Report to the Independent Advisory Council of the National Disability Insurance Scheme

Support coordination as a tool of capacity building in the NDIS: a discussion paper

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Purpose

The purpose of this paper is to explore the Support Coordination function in relation to its potential to build positive life outcomes for participants and sustainability for the Scheme.

Summary

Support Coordination is a key tool in the NDIS to strengthen the capacity of participants. A key issue under discussion is whether the Support Coordination function is fundamentally about establishing the infrastructure for capacity building for the individual or whether the purpose includes direct work by the support coordinator to build capacity.

The paper discusses the advantages and limitations of a broader or more narrow reading of the function and hence the concomitant adjustment of its capacity building elements. Aspects under debate include the definition of the role, the consistency of representation of its capacity building intent in NDIS documentation, whether Specialist Support Coordination is better described as case management and whether a sunset clause is desirable.

The paper reviews the delivery of Support Coordination and its requirements that providers must be registered and that the Support Coordinator should not be the provider of any other funded supports in the plan. Agency rationale for these requirements as well as limitations that arise as a result of the requirement are discussed.

The paper expresses concern that the current market of registered capacity building organisations is thin because user led organisations have failed to register as providers of capacity building support. In addition, shortcomings in the current registration process are identified raising doubt as to whether the registration requirements in fact address questions of competence to provide the identified support.

Issues for discussion

1. The nature of Support Coordination:

- The intention of Support Coordination: whether the intention is to establish the infrastructure for capacity building for the individual or whether it is impossible to include direct work by the support coordinator to build capacity.
- The aim of Support Coordination: whether Support Coordination should promote greater independence in directing services or greater independence in living life
- The roles and tasks identified in the Support Coordination Framework and whether they give sufficient emphasis to capacity building including the relative weighting of capacity building and other aspects of the role
- The role of Specialist Support Coordination and whether it is best described as case management
- The level and duration of Support Co-ordination balancing the requirements of maximising independence, self management and inclusion of participants with Scheme sustainability.

2. The delivery of Support Coordination

- Whether the current requirement that Support Coordination is delivered by a registered provider should hold or whether alternate quality processes as anticipated for providers in the ILC should be considered.
- Whether the current requirement that the Support Coordinator should not be the provider of any other funded supports in the plan is correct or whether a distinction should be drawn between providers of core and capacity building supports and a Support Coordinator should be permitted to provide other capacity building supports that plan and/or facilitate greater independence, self management and inclusion.
- Whether capacity building for Support Coordinators should showcase capacity building opportunities in all domains of life.

3. Registration process

- Whether it is desirable to take steps to ensure a more diverse market of providers of Support Coordination including steps in relation to user led organisations.
- Whether the current registration process for the capacity building cluster of Assist Life Stage Transition is fit for purpose or whether changes identified in the paper are appropriate

Introduction

Support coordination aims to be a key vehicle of the NDIS to facilitate increased capacity toward greater independence, economic participation and social inclusion. The discussion in this paper is based on an analysis of the NDIA Coordination of Supports Framework (The Framework)

The nature of Support Coordination

Role

There is significant confusion as to the role of support coordination. The confusion stems in part from the fact that the name is used in human services to refer to a case management function and in many areas of disability services to the more mundane tasks including those associated with rostering. Additional confusion arises as a result of the NDIS aspiration that all NDIA supports contribute to building capacity without clarification as to what 'capacity building' actually means[1]. This allows the term to be used to describe actions that by force of circumstance are case management and only indirectly related to enhancing participant self efficacy. The attribution of capacity building in this way weakens its critical role.

In essence the key debate about the role of support coordination is fundamentally about whether its purpose is to establish the infrastructure for capacity building for the individual, i.e. identify and ensure that capacity building services are engaged or whether the purpose includes direct work by the support coordinator to build capacity.

The NDIS term, support coordination, not surprisingly, is billed as 'coordination of support', *"Assistance to strengthen participants abilities to connect to and coordinate informal mainstream and funded supports in a complex service delivery environment".* The primary aim is limited to greater independence in directing services, not greater independence in living life. As a result, the need for support coordination has been met when a participant can direct services even where services received reflect standard congregate fare on the service menu.

Discussion with senior NDIA staff indicates that the Agency looks to support coordination as a major capacity building strategy where a risk assessment has identified significant vulnerability. This broader view is implied when Agency staff indicate that the allocation of support coordination is the solution to the need for support for decision making, developing self advocacy skills and support to build personal safeguards.

