Independent Advisory Council to the NDIS

Support Coordination

October 2018

Table of Contents

Introduction

Support Coordination

Significant resources are allocated to Support Coordination in participant plans but outcomes have not matched expectations and there has been widespread dissatisfaction as a result.

The NDIA commissioned the Boston Consulting Group to undertake a review of the current roles of intermediaries in disability support markets, with a focus on plan managers and Support Coordinators. The review was motivated in part because of concern that the intermediaries market had not developed as anticipated.

This paper highlights the critical importance of Support Coordination, identifies adjustments to enhance its effectiveness and proposes strategies to facilitate the emergence of a more balanced market of providers of Support Coordination.

Note: Most disability service systems offering enhanced choice and control through individualised funding include a role of a broker (UK)/ case manager (US) / facilitator (Canada) / support coordinator as an integral part of the of the equation that develops and implements person centred, locally responsive options of support. Whilst all the roles have some differences, core elements are consistent with the NDIA Support Coordinator role and hence this paper will provide evidence of how other jurisdictions have responded to challenges experienced by the NDIS.

The importance of Support Coordination

The delivery of key outcomes of the NDIS will fail unless people possess or have access to the knowledge and skills required to design, build, negotiate and orchestrate informal, mainstream, community and funded supports to build an ordinary life. These are not easy tasks. Managing a person into a service vacancy is not a response that is fit for purpose.

The NDIS requires Support Coordination to deliver these outcomes for participants in the intensive and super-intensive stream, participants who by definition experience vulnerability related to personal factors (Aboriginality, CALD, refugee, abuse, significant poverty), lack informal support and have complexity in their lives either arising from their disability or from their engagement in the justice or child protection systems.

These are participants for whom the opportunities enabled by the NDIS will not be forthcoming without significant representation and negotiation to:

- navigate the system
- explore what is possible
- research and connect to opportunities and services
- design supports

- negotiate service agreements
- mould supports to achieve goals
- negotiate reasonable adjustment in mainstream services
- participate in community activities
- build informal support.

These are the participants whose packages of reasonable and necessary support will be large and will test the sustainability of the Scheme. The key strategies that mitigate these risks must strengthen participant capacity and informal support, negotiate equitable access to mainstream services and nurture inclusion in the community.

A Support Coordinator must be the skilled strategic guide that helps the participant to move beyond seeking to maximise disability and support and remain in specialist disability services; behaviours that were rational and predictable in an untrustworthy crisis driven state system but are counterproductive in the NDIS. Untrustworthy state systems taught clients to be wary of risking the use of mainstream services and informal supports because there was no guarantee of getting back into the system if something went wrong. Hence Support Coordination has an important role in building trust in the insurance approach of the NDIS.

The outcomes of effective Support Coordination are seen in the ordinary life for a participant and a sustainable NDIS. Effective Support Coordination strengthens confidence in the Scheme including that informal support has been strengthened, that mainstream and community services are 'doing their bit', that public funds are used effectively to improve outcomes and that participants are becoming more independent with a balanced approach to risk.

Enhancing the effectiveness of Support Coordination

Outcomes

In measuring the outcomes of Support Coordination, it is important to take into account that its target group are the most vulnerable 20% of participants where the achievement of real outcomes will take significant planning, time and orchestration.

The IAC is pleased to see that in the 2018-19 Price Guide, Support Coordination is framed as *"supporting participants to direct their lives, not just their services. This involves working together to understand the funding, identify what participants expect of services and how participants want this designed. Coordination of Supports also includes coaching participants to develop capacity and resilience in their networks."*

As the IAC has reported in many papers, the main challenges to Support Coordination is that there is inadequate attention to the capacity building elements of the role and the time allocated needs to match the outcomes sought. This is reflected in the inadequate understanding of what is required to achieve outcomes related to:

- 'support the implementation of …informal support',
- 'strengthen and enhance participant's abilities to coordinate supports and participate in the community' and
- 'build the capacity of the participant to achieve greater independence to self-direct services and supports in the longer term'.

