a huge profit from a high return, low-risk investment. The scammer persuades you to go all in with this investment—it worked out well for them, after all.
2. After a few months, the scammer might say they are ready to move in with you and need money for a home deposit or a rental bond.
3. They send you items or money that they ask you to send on to someone else. This is to cover up criminal activity.
4. The person you are talking to is living in a different country. They really want to see you in person, but they do not have the money for it. So, they ask you to send some across. You send them the money, but they never show up.
5. They have revealed that they are evading prosecution in another country and need your financial support to keep them out of trouble.
6. They have a relative that is unwell. They do not have the money to cover the medical bills, so they ask for your help.



How to stay safe when dating online

If you want to explore the world of online dating and stay safe from romance scams, here are a few tips to follow:

- Do not dive headfirst into the relationship. Ask your potential suitor questions to verify their identity. If they are dodging your questions, then do some investigating of your own. What social media do they have? Can you reverse image search their profile picture in a search engine? Doing your due diligence now can protect you from a broken heart and lost money later.
- Never feel pressured into sending money to someone—even if it is someone who claims to love you. Stop and think twice before acting, especially when your money is involved.
- Do not share any personal information with anyone. This includes your passwords, PINs and bank account information.

What can you do if you think you have been scammed?

First of all, do not blame yourself.

Romance scams can happen to anyone:

- If you shared financial information or transferred money, notify your

bank immediately. If you are an ANZ customer, [contact us immediately](#) and report it.

- If you shared credit card details, block or cancel those cards immediately. If your cards are with ANZ, you can do this through the app. [Learn more.](#)
- Report the account to the dating app and/or the messaging app you used to communicate with the scammer.

Who can you contact if you have been scammed?

- Report the scam to the Police through the Australian Signals Directorate's [ReportCyber](#) portal. This resource is there for reports of scams where money or personal information has been lost.
- Contact the Australian Cyber Security hotline, 24 hours a day, seven days a week on 1300 CYBER1 (or 1300 292 371).
- Help others by reporting to [Scamwatch](#) to help them prevent future losses.
- You can also contact [IDCare](#), a not-for-profit organisation that provides support to those experiencing identity and cyber security concerns. ●

IMPORTANT INFORMATION

The information set out above is general in nature and has been prepared without taking into account your objectives, financial situation or needs. Before acting on the information, you should consider whether the information is appropriate for you having regard to your objectives, financial situation and needs. By providing this information ANZ does not intend to provide any financial advice or other advice or recommendations. You should seek independent financial, legal, tax and other relevant advice having regard to your particular circumstances.



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Behaviour support: Putting people with disability at the centre

A new website provides a toolkit for stakeholders to have input into behaviour support plans, with a goal of empowering people with disability. **By Lachlan Colquhoun**

One of the key principles in improving the lives of people with disability is to put them at the centre of decision making about their care and support plans.

Recent research has shown that there is some way to go in achieving this. The 2024 review by the NDIS Quality and Safeguards Commission looked at more than 2,700 behaviour support plans and found that only 32% showed evidence

that participants and family members had been consulted in the development of their plans.

The review showed that National Disability Insurance Scheme (NDIS) participants need to be more empowered to have more input into their behaviour support plans, and one of the responses to this has been the development of a new decision-making toolkit and practical resources website.

Flinders University in Adelaide was awarded a grant to develop the project, which went live in late 2023 as Deciding with Support, which can be found at www.decidingwithsupport.flinders.edu.au.

Project leader Sally Robinson, who is Professor of Disability Inclusion at Flinders University, said the new toolkit had been co-designed and tested by people with disability and behaviour

practitioners to ensure it empowers them with more choice and control in their lives.

“Supported decision-making is about enabling people with disability to make decisions for themselves,” Professor Robinson says.

“It’s about making adjustments or changes to the way people receive information, so practitioners also feel more confident the support being provided is what the person wants.”

Professor Robinson heads a teaching discipline at Flinders University with around a dozen researchers who work in a ‘social framework’ around a human rights model to promote social inclusion, challenge marginalisation and build service capacity and quality.

“All of our research is conducted with people with disability as colleagues and as people closely involved in our research,” she says.

“Too often, people with disability can be left out of decision making as their behaviour support plans are developed, implemented and reviewed.”

The project design involved tertiary institutions and community organisations alongside the Council for Intellectual Disability, so that all stakeholders could feel confident that the toolkit was the best and most up to date representation of current thinking and practice on the issue.

Evidence base

Professor Robinson says there was a “very strong evidence base” to the design, with the evidence base reviewed by university partners to ensure it was as rigorous as possible.

The Deciding with Support website provides practical resources, tips and information to build strong foundations in the decision-making process for behaviour support plans.

This includes accessible and easy to read worksheets and templates to record important information a person with disability wants to communicate with their behaviour support team.

The website also contains case studies, videos and audio recordings which provide stories and examples for providers, practitioners and people with disability of how to build positive and trusting relationships and how to find ways to work well together.

“Behaviour support is a growing area of practice which comes from a deep concern about the quality of the support provided to people of disability,” says Professor Robinson.

“There’s quite a lot of work going on to build the support for practitioners to do better in this space, and there’s a real hunger in practitioners to do better as well.”

“In the past, behaviour support hasn’t put a priority on including people, and that has become a central issue because when people are left out of designing their own support solutions it can contribute to the problem and deliver sub-optimal care.”

Professor Robinson says that in many cases, behaviour support was needed because the way people were



Support practitioner Cameron says that when Luke, a person with disability he works with, makes decisions for himself “we see a happy Luke”.

“We see a regulated Luke, and most of all we see a Luke who is achieving his goals and that’s what we want,” he says.

“This is why we try and facilitate that ability as much as we can.”

Cameron and Luke appear in one of the resource videos on the Deciding with Support website, designed to help people understand case studies around behaviour support.

In the video, Luke says that he knows he has behaviours and that is why a plan has been created for him.

“That’s why I have a lot to talk about involving decisions which are associated with my plan,” he says.

Luke lives independently in a group home and says he loves having his own space, and says he has a good team of people supporting him.

Timothy, a supporter who has been

working with Luke for around three years, sees him once or twice a week.

“Primarily we try and do some shopping and cooking on one of those days and the other day is helping Luke with day to day chores and maybe getting out and about in the community,” says Timothy.

Also in the video is Sidharth, who has autism and describes himself as a non-speaker.

Sidarth’s mother Rajni has been caring for him for 30 years and says that although he does not use speech, he is verbal through the use of his iPad.

“He’s got lots of words, and he’s got lots and lots of language,” she says.

Using the iPad, Sidarth’s mother says that he is involved in making decisions about his life.

“It feels great because of my iPad,” Sidarth says.

“I can share my words and feelings with other people.”



Positive behaviour support is a structured approach that responds to the changing environment and supports the person so that they don't need to use those behaviours anymore because they have other alternatives.

communicating was impacting not only on them but the people around them.

"They might be exercising frustration or distress or anger in ways that are difficult.

"Positive behaviour support is a structured approach that responds to the changing environment and supports the person so that they don't need to use those behaviours anymore because they have other alternatives.

"So it's all about making changes that provide positive alternatives."

Regulation on restrictive practices

The momentum for positive behaviour support is also part of a move away from the historical and often unproductive response for carers to use restrictive practices, which are now regulated under NDIS rules.

The NDIS has regulated five restrictive practices across chemical,

environmental, mechanical, physical and seclusion restraints.

The NDIS philosophy is that the use of restrictive practices for people with disability can present serious human rights breaches, and the decision to use a restrictive practice needs careful clinical and ethical consideration, taking into account a person's human rights and the right to self-determination.

Restrictive practices should be used within a positive behaviour support framework that includes proactive, person-centred and evidence-informed interventions.

With the advent of regulation, Professor Robinson says it was now imperative that people who had experienced restrictive practices needed to have a plan "on how these could be diminished over time and replaced with more positive alternatives.

"There needs to be a whole system of support around how we set everybody up for this and this Deciding with Support project is part of that because it's about providing practical and accessible options.

"The goal is for people with disability to build their capacity to find out more about making decisions, but also to build the capacity and attitudes of the people around them and that will help broaden the options."

Human rights framework

Professor Robinson says the reality was that most people do not choose to have behaviour support in their lives, and many could be in situations where they were subject to decisions they were dissatisfied about.

"This is why supported decision making is so important because without it, it can be very easy for people's rights to be taken away.

"The right to support decision making is something we have agreed to under the UN Convention on the Rights of People with Disability, and it's very important that it be followed and enacted.

"With this project, the University of New South Wales Social Policy

Research Centre conducted a policy review on the way in which supported decision making is a human right for people who receive behaviour support, and how this intersects to support a really strong framework for education for practitioners and service providers.”

There was also a review of positive behaviour support practice and this was mapped onto the evidence review in a way which helped us show how supported decision making can assist in the complex planning and implementation of behaviour support.

“Breaking that down into sequential steps was really important so it had credibility with practitioners and they could see how they could change their practice,” says Professor Robinson.

“Bringing the reviews and the evidence together showed us that there were some consistent principles that were key to build upon in delivered person centredness, autonomy, agency, social inclusion and citizenship.

“All of these things really matter to people but there are real gaps in how they are implemented in this context and where there are gaps it’s easy for things to happen, such as practitioners overriding the views of the person with disability.”

Without clear strategies, Professor Robinson says stakeholder engagement could become a “euphemism” for supported decision making that unintentionally leaves the most important person out.

“We needed to set up a space for supporters that sits underneath and resources the supported the person with disability, and provides a way for supporters to see how they could play a role and how supported decision making could grow over time.”

Targeted to users

The website is targeted to four different user groups, with people with disability at the centre. The other groups are supporters (family and support workers), behaviour support practitioners and service providers.

Within each of those sections there are practical worksheets and scaffolded learning to walk people through the website and the issues.

The worksheets are designed specifically for each group. For people with disability, they are primarily PDF

documents that can be downloaded and printed so supporters can use them together in ways that work best for the person.

Practitioners are more likely to work with documents online when they work individually and also when they work in a group.

“The materials are designed to be ‘snackable’,” says Professor Robinson.

“We know that workers don’t have whole half days to sit down and leisurely browse a website, so it’s designed so that people can make an account and they can keep coming back but also keep track of where they are up to.

“They can just use 10 minutes if that works for them, and then go back to their job.”

Professor Robinson says feedback on the site has been positive, with reports from stakeholders who are actively using the resources and the toolkit.

“The feedback we have had is that people are pleased that we have a strong evidence base sitting underneath everything on the site.

“It is important that supporters bring to bear all of the considerations around what it means to have an open mindset and an awareness of the power relationship between supporters and people who are being supported.

“It is about taking account of people’s communication needs and the different ways that people express themselves and how you work with all of that diversity that people bring.”

Better behaviour support requires anticipating the potential emotional impact of the decision-making process on people, and what it means to enable changes in people’s lives which could be transformative.

“All of this is really big for everybody,” says Professor Robinson.

“It is big for supporters, for service providers and, most importantly, the person with disability.

“Those kind of changes take time, but they are incremental changes and I hope that the resources that we have created can make a contribution to that.” ●




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Exploring the evolution of support coordination and its integration with plan management

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By Anthony O'Brien

Support Coordinator Jillian Woollard recently celebrated a significant milestone—her 30th anniversary with successful disability services provider ConnectAbility Australia. With her extensive experience, she is uniquely positioned to discuss trends in support coordination and how this essential National Disability Insurance Service (NDIS) service integrates with plan management.

ConnectAbility Australia is a NSW-based not-for-profit organisation that aims to empower individuals with disabilities to achieve “their goals and dreams”. With over 30 years of experience in the Hunter and Central Coast communities, ConnectAbility supports over 1,000 customers in supported independent living, community and centre-based programs, support coordination, capacity building, youth and allied health.

As one of its outstanding support coordinators, Woollard has held various service delivery and leadership roles throughout her tenure with

ConnectAbility. Managing an extensive portfolio of approximately 50 participants, she has impressively supported 66% of them since she began in the support coordinator role 6.5 years ago. Let us dive into her insights and experiences in the world of support coordination within the NDIS.

Defining the role of a support coordinator

For those unfamiliar with support coordination, it is a valuable service that assists participants in employing the supports outlined in their NDIS plan. These supports can include

David Carey



Support coordination is a funded service within an individual’s NDIS plan and serves as capacity-building support. It aims to assist participants in understanding how to utilise the funding within their plan effectively, work towards their NDIS goals, and establish connections with providers and supports.

informal, mainstream, community and funded services. Support coordination encompasses a range of activities to facilitate and optimise individual assistance. These activities include understanding the plan, connecting with supports and services, designing support approaches, establishing supports, crisis planning, prevention, mitigation and action, building capacity and resilience, and reporting to the National Disability Insurance Agency (NDIA), the independent statutory agency responsible for administering the NDIS.