In order to understand actual practice it would be helpful to have information about the current utilisation of support coordination and other capacity building items in the support catalogue. In particular, data on % of participants who receive support coordination, other capacity building items from the support catalogue or both would demonstrate the extent to which participants are being supported in relation to goals and aspirations that genuinely extend the participant. An analysis of the extent to which the Scheme is supporting

[1] Capacity building is a strengths based approach that taps into existing knowledge, skills and motivations of the participant to promote self efficacy, an increased sense of their capacity to influence their lives, their environment and their support. Capacity building takes place over time requiring a multitude of strategies at the individual, organisational and systemic levels to be promote sustainable outcomes.

participants to enhance their capacity could be seen if this data was cross referenced with data about the nature of vulnerability and the level of effective informal support providing insights into its use as the sole form of capacity building, as a facilitator of other capacity building and the extent to which it assists informal supporters to enable a participant to be more independent or more included.

Pros and cons of a broader or more restrictive role

One can differentiate between different types of capacity building in the role of a support coordinator. Where capacity building is related to skills for daily living, one would expect a support coordinator to broker training and assistance from a suitably qualified provider. There are other areas of capacity building however that are more of a thinking planning nature, e.g. planning to move into one's own home and securing valued roles (for people with high and complex needs) where a support coordinator could easily provide the capacity building support if enabled through the Framework.

The main advantage of a more narrow view of support coordination, i.e. the view that it is the role of a support coordinator to develop the infrastructure for capacity building and call on other providers to actually build capacity is the cost containment to the Scheme. This advantage would however be reduced if analysis led to the view that the reduced role of support coordination was associated with less capacity building to enable the participant to direct his/her life.

There appear to be three main disadvantages of a more narrow view of support coordination:

- That participants need to engage with and build trust in more professionals in relation to thinking and planning;
- That it is uncertain which items in the Support Catalogue capture support for decision making and support to build personal safeguard and finally
- That the narrow view provides little or no consideration of and support for the higher aspiration of a person self directing life, being in control of important decisions and orchestrating the combination of paid and informal support in the domains of home, work, lifelong learning, leisure, civic and cultural participation etc.

Priorities

The IAC believes that greater clarification is required in relation to relative priorities of functions in the Support Coordination. The Framework indicates that: *"Support coordination has the features of Support Connection[2], with an increased focus on:*

- *Addressing barriers to participation, and*
- *Resolving service delivery issues.*

Whilst the initial role description in the Framework has a strong capacity building element, this is not reflected in the tasks that provide further description and the examples of potential

[2] Focus of Support Connection is to identify options (funded, mainstream and in informal networks, investigate options, understand funding flexibility, reach decisions regarding services, reach agreement with providers, commence service and ensure new support arrangements thrive" (NDIS Coordination of Supports Framework, 2015,4)

candidates for Support Coordination are all drawn from a case management / crisis intervention perspective. This disparity allows Support Coordination practitioners to slip back into a traditional view of the role and inhibits even the recognition of a need to change practice.

Table 1 maps the variation between the role of Support Coordination as described on p3 of the Framework, and the tasks expected of a Support Coordinators as outlined on p5.

Table 1 Role and tasks in the Coordination of Supports Framework

Role (p3)	Identified tasks (p5)	Omissions
Support implementation of all supports in the plan	Regular active management and ongoing adjustment of supports due to participant's changing needs	Development and strengthening of informal support
Strengthen and enhance the participant's abilities to coordinate supports and participate in the community	From Support Connection role: assisting participant to start plan implementation	Individual capacity building to enable participants to speak up for themselves, develop personal safeguards, make decisions Assistance to participants to develop roles that provide opportunities for relationships, belonging and making a contribution
Ensure mainstream services meet their obligations	Management of multiple/complex supports from a range of providers which intersect with mainstream services	Supporting participant to link to mainstream services including assistance to locate and support the development of informal support in mainstream services[3]
Build the capacity of the participant to achieve greater independence to self direct services and supports in the future	Crisis resolution and developing resilience	Individual capacity building in areas across the outcomes framework Development and coordination of unpaid and mainstream supports and connections
Provide NDIA will reports on outcomes and success indicators	Regular monitoring and outcome reporting	

[3] Work by Roger Stancliffe with AFFORD demonstrates the nature of work required to link people who have led segregated lives to mainstream options in retirement http://sydney.edu.au/news/fhs/607.html?newsstoryid=8350

Table 2 proposes an ordering of the Support Coordination role to give effect to the capacity building elements of its role statement.

