

POLICY BRIEF

Achieving quality disability service provision.

Quality service provision is the foundation of daily living for people with disability, especially those with complex support needs. It enables independence, participation, employment, education and wellbeing. If delivered correctly it also provides an economic benefit through reduced health management costs and improved economic participation.

Introduction

In 2023, SCIA conducted a member-wide survey to better understand the barriers and challenges people with disability experience when accessing care from aged care and disability service providers. The report is available on the SCIA website.

People with disability, their carers and families are capable individuals who can advocate for themselves with the correct training and policy levers in place. This Policy Brief is designed to inform:

- a. Disability and aged care service providers and
- b. The NDIA and My Aged Care

Our report highlights that, whilst many people are happy with the services they receive, others experienced frequent cancellations, inconsistent service, poor quality and difficulty raising complaints. Many of these issues have also been highlighted in the NDIS Independent Review Findings, and the Royal Commissions into Aged Care Quality and Safety and Violence, Abuse, Neglect and Exploitation of People with Disability.

Acquiring a complex disability, has lifelong effects. However, with appropriate support people with disability such as Spinal Cord Injury (SCI) or Acquired Brain Injury (ABI) can continue to live fulfilling lives, where they enjoy good health and economic participation. Inconsistent service and poor quality of care leads to increased cost to the Australian economy. The cost to the Australian economy through lower employment, absenteeism, loss of wellbeing and health care

for people with spinal cord injury alone is \$43.9bn.¹ Improved service provision not only leads to reduced health management costs through improved wellbeing and mental health but also reduced economic pressure as people with disability are better able to remain in the workforce.²

Survey Findings Summary

People with SCI and other Neurological conditions have some of the highest support needs in the NDIS: 19% of survey respondents used more than 40 hours of care per week, 25% received between 20 and 40 hours per week and 19% used 10 – 20 hours of care.³

These hours of support enable participation and are used primarily for domestic assistance, personal care, community participation, medical, and transportation.

While 48% of respondents use registered providers, a significant minority of respondents, 30%, use either only unregistered providers or a combination of registered and unregistered providers. This is relevant because many respondents shared that their dissatisfaction with service provision had been the main driver in moving towards the use of unregistered supports. Thus, this information offers an incentive for both government policy makers and service providers to strengthen the policy levers governing providers and training to improve service delivery.

Many respondents stated that they prefer to either utilise sole traders through platforms or employ their own staff because it results in significantly reduced cancelations and missed shifts. One gentleman said that when he was with a service provider, they missed shifts at least once a fortnight. He wished he had moved to hiring his own staff years ago. Another respondent said that she “has a great team”; she manages 11 staff that she employed herself and manages her roster.

Satisfaction with supports

Whilst overall respondents were slightly more satisfied than dissatisfied with supports, the table below highlights the opportunity for improvement and is the foundation for the recommendations included in this brief.

Type of issue	Satisfied	Dissatisfied
Interaction with a service coordinator	46%	31%
Kept informed about changes	41%	43%
Choice and control in support workers	38%	40%

¹ Spinal Cord Injury in Australia. The case for investing in new treatments, alphaBeta Report, December 2020.

³ SCIA Service Provider Report, 2024

Flexibility to adjust service times	54%	26%
Quality of support workers	53%	35%
Interaction with support workers	58%	23%
Service provider cancellation policies	31%	40%
General rapport and understanding by a service provider	53%	29%

The three highest areas of satisfaction were: interaction with support workers and quality of support workers as well as flexibility to adjust to service times suggesting that at an interpersonal level respondents were happy with their support workers.

The three highest areas for dissatisfaction were: being kept informed about changes, cancellation policies and choice and control with support workers. This suggests improvements made at a structural level will have the biggest impact.

Respondents highlighted

- A lack of choice or control due to changes to schedules and staff made without being consulted or informed.
- Shifts being routinely cancelled, often at the last minute with agencies having a high staff turnover.
- Cancelled shifts due to insufficient staff or lack of choice about support times.
- Insufficient procedures for cancelled shifts, particularly for personal care. In some cases, services were unaware of when support workers had not attended a client.