Support coordination is a funded service within an individual’s NDIS plan and serves as capacity-building support. It aims to assist participants in understanding how to utilise the funding within their plan effectively, work towards their NDIS goals, and establish connections with providers and supports. It is crucial in empowering participants to navigate the community and build their confidence in coordinating their supports. This includes conducting research and identifying providers who can offer the specific services they require. Moreover, the amount of time included in a plan for support coordination depends on the participant’s particular needs.

Support coordinators commonly assist by addressing participants’ enquiries, which often include questions such as: What does my plan mean? What are

my goals? How do I use my funding to establish those goals and meet those expectations? How do I build a better quality of life for myself by implementing the supports in my plan?

Woollard explains that a support coordinator assists NDIS participants by helping them navigate their plans, identify goals, and connect with relevant providers and supports. Woollard also notes that they manage the allocated budget within the plan.

“We aim to work collaboratively to empower participants to self-advocate, understand their options, and connect with formal and informal supports. The key to a successful relationship is the development of trust, understanding and rapport. While this takes time, it creates a foundation for achieving goals that will build the participant’s capacity to live as independently as possible.”

Different levels of support coordination

According to the NDIS, participants can access three levels of support coordination:

1. Support connection. Support connection helps participants connect with informal, community and funded supports, enabling them to maximise their plans and achieve their goals.

2. Support coordination. Support coordination assists participants in building the skills necessary to understand and utilise their plans effectively. A support coordinator works with participants to ensure a variety of supports are used to enhance their capacity to maintain relationships, manage service delivery tasks, live more independently and be included in their community.

3. Specialist support coordination. Specialist support coordination is a higher level of support designed for individuals with more complex situations who require specialised assistance. A specialist support coordinator helps participants manage challenges in their support environment and ensures the consistent delivery of services.

The type and level of support a participant receives depends on the funding allocated in their plans.

The evolution of support coordination over the past five years

Initially, when the NDIS scheme was new, support coordinators were navigating uncharted waters alongside participants. Now, support coordinators are highly experienced, ensuring participants are engaged with supports in the best way possible to meet their individual needs, says Woollard. “The focus has shifted from mere coordination to empowering participants to self-advocate, understand their options, and connect with community and both formal and informal supports.

“It’s a journey of growth and adaptability for both coordinators and participants.”

Over time, developing a relationship based on trust, understanding and rapport should be a good foundation for achieving participant goals and increasing the participant’s capacity. Woollard remarks, “Participants are more readily assisted in navigating the NDIS system with a coordinator they trust, who has experience and can identify the complexities of each individual’s situation.”

Continued on page 40 ▶

IMAGE: Supplied



Managing your NDIS plan

Navigating the National Disability Insurance Scheme (NDIS) and managing plan funding can be complex and time consuming. Understanding the different ways you can manage your plan budget can help you choose the best option for you.

If things are not working with your current type of NDIS plan management, it might be time to consider a change. A good plan manager can take the hassle out of NDIS administration, providing peace of mind and freeing you to focus on your goals.

What is the difference between plan managed, agency managed and self-managed?

The differences between the options are:

- **Plan managed.** Plan management involves having a third-party provider, like nib Thrive, manage your NDIS funds on your behalf. Plan managers help ensure payments are made correctly and as per your plan. According to the NDIS Quarterly Report to Disability Ministers Q3 2023-24*, this is the most common

way participants choose to manage their NDIS budget, with 56% of total payments to providers being managed by a plan manager. Plan managers handle administrative tasks, help keep track of expenses, communicate with providers and budget for supports. Plan managed participants can use any provider of their choice, both registered and unregistered.

- **Agency managed.** Agency-managed means the National Disability Insurance Agency (NDIA) manages your funds. With 33% of payments agency managed, NDIA-managed participants can only use registered NDIS providers.
- **Self-managed.** A participant or their nominee directly receives their funds from the NDIA and pays their providers for any supports received. In the March 2024 quarter, 11% of payments were self-managed. This option gives you direct control over your funds, requiring you to handle payments and paperwork.
- **Combination of plan and self-managed.** Many choose a combination of plan managed and

self-managed approaches to suit their individual needs. You might want to self-manage the funding under one support category, while the other categories are plan managed. The choice is yours.

Why use a plan manager?

Plan managers offer you peace of mind and support, taking care of the financial paperwork of NDIS plans. This includes paying providers, giving spend overview reports and assisting participants with how to spend their funds. Depending on your needs, plan managers can also help with capacity building and training to help you learn to self-manage your plan and gain more financial independence.

How much does it cost?

Anyone with an NDIS plan can have plan management services added to their plan. Plan management does not cost you anything. The funding for plan management comes under a separate budget of your NDIS plan and will not take away from any of your supports funding.

Choosing a plan manager

Once you have decided to include plan management in your NDIS plan and had it added to your plan, you can choose a plan manager that suits your needs. Consider factors such as their experience, reputation and the level of support they offer. You have the choice to select a plan manager that aligns with your preferences and values. Your plan manager will finalise setting up your plan, provide you with a service agreement and you will be on your way to spending your NDIS budget.

Managing your NDIS budget effectively is important for achieving your goals and getting the most out of your supports. nib Thrive brings efficiency and reliability to the NDIS process, using innovative human and digital solutions to ensure tracking your expenses, managing your budget and planning your supports are convenient and transparent.

Interested in learning more about how nib Thrive can help you manage your NDIS plan? Contact one of our friendly team on 1800 999 333 or email enquiries@nibthrive.com.au.

* NDIS Quarterly Report to Disability Ministers Q3 2024, on 31 March 2023-24.



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IMAGE Supplied



Jane Morrell (standing), Janita (left) and Veronica (right).

Unique Direct Employ service provides a genuine solution to the support worker shortage

For people living with disability, life can provide many challenges including finding the right supports.

Carer Solutions' unique direct employ service provides the perfect solution to those people frustrated with their current supports—or lack thereof. The model is especially helpful for people with specific cultural and linguistic barriers, or those living in regional and remote

areas, where accessing support is even more challenging.

Founder and CEO of Carer Solutions, Jane Morrell says many National Disability Insurance Scheme (NDIS) participants struggle to find suitable and trusted support workers who they can build and maintain meaningful relationships with.

"In 2012, a year before the NDIS was introduced, I created Carer Solutions. I had worked in the disability sector for

a number of years and had met with countless frustrated and exhausted families across Australia, who were facing a significant lack of options when it came to finding suitable support workers," she explains.

Identifying a need for a better option, Morrell founded Carer Solutions—Australia's only service which facilitates participants to directly employ support workers they know and trust.

The Direct Employ service assists individuals and families to set themselves up as formal employers and their chosen supports as formal employees. Carer Solutions take care of all the administration associated with being an employer, such as payroll, WorkCover insurance, superannuation and PAYG tax.

It also effectively unlocks a new potential workforce. There are countless possibilities of who you can employ, provided they clear police checks and other mandatory requirements relevant to the state they live in. It could be a neighbour, an allied health student, a teacher's aide or even your hairdresser.

For Veronica Garawirtja, a Yolngu woman from Milingimbi in the Northern Territory, Carer Solutions provided her with the life-changing option to employ someone from within her own clan.

Living in a town with a population of around 1,400 people, where English is not even a first or second language, it was essential for Veronica to receive support from someone she trusted.

Veronica had previously received support from people who aligned with her cultural needs, but when her provider replaced those workers with staff from overseas, Veronica was no longer able to source alternative, culturally appropriate supports.

Thanks to Carer Solutions, Veronica was able to formally employ Janita, a woman from her clan as her support worker.

"For far too long, Veronica was expected to compromise on her connection to country in order to access supports, so we were delighted that our unique service model has ensured this is no longer the case," Morrell says.

You can learn more about this unique service by visiting Carer Solutions or giving the friendly team a call on **1300 729 839**. ●

► **ConnectAbility has a great team assisting participants**

Woollard says that ConnectAbility's approach to support coordination involves a blend of expertise, compassion and practical strategies.

"First, we attend training sessions to enhance our navigation skills," she explains. "These sessions cover everything from understanding the latest NDIS guidelines to effective practice standards like setting up role boundaries and preparing for plan review meetings. Interagency collaborations are a terrific tool to network with local providers to identify suitable services based on individual needs. Accompanying participants on visits to accommodation options, employment services, and therapy providers empowers them to make informed choices."

Participants benefit from understanding their NDIS plans and the various support categories available, according to Woollard. "This understanding helps them identify the specific supports they need and how funding can be used flexibly. And, finally, we have a great team. Our Coordination of Support team has a positive reputation in the community and, between the three of us, we have 15 years of experience. We hold monthly catch-ups to discuss concerns (while maintaining anonymity) and collaboratively identify actions to achieve the best outcomes for all participants," Woollard highlights.

What qualifications or training do support coordinators typically have?

According to Woollard, support coordinators often have extensive experience working in the sector or in roles with transferrable skills such as coordination of disability supports and case management. "They typically hold formal qualifications in relevant fields such as Social Science (Welfare), social work, nursing, Certificate IV or Diplomas in community work and case management.

How do support coordinators collaborate with plan managers?

Managing NDIS plans involves several steps, explains Woollard. "First, we

receive the new plan and meet with the participant or responsible person to review the funding. Next, we allocate funds to providers using a budget breakdown document. We then engage with the plan manager, discuss budget details, and identify endorsed providers for invoicing. Throughout the process, we maintain ongoing contact by phone/email and provide monthly budget statements for review."

To sum up, plan management, as described by the NDIS, offers participants increased choice and control in selecting their service providers. With the assistance of a plan manager, participants can engage with NDIS-registered services, ranging from speech therapists to lawn mowing businesses. Additionally, a plan manager allows participants to opt for non-registered providers, albeit with a requirement that the plan manager themselves be a registered NDIS provider if the participant chooses a non-registered speech therapist.

Plan managers can negotiate fees with providers, ensuring the costs remain below the NDIS price guide. They also assist participants in making informed decisions that align with their service plans while delivering value for their money. Furthermore, plan managers can access a participant's plan on the myplace portal, facilitating effective budget management.

Managing the financials

It is crucial to highlight that individuals can decide how their finances are managed and by whom. Alternative options for plan management exist, such as entrusting the NDIA with the responsibility of handling their invoices, self-management or choose to work with a plan manager.

Agency managed

If participants opt for this choice, their providers can directly claim their expenses from the NDIA. By choosing the Agency-managed option, a significant portion of the paperwork will be handled on a participant's behalf. However, the drawback is that participants are limited to accessing services solely from NDIA-approved providers.

Self-management

A participant can request to manage their NDIS funds. The NDIA conducts a risk assessment, and if it is satisfied that the participant has the capability and capacity, they are approved to self-manage. When the participant receives an invoice for supports in their plan, they can either pay it themselves and be reimbursed by the NDIA into their bank account, or they can submit a claim to the NDIA, which then deposits the money into their bank account so that they can pay the invoice.

This option involves the most paperwork but offers the broadest level of flexibility. Participants directly manage the funds and are responsible for all transactions. They may choose to employ support staff directly and handle all financial transactions themselves or pay a provider of their choice to manage this on their behalf.

Participants who choose to self-manage can use their NDIS funds on any support provider they want, whether or not the provider is on the list of registered NDIS providers.

Choosing a plan manager

A participant can also select a plan manager if managing the paperwork involved in their NDIS plan seems too onerous and time-consuming.

With a plan manager, funding is allocated to a third party to handle the plan's financial transactions. This support relieves participants of some of the paperwork, though they remain responsible for the overall administration of their plan.

Plan managers must be registered with the NDIA and receive direct payment from the Agency for their services. This means the services provided by a plan manager are not deducted from a participant's existing NDIS funding but are additional to their allocated funding.

A plan manager plays a crucial role in assisting participants by developing service agreements with providers, facilitating payment to providers, and generating monthly reports detailing the utilisation of a participant's funding. Instead of the

participant opening a separate bank account, the NDIS pays the plan manager directly, who then pays the service providers' invoices. Essentially, a plan manager ensures that all invoices meet NDIA standards before processing claims and maintains comprehensive documentation.

One of the benefits of having a plan manager is that participants do not have to worry about claiming invoices, selecting support categories, or maintaining records, unlike those who choose to self-manage their NDIS funding. Participants simply engage with their preferred service providers to obtain the required services and inform the providers to send their invoices directly to the plan manager, who will handle the rest.

The collaboration between support coordinators and plan managers

According to Woollard, effective collaboration between coordinators and plan managers ensures that the budget is managed efficiently and the plan is utilised to its full potential.

"This allows the participant to have the best opportunity for receiving appropriate supports that best meet their needs. This way of managing the participant's plan also gives opportunities for using non-registered providers if this is the participant's preference.

"This may be due to living in isolated locations with limited options for clinicians or via personal preference, such as having already developed a relationship with a provider prior to accessing supports through the NDIS."