Table 2 Proposed priorities in Support Coordination Role

Development and coordination of unpaid and mainstream supports and connections	60% of time
Individual capacity building toward greater self efficacy (peer to peer, training, learning by doing, mentoring, etc.)	
Crisis resolution	40% of time
Coordination of funded supports	
Reporting and monitoring	

The IAC believes that the tasks identified in the omissions should be included in the tasks of Support Coordination including the priorities identified in Table 2.

Specialist Support Coordination or case management

The Framework also identifies Specialist Support Coordination as a time limited step up from Support Coordination that '*focuses on addressing barriers and reducing complexity in the support environment while assisting the participant to connect with supports and build capacity and resilience'* (p6). All indicators of people likely to benefit from Specialist Support Coordination are in a severe and complex disability, crisis model (child protection, trauma etc.).

Pros and cons of Specialist Support Coordination as an extension of support coordination rather than as case management

The crux of this question relates to the extent to which the tasks of Specialist Support Coordination are of a capacity building nature. The term capacity building to describe non capacity building activities weakens the genuine intention of capacity building.

The Framework indicates that Specialist Support Coordination is a time limited (up to 12 weeks) intervention with participants with a severe and complex disability or participants who are in crisis (a time that is not conducive to capacity building). Under these constraints, it is anticipated that the work will involve significant negotiation on behalf of the participant in order to stabilise the situation to a point where, hopefully, the participant may be receptive to capacity building. For this reason it appears that the assistance documented as Specialist Support Coordination is better described as case management. In the NDIS context it would be hoped that the case management would be undertaken in a capacity building focus.

If the nature of the work is recognised as case management, good practice is more likely to be developed if specialist support coordination is called case management.

Level and duration

The Framework provides a useful matrix relating capacity and complexity and identifies appropriate levels and intensity of Support Coordination. In conceptualising the flow through as capacity is built and complexity is reduced, it is important to note however that increased capacity may not represent a person who now has the capacity required to engage effectively with providers or the NDIA nor always make sensible decisions in their life. Similarly whilst case management and then Support Coordination may reduce the complexity of a person's circumstances, a person with intellectual disability who is supported by their family to seek ordinary life goals such as living in their own home with a combination of paid and informal support will need the expert guidance of Support Coordination to plan and implement the highly nuanced steps required to succeed. The link below demonstrates the skilled planning and skill development (that should be part of Support Coordination) that is required to enable a man with intellectual disability and autism to live in his own home with paid support to compliment the informal support provided by family and friends. https://adammovesout.wordpress.com/background/. Adam's NSW support package is less than half the resources that would be allocated for his support in a group home.

The Framework indicates a level of support coordination that seems appropriate but experience on the ground indicates it is seldom applied. Recent discussion with a Support Coordinator working with a participant from the NSW Criminal Justice Project[4] indicated that 50 hours support coordination was only provided for the duration of the plan following significant advocacy and most of that time was spent completing the paperwork required on behalf of the participant. The IAC is mindful of the impact of the provision of skilled support without constraints on Scheme sustainability but believes that with clear attention to goals and monitoring for outcomes, higher levels of support coordination over a longer period of time will reduce the overall participant costs over time.

The Framework implies a sunset clause with emphasis on time limited intervention.

Pros and cons of a sunset clause for support coordination

The advantage of a sunset clause for Support Coordination is to stress to practitioners that focused, time limited skilled intervention is required, important for the sustainability of the Scheme.

A sunset clause is often appropriate for case management although many vulnerable participants (such as those on the margins) are well served by an ongoing relationship with a trusted professional who knows their circumstances and can respond quickly when things begin to go off the rail. Support of this nature often provides an early intervention approach, reducing the need for further costly support.

The disadvantage of having a sunset clause is that it may limit aspirations for participants because most capacity building occurs in a trusted relationship over time frames of more than one plan. The availability of goal focused support coordination over an extended period is often critical to extend independence and social and economic participation and reduce the need for costly paid support.

[4] Works with people with intellectual disability in contact with the criminal justice system resulting in time spent in custody, risk of serious re-offending

Delivery of Support Coordination

Support Coordination is a critical tool for the NDIS to secure quality participant outcomes and Scheme sustainability. It is therefore not surprising that additional requirements be placed on providers of this support.

Current requirements of providers of Support Coordination include that:

- It is delivered by a registered provider
- The Support Coordinator should not be the provider of any other funded supports in the plan.