The IAC has also argued that the role of Support Coordination should include assisting participants to develop personal safeguards and that general and supported participants be enabled to use capacity building funding to purchase support design if the chose in line with the Intermediaries Review recommendation.

Proposed enhanced outcomes for Support Coordination

Current outcomes for Support Coordination	Additional Outcomes: Participant	Additional Outcomes: Other
All funded supports have been drawn down or adequately been replaced by unfunded supports	The design of supports demonstrates moves to an ordinary life	
If there are multiple supports in the plan, a variety of agencies are providing support or there is evidence that the participant was provided with genuine choice	Where all supports provided by one provider: Participant and their network can describe alternate options offered	
The participant is well connected with informal and mainstream and community supports	Participant has created [insert number] new relationship(s) with a person(s) not paid to provide support Participant feels confident to use mainstream service Participant participates regularly in [list all activities] activities in the community that is not specifically for people with disability. At this activity: - Participant feels confident - Participant is known by other people who undertake this activity	Provider makes reasonable adjustment to provide service to participant Provider has plan in place to respond effectively

Current outcomes for Support Coordination	Additional Outcomes: Participant	Additional Outcomes: Other
	- There are people who feel confident to respond to participant	
The service provider effectively monitors the quality and effectiveness of the supports the participant is accessing, working with the participant to resolve issues that arise		
The service provider has taken responsibility for working with the participant to resolve any points of crisis that affect service delivery		
The need for support has reduced or is no longer needed	Participant is more independent in certain areas of their life, including [list areas]. Because of this they may reduce certain supports	
The participant and their network better understand how to participate in the NDIA processes such as establishing agreements with service providers, managing budget flexibility and setting and refining goals, objectives and strategies	Service agreement identifies and takes action on specific issues of concern to participant and their network Participant and their network can use their budget to plan for activities such as holidays Use of support changes over time	
Participant's family have developed strength in provider and service understanding and able to provide similar informal support to the participant	Participant without engaged family has a person to negotiate on their behalf	

Current outcomes for Support Coordination	Additional Outcomes: Participant	Additional Outcomes: Other
Demonstrated evidence that the participant has strengthened their social, community and economic participatory goals	Participant has personal safeguards in place Participant is more independent in [insert area] looking for work and participating in the community	

Skills

One area of disappointment in the operation of Support Coordination relates to the inadequate understanding of the skills required to build informal support and enhance participant capacity. Research by Roger Stancliffe[1] with the provider AFFORD demonstrates the nature of work required to support people with intellectual disability who have led segregated lives to transition to mainstream options in retirement. The key message from the research is that inclusion and the establishment of informal networks in ordinary places is possible but that it requires sustained and strategic effort over time.

Time frame

Participants in the intensive and super intensive streams need guidance over a significant period of time to positively disrupt patterns that do not contribute to outcomes of increased independence and participation. The level of Support Coordination in relation to the complexity of the situation means that in practice, only the case management elements are implemented and there is little or no attention to the capacity building tasks that are central to reducing the long-term need for support. These tasks include work to:

- build informal support
- embed (not just connect) the participant to the community in meaningful ways that build belonging and inclusion
- guide and mentor services to work toward participant goals of increased independence and relationships
- identify areas for next steps, and
- support the participant and his/her newly connected informal support to speak up.

The allocation of Support Coordination makes assumptions about the availability of providers of core supports that are skilled at working developmentally. In an ideal world, competent services are readily available to undertake this work but anecdotal

---

[1] Supporting people with disabilities to transition to retirement

evidence suggests that the reality is very different, to the detriment of the participant and the Scheme. Elsewhere, the IDRG[2] has called for a market scan to test the readiness of providers of core supports to assist participants in ways that facilitate increased independence including identifying the core competencies required for support workers to increase participant independence.

Specialisation

Support Coordination is not differentiated by type of need or participant so it is often provided by Support Coordinators without specialised expertise in working with the target cohort or participants at the specific life domain.