It is important that the participant trusts that they have an effective team managing their budgets, allowing them to have better choices and control regarding the support they receive through their NDIS funding. "Participants are kept up to date and have a personalised experience and involvement in managing their funded supports," Woollard explains. ●

Plan manager and support coordinator obligations

The NDIA and NDIS Quality and Safeguards Commission is writing jointly to all plan managers and support coordinators who support participants to remind them of their obligations to:

- Meet record-keeping responsibilities
- Meet conflict-of-interest obligations
- Not engage in practices which facilitate the misuse of NDIS funds
- Comply with all Commonwealth, state and territory laws, including tax obligations.

In a statement on the NDIS website¹, it warns that it has "zero tolerance for plan managers or support coordinators engaging

in malicious behaviours and is progressively removing them and their networks from the NDIS." Additionally, it is referring these individuals to law enforcement agencies.

The statement added that "NDIS plan managers and support coordinators play a significant role supporting participants to spend their plan appropriately. They enable participants to use their supports in the most efficient and effective manner.

"But while most of them do the right thing, we know sometimes, some do not. Plan managers and support coordinators that have the best interests of participants at heart should not need to compete with these unethical and criminal entities."

¹ <https://www.ndis.gov.au/news/10125-plan-managers-and-support-coordinators-obligations>



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Engagement drives NDIS Review for future change

By Lachlan Colquhoun

As one of two chairs of the Independent Review Panel into the National Disability Insurance Scheme (NDIS), Professor Bruce Bonyhady was part of a process which engaged the opinions of more than 10,000 people and organisations.

Asked to describe the experience, his first comment was that it was “an absolute privilege”.

“It was quite humbling that so many people gave their time to tell us of their experience and want to make a difference and help us improve the scheme,” says Professor Bonyhady, who was the first Chair of the National Disability Insurance Agency and has had a career of more than three decades

working to improve the lives of people with disability.

Announced in October 2022, the final review was delivered in December 2023 and made 26 recommendations with 139 actions to change and improve the system.

The recommendations spanned four areas of review:

1. A unified system of support
2. Empowering people with disability
3. Stewardship of a combined ecosystem
4. A five year transition for the reforms.

In arriving at the final report, Professor Bonyhady says it was impossible to overstate the importance of the stakeholder engagement, which comprised webinars, virtual and

face to face community and sector consultations, regional and remote area engagements, online submissions, phone interviews and public events with over 4,000 attendees.

“We just could not have come up with the recommendations without all that input not just from people with disability, but their families and providers.

“After 10 years of the scheme there’s an enormous amount of information about what works and what doesn’t work, but we really wanted our recommendations to be practical and implementable.”

The Review, says Professor Bonyhady, took a different approach to convention.

Where most Reviews release an issues paper as a starting point, the NDIS Review had its issues shaped by the submissions it received.



“In many cases there is very little engagement with the people who are going to be affected,” Professor Bonyhady says.

“Often they don’t feel part of the process and they feel that things are being done to them rather than they are helping to shape what is going to happen.

“There is an enormous amount of evidence that where people feel they’ve been engaged deeply that two things happen. One is that you get better recommendations and the other is that because people feel part of the process they are more likely to be supportive because they have had a chance to have an influence.”

The Review also made the decision that it would take submissions in whatever form people wanted to make them, judging that this would deliver a wider breadth of feedback and opinion.

“We said if people wanted to ring up we would transcribe it, and we would take written submissions and videos,” says Professor Bonyhady.

“We engaged disability representative organisations to reach out to their members because we wanted to get to the people who are not often heard.

“These type of reviews are set up for middle class educated people with access to good technology with lots of family support, but with a scheme like this you have to go to the edge to design because if you just design for those well-educated participants you miss understanding what actually needs to happen.”

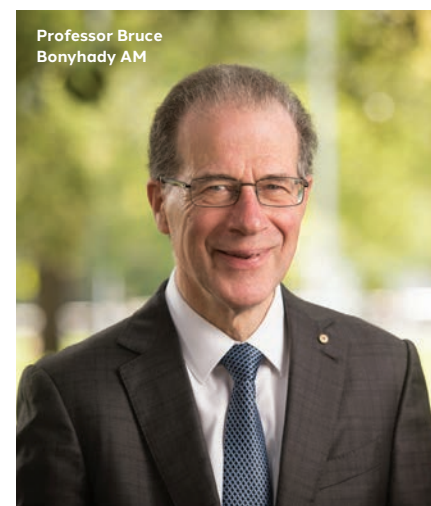
Transformational nature of the scheme

The “overwhelming” point which came through the Review engagement was the “transformational nature of the scheme” and its ability to change lives for the better.

When then Prime Minister, Julia Gillard, introduced legislation to create the NDIS, she said that she hoped it would “win a place in the heart of the nation”, and it has achieved that, and was “cemented there”.

“The public quite consistently rate the scheme at the same level as Medicare in terms of its importance,” says Professor Bonyhady.

“They want to know that if something happens to them, or their child or grandchild, that there’s a system which is going to support



Professor Bruce
Bonyhady AM

them because the cost of severe and profound disability are unaffordable and no-one can pay them.

“And of course there’s an opportunity cost because parents are not able to work, so their income goes down as their costs go up, but if we all pay a small amount through taxes then we have a solution, but we need to make sure that it’s achieving what was intended.”

While there were negative experiences and opinions put forward in submissions, Professor Bonyhady says it



44 **After 10 years of operation, there were always going to be aspects which worked well, and others that had unintended consequences so a major review was always planned as a way to drive the next 10 years forward.**

was clear that Australia is “doing things to support people with disability that no other country is doing”.

There were no “global blueprints” for a scheme such as the NDIS, which is unique as a universal scheme for disability.

After 10 years of operation, there were always going to be aspects which worked well, and others that had unintended consequences so a major review was always planned as a way to drive the next 10 years forward.

One issue the Review focused on from an early point was that the NDIS should not be an “oasis” for people with disability, with nothing offered to them outside of the scheme.

The scheme was never intended to support everyone with a disability, so one of the most significant Review findings was that there needs to be a “graduated system of supports” which extends to people not eligible for the NDIS.

“There needs to be a continuum of supports for people, kids and adults, with mild levels of disabilities who are outside of the scheme, because if they don’t have that support they can fall through the cracks,” says Professor Bonyhady.

“If you do that then you minimise the lifetime costs but also maximise the quality of life, and this is also about sustainability—not just as a cost but as a unified ecosystem of support.

“So it’s also about how the disability system interfaces with the health system and the education system, so that the NDIS is not just a fallback and has sole responsibility.”

This was also a ‘big opportunity’ to get government systems working better together and to extend the idea of ‘person centricity’ which is at the core of the NDIS so that government services which are ‘siloe’d’ today become more ‘citizen centric’.

Focus on sustainability

Sustainability was a key focus for the Review, and this involved understanding both the costs and the benefits of the NDIS.

“It is not just one or the other, but a cost and benefit profile which aligns with what citizens—the Australian community—are prepared to pay,” says Professor Bonyhady.

“I think Australians are very generous, and this scheme only exists because of that generosity and fairness.

“I’ve talked to thousands of people about this scheme and what they want to know is that it’s supporting the people who really need it, that they are getting a benefit in terms of a good life, and that the scheme is being managed with a high degree of integrity.”

The Review spent a lot of time on the issue of integrity and the operational components which contribute to it, such as claims management.

Ultimately this was about maintaining trust and confidence in the scheme among people with disability, their families and the wider Australian community.

“Integrity, good management and sustainability are different sides to what is essentially the same issue,” Professor Bonyhady says.

“The scheme is there to maximise lifetime outcomes and minimise the lifetime costs of support, while investing in people and also getting a return.”

Tighter oversight and regulation also formed part of the recommendations, and there was evidence presented to the Review on how vulnerable people with large NDIS packages were being exploited and even abused.

Addressing the required minimum standards and regulatory settings that balance the innovation the market delivered with the potential for abuse, there was a risk if the regulation was too light.

This was the context for recommendations around proportional provider registration.

“If you set up a system where there is control and choice but which exposes people to exploitation then you haven’t set up the system right,” says Professor Bonyhady.

“We’ve got a system that is supporting 600,000 people, 70% of whom have some form of intellectual disability, and we’ve got 15,000 registered providers and 160,000 unregistered.

“That is clearly a recipe for something that does not have the right guide rails, because what we want is a system where people have choice but they are choosing between quality providers they can be confident about.”

Holistic needs

Another major area of review was the participant journey, in recognition that in many cases it was “highly stressful and even traumatising”.

The Review also produced evidence on how the budget setting process and wider access to the scheme had, in some cases, become unfair.

“The way the budget setting process is structured is often a line by line process where people say they want this and they want that, so it turns into a line by line negotiation,” Professor Bonyhady says.

“This was never the intention, which was to assess a person’s holistic needs and say to them that they have the choice on how they spend the money, so they can individualise how they spend it to best meet their needs.”

The current planning process confuses three areas: access criteria,

NDIS Review at a glance

Terms of reference

1. Putting people with disability back at the centre of the NDIS.
2. Restoring trust, confidence and pride in the NDIS.
3. Ensuring sustainability of the NDIS for future generations.

Actions and recommendations

The 26 recommendations with 139 integrated actions are a complete package of changes needed to improve the NDIS.

Engagement

- A total of over 10,000 people and organisations
- 164 virtual consultations
- 109 face to face engagements
- Over 3,800 online submissions by individuals
- 776 online submissions by organisations
- 4,626 total submissions
- 50 phone interviews
- Over 4,000 attendees at public events.

Recommendation areas

1. A unified system of support for people with disability
2. Markets and support systems that empower people with disability
3. Stewardship of the unified ecosystem.

The new National Disability Insurance Scheme ecosystem

1. A connected system of support for all people with disability
2. Inclusive and accessible mainstream services
3. A thriving foundational support system
4. A new pathway for access, budget setting and using the budget.

What stood out for the panel

1. Creating a unified ecosystem of supports
2. A complete rethink of a participant’s journey
3. Better support for children and families
4. Governments to become more active in stewarding NDIS markets
5. Securing the future sustainability of the NDIS.

budget setting and planning. The reviewers opinion was that it should be split into three steps where there was always human interaction, not just an anonymised process.

This came back to the three goals of the scheme and the Review, of being more person centred, inspiring trust and confidence in the scheme and driving sustainability.

According to the Review, all this would take time and it has recommended a five-year timeframe.

“I think that we need that time because of the sweeping nature of what we have proposed and the need for deep engagement on the implementation,” says Professor Bonyhady.

“We will want to set up processes that are effective in building in our recommendations for change.

“While the direction is absolutely clear, there are areas where some piloting

of alternate approaches will be best, particularly when you think about some of the ideas around foundational support.”

When he was the Chair of the Agency, Professor Bonyhady says he used a phrase—“listening, learning and then design and deliver”.

“Now that we are in this next cycle of the scheme, we need to do that again,” he says.

“We listen, you learn, you design and then you deliver and then you listen again. And then you listen again, and again.” ●

The NDIS Review was chaired by Professor Bruce Bonyhady, Director at the Melbourne Disability Institute at the University of Melbourne and Lisa Paul, a former senior Australian public servant and policymaker who was secretary of federal government departments between 2004 and 2016.



Care1: Revolutionising disability support since 2006

By Anthony O'Brien

In July 2006, Damon Ashton, with a long history of working in the disability support sector, co-founded Care1, an Australian-owned medium-sized healthcare agency servicing clients in Queensland, Canberra, Greater Sydney, and regional areas within NSW. Care1 launched out of the desire to create a healthcare agency with an unwavering commitment to providing reliable, responsive and consistent support to people requiring quality care.

Drawing from his extensive experience in group homes and community support roles, including notable organisations like the Cerebral Palsy Alliance, where he worked for a decade, Homecare, which supported people with quadriplegia, and ParaQuad, which supported clients living with spinal cord injuries, Damon envisioned a better way to deliver care. His observations and belief in providing the highest level of care to every individual laid the foundation for Care1.

"Our business started as a disability support service, which is my background," Ashton says.

What Care1 does

Care1 employs community support workers who assist people with complex disabilities, allowing them to stay in their homes and maintain a semblance of normality and quality of life. The services range from around-the-clock (24hr) care for high-need clients to community outreach programs and respite care, giving full-time caregivers a break.

The services include attendant care, personal care, respite, transport and domestic assistance services. Care1 has particular expertise in supporting community-based clients with disabilities, especially those with complex care needs, including people with acquired brain injuries and spinal cord injuries.

We specialise in supporting clients with complex care needs. Many providers focus on drop-in services, providing a couple of hours here and there, assisting with meal preparation and community access. We do that too, but as part of a larger service offering, and mostly working with clients with complex care needs, like brain injuries, spinal cord injuries, and sometimes a combination of the two,

In addition, Care1 is accredited to the Australian Community Industry Standard and NDIS Practice Standards.

The support provided by Care1 is covered under the National Disability Insurance Scheme (NDIS) through an

individual funding model. Due to their specialisation in assisting individuals with acquired brain and spinal cord injuries, Care1 also works with motor accident insurance authorities across different states.

