



Council for  
Intellectual Disability



## Joint Position Statement – May 2016

# Transfer of NSW government disability services to the non-government sector

We are very concerned that the NSW Government's process for transition out of service provision is based on ADHC choosing a person's new service provider rather than that choice being made by people with disability with support as appropriate from their families and other advocates.

However, we are now focusing on recommendations that we can make aimed at the Government's process including maximum input by people with disability and their families and achieving important goals such as a diverse market of service providers, meeting complex needs and maintenance of vital ADHC services that will not be continued by the National Disability Insurance Agency.

### We recommend as follows:

#### The ADHC EOI and tendering process

##### Key outcomes of this process should include

- a diverse market of providers so that people with disability will readily have choices available to them if they wish to change providers after the ADHC closure process,
- a market of providers focused on innovation and flexible supports rather than, for example, a primary focus on group homes, and
- people not being dependent on one service provider to meet all or most of their needs and goals.

Services should be put out to tender in the smallest feasible chunks and tendering needs to result in diversity of providers including in regional and remote areas. Culturally appropriate services are needed.

#### ADHC owned housing

Support providers should not have control over accommodation. ADHC housing should not be transferred to support providers. If ADHC proceeds with its plan to lease housing to support providers, the lease should be for a short term and provide that, on request from residents, it will be transferred to another provider.

#### Consumer and independent input to the EOI and tendering process

##### There should be:

1. Independent consumer, carer/family and professional representation on panels considering expressions of interests and responses to tenders. These representatives need to be appropriately remunerated in view of the time and responsibility involved in this task.
2. Establish a regular communication process, which includes frank updates to people with disability and their families/carers on the EOI and tender processes and on the interplay between the ADHC processes and the transition of people into the NDIS.
3. Input by key advocacy groups into all major steps in the process including the tender specification, consideration of the results of the EOI and determining what say people with disability and their families/carers will have in choice of their service provider.
4. Prompt spelling out of a process for people to have an opportunity to choose their own new support arrangements if they transition to the NDIS prior to their service being tendered out by ADHC. ▶



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5. Independent decision/advocacy support provided to clients of ADHC who do not have an involved family member or advocate to assist them through the transition process.

### **Safeguarding processes (in particular for people with complex needs)**

#### **ADHC should:**

1. Fund independent organisations to provide decision support/advocacy for people with disability and families/carers who want independent information in relation to the ADHC transition process or support to express and pursue grievances in relation to how it is unfolding for them.
2. Establish a robust arrangement with the Ombudsman to monitor and report on transition for people with complex needs both on a proactive basis and in response to complaints.
3. Resolve with the NDIA and promptly announce what provider of last resort, crisis provider and complex behaviour support arrangements the NDIA will have in place. There is a very legitimate community concern about whether the market will meet these issues.
4. Promptly take action to meet the issues identified by KPMG in its analysis of issues in safe transition of people with complex needs.
5. Identify any roles currently taken by the Community Justice Program and the Integrated Services Program that will not be funded by the NDIS and resolve and announce robust arrangements for these roles to be maintained by the NSW government.

These processes would both increase community confidence in the process and provide valuable feedback to the Minister and department so that they can be continually addressing legitimate concerns that may arise.

The NSW Government should not exit disability service provision until it is clear that the non-government sector is able to meet the needs of all ADHC clients, in particular those with complex needs.

### **ADHC health services**

Resolve with NSW Health arrangements for continuity of the health services funded by ADHC as recently highlighted by the NSW Ombudsman in the Report of Reviewable Deaths 2012 and 2013.

### **NSW advocacy infrastructure**

Resolve with the Commonwealth and other NSW government agencies arrangements for maintenance and enhancement of existing advocacy beyond 2018 in NSW including, for example,

- the systemic advocacy that NSW CID does with agencies such as justice and health towards their responding to the needs of people with disability,
- the Criminal Justice Support Network of the Intellectual Disability Rights Service which trains and coordinates volunteers to support people with intellectual disability in court and in police interviews, and
- advocacy by families as currently provided by Family Advocacy in NSW.