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## **Unsafe at any speed**

A submission to the Royal Commission into Violence,  
Abuse, Neglect and Exploitation of People with Disability

## **Re: Safeguards and Quality**

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ABN 30 591 218 387

**Leadership Plus**

Anzac House Level 4  
4 Collins Street  
Melbourne VIC 3000

Phone: (03) 9489 2999  
[www.leadershipplus.com](http://www.leadershipplus.com)

Leadership Plus acknowledges the traditional owners of the lands on which we  
work and pays respect Elders past, present and future.

This document was prepared on the lands of the Kulin Nation.

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## Leadership Plus

Leadership Plus thank the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Royal Commission) for its focus on Safeguards and Quality, and we welcome the opportunity to provide input.

We are advocates and decision supporters working closely with people living with complex disabilities in Victoria. We advocate for nearly 300 people each year, with a particular focus on those living with cognitive disability (acquired brain injury), and are intimately acquainted with examples of violence, neglect, abuse and exploitation of people with disability, and of various systems' failures to recognise and take corrective actions when harm occurs.

Over 60% of our work now concerns interactions with the NDIS, where we see a large amount of our client base struggle to secure access to the scheme and the funding necessary to promote their full social inclusion, which we identify as a key safeguard against the violence, abuse and neglect.

Our individual advocacy work relies on building strong relationships with people living with disability, family members and their loved ones. Similar issues are raised time and time again and are confirmed by numbers of advocacy organisations in our state-wide and national networks.

Our daily experience gives us a unique position to identify and articulate the issues, and to pinpoint important solutions to enable the Disability Royal Commission to make effective recommendations.

We at Leadership Plus applaud the work of the Disability Royal Commission and have no illusions about the enormity of the task it has undertaken. We join all the disability advocacy networks in which we are represented and involved (Victorian Disability Advocacy Network, Disability Advocacy Victoria and Disability Advocacy Network Australia) in wishing only for the success of the Commission.

We are mindful that abuse, neglect, violence and exploitation happen in many areas of life: in families, in employment, in hospitals, at schools and TAFE, in housing and health. Our experience as independent advocates for people who need additional support (as mentioned in your Issues Paper: people who do not have informal supports, people who face communication barriers and people with high support needs), provides direct intelligence on several of the questions in your Issues Paper.

We trust that providing our submission and de-identified examples of real client experiences will add value and help the Commission to make meaningful recommendations to lead to more positive outcomes for people living with disability and the whole community.

## Key issues with Safeguards and Quality

### Question 7: What safeguards are required for people who need additional support?

#### 1. An informal network of support

Regular, trusted community access is key to prevention of violence, abuse, neglect and exploitation, and is thus considered a fundamentally important informal safeguard.

Whilst it is true that certain people living with disabilities may be vulnerable to exploitation and abuse when engaging in the community, be it at work, in community groups, exercise programs, or shopping, our experience shows that clients who are most connected to their communities are best protected by the awareness and concerns of the varying people they interact with. This can be thought of as a circle or 'network of support' model of safeguarding.

Sadly, many people with the highest support needs have no such informal supports. Several factors interact to exacerbate isolation and segregation: poor general baseline understanding of disability, our generally insular lifestyles, disconnected from our neighbours and the local community, and the history of institutionalisation, where people were raised in institutions because that was the thing for families to do with disabled children. Largely, estranged from their families, they lived in sheltered settings, grouped together with other disabled people in institutions and now in group homes, due to just one facet of their being/personhood – their impairment/disability. This enforced segregation – in both housing and education – deprives people of the full opportunity to explore and develop unique interests and talents as others do, to find and connect with humans with shared interests and skills in the broader community. The historical impact of institutionalisation cannot be underestimated in the experience of people living with disability.

#### 2. Independent oversight of service providers

The lives of many are almost completely dependent on formal services, often provided by a single agency provider, risking conflicts of interest. As the NDIS funding model is set up so that services bill for funds only when they are face-to-face with the client, there are few financial incentives for staff training and program development. The unintended consequence of the funding mechanism is that providers employ mostly underpaid, untrained, casualised workers, to care intimately for the most vulnerable Australians. In paid support work, a power dynamic operates and may create harm, whereby people with disabilities are utterly reliant on the daily support of the very same people who may mistreat them. People will not disclose abuse without trust, and it is often the case that people's only avenue of complaint is via the very services that are responsible for their victimisation.

In view of this, in addition to the general level of oversight provided by community members and supports through access and engagement, independent, trained community visitors can provide crucial regular oversight. So too can both professional and volunteer advocates.

## Solutions for Safeguards and Quality

### Question 3: How can safeguarding laws, practices or policy frameworks be improved?

#### 1. Developmental measures

Few NDIS support worker agencies appear motivated to fund rights-based education for workers. Low pay and casualization of the support workforce severely restricts the potential to improve quality of supports, especially when there is a revolving door of new workers

A more educated and professional workforce could play an ambassador role, promoting human rights, inclusion, communication and negotiation, benefiting workplace culture and NDIS Goal outcomes. It is the support workers in settings such as day services and group homes, and 1:1 community support workers, who often spend the most time directly engaging with those with disabilities. Their role is demanding and vital, and yet they are paid little by comparison to others in the sector and in general.

**Recommendation:** Explore ways to reward providers for investing in and upskilling staff who can in turn build clients' capacities to exercise choice and control.

With a more educated community, ordinary people would feel more confident and competent to approach and engage people living with disability, which would strengthen informal safeguarding.

**Recommendation:** Implement public awareness campaigns to reduce the stigma of disability, show the diversity of the disability community and lived experience, and demonstrate the impact of compassion and community on quality of life.