"We specialise in supporting clients with complex care needs. Many providers focus on drop-in services, providing a couple of hours here and there, assisting with meal preparation and community access. We do that too, but as part of a larger service offering, and mostly working with clients with complex care needs, like brain injuries, spinal cord injuries, and sometimes a combination of the two," explains Ashton.

Apart from the NDIS, Care1 is an approved panel provider to the iCare scheme, providing support and care to participants under the Lifetime Care and Support Authority, which handles motor vehicle accidents.

Before National Disability Insurance Scheme establishment

Care1 was already established and running for 10 years before the NDIS was introduced across Australia in 2016. This pre-existing foundation allowed the provider to integrate with the NDIS framework and continue growing seamlessly. Care1 had the certifications, experience and long-term staff to thrive in the evolving landscape, unlike many new entrants.

Ashton remarks, "The rollout of the National Disability Insurance Scheme has changed the industry exponentially. All those state-funded government programs have now been transferred to the federal government. Ironically, with the Royal Commission and sector reforms, some of these responsibilities



Simplifying changes to the National Disability Insurance Scheme:

A quick guide for participants and carers

Brought to you by the experts at Care1

Approximately 4.3 million Australians have a disability. The National Disability Insurance Scheme (NDIS) was established in 2013 with the goal of empowering people with disabilities to achieve their goals and lead fulfilling lives. It operates on the principles of choice, control and individualised support.

More than a decade later, the NDIS is set to evolve in line with changing needs, feedback and findings from the recent Disability Royal Commission. Like any legislative changes, it takes time. Consultation on the recommended reforms will continue for up to 18 months, and changes would gradually roll out over five years.

This article aims to empower NDIS participants and carers with the information and reassurance they need to tackle any changes when they occur.

What are the proposed changes?

Nothing is final right now, and these are only recommendations, but what we know so far is:

- **A move towards needs-based assessments, rather than focusing on**

diagnosis, so individuals do not have to repeatedly provide medical reports to prove a disability.

- **Participants may be given longer plans (up to five years)** and more flexibility in budgeting, versus caps on support categories.
- **A definition of what constitutes “NDIS support”** to help prevent people spending their budgets on things they are not supposed to.
- **NDIS agency to have greater controls over participant funding** if there is evidence of “financial risk factors” such as fraud.

What might changes mean for participants?

These proposed changes would likely have several implications for participants, including:

- **Access:** By considering individual needs rather than just medical diagnoses, more people with diverse disabilities and needs could qualify for support.
- **Reduced administration:** Eliminating the need for repeated medical reports would reduce the administrative burden.
- **Longer planning periods:** Extending plans could empower participants to better manage their supports over the

long term, allowing for supports to meet their evolving needs and preferences.

- **Better oversight and safeguards:** Giving the NDIS agency greater control over funding could ensure funds are used appropriately, and towards services that genuinely meet participant needs and goals.

What might changes mean for carers?

These changes could have several implications for people providing care to individuals with disabilities, such as:

- **Assessment focus:** Care providers may need to address specific support requirements, rather than adhering to diagnostic criteria.
- **Reduced administration:** Less time spent on paperwork and more time available for direct care and support activities.
- **Longer planning periods:** Extended periods to plan and deliver services, and greater flexibility in how they allocate resources will better meet client needs.
- **Greater accountability:** Increased scrutiny and oversight in the sector would hold care providers to a higher standard of care.
- **More collaboration:** Opportunities for care providers to collaborate more closely with NDIS participants and families during planning would deliver better overall patient outcomes.

All-in-all, the proposed changes could bring about many positive outcomes for care participants and those care providers who are doing right by their clients and the community.

For more information on the NDIS, how to navigate the system, apply for support and more, visit <https://care1.com.au/ndis> ●



will revert to the states over the next few years. The federal government has realised they are funding more than they initially anticipated. There are gaps in the system, leaving some participants without support. This has caused some tension between the federal and state governments. They are now considering foundational supports for those participants who don't fit into the existing scheme."

If he had to choose a word to describe the NDIS in 2024, Ashton says it would be "maturing". "We predate the NDIS and, initially, there were few players in the disability provider space, especially in labour hire. Many lacked industry knowledge, risking worker safety. Directors must be risk-averse to manage complex client needs. The Royal Commission has highlighted the significant service gaps."

Accreditation and quality standards

Ashton recalls, "When we started Care1, everyone claimed to be the best. However, simply stating it doesn't make it true. So, we took a different approach. We sought accreditation to reflect our commitment to a quality standard, right from the start.

"Within our first two years of operation, we achieved the ISO 9001 quality standard. Shortly after, when we

began working with the Lifetime Care and Support Authority, we were required to meet an additional clinical standard to provide complex care services. We successfully achieved that standard as well." Thus, Ashton notes that Care 1 has maintained two quality standards for 18 years consecutively.

Training and recruitment challenges

One of Care1's significant challenges is recruiting skilled staff. To address this, they launched a Registered Training Organisation called Train2Care, a 12 – 18-month program that qualifies workers to operate in the disability sector. This initiative helps train and upskill Care1's staff, ensuring they have the right skills to provide high-quality care.

"Recruitment has been challenging, especially with record low unemployment rates. This issue was particularly evident during COVID-19 when we couldn't bring in new people. We are competing with every other provider for staff, so it's crucial to have a unique offering that sets our organisation apart. Recruitment and retention are critical in this competitive environment," Ashton explains.

To address the recruitment challenges, Care1 decided to look at ways to recruit from outside the



Damon Ashton

disability sector. Ashton elaborates, "That's exactly why we started Train2Care. Everyone with experience in the disability sector is already employed, so we need to attract new people. We provide them with the necessary training and qualifications. The great thing is that Care1 offers employment training, while Train2Care provides the essential qualifications.

"We are attracting quite a few candidates from the hospitality industry by getting creative with our recruitment strategies. We're placing ads on SEEK in various sectors to gauge interest."

Looking ahead

Care1 continues to innovate and adapt to the challenges of the disability support sector, always with the goal of providing the best possible care. With a strong foundation, specialised services, and a commitment to training, Care1 is well positioned to meet the needs of its clients and support the broader goals of the NDIS.

"We've just completed our strategic plan for the next few years. We're focusing significantly on the supported independent living space and collaborating with housing providers. We have a major project with Vera Living in Macquarie Park in Sydney's north involving 10 purpose-built apartments for people with high physical support needs," Ashton says.

Care1 remains committed to delivering high-quality, reliable and responsive care to those in need, continually evolving to meet the demands of the disability support sector. ●



Self-compassion program promotes improved wellbeing among autistic adults

By Anthony O'Brien

Australian researchers Dr Ru Ying Cai and Dr Chris Edwards from the Aspect Research Centre for Autism Practice have made a groundbreaking discovery: self-compassion significantly impacts the emotional regulation of autistic adults while simultaneously addressing a common challenge faced by many on the autism spectrum.

To translate their findings into practical support, they launched the

Aspect Self-Compassion Program for Autistic Adults (ASPAA) in August 2023. Dr Cai explains, "It's a self-guided online program designed to help autistic adults increase their levels of self-compassion. By self-compassion, we mean the ability to be kind and gentle to oneself."

Aspect Self-Compassion Program

ASPAA is a free self-guided online course available to participants worldwide that covers all aspects of self-compassion and teaches autistic adults how to become more self-compassionate. The program

is grounded in evidence-based interventions such as the Mindful Self-Compassion program¹ (Neff & Germer, 2018) and Compassion-Focused Therapy² (Gilbert, 2014) and consists of five modules:

1. Module 1. Understanding Self-Compassion:

This introductory module clarifies what self-compassion is and what it is not. Participants engage in an exercise on treating a friend or loved one kindly and they try two practices involving the soles of the feet and hand exercises.

2. Module 2. Benefits of Self-Compassion:

This module explores how self-compassion benefits autistic adults. Participants complete an exercise on 'Common Humanity' and learn about the physiological impacts of self-compassion, concluding with the practice of 'Soothing Touch'.

3. Module 3. Mindfulness:

This module delves into the mindfulness aspect of self-compassion, explaining mindfulness and offering two skills to practice: the 'Compassionate Body Scan' and the '5-4-3-2-1 Method'. Participants choose the method that feels most comfortable for them.

4. Module 4. Finding your

Compassionate Voice: Participants learn to treat themselves with kindness through an exercise to develop their own loving-kindness phrases, which are used in 'Loving-Kindness Meditation'. The module also discusses 'Backdraft' which is how things might feel worse before they get better and why that is okay.

5. Module 5. Accepting our

Experiences: The final module encourages acceptance of self-compassion experiences rather than resistance. Participants reflect on resistance and practice a final skill: 'Three Self-Compassion Gestures or Reminders'. This module concludes with a summary of the program.

Autistic adults can now register for this program, which includes modules and guided daily exercises to enhance self-compassion skills.

The importance of self-compassion

ASPAA was launched following the first global research study examining self-compassion in autistic adults and its potential to improve mental health and psychological wellbeing³. This pioneering research, which began in early 2021, led to the development of ASPAA, a program that demonstrated positive emotional shifts in autistic adults during trials.

Initial findings from the study, which included 153 autistic adults and 93 non-autistic adults, revealed that autistic adults scored lower in self-compassion and positive wellbeing and higher in anxiety and depression compared to their non-autistic peers. Specifically, 50% of autistic adults scored low on self-compassion versus 8% of non-autistic adults. In contrast, only 7% of autistic adults scored high on self-compassion compared to 49% of non-autistic adults.

Because of these findings, Dr Edwards highlights the urgent need for such a program, stating, “Autistic people often have poorer mental health compared to non-autistic individuals, with higher levels of anxiety, depression and self-criticism. There’s also a higher rate of loneliness and difficulties managing emotions. Despite these challenges, mental health services specifically for autistic adults are scarce, and many available treatments aren’t effective.

“A few years ago, we conducted a study showing that autistic adults with higher levels of self-compassion had better mental health. This inspired the ASPAA program, which we tested with 39 autistic adults, significantly improving their mental health. This free resource can help many improve their wellbeing.”

Shifting the focus to adults

There has historically been a greater focus on early intervention for children on the autism spectrum, but in the last five to 10 years, research into adult experiences has been growing exponentially. This shift acknowledges that there are proportionally more autistic adults than children, highlighting the need for adult-specific resources.

Dr Cai elaborates, “We started the pilot mid-2022. We created the program in-house using our skills and available technology, resulting in five modules. We piloted it with 39 autistic adults, receiving weekly feedback to refine the program. The feedback was positive, leading to the program’s launch in August last year.”

Impact on mental health

Dr Cai emphasises the transformative potential of self-compassion, saying, “Practicing self-compassion is like learning to be your own best friend. After completing the online program, participants’ overall self-compassion levels moved from low to moderate. Positive emotions increased significantly, while symptoms of anxiety, depression and emotion regulation difficulties decreased.”

Dr Belinda Ratcliffe, CEO and Director of Training and Clinical Services at the Emotions Clinic Australia supports the program, noting, “In my experience, many autistic people experience a strong inner critic and sense of shame from feeling different and often alone, in a world designed for neuro-normative people.

“There is a profound lack of autistic adaptations of mainstream psychological therapies, especially for adults, so the development of an autism-specific program that incorporates mindful self-compassion and compassion focused therapy is a potential game changer.

“My team of clinicians have begun implementing ASPAA with autistic clients, who have engaged well with

the structure and have benefited from seeing autistic voices represented during the program. It is easily incorporated into existing therapy in a way that helps support, resource and empower autistic adults to meet their individual goals.”

Research participant Deborah Hunter says the program was life-changing and provided a new type of psychological resilience during times of distress or anxiety.

“There is such value in practising self-care but it’s not something that has come easy to me, as being self-critical when I make mistakes or fail is my natural default,” says Hunter. “Being kinder to myself helps me to navigate my emotions, and the more I actively practice self-compassion, the more I develop, which makes me feel happier, more confident and more positive overall.”

Clinician version and recognition

A clinician version of ASPAA, priced at \$49, offers therapists, psychologists, and mental health professionals additional instructions to tailor modules for practical client support.

Developers of the program, Drs Cai and Edwards, received the 2023 Autism CRC Achievement in Autism Research Award for their project on improving the mental health of autistic adults through self-compassion. ●

Endnotes

- 1 Kristin Neff and Christopher Germer, *The Mindful Self-Compassion Workbook – A Proven Way to Accept Yourself, Build Inner Strength, and Thrive*, 2018
- 2 Paul Gilbert, *Compassion-Focused Therapy*, 2014
- 3 aspect.org.au/about-autism/our-research/self-compassion





Technology unlocks benefits for service providers and participants

By Anthony O'Brien

Since we last examined information technology trends for this publication, one of the big banks has decided to get involved in the National Disability Insurance Scheme (NDIS) action. In a groundbreaking move, Health Industry Claims and Payment Service (HICAPS), NAB's dedicated healthcare claiming

solution, has developed new digital invoicing technology to simplify and accelerate how healthcare and disability providers interact with NDIS participants¹.