Delivered by a registered provider

It is anticipated that the rationale for requiring Support Coordination to be delivered by a registered provider is the need for a quality assurance process for a role so pivotal to quality participant outcomes and Scheme sustainability.

Pros and cons of requiring support coordination to be delivered by a registered provider

The advantage of requiring Support Coordination to be delivered by a registered provider is to assure quality. Appendix A however documents shortcomings in the current registration process raising doubts as to whether the registration requirements in fact assure quality and address competence to provide the identified support.

The limitation of this requirement is that it prevents a diversity of organisations that would be skilled at providing capacity building from providing Support Coordination. Most user led organisations have not registered as providers with the NDIS. They are highly skilled and experienced at guiding members to greater independence and social and economic participation. Many are new entrants in the market without ever having had the benefit of core funding to establish the organisational infrastructure required for registration. In the current environment, they lack the funds to pay for its development. In addition there are skilled people with lived experience of disability operating as sole practitioners who provide quality support to self direct a life rather than just services who also do not have the infrastructure required to become a registered provider with the NDIS. The lack of availability of choice of providers can lead to a serious detriment to vulnerable participants.

The ILC Commissioning Framework indicates *that ILC providers will not have to be registered with the Agency to apply for and deliver ILC activities* and that *ILC funding agreements will, however, have quality requirements to provide appropriate safeguards for users'* (p33). This could be a strategy to provide quality assurance for unregistered providers.

Separation of Support Coordination from all other supports in the plan

It is anticipated that the rationale for this separation is to avoid any conflict of interest.

Pros and cons of separation

The advantage of complete separation of provider of Support Coordination from providers of other supports is to avoid the actual, potential or perceived conflict of interest whereby a provider of Support Coordination captures the participant into a range of other services.

The disadvantage is that complete separation may reduce the opportunities of synergies that could benefit the participant.

An approach that is more nuanced may be desirable. The core distinction between providers of core supports and providers of capacity building supports is pivotal; if the same organisation runs the group home in which the participant lives and also is the participant's Support Coordinator, it is easy to see the increased likelihood of the person being 'captured' by the service.

If however an organisation is a plan management provider, it can be argued that a synergy is achieved if the organisation also provides Support Coordination. The participant gains the flexibility of plan management and the guidance of Support Coordination to build their capacity from the one trusted provider.

Similarly there is a synergy if the Support Coordinator also provides other capacity building activities that plan and facilitate greater independence, self management and community inclusion. This might include capacity building items such as:

- Life transition planning (08005)
- Training for parents and carers (15008)
- Individual employment support (03007) where the support is in establishing a home based business or supporting the participant to negotiate with potential sales outlets
- Training in planning and plan management (15009)

Capacity building for Support Coordination providers

Finally the IAC is pleased to see that many trial sites are holding seminars on Support Coordination as part of a quality improvement strategy. The IAC believes that quality would be further enhanced by the development of resource material that demonstrates the capacity building role of Support Coordination in the domains of the Outcomes Framework and argues that such resource material to be developed by a capacity building organisation.

Registration process

The IAC capacity building paper recommended that the Agency undertake a targeted registration process to encourage user led capacity building organisations to register as providers of capacity building support. This has not yet occurred and as a result there is little diversity in the market of Support Coordination and participants are unable to purchase Support Coordination through a user led organisation.

In addition, the current registration process is flawed in that its unnecessarily restricted requirements prevent many capacity building organisations from registering. Ironically, registration for the capacity building cluster of Assist Life Stages Transition does not require evidence of skill and experience in capacity building.

Appendix A identifies changes to requirements for registration to ensure that organisations providing capacity building are skilled in evidence based capacity building that promotes increased independence, self management and community inclusion.

Appendix A
Challenges to Provider Registration in relation to Support Coordination and capacity building

Purpose: To ensure a diversity of organisations skilled at providing Support Coordination and capacity building.

Challenge

- The current registration process prevents many capacity building organisations from registering under the Assist Life Stages Transition cluster
- Registration under the Assist Life Stages Transition Cluster does not require evidence of skill and experience in capacity building

The registration process

For a potential provider (registrant) to become a registered provider of support, the organisation must register on the basis of its staff who need to:

1. Identify the profession of which they are apart. This is a threshold that then enables the potential provider to
2. Identify the Support Cluster in which they want to provide services.
3. Provide evidence of relevant experience
4. Provide evidence of capacity

http://www.ndis.gov.au/providers/suitability#services outlines the types of professions and evidence of experience and evidence of capacity requirements against each of the support Clusters. For example