The NDIA provides the time limited Specialist Support Coordination for participants experiencing a high level of risk. This includes participants in touch with the criminal justice system, who are eligible for SDA, who have complex behaviour and who have complex health. IAC papers have argued however that the NDIA differentiate Support Coordination by target group not just by risk, to ensure providers have the requisite knowledge, skill and experience. The IAC also argued that these requirements should be reflected in the registration process.

The Innovations Reference Group recommended the development of the targeted role of Support Coordination (Housing), scoping the nature of support required to explore, plan and transition participants into more independent living. Appendix 1 outlines a phased approach as well as skills and expertise required at different points of the journey including flexibility to access technical assistance that lies beyond the traditional disability sector.

The Tailored Participant Pathway will provide a specialised pathway for targeted cohorts of participants. This will inform future direction as to the effective use of Support Coordination and greater focus on LAC connecting participants to supports more effectively. External stakeholders in the development of the Complex Needs Pathway urged the NDIA to play a stronger role in addressing skill development of Support Coordinators and sought the development of practice guidance in relation to funded support implementation, and navigation and referral to other government services and community supports.

Target group

The target group for Support Coordination may be unnecessarily restricted.

It is the role of Partners in the Community delivering Local Area Coordination (LAC) services to assist participants in the general and supported service streams to activate informal, mainstream and community supports and assist the participant to link to services. Whilst the revised Participant Pathway will facilitate increased participant engagement, the IAC is concerned that LACs are unlikely to have the time to provide more than information and referral. In addition, the IAC is concerned that the assumptions about the capacity of participants to reconfigure their supports and

---

[2] IDRG *"NDIS Supports for independence",* December 2016

negotiate service agreements to help them achieve their goals are unrealistic.

Participants who have informal support but face complex situations need skilled assistance to lead an ordinary life. Many are participants with significant disability who have traditionally been subjected to low expectations with a natural pathway to grouped accommodation and day programs. Some have engaged families who seek guidance as to how to build ordinary lives for their family member with disability.

The now obsolete Support Coordination Framework allocated Support Coordination according to a matrix of capacity of participant AND complexity of plan. This enabled the provision of Support Coordination for people with significant disability who want to avoid congregate services and want paid staff to facilitate relationships and help them be more independent. The challenge is that these participants do not get support to redesign their support and move from congregate to individualised services.

The Support Coordination Framework enabled the allocation of Support Coordination to plan and implement the highly nuanced steps required to succeed. Evidence from state and territory systems suggests that assistance of this nature represents value for money contributing to participants being more independent, more safeguarded, with greater levels of participation and less need for paid support.

Registration requirements

Elsewhere[3], the IAC and the IDRG have argued that registration for Support Coordination does not require evidence of the knowledge, skills and experience required to provide the capacity building support with many Support Coordination providers advertising their services as case management.

In particular, the IAC is concerned at the NDIA requirement that a provider of Support Coordination holds qualifications in psychology or allied health for two reasons. Firstly, allied health qualifications do not per se demonstrate the capacity building approach sought for this role (with the Interface Principles describing the role of allied health professionals as "maintaining or managing a person's functional capacity … to achieve incremental gains or to prevent functional decline"). In addition, the restriction to these qualification groups eliminates the opportunity for others who are well able to provide Support Coordination, from registering. Of particular concern is the impact of allied health requirements on the possible registration of people with disability whose functional impairments may have made them unsuitable candidates for degrees in the allied health but whose knowledge and skills arising from other work and life pursuits and whose lived experience of disability make them excellent candidates for the Support Coordination role.

---

[3] IAC, *(May 2016) Support Coordination as a tool of capacity building in the NDIS*
IAC (August 2016) *Support Coordination as a tool of capacity building in the NDIS: A discussion paper*
IDRG (June 2016) *Requirements of support coordination to meet the goals of the NDIS for people with intellectual disability*

Conflict of interest

In state and territory systems, case managers often found it difficult to reconcile their conflicting responsibilities to the client, with those they had to the service provider who employed them. Government employed case managers found it difficult to navigate conflicting interests between their clients and the constraints of public funding body. The NDIA structured the Support Coordination role to avoid such conflicts.