Whenever people with disability interact with mainstream services, there is an opportunity to understand and help and link, and thereby prevent abuse and neglect.

**Recommendation:** Provide mandatory cultural change programs for dehumanised bureaucracies which process 'consumers' and transform them into services which help vulnerable people live more meaningful lives.

## 2. Preventative measures

Extra opportunities to build informal, trusting relationships - the best form of safeguard - often occur when people have access to community groups.

Whilst the NDIS was built around an ideology of 'choice and control' and individualised funding, it is often a difficult battle for Participants to secure the funding required for them to individually access the community safely.

There are significant challenges around securing funding for 1:1 community supports, as well as the necessary transport funding. This means that many participants who could be exploring mainstream community groups, or volunteer programs with the assistance of a support worker, instead continue to attend only group disability day services, with limited opportunities to create new informal connections.

**Recommendation: NDIA Planning needs to provide additional and easily accessible funding for transport and support workers, to get people out of home and into society.**

Improved supervision and performance management of staff is vital; the current lack of oversight of low-paid workers in group homes and similarly closed settings, and a lack of appropriate training to promote human rights, creates a pressure-cooker of risk of abuse, violence, neglect and exploitation.

**Recommendation: Devise ways to incentivise service providers to invest in skilled supervision and performance management.**

Goal Setting and Planning by NDIS skips vital steps in understanding a person's situation, vulnerability and risk of social isolation. Currently planners are incentivised to trim budgets. Yet the best planners explore and communicate the risks upwards, so preventative measures are funded, minimising system and reputation risk.

Support Coordinators also need training in identifying vulnerabilities and high-risk situations, and in responding proactively to complaints.

**Recommendation: Train NDIS Planners and Support Coordinators in Decision Support skills, including in exploring, "Who do you know?" "Who do you speak to?" "Who can help you to make a call?"**

### **Question 6: What role should independent monitoring and oversight play?**

Someone needs to be visiting homes and particularly monopoly service providers on an ongoing basis - someone with a fresh perspective, fresh eyes, someone who can notice differences, and who knows who to call and what to do. The most effective model we have seen is the independent OPA Community Visitors' Scheme. We note this is a volunteer



model, one of the most effective models and it is run largely through the use of volunteers. Independent monitoring and outreach is a crucial gap in safeguarding.

**Recommendation:** Considering the clear vulnerability of people with a disability, a systematic monitoring program needs to be put in place, with the active engagement of independent specialists, to ensure that all facets of the needs of people living with disability are met and risks of abuse and neglect minimised.

Highly relevant to its mandate, the NDIS Quality and Safeguards Commission could itself be involved in more proactive, broad observations and investigations, rather than reactively relying only on consumer complaints and service providers' reportable incidents.

**Recommendation:** The NDIS Quality and Safeguards Commission needs to diversify its tactics in keeping people safe:

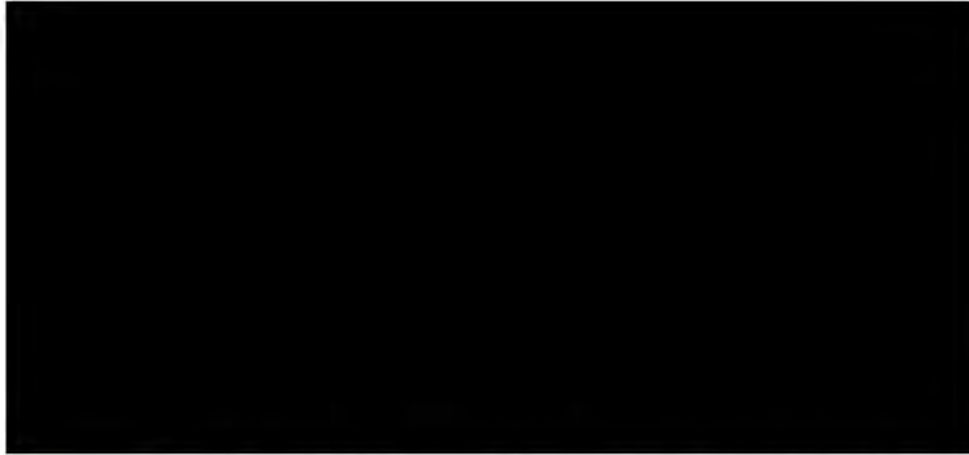
- developing specialisation in communication skills and decision support expertise with people with disability who have additional needs,
- employing the latest technological possibilities and enabling choice and control
- identifying those people with high support needs and with only one or minimal agencies contracted to provide care, clearly a group of people at risk.

### 3. Corrective measures

**Question 9: What barriers do people with disability face when making a complaint?**



**Recommendation:** Train the sector in recognising “problem behaviours” as “attempts at communication” and fund specialist interpreters to solve problems rather than ignore them.



**Recommendation:** The Quality and Safeguards Commission needs to be much more active in outreach to people with disability who make a complaint. The staff need training in Decision Support and to leverage their under-used powers of investigation.

Leadership Plus have found, and our network of fellow advocacy organisations agree, that the [REDACTED] They are not routinely utilising their powers to do site visits and to investigate complaints by liaising with all interested parties. Advocates within the sector are commonly seeing an apparent focus on conciliation and closing complaints, rather than investigating and exploring the systemic implications.

**Recommendation:** See a complaint as a vital opportunity to minimise systemic risks and improve lives, rather than a tiresome blemish to be hidden and smoothed over. Set formalised expectations in SIL/SDA settings around reporting and communication with interested parties when a complaint is made, demand transparency in how ‘external investigations’ are conducted by service provider organisations and commit to investigating and solving systemic failures in safeguarding and quality.