HICAPS NDIS Invoice Anyone will help NDIS providers streamline transactions with the NDIS, granting them better access to their choice of health practitioner. NAB's Andrew Irvine says, "Customers consistently tell us they want their payment devices and processes to be secure, simple and easy."

Peninsula Foot Clinic founder, Andrew Cook, says the integration of the new HICAPS NDIS Invoice Anyone tool into their operations has markedly improved efficiencies and reduced processing times for NDIS clients. "Its simplicity is second to none and since adopting the system, we have managed to substantially cut processing times for our NDIS patients," Cook says. "This is a considerable productivity boost for us, and its smooth introduction is something patients have widely commented on and welcomed."



Rob Scott,
Head of
Marketing,
ShiftCare



David Powis,
founder and
Managing
Director
of e-Tools
Software

Provider technology adoption is on the rise

David Powis, founder and Managing Director of e-Tools Software, echoes Cook’s comments and adds that technology adoption by NDIS providers is increasing. “The major limitations for technology adoption are cost and the number of participants the average provider supports,” says Powis. “The needs of participants can be extensive, and a significant number of providers have a small number of participants, which means it is hard to justify the cost of technology. This is to the disadvantage of the participant and the provider.

“Initially, there was some hesitation, but as the benefits of digital solutions become more evident, more providers are embracing technology,” says Rob Scott, Head of Marketing at care management software ShiftCare.

“The shift is driven by the need for greater efficiency, compliance and better client outcomes. Platforms

like ShiftCare are leading this transformation, making it easier for providers to adopt and benefit from new technologies.”

Powis adds that providers recognise the potential of technology to simplify their work, enhance accurate record-keeping and reduce non-compliance risk. “Acknowledging that smaller providers with less participants often struggle to justify the cost of investing in technology even though they understand the value and benefits, e-Tools Software offers a staged pricing structure to provide them with the opportunity to adopt technology. Licences are based on the number of participants serviced and adjusted as numbers grow. The e-Tools Mobile Apps also offers scalability, allowing providers to pay for the number of users required on a month-by-month basis. We have been privileged to support many NDIS clients on their growth journeys, and we continue to support them no matter what their numbers are.”

e-Tools Software commenced operations in 2004. As its founder, Powis had decades of active aged care management consulting experience. His firsthand dealings with service providers gave him insight into the challenges faced in meeting regulatory and compliance requirements. Powis assembled a small team of software developers, consultants and professionals and pioneered the release of the National e-Tools Resident Agreement software. It was the first of its kind in Australia and received an overwhelming response from industry members. Recognising a similar gap in the homecare sector, the e-Tools

Home Care Package (eHCP) software for homecare service providers was released several years later.

When the Government introduced the NDIS, e-Tools responded to the increasing number of homecare providers servicing consumers under the NDIS banner. The e-Tools National Disability Insurance Scheme (eNDIS) software was launched in 2017 to support NDIS providers.

Providers embrace efficiencies through technology

Scott stresses that NDIS providers are increasingly recognising the benefits of technology. “More NDIS providers are realising that technology can significantly streamline their operations. With the right tools, they can reduce manual tasks, avoid errors and ensure they are compliant with regulations. This not only makes their work easier but also allows them to allocate more time and resources to client care, which is their primary focus.”

ShiftCare’s journey began with an idea in 2016, inspired by the experiences of Navita, the wife of founder Gaurav Cheema, who worked in the care industry. She was all too familiar with outdated and tedious processes. “At the time, the inception of the NDIS was fresh, and providers were still becoming familiar with how to best navigate and work within this new landscape,” Scott explains. “There were existing solutions, but they were expensive and complex, often leaving small, starting providers craving a simpler, more accessible solution.”

Cheema saw the opportunity to take the leap with a clear goal

ShiftCare is making a notable difference in the NDIS landscape by addressing major pain points such as managing complex rosters, ensuring compliance, handling documentation and maintaining effective team communication.

to create a full-featured care management software.

“The North Star was clear—ShiftCare would become a full-featured care management software,” Scott continues.

Smart technology is revolutionary

According to Scott, smart technology is significantly impacting the NDIS. From digital rostering and real-time communication to secure data management and automated reporting, technology is helping NDIS providers focus on delivering high-quality care. These advancements

reduce administrative burdens, ensure compliance and improve service delivery.

ShiftCare is making a notable difference in the NDIS landscape by addressing major pain points such as managing complex rosters, ensuring compliance, handling documentation and maintaining effective team communication. “Our software simplifies these processes, allowing providers to focus more on their clients,” says Scott. “We offer features such as customisable form templates, advanced incident management reports and bulk uploads, all designed to ease administrative burdens and enhance service delivery.”

The response to ShiftCare has been overwhelmingly positive. “Providers appreciate the ease of use, the comprehensive features and the significant time savings our software offers,” notes Scott. “We’ve made it to where we are today by following a product-led strategy that prioritises feedback from customers as the core driver for tweaks and new features. For example, we understood how much trouble providers were having with cancellations and filling vacant shifts, so we created Job Board. This feature makes it easier than ever for support teams to post and assign jobs to carers. We routinely meet with customers and have a dedicated section for customer stories on our website.”

ShiftCare’s rostering software is crucial in helping NDIS providers adapt to the challenges of running a disability support business in the digital age. One ShiftCare user, Abilities NQ, shared their experience. “We’ve dramatically reduced the time it takes to roster from 400 to just 52 hours. These huge savings have

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allowed us to confidently increase our support staff and participant capacity without drastically increasing our administrative staff."

Looking ahead, Scott highlights that innovation is at the core of ShiftCare. "Our pipeline is stacked with exciting new features that will make life even easier for NDIS providers across Australia," he says. "We're always looking ahead, constantly seeking to improve and innovate to meet the evolving needs of our users."

How e-Tools is resonating with providers

The NDIS necessitates that registered service providers show evidence of complying with relevant rules and regulations, including pricing rules and accurate claims reporting. The e-Tools eNDIS software application addresses this need with a step-by-step approach that makes it easy for users to follow the required processes. An inbuilt price guide is automatically updated to prevent under or overcharging, and

a claims module allows for improved reporting accuracy to the National Disability Insurance Agency (NDIA). Tracking is available for the NDIA Plan versus service bookings, services delivered, and expenditure versus budget.

eNDIS has significantly helped providers conform to the set rules and regulations. Providers appreciate the intuitive features and long-term benefits that eNDIS offers. Other products resonating with NDIS providers are the e-Tools Staff Records Management (eSRM) software, eWorkforce Mobile App and eConsumer Mobile App.

eSRM is a central repository for key staff records such as qualifications, police checks, inoculations and availability. These records are used to manage staff scheduling, which is displayed on the eWorkforce and eConsumer Mobile Apps. The uptake of the eWorkforce Mobile App for support workers has been encouraging over the years. NDIS providers acknowledge that arming their workforce with the

From startup success to award-winning excellence

Geoff and Alison McQueen, Managing Directors of Newcastle and Hunter Community Health (NHCH), have collaborated with e-Tools since they were a startup NDIS business. With a hands-on approach to the business and willingness to embrace technology to maintain the highest level of care, NHCH took out the Australian Small Business award in the Professional Medical Services Category in 2020. The partnership with e-Tools continues to this day. When the McQueens expanded into homecare, they adopted eHCP software, eSRM software for staff scheduling and e-Tools Mobile Apps to manage their homecare compliance requirements and meet the growing needs of their client base.



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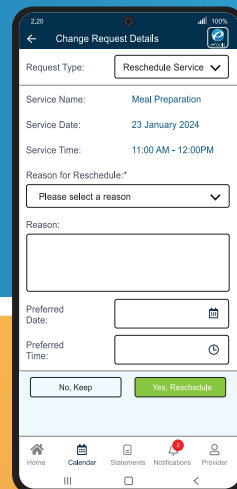
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- ✓ Up to date participant plans
- ✓ Latest handover notes
- ✓ Record notes instantly
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The eWorkforce Mobile App provides support workers access to the most current information required to deliver safe and high-quality services, no matter where they are. This includes participant plans, service bookings and handover notes. They can record service notes instantly for improved accuracy and capture clients' signatures electronically upon completion.

latest participant service information, accessible from any location, is vital to providing safe, quality services.

Recently refreshed with upgraded features, the eConsumer Mobile App for participants and families is shaping up to be a product that is well accepted by NDIS providers, who see its value in being inclusive and transparent.

Introducing the e-Tools mobile apps

e-Tools offers two mobile apps: the eWorkforce Mobile App for support workers and the eConsumer Mobile App for NDIS participants and their families or representatives. The eWorkforce Mobile App provides support workers access to

the most current information required to deliver safe and high-quality services, no matter where they are. This includes participant plans, service bookings and handover notes. They can record service notes instantly for improved accuracy and capture clients' signatures electronically upon completion.

The eConsumer Mobile App, designed exclusively for participants and families, allows providers to share information and engage participants and families in the care process. Participants and families can see future service appointments, request to reschedule appointments and give feedback. The app is accessible in 10 languages to cater to a wide range of ethnicities.

Powis says, "The eWorkforce Mobile App has been extremely popular with NDIS providers. It is currently taken up by a large percentage of clients who use eNDIS software, proving there is an understanding of the benefits of this technology.

"e-Tools Software has been a leading software provider in the aged care industry for 20 years, and in the homecare subset. eWorkforce has been successfully implemented across hundreds of homecare provider organisations, and there are currently over 1,600 registered staff users.

"The e-Tools Mobile Apps have clear delineations to provide outputs for one or both funding packages, and many clients are signed up for both NDIS and HCP software programs. The eConsumer Mobile App is a recent addition to the technology suite, but it appears to be moving in the same direction as its predecessor, eWorkforce," Powis adds.

How is e-Tools making a difference?

Powis says that e-Tools recognises the importance of having a diverse range of quality service providers to meet the needs of people with disabilities. "Our

key objectives are to make it easier for NDIS providers to streamline their management of services and reporting outputs, and manage their compliance requirements successfully, while supporting their participants.

“Our team comprises people with backgrounds in software development, programming, consulting, aged care facility management, accounting and disability work. We have a solid understanding of ongoing compliance requirements, financial viability and operational efficiency. These form the core of our products and services.”

According to Powis, the biggest pain point for service providers is managing participant services and tracking funding accurately to prevent mistakes. “This is often easier said than done. The process, from start to finish, can be difficult to follow and is prone to human error. e-Tools Software steps in to take over this role by automating processes and simplifying steps to minimise errors.”

The other major concern for service providers, notes Powis, is ensuring

their workforce delivers the best care possible to participants. “Using the latest technology, the eWorkforce Mobile App dispels provider concerns in this area—it is portable, convenient and able to display the most current information required by support workers to deliver safe and high-quality services. No more carrying around printed sheets of paper and being at risk of referring to outdated information.”

The most significant pain point for participants and families is not having easy access to service information. “As part of an advancing society, participants and families have different expectations compared to a decade ago; information is required instantly and very often digitally,” Powis observes. “e-Tools’ answer to this is the eConsumer Mobile App, in a move to aid information-sharing, transparency and inclusiveness. Providers can share service appointments and enable requests for rescheduling of appointments, with the ability to review before approving requests.

“eConsumer even has a feedback-

rating tool that empowers participants and families to have a voice in a private platform.”

Looking ahead, the eConsumer Mobile App is set to improve significantly. By early 2025, eNDIS users will be able to upload monthly participant statements to eConsumer, making them easily accessible and reducing postage costs and the administrative burden considerably. Additionally, a noticeboard feature will allow providers to post social event announcements and newsletters, enhancing communication.

Toward the end of the 2024-25 financial year, a new mobile app will be introduced to add third-party suppliers to the client service tasking system, providing feedback and transparency on service delivery. e-Tools is also developing an integrated dashboard application for staff and management to monitor services, analyse feedback and provide predictive data for better planning and delivery. ●

1 <https://business.nab.com.au/hicaps-driving-positive-change-in-health/>

eTrack

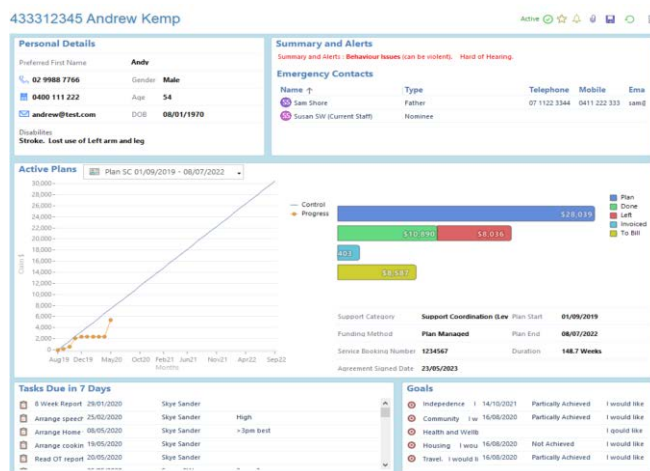
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Celebrating a dedicated support worker: The inspiring story of Sarah Greaves

Sarah Greaves' journey in support work began with a personal mission—helping her son navigate the challenges of autism. This experience sparked a lifelong commitment to aiding others with special needs. Today, Sarah is a pillar of strength and compassion at Irises Support Services, the organisation she founded, where her dedication and innovative approaches have transformed countless lives.