NDIA policy, reflected in the 'Request for Service: Support Coordination', indicates that it is the NDIA preference that *The Coordinator of Supports should not be the provider of any other funded supports in the plan;* However, this preference is usually waived: *The utilisation of First Plans means that the initial Support Coordinator may be employed by the same provider organisation as delivers other supports. Any potential conflict of interest must be managed by the provider and monitored by the NDIA.*

In managing any perceived or actual conflict of interest, the NDIS Terms of Business require registered providers to:

- act in the best interests of participants, ensuring that participants are informed, empowered and able to maximise choice and control.
- not (by act or omission) constrain, influence or direct decision making by a person with disability and/or their family so as to limit the person's access to information, opportunities and choice and control'.

In general, Support Coordination has not provided participants with adequate '*access to information, opportunities and choice and control'* as a result of multiple factors. Support Coordination is generally provided to participants by the provider of core or SIL supports introducing a risk that alternatives are not given as thorough an exploration as may be required to contemplate an alternative. The conservative nature of most participants and their families means that most participants remain in the services with which they are familiar, at least for the first plan. The fact that Support Coordination is provided to a significant proportion of participants only in their first plan means that when, over time, participants have an appetite to explore different options, they do not have support to *access to information, opportunities and choice and control'.*

The balance between requirements for independence and perceived constraints of the market has been a contentious issue. Participant advocates argue the avoidance of conflict of interest is essential because most participants with Support Coordination lack the capacity to identify and understand conflict of interest, are not aware of opportunities they have never experienced and feel loyal to what they know. In addition, participant advocates argue that independent Support Coordination is a safeguard that mediates the pressures of: participants who doubt the reliability of mainstream opportunities and hence maximise funded support; and providers who subtly and even subconsciously protect their clients from the uncertainties of mainstream and community services.

National Disability Services (NDS) and the NDIA have argued that the market is not yet sufficiently mature and that a requirement for independence may deplete the market, leading to additional risks for vulnerable participants. The view is put that interests are ubiquitous: the issue is to declare them, recognise the potential for bias and manage conflicting interests, as occurs in the health sector.

In practice, a participant's SIL or Social and Community Participation provider very often provides their Support Coordination.

The case for avoidance of conflict of interest is based on:

Creating an NDIS that is trustworthy: In conceptualising the role of Support Coordinator, the NDIA sought to strengthen the trustworthy nature of the system by providing a secure and yet separated place from the funder and provider agencies in order to prevent obligations that staff might have to the organisation that employs them, from compromising decisions they may make or recommend regarding the person they are supporting.

Preventing authority drifting back to providers: The disability services system, similar to most other systems, is fundamentally conservative and will employ a range of strategies to resist change. Support Coordination is an innovation to support the power shift to participants, providing a broker to navigate systems and supports to implement participant goals.

When a SIL provider also provides Support Coordination for its resident participants, (often by rebadging caseworkers and house managers to Support Coordinators), the provider is able to manage the innovation without substantial change, by 'managing' the expectations of participants toward options that fit within its current practice.

Protecting people who cannot advocate for themselves: Where participants are in a weak position to assert their rights, or assess the trustworthiness of advisors, the case for offering independent Support Coordinators is especially strong. When a SIL provider also provides Support Coordination to its resident participants, the risks of service capture and the loss of the potential safeguard arising from contact with a person independent of the service is significant.

The choice and control offered by the NDIS can only make a difference to participants if they are supported to identify and try new options. Where the provider of core and SIL supports provides Support Coordination, most participants 'choose' the familiar, thereby handing their NDIS conferred authority in relation to choice, control and decision making to providers, without even being aware they are doing so.