Support Cluster	Professions	Evidence of experience	Capacity Requirements Evidence of:
Provider Portal Name: Assist-Life Stage, Transition **Assistance in coordinating or managing life stages, transitions and supports** This cluster includes short and long-term supports that focus on strengthening the participant's ability to coordinate their supports, and to assist them to live at home and participate in their community.	• Disability Support Worker • Occupational Therapist • Social Worker	Please provide details of delivery of person centred services in the community or in their home. For peer support – lived experience of disability or mental illness and relevant experiences and skills or training to perform this activity IF Diploma in Disability Services studies provide details of at least two years of experience IF Certificate III in Disability Services provide details of substantial years of relevant experience and specialist skills sufficient to perform these activities	• Risk Management • Specialist Disability Service State Approval • National Police Check • Working with Children / Vulnerable people check

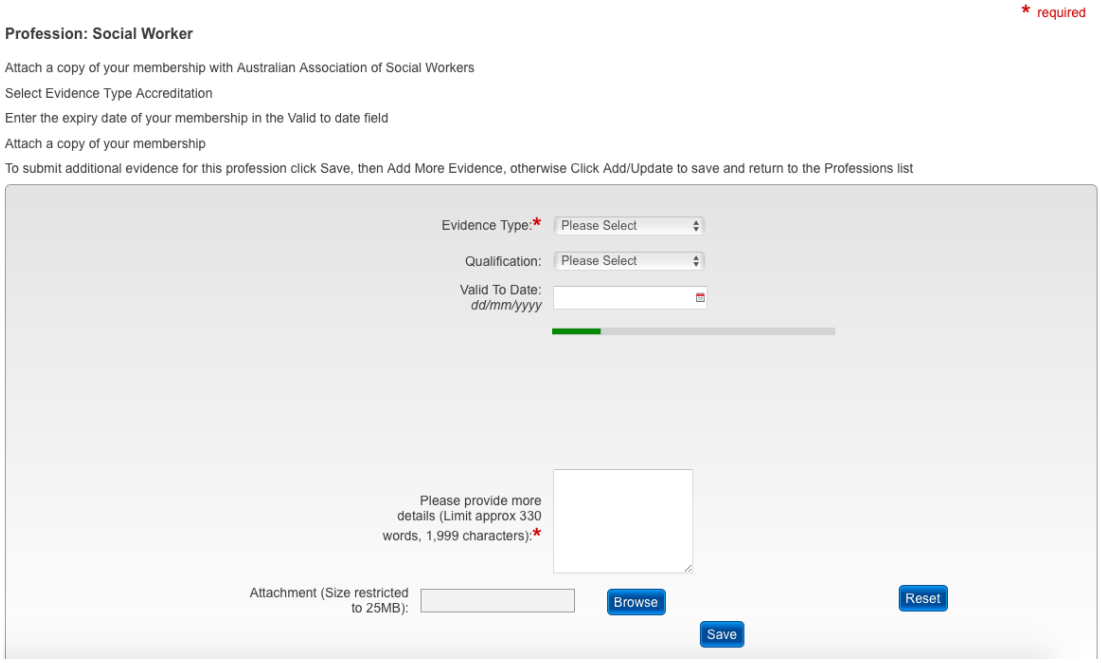
The Challenge in relation to capacity building

Professional designations are a threshold to registration: To access the Assist Life Stages Transition cluster, the registrant must have qualifications as a disability support worker, a social worker or an occupational therapist. The only way to demonstrate qualifications in social work or occupational therapy is by membership of a professional association, without which the registrant is prevented from registering for the capacity building cluster and proceeding to the next step of providing evidence of experience.

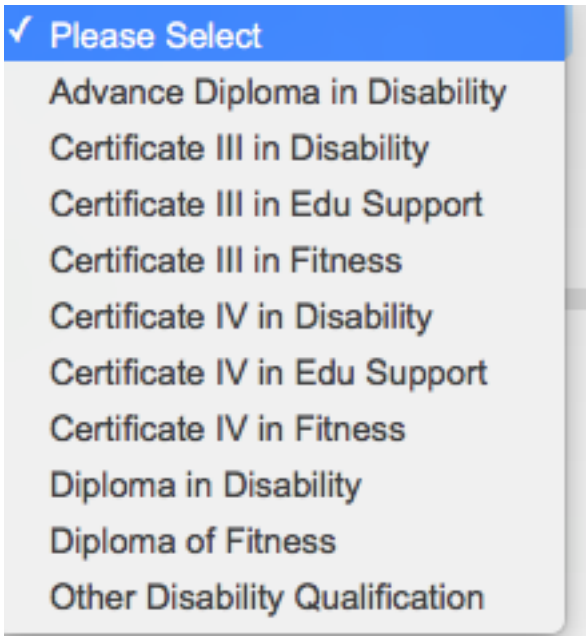
The problems are fourfold:

- Qualifications are used as a threshold of capacity to deliver a service preventing the provision of evidence of experience
- The list of qualifications deemed appropriate is unnecessarily limited
- Evidence of qualifications is unnecessarily limited
- The employment of one individual with the appropriate evidence for registration enables an organisation to deliver the service with no reference to the skills and experience of multiple staff delivering the service on the ground or the training development and supervisory structures to assure quality.

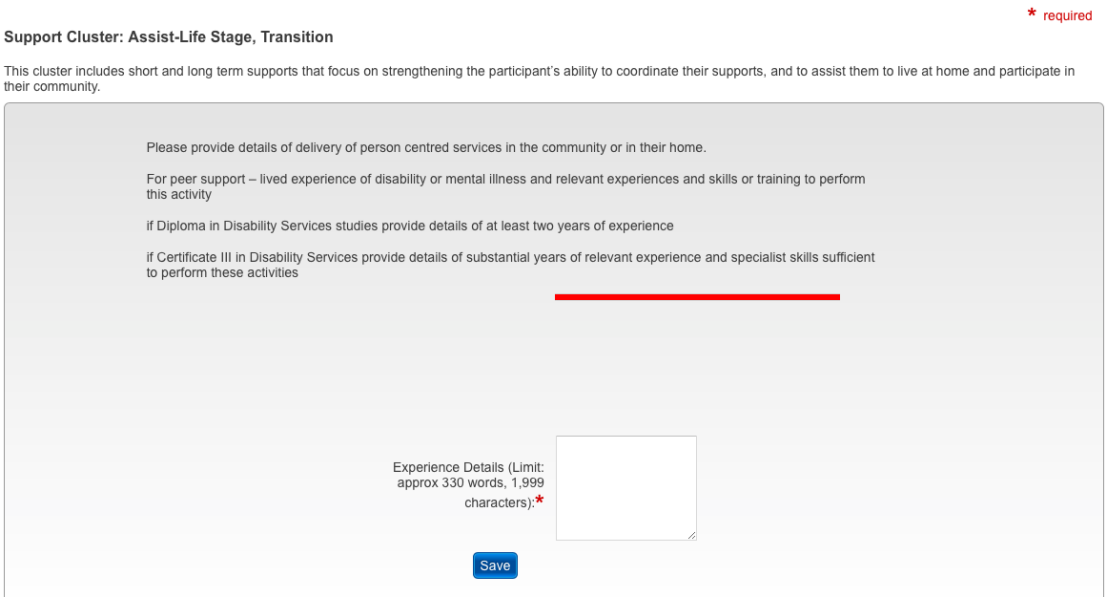
For example, if the registrant is a social worker, membership of the Australian Association of Social Workers is the threshold for registration for the Assist Life Stages Transition cluster. Without this evidence, the registrant is unable to provide any evidence of experience or capacity.



If however the registrant is a disability support worker, the list of qualifications is broader and the attachment of the qualifications provides evidence.



Once a registrant has passed the qualifications threshold, the person is able to registers for possible clusters and has 330 words (or less than one page) to demonstrate experience. See screen below:



Evidence of capacity requirements

The registrant can demonstrate his/her capacity to provide assistance under the Assist Life Stages Transition cluster by the provision of support material related to risk management, Specialist Disability Service State Approval, National Police Check and Working with Children/Vulnerable People Check. At least in NSW the Specialist Disability Service State Approval does not demonstrate capacity to deliver capacity building assistance.

The NDIS will be more likely to enhance the quality of capacity building support by developing a capacity requirement for this cluster whereby registered providers need to demonstrate evidence of:

- Use of evidence based practice to improve self efficacy
- Policy and practice guidelines related to (among other things) enhancing support for decision making, self advocacy and personal safeguards as core requirements

The capacity requirements to be co-designed with capacity building organisations

Recommendation

That registration process for the capacity building clusters is changed to:

- Emphasise evidence of experience rather than accreditation with qualifications as one among many ways to demonstrate experience.
- Require registrants to demonstrate capacity requirements related to capacity building
- A co-design process between the NDIA and capacity building organisations is used in developing the changed registration requirements