Sarah's quest for knowledge has led her to study social work, drug and alcohol support, mental health

and psychology. Her commitment to continuous learning ensures she is at the forefront of providing the best possible care for her clients.

Determined to make a broader impact, Sarah established her own company, providing a range of services, including psychologists and occupational therapists. She built a team of carefully selected professionals who treat clients like family. Sarah's personal and compassionate approach creates a supportive environment where everyone feels valued.

There are countless stories of Sarah's dedication. When two girls on the National Disability Insurance Scheme (NDIS) faced homelessness just before Christmas, Sarah found them a safe place to stay.

Sarah's generosity extends to housing families fleeing domestic violence, supporting individuals struggling on the streets, and going the extra mile to assist clients' families in times of crisis. Her holiday program helps children make friends and gives parents a much-needed break. Sarah even provides practical support, such as giving a

second car to a family to reduce their commuting time.

As a boss, mother, worker and community member, Sarah's impact is profound. She is often compared to Mary Poppins for her ability to solve problems and uplift those around her. Her dedication has caught the attention of high-profile figures, including Bill Shorten, who received a commendatory email from one of Sarah's clients.

Sarah's efforts are driven by a genuine desire to improve the lives of those around her. With 30 years of experience, she has developed numerous strategies to aid her clients. These include simple yet effective techniques like using physical touch to gain attention, designing early intervention programs, and employing creative tools like laminated fish with tasks for children to complete.

Sarah's innovative approaches have been adopted by other companies, and her presence alone can transform a room. She intuitively understands the needs of families and implements solutions that others might overlook. For example, she developed a routine for a non-verbal 12-year-old boy, teaching him to read and communicate basic needs. Her efforts have drastically improved his quality of life, earning praise from his speech therapist.

Clients and colleagues alike praise Sarah. Comments range from "I wish I could clone you" to "You are our Mary Poppins" and "You are a real-life superhero". Her kindness and ingenuity have touched countless lives, making her a beloved figure in her community. As a boss, she inspires loyalty and dedication, with staff willing to assist her even at midnight.

Despite her remarkable achievements, Sarah remains humble, constantly feeling she could do more. Her tireless efforts at the Craigieburn house were particularly noted, earning commendations from a paediatrician who now refers clients to her. Sarah's ability to balance her professional responsibilities with her personal challenges is extraordinary.

In recognition of her outstanding service and dedication, Sarah Greaves is the recipient of the ShiftCare Support Worker of the Year Award. This accolade celebrates her excellence

in the profession and her unwavering commitment to her clients and the NDIS community. Sarah's story is a testament to the profound impact that one dedicated individual can have.

The ShiftCare Support Worker of the Year Award was created to recognise and acknowledge the heroes who have dedicated their lives to helping others. ShiftCare wanted to play a part in supporting all those involved in providing the highest quality of care. Over 1,000 nominations were received from across Australia. Nominations were judged by a panel on criteria including client impact, professional excellence, commitment and dedication, adaptability, communication skills, community impact and overall contribution.

"The ShiftCare Support Worker of the Year Award is presented to care providers who have demonstrated a commitment to quality, compassion and excellence in the delivery of care. We are proud to formally recognise the importance of our support workers, and this year's winners exemplify the values and dedication we seek to honour," says Mat Cagney, ShiftCare Chief Executive Officer.

Sarah Greaves was selected as the winner, and two runners-up were also recognised. Sarah received a cash prize of \$5,000.

The ShiftCare Support Worker of the Year Award not only honours individual

excellence but also aims to elevate the entire profession. By highlighting the extraordinary contributions of support workers like Sarah, ShiftCare hopes to inspire others in the sector to strive for the same level of dedication and innovation. This award serves as a reminder of the vital role support workers play in our communities and underscores the importance of providing them with the recognition and support they deserve.

Looking ahead, ShiftCare plans to continue celebrating and investing in the development of support workers, ensuring they have the resources and training necessary to excel in their roles. The commitment to recognising outstanding service will hopefully encourage more individuals to pursue careers in support work, knowing that their efforts can lead to meaningful recognition and professional growth.

ShiftCare is the all-in-one care management software that gives support workers the tools they need to deliver a higher standard of care. The mobile app is the perfect shift companion, giving support workers access to client profiles, care plans, voice-to-text progress notes, clock-in and out, and shift reminders right in their pocket.

For more information about Sarah Greaves and the two runners-up please visit <https://shiftcare.com/support-worker-of-the-year> ●



New data reveals increased employment among participants, families and carers

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IMAGE: Supplied

By Anthony O'Brien

The National Disability Insurance Scheme (NDIS) continues to have a positive impact on the lives of participants, their families and carers. Recent data highlights improvements in areas such as employment and community participation. The Scheme now supports over 646,000 participants, and a recent quarterly report underscores its significant positive effects.

In a real-world example of the employment opportunities the NDIS is creating, former professional ballet dancer Jason Wilcock transitioned to a career in disability care with the help of TAFE NSW Wollongong. Injuries led him to seek a more meaningful vocation, and the NDIS-fuelled growth in the disability sector provided the perfect opportunity. His story below exemplifies how the NDIS and supportive educational institutions are creating new pathways and enriching lives for participants and those who care for them.

Key highlights from the latest quarterly report

The participation in work of NDIS participants aged between 15 and 24 has more than doubled from 10% to 22%. This significant increase highlights the positive impact of the NDIS on young participants' employment opportunities.

Half of all parents and carers are now reporting paid employment, reaching the 2023-24 target of 50%. This represents a relative increase of 10%, showcasing the Scheme's success in supporting families and carers in securing employment.

Additionally, 41% of participants aged 15 years and older have reported increased participation in community and social activities, reflecting a relative increase of 19%. This demonstrates the effectiveness the NDIS has in enhancing social inclusion and community engagement among participants.

Furthermore, over three-quarters of all participants aged over 15 years reported greater choice and control in their lives, surpassing the 2023-24 target. This achievement underscores the Scheme's commitment to empowering individuals

with greater autonomy and decision-making capabilities in their daily lives.

National Disability Insurance Agency CEO Rebecca Falkingham says the latest data shows the Scheme is changing many people's lives for the better. "Measuring participant outcomes is vitally important to gauge how the Scheme is doing, and this quarter illustrates fantastic improvements in key areas such as employment for participants and family members and increased participation in our community."

Former professional ballet dancer makes unlikely career pirouette

A former professional ballet dancer who made an unlikely career pirouette to disability care has credited TAFE NSW Wollongong with helping him discover his "next act".

Wilcock, who started ballet at age 10 at the iconic Beverley Rowles Dance Academy in Corrimal, was accepted into the Australian Ballet School at 16 and had a 12-year career performing in some of the world's most prestigious dance companies.

With injuries mounting, Wilcock ended his career with Sydney Dance Company and worked in horticulture and retail before yearning for a more meaningful vocation. Enter TAFE NSW.

"I was really at a fork in the road, and I knew my next career had to be something that really moved me," Wilcock says. "I heard disability carers were in high demand, and you could study the course fee-free at TAFE NSW, so I took the plunge. It really opened my eyes to a whole new world."

Wilcock even landed a job as a disability support worker while still completing his course, a position that sees him undertake various duties for clients, including personal care, administering medication, discussing meal plans, booking appointments, allowing participants community access and helping them run errands. "It's so rewarding to be the reason another human being isn't left alone and uncared for," he says. "It feels like one of the last human rights being addressed in society. The job has really made me aware of how many people are living with disability in our community."

Wilcock, who works for Client Care First, hopes to eventually start dancing classes with clients to help them move and enjoy music.

He said studying the Certificate IV in Disability at TAFE NSW had given him the practical skills and experience to make a running start into the profession. “It really has given me the skills for the job, and our teacher has been so patient and giving,” he says.

TAFE NSW Wollongong disability teacher Christy Lewin urged locals to consider a career in disability, saying a

growing skills gap in the industry meant jobs were plentiful. “The majority of our students secure work before graduating,” says Lewin. “It’s very rewarding work to be able to empower clients to live as independently as possible.”

Participant pivots into gardening

One example of working independently is Chloe, the gardener at the luxury

holiday escape Aqua Vista Resort on Queensland’s Sunshine Coast. EPIC Assist (EPIC), a local Disability Employment Services (DES) provider has supported Chloe’s journey.

Chloe works diligently daily to ensure that the business’s first impression on the public is positive and memorable. “I do the trimming, sweeping, weeding, blowing, and the maintenance of all the greenery around the resort. It’s up to me to make sure it all stays nice and neat,” Chloe says proudly.

Chloe’s journey to a career in gardening

Chloe has been into gardening since before she could remember. Something about the process and the work appealed to her brain. “There’s nothing as satisfying as seeing the end product. The garden looking all neat after you’ve touched it up feels so rewarding to me. Seeing a big project at the end of the month, doing a mental before and after, and recognising all the work I’ve done makes it all worthwhile,” Chloe explains.

At the start of her journey, Chloe explored various career options through trial and error. Initially drawn to zoo work, she switched to photography and graphic design but found photography suited her better as a hobby. Then, she had an epiphany: gardening!

Hitting the ground running

After realising her initial career plans were not a good fit, it would have been easy for Chloe to adopt a defeatist attitude and lose momentum. However, she did not let that hold her back. Instead, she quickly set her sights on her chosen career path and immediately got it off the ground. “I worked on a farm for two and a half years, then worked with steel grass at a separate place for nine months. And I’ve been at Aqua Vista Resort since February 2024,” Chloe says.

Before making the jump to Aqua Vista, Chloe enrolled in some courses through TAFE to make sure her gardening knowledge would be up to snuff before she took the plunge and started job searching for her next career opportunity. Something she had always struggled with, and I daresay we all do, was actually getting her

More detail emerges on reform of the Disability Employment Services Program

According to a report from National Disability Services (NDS), since the federal budget announcement in May, the government has provided more details on the reform of the DES Program. The initial 2024 budget measures for DES included:

- An additional \$227.6 million, allocated over five years from 2023–24, to support the introduction of a new DES program, commencing 1 July 2025.
- Extending eligibility for the new DES to jobseekers not receiving income support and those with less than eight hours per week work capacity.
- Removal of the two-year service limit for DES participants.
- An increase in wage subsidies per participant of up to \$10,000.

The government’s aims for the new DES program are ambitious and reflect its extensive ongoing employment reform agenda, as informed by the:

- White Paper on jobs and opportunities
- Royal Commission
- House Select Committee Report on Workforce Australia Employment Services
- NDIS Review.

The extension of DES eligibility to the two additional cohorts is expected to attract an extra 15,000 people to the program annually. NDS has strongly advocated for broader access to the DES. Also, DES providers

have been advised that the two DES streams will be combined, simplifying administration and “encouraging a stronger focus on individual participant needs”. While we welcome simplification of the program’s administration, the NDS will monitor the effect of this measure and to see if a one-size-fits-all-approach results in adverse, unintended consequences.

The new DES offers intensive and flexible services that recognise the needs of participants and whether they are engaged in other activities, such as work, training and non-vocational supports. Strong support comes from the NDS, as this measure focuses on delivering better assistance for participants with more complex needs..

A focus on delivering higher quality servicing—via the new quality framework—is intended to ensure increased trust between participants and providers, focusing on the participant’s strengths and goals. The NDS will monitor how this incorporates into the new performance framework in the new DES contract.

According to the DES, it will seek to allow “in employment” support, as required by working participants and their employers, including longer term support for participants who need continuing workplace assistance.

It is also likely that a procurement exercise will be conducted for “a diverse network of specialist providers” to deliver the new program from 1 July 2025. The NDS promises it will keep a close watch on which type of market arrangements emerge.

resume out there. Luckily for Chloe, she found a way to get some help and ensure this did not put her career journey on hold. Chloe chose to go with EPIC.

EPIC lends a hand

EPIC is a local DES provider that connects job-ready people with disability with supportive and inclusive workplaces—it is also an NDIS support coordination organisation in Tasmania. “I got help from EPIC writing cover letters and resumes so that I could get myself out there. I’m not very good at writing them, so the help was really appreciated,” says Chloe.

With EPIC’s support, Chloe felt confident enough to really focus on her TAFE courses. This enabled her to complete her certificates in conservation, land management and horticulture.