The case for avoiding conflict of interest is long standing in the UK. The National Development Team for Inclusion recommended the founding principle that people who work as brokers should be free of loyalties, (notably with the local authority or

support providers) that might weaken their ability to work in the interests of their customers.[4]

In the US, the issue of conflict of interest by professionals in self-direction was spear headed in 2014 when the US Centre for Medicare and Medicaid Services (CMS) issued a policy that required States to separate case management from service delivery functions. The CMS required immediate implementation of the separation policy and identified conflict as occurring not just if the case manager is a direct service provider but also if the entity has an interest in a provider or is employed by a provider. In addition, the policy placed significant requirements on any waiver such that a direct service provider can only provide case management when:

- the state demonstrates that the provider is the only willing and qualified entity in a geographical area,
- the state devises conflict of interest protections and
- individuals are provided with a clear and accessible alternative dispute resolution process.[5]

In the NDIS, the Intermediaries Review sought to avoid, rather than manage conflict of interest, and recommended independence at the participant level with transitional arrangements over a 12-18 month period. The recommendation was based on anecdotal evidence of sharp practices, concern that intermediary services delivered alongside traditional support models may not drive innovation and the need for clarity in relation to conflict of interest provisions.

The case for managing conflict of interest is based on

Market readiness: The NDIA has assessed that there are insufficient providers in the market to require the avoidance of conflict of interest. The NDIA is concerned that a requirement of independence at the participant level may deplete the market leading to additional risk for vulnerable participants.

Determining quality: The NDIA has expressed uncertainty as to whether independence is the key factor in driving quality.

Participant choice: Participants and their families have often developed deep trust in a provider and want that provider to guide them into a new system such as the NDIS.

Knowledge of the participant: Many providers know their participants well, based on their support for the person over an extensive period and in response to changing needs.

---

[4] Dowson, S., & Greig, R., (2009) *The emergence of the independent support broker role,* Journal of Integrated care, v17, no 4, p27
[5] www.appliedselfdirection.com/file/564/download?token=L4wBMqa3 Accessed 22 June 2018

Discussion

The IAC is especially concerned that the NDIA practice of managing rather than avoiding conflict of interest has not been effective for participants who live supported accommodation with few if any unpaid relationships in their lives. There is little evidence that these isolated and vulnerable participants have increased informal support or new mainstream and community opportunities.

The IAC is of the view that the 'thin markets' argument may be over stated, at least in metropolitan areas. The Intermediaries Review recommended independence at the participant level, not the organisational level. This would have enabled a SIL provider to provide Support Coordination to participants for whom the provider did not provide SIL. At least in metropolitan areas there is no shortage of providers that have registered for Support Coordination making it difficult to understand the challenges to the avoidance of conflict of interest at the participant level.

Lessons from the financial services markets affirm to the IAC that the conflict of interest associated with providers of SIL also providing Support Coordination to a participant requires strong mitigation strategies lest the risks undermine the intention of the Scheme.

The IAC proposes that the NDIA moves toward requiring providers to avoid rather than manage conflicts of interest, starting with participants in closed system options of housing and support in major cities. Over time, such a move would generate data to underpin a fuller analysis of the role of independence in driving innovation and quality.

The IAC proposes that the NDIA:

- requires that the provider of Support Coordination is independent of the provider of SIL (or its affiliate) for participants who live in closed systems of housing and support in metropolitan areas, except where no other suitably qualified[6] Support Coordination provider is available locally or the participant rejects the alternatives.
- actively assists participants to choose a suitably qualified provider of Support Coordination.

The IAC recognises the importance of transitional arrangements over a 12-18 month period to signal to the market the intent to move to independence for participants who use SIL and centre based programs. The IAC also supports the Intermediaries Review recommendation that NDIA planners retain discretion to grant exemptions based on operational guidelines.