69% of respondents reported missing out on scheduled supports due to cancelled shifts with little or no notice with 32% saying this had occurred over ten times in the past twelve months and 38% reporting between four and nine times in a twelve-month period.

- Insufficient knowledge in personal care team about complex disability such as SCI
- Unprofessional behaviour such as staff arguing with each other, not following care plans, bullying participants, not understanding boundaries, not dressing appropriately for work, going through people's private papers and other confidentiality breaches, conducting their own person business whilst caring for the client, not including the person with disability in conversation, walking out on service, turning up late or not at all, being argumentative, constantly talking on mobile whilst caring for the person with disability, vaping in the car, stealing from clients, speaking about other participants in front of a client, swearing, being disrespectful, physically abusing clients and not listening to instructions causing injury and at times hospitalisation.

“[Support worker] constantly on the phone whilst supporting me. Turning up late or not at all.” Female Respondent from South Australia

38% of respondents believed that support staff were not adequately trained and 49% experienced incidents where they believed support staff acted unprofessionally while supporting them. 60% of respondents felt safe however too many, 38%, of clients reported feeling unsafe with their support workers.

- The need for improved processes and follow-up regarding feedback and complaints.
- Respondents reported fear of negative consequences of speaking up or complaining.
- The need for advocates to help in this regard was highlighted.
- Once feedback was given, the situation does not always change.

77% of respondents felt comfortable providing feedback to their service providers however a remaining 23% were not comfortable for fear of negative consequences. Of those who did raise issues, 57% reported that nothing changed following the investigation.

Service Provider Recommendations

The report highlights that people are predominantly happy on an interpersonal level with support workers. Areas for improvement are primarily at an operational level. Although securing staff is challenging in the care sector, it is clearly possible given reports that when people with disability or their carers recruit their own staff, retention is improved. Therefore, service providers who invest in their staff will likely see overall staff and client satisfaction rates improve. Adopting the following recommendations will significantly improve service delivery.

Recommendation: all service providers mandate disability awareness training for all employees including those who work in operational roles. When employees understand disability, they will better understand the importance of professional behaviours such as timeliness.

Recommendation: ensure that all employees responsible for personal care have adequate training regarding complex disability including bowel management and pressure care.

Recommendation: invest in staff for long-term success including setting clear expectations about boundaries, confidentiality, timeliness and respect.

Recommendation: develop rosters in consultation with clients and provide advance notice of changes and cancellations.

Recommendation: create processes that follow up with clients and employees following shifts to ensure satisfaction and invest in continuous improvement.

Recommendation: provide clear processes for feedback and complaints and invest in continuous improvement to ensure people see change. Always follow up with clients to report on actions taken and give opportunities for further feedback.

NDIS and My Age Care Recommendations

SCIA supports the NDIS focus on improved quality and safety following the NDIS Review. In addition, SCIA strongly urges both the NDIS and My Aged Care to adopt the following recommendations.

Recommendation: mandate training regarding complex disability for all service providers providing complex care.

Recommendation: ensure pricing is sufficient for service providers to prioritise training. In the long run, adequate training and regulation will provide a cost saving as staff turnover and provider complaints are reduced.

Recommendation: ensure all staff required to regulate service providers have undergone disability awareness training and utilise specialist knowledge areas within the department/s.

Recommendation: invite representative organisations, such as Spinal Cord Injuries Australia, to provide information and guidance on appropriate service delivery.

The Opportunity

The results of the SCIA Member Survey are aligned with those of the NDIS Independent Review Findings, and the Royal Commissions into Aged Care Quality and Safety and Violence, Abuse, Neglect and Exploitation of People with Disability signifying a pressing opportunity for service providers, government and representative organisations to work together to ensure that people with disability, and in particular people with complex disability have high quality care and support.

If service providers, the NDIS and My Aged Care follow the recommendations outlined above, the outcome for people with disability and the economy (through improved wellbeing and employment) are significant.

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