Chloe also lives with an intellectual disability. It can take her longer to learn things sometimes, and it is easier for her to learn new things if she is physically

shown how to do something. “But once they do that, I’m set!” Chloe insists.

EPIC understood her situation and made sure that when Chloe was ready to enter the work environment, she would feel comfortable that her disability was recognised and not perceived as a barrier to her feeling fulfilled in her role or as part of the Aqua Vista Resort team.

Growth at Aqua Vista

The support has made all the difference for Chloe. Since starting at Aqua Vista Resort, she feels that she has improved both personally and at gardening. “When I started, I was taking the knowledge I had learned from TAFE and taking my time to identify what everything was and how to deal with it. Now that I’m actually working with the plants it’s all just like second nature to me, I’ve gotten a lot quicker.

“I’ve gotten a lot more trust in my skills too. My confidence has had a huge boost,” Chloe exclaims with a proud grin.

With her positive employment journey, Chloe has clear career goals. She plans

to continue working at Aqua Vista to hone her skills and knowledge, aiming to own a private gardening business eventually. She envisions having her own tools, visiting clients’ lawns, and building personal relationships while tidying their greenery. Thanks to EPIC and her hard work, Chloe feels she is on the path to achieving this goal, even if it is still some time away.

On working with EPIC, Chloe says, “For me, EPIC was great. It helped me with the parts of the job search that I would have found very difficult on my own. The support made all the difference. They came into the interview and explained it all out to me—what everything meant and what I had to do. I still went through it myself, but the extra reassurance and the second opinion gave me the stability I needed to see it through.” ●

If, like Chloe, you are living with a disability, injury, health condition or mental health condition and seeking meaningful employment, contact EPIC Assist today at epicassist.org.





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SCAN ME



Innovative housing solutions for people with disabilities

By Anthony O'Brien

Experienced National Disability Insurance Scheme (NDIS) providers are leading the way in developing innovative and independent housing options for people with disabilities.

This surge in housing development is in response to the SDA Demand Projections Report, which projects

that demand for specialist disability accommodation (SDA) will increase from approximately 22,900 participants in June 2022 to about 36,700 by June 2042, reflecting an average annual growth rate of 2.4%.

At the same time, David Carey, CEO of NSW-based service provider ConnectAbility, notes a growing demand for new SDA homes, particularly among younger NDIS participants. "Older homes have become less attractive due to inadequate funds for upkeep," he

says. With over 30 years of experience in the Hunter and Central Coast communities, ConnectAbility supports more than 1,000 customers through various programs, including supported independent living (SIL), community and centre-based programs, support coordination, capacity building, youth, and allied health. The provider also manages 24/7 staffing for older SDA homes after securing a government contract before the NDIS launched. Founded by families, ConnectAbility

IMAGE: nazar_ab from iStock

We faced significant hurdles due to the legacy infrastructure. Government-owned homes often required substantial repairs and updates, yet funding for these improvements was limited. The SDA funding model, though intended to support disability housing, was not enough to cover the extensive renovations needed for these older properties. This has disadvantaged us as we struggle to make older homes appealing to potential residents.

has a volunteer board comprised mainly of professionals, with family members still included. With 600 staff, the organisation provides over a million hours of support annually and transports participants in the community, covering 500,000km each year.

“When there is a vacancy, a bedroom may not have been painted for 10 – 15 years. That’s frustrating, and we have no control over it. Consequently, people see a brand-new home and think, ‘I get the same amount for 25% of my pension, so I’m going there instead of a 30-year-old home’,” Carey says.

“We faced significant hurdles due to the legacy infrastructure. Government-owned homes often required substantial repairs and updates, yet funding for these improvements was limited. The SDA funding model, though intended to support disability housing, was not enough to cover the extensive renovations needed for these older properties. This has disadvantaged us as we struggle to make older homes appealing to potential residents.”

In response to these challenges, ConnectAbility is partnering with a financier to build 12 – 15 new, purpose-designed homes, each accommodating up to six people with disabilities. The model involves constructing modern, energy-efficient homes that meet specific needs, ensuring safer and more comfortable living conditions. “These new homes are designed to reduce conflict and promote a better living environment through features like soundproofing, wide doorways, and appropriate facilities for residents with varying needs,” Carey says.

ConnectAbility has embarked on

this partnership for two main reasons: to remain competitive and shape the future of housing. “First, to help us stay competitive over the next 10 – 15 years, we need to offer modern housing options,” Carey explains. “Given a choice between brand-new and 30-year-old homes, people will naturally choose the new ones, especially when there’s no additional cost, as the rent remains capped at 25% of their pension. This prompted me to consider the future of housing. It’s clear that the government isn’t in a position to rebuild their homes.”

New builds tackle issues that are often in older properties, especially the issues with open-plan layouts that group all residents together regardless of age and behaviours. Carey clarifies, “Many current residents, now in their 60s and 70s, have mellowed. However, younger individuals are different—on the autism spectrum level two and quite spirited. You can’t place them with older residents as it’s not a suitable match.”

Carey adds that proper planning and design can eliminate 70% of behavioural issues. “Homes built specifically to accommodate individuals with certain behaviours significantly reduce these challenges.”

Building at a higher standard also ensures a safer environment for staff and clients. This approach reduces workers’ compensation claims, lowers premiums and improves staff retention. “Clients benefit from thoughtful layouts, like three-bedroom units or separate granny flats, that cater to those who struggle in group settings.

“This flexibility allows us to fill vacancies more effectively while maintaining safety and comfort. Modern features like steel beams for lifts and

wide doors enhance accessibility, preventing injuries and ensuring a functional living space for everyone. The new homes will feature one-metre-wide doors to prevent wheelchairs damaging doorframes. Bathrooms are four metres wide and bedrooms are oversized.”

What is specialist disability accommodation?

SDA is one type of housing designed for people with disability. It is specialist housing for people who have an extreme functional impairment or very high support needs.

Hannah Trood, National NDIS Program Manager, Community Housing Ltd (CHL), says, “The NDIA [National Disability Insurance Agency] determines who is eligible for SDA. To be eligible, you must be an NDIS participant, and the NDIA must also determine that SDA is the best housing option for you according to the SDA rules.”

CHL is a national Tier 1 community housing provider, a registered builder and an SDA provider under the NDIS. “We believe everyone has the right to a safe and secure home. That’s why CHL has always provided homes for people with disability,” says Trood.

“One of our earliest projects was accessible social housing for people with disability. Currently, we support well over 2,000 people with disability to live in CHL housing across Australia. When SDA was introduced, CHL became a registered SDA provider to deliver and manage specialist housing to meet the diverse needs of Australians with disability.”

According to Trood, only a minimal number of people are eligible for SDA. “Roughly 25% of people with disability are on the NDIS and, of that number, only 4% of participants are deemed eligible for SDA. That equates to about 23,000 people currently eligible for SDA across Australia.”

One challenge is that SDA can vary significantly based on the build type and design category. It can range from a five-bedroom shared home to a one-bedroom apartment, among other housing types. “All SDA housing contains features that make it suitable for those who are eligible,” explains Trood.

“It can be tricky to understand whether a participant would be eligible

for SDA; that's something we can chat through with participants to help them understand what the best housing option for them might be."

Do specialist disability accommodation services work in tandem with homecare services?

Generally, yes, they do work in tandem, advises Trood. "Most of the time, in-home supports are provided in SDA properties. When they are, an SDA provider has an obligation to work and collaborate with the SIL/disability support provider to ensure that each participant's rights are met, the property is well maintained and cared for, and that the participants are content in their home and receiving appropriate support."

It is important to note that although support providers and SDA providers work together, a participant's access to a home should not be influenced by their choice of support provider.

Trood says, "An SDA provider has the responsibility to ensure a participant's right to choice and control over their NDIS supports are upheld as much as practicable and possible.

"This might mean that a support provider in the home changes, if that is the preference of the participant/s living in the home, and an SDA provider should support participants to make this change."

What are some of the critical features?

The features of an SDA home vary based on its specific type. There are four SDA design categories: robust, improved liveability, fully accessible and high physical support.

Each category includes different design features to support individuals with varying needs. "The concept behind the design categories is that they are comprehensive enough to meet the general housing and accessibility needs of participants with extreme functional impairment or significant need for person-to-person support," says Trood.

The robust category has design features that, as the name implies, make it more robust and durable. This is to support a participant who may have behaviours of concern to live safely in



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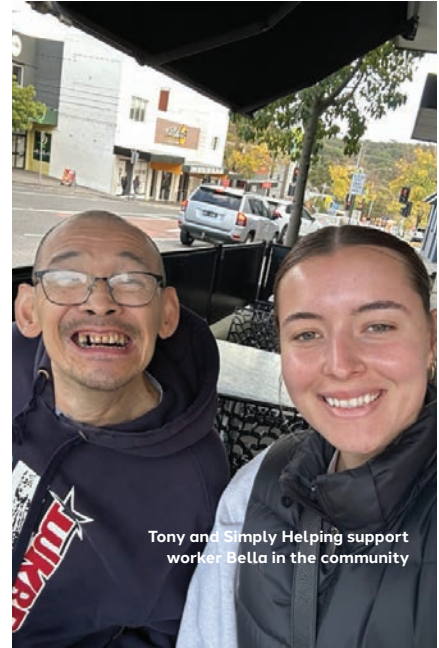
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Tony and Simply Helping support worker Bella in the community

Simply Helping Tony to connect with his community

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Being able to socially connect with people and his chosen community, is an important life goal and human need that provides Tony purpose and happiness. Tony is living with cerebral palsy and hearing impairment. As a person who identifies as a gay man and celebrates being part of the LGBTIQ+ community, Tony has successfully accessed the National Disability Insurance Scheme (NDIS) through

Simply Helping Central and Northern Melbourne to achieve his goal.

When looking for an NDIS support worker, Tony shared that what is important, “Someone who doesn’t judge me. They must be interested in who I am and what I want to achieve to live an ordinary life. I want to be treated just like any other regular person you would meet on the street”.

Tony expresses that what he dislikes the most is when people

make assumptions about his abilities without offering him the respect of asking and giving him choice and control. Tony shared that he often comes across people who falsely assume “he is unable to have sex based on his physical disability”. These experiences have all contributed towards Tony being clear and decisive on the standards he sets for NDIS support workers that he will work with and the importance of educating people.

Since commencing supports with Simply Helping Central and Northern Melbourne in July 2021, Tony has been supported by support workers that he has valued. More recently, support worker Bella has supported Tony with building his capacity to attend community events, including the PRIDE carnival as part of Melbourne’s Midsummer Festival as well as the local swimming centre.

Tony’s next goal, which is currently underway with his support worker Bella, relates to his passion to support educating people and breaking down barriers and assumptions that exist about people living with a disability. Tony will be sharing his lived experience with groups of people in intimate forums as part of Simply Helping Central and Northern Melbourne’s program called Simply Learning Through Lived Experience. ●

Depending on the participant’s support and SDA funding, they can live in the apartments with another participant, with friends or family, or on their own. What sets these apartments apart from other SDA apartments is the community aspect. Our community development team runs events that are driven by the community multiple times a week. This provides a fantastic genuine opportunity for connecting with your community and neighbourhood.

the dwelling, to cause less property damage and to ensure their supports can be safely delivered in the home. “Think an extra egress for support staff, thicker walls and appliances/fixtures more secured,” Trood says.

“In improved liveability properties, you’ll find that the property has a general level of accessibility such as a step-free shower and slip-resistant flooring. You’ll also notice there are additional contrast luminance features.”

Fully accessible and high physical support properties have higher levels of physical accessibility features respectively, step free flooring throughout, raisable kitchen benchtops, provisioning for ceiling hoists and heaps of other and very detailed requirements.

Trood adds, “All the requirements for SDA properties come from the National Construction Code and the 2019 SDA Design Standards.”

Carey says SDA homes typically feature oversized bedrooms, doorways, and bathrooms to accommodate wheelchair passage and turning. They may also include cabling for technology to maintain independence, such as auto-opening doors and blinds. “There will be no steps—just flat access or ramps. Houses can be configured in various ways, such as 3+2+1, 3+3, or 2+2+2 bedrooms. This flexibility allows for a broad variety of people, personalities and disabilities to live there.”

Traditional disability homes have open-plan kitchens and living areas with 3 – 4 bedrooms, similar to most housing in Australia. However, the new design allows for different

configurations, like duplex or triplex builds. Carey says, “This setup provides more privacy, can separate males and females, and offers individual units for those with specific behaviours. It also creates a safer work environment for staff and facilitates filling vacancies due to its thoughtful design.”

ConnectAbility’s future SDA homes will be co-designed with participants, their families, staff, and key stakeholders to ensure they meet the diverse needs and preferences of the individuals who will live in them, Carey adds.

What types of housing does Community Housing Ltd offer?

CHL owns or manages SDA properties in various categories and build types, including shared houses, individual units/villas and apartments in addition to SDA housing. CHL also offers social and affordable housing, with some social housing being accessible or disability-modified.