---

[6] suitably qualified includes cultural competence

Market of Support Coordination

In the NDIS

Analysis of the NDIS register of providers (2016) [7] found that of the 401 organisations registered to provide Support Coordination in NSW, 85.3% were support providers (providers of core supports), 10% were community organisations, 0.5% were peer support organisations and 2% were independent Support Coordinators.

The Intermediaries Review engaged with a number of stakeholders, including with the IAC to reveal consistent views and a shared vision that:

- there should be a diversity of intermediary service models, including those that are peer-led, to provide participants with choice.
- intermediaries should focus on the design of participant supports, informed by insurance principles and focus on continually improving outcomes.
- intermediary services should have clear outcomes against which the providers are accountable.
- intermediaries should be independent from providers of funded supports to protect participants from potential sharp practices and conflicts of interest.
- participants should be able to self-direct through inexpensive and intuitive tools.

The Intermediaries Review recommendation that the provider of Support Coordination be independent of the provider of other supports was motivated in part by a desire to encourage the growth of an intermediary market that is distinct from existing service provision. The Review argued that an independent intermediary market would facilitate the growth in contemporary value for money supports.

Impact of auspice

In their discussion of 'community brokerage' in the UK, Duffy and Fulton[8] identified a broad range of approaches to enable people and families to be stronger. They argued that good brokerage could come from a range of sources including social workers, families, service providers and community organisations; that no group should be ruled out and **no group should take on a monopoly role** in providing brokerage. What was important was to acknowledge that not every form of brokerage was the same with the quality of brokerage partly shaped by the particular people involved, organisational culture or the strength of local communities.

The tables below outline the strengths and concerns related to different sources of Support Coordinators.

---

[7] Ellis, L., Fulton, K., B'osher, L., (2017) Support Coordination - A Changing Landscape Melbourne: Summer Foundation Ltd. Accessed 21 March 2018
[8] Duffy, S., and Fulton, K., (2011) Community brokerage Centre for Welfare Reform Accessed 23 March 2018

Support Coordinators employed by providers of core and SIL supports

Strengths	Concerns
The Support Coordinator: • can "work the organisation" to actively intervene to resolve problems, develop alternative solutions to respond to the individual • knows the strengths and weaknesses of the organisation and can steer the consumer to the best service and staff.	The Support Coordinator: • has primary allegiance to his/her employer and may guide participants to services operated by the provider agency • may be rewarded (implicitly and explicitly) by the agency for referral practices that favour the organisation • does not need to become familiar with service alternatives that could benefit the participant • may be prevented by the employer from making decisions that do not benefit the agency. Whilst the practices identified above raise alarms in relation to the conflict of interest requirements of registered providers, ill informed and disempowered participants are unlikely to take action.

Support Coordinators employed by the NDIS

Strengths	Concerns
The Support Coordinator: • is in a good position to negotiate with the NDIA on behalf of participants • is able to work effectively with providers without conflict of interest • can define his/her role as working *for* the participant, helping to purchase wanted or needed services.	The Support Coordinator: • may find it difficult to reconcile their loyalty to the NDIA with their responsibility to work on behalf the participant • may be affected by workload allocations that reduce time available for individual participants.

Support Coordinators employed by independent agencies including user led organisations

Strengths	Concerns
The Support Coordinator: • works for the participant and is required to carry out his/her wishes • does not represent service providers or the NDIA, hence avoiding conflicts of interest • reflects a deeper understanding of lived experience • holds empowerment and capacity building as core values.	The Support Coordinator: • may compromise independence through special arrangements with organisations or mutual referral networks • may extend beyond the number of participants that can effectively be served to increase revenues • may offer incentives to participants and their families to make particular choices • does not have the power to force providers to change practice to better meet the needs of the participant • may lack knowledge of disability supports. There are few independent Support Coordinators and few user-led organisations provide Support Coordination. The business model of user led organisations is not well geared to fee for service.

Market disruption

NDIA data demonstrates that there is not yet a diverse market of providers of Support Coordination. The dominance of providers of core supports is understandable but may not always provide participants with choice in this key enabler of enhanced life chances. Market disruption is required to ensure the development of a diverse market to provide real choice in Support Coordination for participants.

In the UK

The UK Government took proactive measures to diversify the broker / support coordination market. Soon after the introduction of individual budgets, the Social Care Institute for Excellence made the case that external support planning and brokerage, particularly by disabled persons user-led organisations (DPULOs) and centres for independent living were crucial element of the effective implementation of self-directed support and personal budgets [9], especially to operationalise personal

---

9 Davey, V., Fernandez, J., Knapp, M., Vick, N., Jolly, D., Swift, P. et al (2007) Direct payments: A national survey of direct payments policy and practice, London: Personal Social Services Research Unit/London School of Economics and Political Science. reported in SCIE, (2010) Personalisation, productivity and efficiency, p12

budgets for people who may not be confident or have support from family and friends. Local Councils were encouraged to work with user led organisations in their area to develop their capacity and skills to be able to take on a support brokerage role for a diverse range of people. [10] From 2011 until 2015, the UK Government provided funds to DPULOs to strengthen existing organisations as develop new ones to take on brokerage and other roles. [11]

In addition, independent support brokers have emerged as small social businesses that recruit, train and accredit peer workers to offer personalised, bespoke and asset-based brokerage support. My Support Broker, [12] a network of peer brokers in the UK is one such example.

In Canada

In Canada, the Independent Facilitation Demonstration Project [13] was funded by the Ontario Government with the aim of increasing the number of people who were receiving independent facilitation and planning, evaluate the outcomes in terms of people's lives and build the capacity of grassroots independent facilitation organisations so they are able to retain facilitators and operate sustainably.

In the USA

In the US, despite the required immediate implementation of the separation policy in 2014, many providers continue to struggle to implement the policy and many states are still analysing their case management systems and entering into agreements with the Centre for Medicare and Medicaid Services (CMS) to achieve compliance. The US experience demonstrates that immediate implementation of a significant change is difficult to achieve.

Options for the NDIS

The NDIA policy preference for independence is regularly waived because of the immaturity of the market. Experience in the UK and Canada however shows some government intervention to move toward a diversified market of Support Coordination.

One potential approach to increase the supply of independent Support Coordinators may be for the NDIA to contract out the provision of Support Coordination to agencies that do not provide direct services in an approach similar to that used for Partners in the Community delivering LAC services. The contracted agencies would then recruit salaried staff to work as Support Coordinators.

This approach offers the certainty that Support Coordinators would be available locally. NDIA data can anticipate the level of supply required and provided the

---

[10] Care Services Improvement Partnership, (2007) p6 Accessed at http://www.nationalbrokeragenetwork.org.uk/wp-content/uploads/2012/11/csip.pdf 19 June 2018
[11] https://www.gov.uk/government/collections/strengthening-disabled-peoples-user-led-organisations
[12] My Support Broker Accessed 17 April 2018
[13] Independent Facilitation Demonstration Project Accessed 23 March 2018

agencies have been chosen carefully and understand the nature of the Support Coordination role, the option should secure the independence of Support Coordinators. There are however, a number of challenges to the suitability of this option including: pressures of phasing schedules that may require contracted agencies to manage participants into service vacancies rather than fully explore options to build an ordinary life; tight contractual controls from the NDIA reducing flexibility and establishing a tension between meeting the interests of the participant and meeting NDIA's contractual obligations; and frustration from the provider sector that the NDIA has removed a support function that they value.

An alternate approach would be to support the emergence of community based and fee for service providers of independent Support Co-ordination. In Australia today there are a small number of individuals, networks and organisations offering independent Support Co-ordination but their visibility is very low and their business model is undeveloped. They need assistance to grow to a point of providing a real alternative, especially for participants who lack informal support and live in closed systems.