At the core, CHL’s SDA customers are always the participants renting the property. “We make sure we are working to support them in being happy and safe in their SDA home,” says Trood.

“To achieve that, we collaborate with various individuals and organisations before and during a tenancy. This includes working with service providers, support coordinators, advocates, friends and family members of participants and, of course, the participants themselves.”

Likewise, CHL does not offer SIL services. “We do not offer direct person-to-person support services,” confirms Trood. “We’re strong advocates for a separation of housing and support. Meaning, we think it’s

better for us if we only function as a housing provider. It reduces conflict of interests and assists in ensuring a participant’s choice and control in relation to their housing and supports is always upheld.”

Breaking down the homecare jargon

Regarding where SIL starts and homecare services end, Trood explains that homecare is a more general term for disability support work provided within a home. SIL is a specific type of funded support usually involving 24/7 shared supports.

“Typically, a SIL provider delivers person-to-person support in the home daily to assist participants. On the other hand, the SDA provider is a separate organisation responsible for tenancy management, property maintenance and other related functions,” she says.

“However, every participant’s needs are unique so that arrangements may vary. For example, the design features of some SDA homes may enable a participant to live independently without requiring SIL supports.”

What sets Community Housing Ltd apart

According to Trood, CHL has some exciting new SDA apartments in Prahran, Flemington and Brighton that are now available. “They’re spacious two-bedroom, two-bathroom properties that offer a lot of flexibility for how a participant can live in them.

“Depending on the participant’s support and SDA funding, they can live in the apartments with another participant, with friends or family, or on their own. What sets these apartments apart from other SDA apartments is the community aspect. Our community development team runs events that are driven by the community multiple times a week. This provides a fantastic genuine opportunity for connecting with your community and neighbourhood.”

Many of CHL’s developments feature a mix of social housing and SDA (and some with affordable/private market rental), and the mixed tenure provides an excellent opportunity for connection and community. ●



Your experts in therapy: Manifesting change with choice and control

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By Dr Joseph Randolph Bowers and Dr Dwayne Andrew Kennedy

Empowering people begins with affirming and genuinely supporting individuals in real life. This work requires personal values set to match the client. Often services get this wrong, especially ironic when disability services are carefully set up and driven by audit standards, both internal and external.

Also troubling is that cultures of professionalisation tend to separate people from others. Credentials can intimidate when they are really meant to be signs that say, “I am here to help, I am at your service.” Systems generate rules and codes, and while all these are necessary, they can alienate the people we seek to support.

These are not idle comments. We have found the majority of people who find us have tried many therapists before.

They always say practitioners do not affirm them in real ways that build their confidence. Too often help is based on book knowledge and does not apply to real life, let alone to individuals and their unique situations. Our track record and success with cases is based on a humble person-centred approach that sees our clients as experts in their own life and situation. Mothers are experts in their children’s reality. Staff know what they know through experience. All of this is vital to affirm and support.

Our senior expertise includes doctoral degrees and a lifetime of dedicated learning and experience. But in practice what counts the most for success in specialist behaviour support and counselling psychotherapy is supporting the success and challenges of others. Experiential therapy and behaviour support plans reflect this baseline.

Too often practitioners get caught up in the standards and expectations of the system they work within, whether it is the National Disability Insurance Scheme (NDIS) or otherwise. To create useful

and deeply meaningful therapy and co-written plans from therapeutic dialogue means generating practical solutions with the people who apply these skills from day to day. To achieve this, you need to work closely with stakeholders and listen to their needs. You cannot rely on book knowledge or experience from the past. Every moment is new. Living in the now is vital to success in enabling healing and transformative learning.

Co-therapy means working with parents and children together, building on existing skills in parents who can replicate therapeutic learning with their children into the future. Too often therapists and providers create dependency relationships that prevent growth and healing. We want to work ourselves out of a job at every turn. Give people the skills they need to create change. Then closing the case is a joy when you know people have the skills to move on with life.

We work with confidentiality so we can share instructional stories as montages of the many cases and themes that

arise over decades of working. We teach this way and build world-class training programs in case-based contexts and online at www.awakenability.com. Our recent YouTube adventure shares insights with others @awakenability YT channel. Our NDIS services site has an extensive blog and resources at www.abilitytherapyspecialists.com.au. We welcome your visits and drop us a line.

Autism success story

Imagine a child with autism struggling to cope in rural or urban school systems that do not understand their needs. Parents are equally uncertain of how to help. We have met so many in this boat. Youth get so much from realising they are their own kind of normal. Parents awaken to how beautiful their child really is when we look beyond labels and so-called clinical views of limitations. Too many simply diagnose the problem. The real work starts when you co-create solutions.

The youth is facing pending school expulsion. We work on issues of frustration and anger. But not focusing on the youth's behaviour. We share stories of how others come to terms with society. How hard it must be to not feel understood. To feel isolated. The youth starts to open up. Parents are part of the therapy and they realise what living with autism is like when social relationships fail to provide needed support.

We co-create plans to help teachers and support workers to wake up to how to support the youth. The plan is written for others and they are part of its development. Whatever you write needs to build bridges of understanding. But more so, it has to provide real life solutions that make sense to those implementing the strategies.

This is not easy to achieve—but it is possible. You have to really listen and work with people where they are at. This is where many therapists fall short. In the end, in this particular case, the participant did not need a full on behaviour plan. So often this is the reality. Instead we co-write a personal lifestyle plan.

Every behaviour can only exist in relationships. Sometimes yes, the relationship is within one person. But all behaviours in social and environmental relationships happen in context. Carers and staff are part of that context. Often



Dr Joseph
Randolph
Bowers

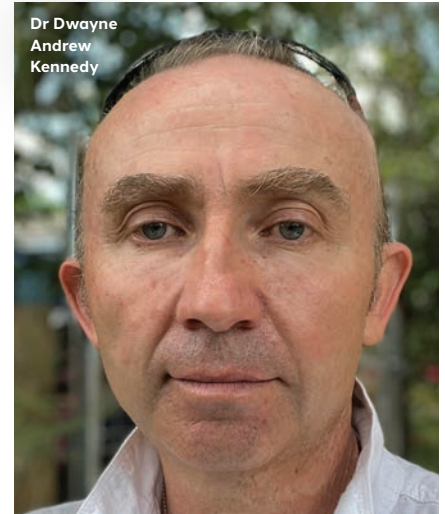
the helper's role is key in behaviours of concern and in finding solutions. The youth will grow to learn and to cope with social relationships. Therapy empowers them and their parents. Autism is transformed into a personal trait, not something to fear or feel defeated about.

People co-write support worker guidelines with us. We co-write a behaviour support plan that acts more like a personal lifestyle plan because it is so positive and affirming. Even in complex cases with restrictive practices, we take a holistic positive approach and build on the skills and capacities of profoundly gifted and differently abled people. How you experience the universe shifts when you walk in our moccasins for a few kilometres.

The youth then will move from school to TAFE and take on new challenges. They get a part-time job in their chosen field. They live semi-independently with drop-in support. Therapy under the NDIS helped them to get this far, and to seek support when they need to debrief and learn from life's ups and downs.

Transgender awakening

Imagine a youth with autism, developmental delays and coming out as non-binary. They want to be called by the gender pronouns of the other gender, or none. They feel not-right in their skin. The gender of birth does not fit an emerging identity. The literature calls this dysphoria. We like to call this awakening to being fabulous. When we can celebrate our reality, life shifts in dramatic ways. We are open to learning



Dr Dwayne
Andrew
Kennedy

in fun ways and the serious issues can be faced with more courage and resilience.

We have provided detailed clinical reports for our transgender clients that speak to complex disabilities but also to the profound beauty and strengths of individuals. Being trans is not a disability. Dysphoria can be very difficult to experience, but it can also lead to growth and learning. We see people in this space when their disability status provides them with NDIS eligibility. Their trans experience can then be viewed in holistic ways as part of their profile of support.

It may be hard to realise how much a youth is coping with when they have multiple issues like autism, developmental and communication concerns, maybe a genetic condition, plus transgender identity. Building a holistic and comprehensive therapy pathway and support plan, while drawing in other stakeholders, requires creativity and expertise. Seeing how youth today face so many issues and how they grow to make personal decisions as a young adult is a level of awesome that is difficult to convey in a few paragraphs.

Practicing radical empathy

Our reports across the board are used for funding reviews but also to build resources and open pathways to services. In almost all our cases, clients have never had a well-written comprehensive report that collates the knowledge of often several dozens of specialist reviews towards a support planning profile.

We often ask for reports back to birth even for adults. We have become known

by those in the know for the most detailed and well-written reports in the field. It is more difficult for the National Disability Insurance Agency to argue against this kind of comprehensive data because it provides robust evidence demonstrating reasonable and necessary support.

Crisis is defined as facing challenges with inadequate resources. When you do not know what you need to know, your life changes can feel like a crisis. Health decisions are in crisis when we fail to get the information needed to face major issues like surgery. Having day to day support, but more so how to manage these support systems leads to crises when we do not have the knowledge we need. Our capacity to manage is lessened by our illness or inability to cope.

Often behaviour support and psychotherapy come up against situations of crisis. Then working toward a solution or many types of solutions becomes important. Where the problem is complex, the pathway forward is often multifaceted. Holistic planning takes into account personal, familial, social and systems solutions.

Imagine a case with intellectual disability, pica, genetic disorders and physical disabilities. The case comes forward also with a misdiagnosis of several conditions that were assumed by junior practitioners and led to service providers confusion and poor planning.

Writing up comprehensive reviews in a case like this requires careful analysis. You need to awaken to the ways that complex conditions overlap and interact to create certain health or lifestyle challenges. You must imagine living in a body that has these issues and sensitivities.

Awakening like this demands deep abiding empathy. This can be confronting for many people. But the next stage in human evolution is empathic resonance. Altruism is a quality of being based on our capacity to connect with others. This means deeply connecting. Allowing ourselves to awaken to an awareness of another person's suffering, pain and existential reality.

It is terribly ironic that therapists are often trained to not be empathic nor intuitive. Training programs overlook growth and communication skills that demonstrate personal qualities while focusing on book knowledge. However,

in real life, therapy is an art based on intuitive and empathic resonance. What defines disability services the most is this capacity to carry another person's burdens even for one day.

Therapeutic gaming for autism

What? You heard us right. Dr Kennedy engages in gaming with clients online. That began with clients whose autism would not allow them to work with any therapists at all. But they loved gaming. The process was to allow the client to game and engage with telehealth chats about the game. Over months this led to opening up about other issues in life. Eventually, the therapy looked at co-creating plans toward venturing out with other relationships.

Later the therapist purchased a specialist gaming computer and set up. Learning the games became part of the process. Some games allow for interaction online between players. Doing this with a therapist is quite dynamic and the therapy includes levels of cognitive behaviour work, symbols and metaphors, stories and challenges to overcome, skills and discussion of goals and planning.

Therapeutic gaming has taught us how valuable it really is to meet people where they are at. We have had deeply isolated individuals with autism whose only links to the world are online. By meeting them in this space, they can form a relationship at their pace and in their own time. Too often services want to rush these outcomes. This can be counterproductive.

Clay art therapy

We have also been exploring online counselling with clay art therapy where we work with clients who set up their resources at home. They purchase a few items to allow working with air dry clay. Some clients find local pottery groups where they can fire clay objects created during therapy.

We have seen many clients have breakthroughs in self-esteem, stress and anxiety management, relationship crisis, trauma recovery and healing from past hurts. Creative methods in therapy, including working with adapted methods in hypnotherapy, allows for an exploration of solutions that many other methods do not allow.

Talking with your therapist while working on drawings, paintings, clay art projects, music or other activities generates a great deal of insight. With the NDIS, our focus is around relationships and behaviour support as well as counselling and psychotherapy. These provide our funding line items but also suggest our focus on measurable goals and outcomes that make a difference and build independent living skills.

New frontiers in lifestyle medicine

Both of us are members of the Australasian Society of Lifestyle Medicine. Dr Bowers was recently welcomed as a senior fellow of the Society in recognition of his years of dedication to the field and advanced clinical practice. Lifestyle Medicine (LM) is a field that champions personal choice and control in healthcare through exercising informed and practical decisions in health and wellness.

In disability and mental health, LM principles and practices seek to empower individuals to make informed choices and address lifestyle health issues in everyday ways. So many of us have given up our agency with healthcare.

Looking at integrating LM's goals into behavioural support planning is a new frontier in both LM and in NDIS funded specialist reviews. This builds on decades old values in disability services that sought to review lifestyle and quality of life measures.

LM practitioners take their primary professional status from their respective fields of work. They then apply principles in LM in collaboration with GPs, primary and secondary health practitioners, mental health providers and NDIS specialist therapists. We find this work exciting as it builds on person-centred values to empower NDIS participants in managing their own health and taking a more active role in their medical needs. ●

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