The case for NDIA support for the development of a national network of independent Support Coordinators rests on the value such a network would have for the growth of a diverse market that is distinct from providers of cores supports, potentially disrupting current practice. NDIA involvement in or support for the development of a national network would enable the NDIA to influence its defining features including requirements in relation to:

- no formal connection to a provider of core supports,
- designing personalised support
- enhancing voice, choice and control and
- increasing informal support, social and economic participation and inclusion.

The NDIA will soon release a Market Enablement Framework that will outline the conditions under which the NDIA would intervene in the market and how it would intervene. The IAC recommends that the NDIA examine the issue of market diversity in the provision of Support Coordination and take steps to support the emergence of a diversified market.

Recommendations

The IAC recommends that the NDIA:

1. **Strengthens Support Coordination** by
   a. articulating its capacity building elements and reflecting them in outcomes by
   b. differentiating Support Coordination by target group and life domain (e.g. housing, employment)

c. amending the registration requirements to ensure a people with a broader range of qualifications, skills and experience can become registered providers.

2. **Avoids conflict of interest** by**:**
   a. requiring that the provider of Support Coordination is independent of the provider of SIL (or its affiliate) for participants in closed systems in of housing and support in metropolitan areas except where no other suitably qualified Support Coordination provider is available locally or the participant rejects the alternatives.
   b. actively assisting participants to choose a suitably qualified provider of Support Coordination.

3. Uses the Market Enablement Framework to support **the emergence of a diverse market** of Support Coordinators including supports the development of a national network of independent support coordinators

4. **Strengthens provider registration** by making representations to the Quality and Safeguards Commission to ensure provider registration requirements for support coordination reflect the knowledge, skills and experience required.

References

Care Services Improvement Partnership (2007) *Self-directed support: the role of support brokerage within individual budgets* Accessed http://www.nationalbrokeragenetwork.org.uk/wp-content/uploads/2012/11/csip.pdf 20 June 2018

Carr, S., (2010), Personalisation, Productivity and Efficiency, Social Care Institute for Excellence, Report 37, London SCIE

Currie, R., Kinn, A., Thompson, R., & Hamilton, S., (2016) An evaluation of My Support Broker Final Report Accessed 17 April 2018

Davey, V., Fernandez, J., Knapp, M., Vick, N., Jolly, D., Swift, P. et al (2007) Direct payments: A national survey of direct payments policy and practice, London: Personal Social Services Research Unit/London School of Economics and Political Science. reported in SCIE, (2010) Personalisation, productivity and efficiency, p12

Dowson, S., (2007) Independent Support Brokers: the why, what and how National Development Team

Dowson, S., & Greig, Rob (2009) The emergence of the independent support broker role, *Journal of integrated care* v17, no 4, 22-30

Ellis, L., Foulton, K & B'osher, L.(2017) *Support coordination – a changing landscape*, Summer Foundation, Melbourne

Fulton, K., Kinsella, P., & Goodwin, G., Good practice in support planning and brokerage, Paradigm

Leach, L., (2015) Re-imagining brokerage, a discussion paper in association with Imagineer and the National Brokerage network Centre for Welfare reform Accessed 17 August 2-18

Moseley, C., (2004) *Support brokerage issues in self-directed services*. Accessed https://www.researchgate.net/publication/237712560_Support_Brokerage_Issues_in_Self-Directed_Services 20 June 2018

Ontario Independent Facilitation Network, http://www.oifn.ca

Skills for Care (2009) *The independent Broker role and training requirements: Summary report,* London, Skills for Care

Sowers, S., (2017) National Association of State Directors of Developmental Disabilities Services, *Migrating conflict of interest in case management state efforts and regulatory requirements,* www.appliedselfdirection.com/file/564/download?token=L4wBMqa3 Accessed 22 June 2018

Stancliffe, R. Bigby, C., Balandin, S. & Wilson. N., (2013) *Transition to retirement,* Policy Bulletin 2 Accessed at https://www.google.com/search?client=safari&rls=en&q=Stancliffe+transition+to+retirement&ie=UTF-8&oe=UTF-8 20 June 2018