

Submission of Family Planning NSW

NDIS Workforce: National Workforce Plan

August 2021

Family Planning NSW welcomes the opportunity to make a submission to the Joint Standing Committee on the National Disability Insurance Scheme regarding the 'NDIS Workforce: National Workforce Plan'.

The submission focuses on the current ability of the National Disability Insurance Scheme (NDIS) workforce to provide holistic sexuality and relationship support to people with disability and builds on our previous submissions to the Joint Standing Committee including our 2017 submission 'Transitional arrangements for the NDIS', our 2019 and 2020 submissions 'General issues around the implementation and performance of the NDIS' and 2020 submission 'NDIS Workforce'.

About us

Family Planning NSW is the leading provider of reproductive and sexual health services in NSW and Australia. Our mission is to enhance the reproductive and sexual health and rights of our communities by supporting all people to have control over and decide freely on all matters related to their reproductive and sexual health. We have been operating for over 95 years, working with communities across NSW, including in regional, rural and remote areas.

We have significant experience in the provision of reproductive and sexual health information and services. We provide more than 31,000 clinical occasions of service to clients annually, information and health promotion activities to communities, and best practice education and training in reproductive and sexual health for health professionals, educators, disability support workers and welfare professionals.

Family Planning NSW has been delivering targeted services to people with disability and those who support them for over 35 years, including clinical services, health promotion and professional education. As a registered provider under the NDIS, we provide sexuality and relationship support and education via psychology services to people with disability, face to face through our Newcastle clinic, and via telehealth statewide.

We firmly believe in the right of all people to make decisions about their own body and relationships, and the right of all people to live without violence, abuse, neglect and exploitation. However, the evidence is clear that people with disability are much more likely to experience violence, particularly sexual violence, compared to people without disability.(1)

Recommendations

Family Planning NSW recommends that:

1. the National Disability Insurance Agency (NDIA) prioritises and improves the consistency and quality of sexuality and relationship support the NDIS workforce and wider disability sector provides to people with disability
2. the NDIA increases the availability and accessibility of sexuality and relationship services for people with disability, particularly in regional and remote areas
3. the NDIA increase governance and requirements to ensure NDIS funded organisations provide sustainable employee care and conditions to support skill development and staff wellbeing which will ultimately improve quality of participant supports received
4. the NDIA provides funding for professional development and training opportunities for the NDIS workforce, including in the areas of sexuality and relationships
5. the NDIA foster a multi-sectoral approach to training between the NDIA, VET sector and disability organisations

6. the NDIA provides clearer guidance for the NDIS workforce and wider disability sector about the kinds of services that can be obtained as part of sexuality and relationship support, in the form of a policy document.

Key points

In previous submissions, Family Planning NSW has stated its deep concern about the capacity and capability of the current NDIS workforce, and wider disability sector, to provide best practice holistic sexuality and relationship support to people with disability. It is well established that lack of provision of sexuality and relationship support places people with disability at greater risk of violence, exploitation, abuse and neglect as well as poorer reproductive and sexual health outcomes than people without disability.

While we are pleased to see the recently released *National Workforce Plan (the Plan)*, we are concerned that the Plan does not address the importance of sexuality and relationship support provision to NDIS participants, nor specifically address access to sexuality and relationship professional development for NDIS workers.

Our key points, in relation to the inquiry *Terms of Reference*, are outlined below.

a) The current size and composition of the NDIS workforce and projections at full scheme

Family Planning NSW is pleased to see the Plan commit to building a competent, diverse and skilled workforce, as well as acknowledge the workforce is currently functioning at a reduced capacity. As stated in the Plan, approximately 450,000 NDIS participants receive support from approximately 270,000 workers. Disability support workers have a high turnover rate given the diverse and complex needs of participants and the physical, social and emotional requirements of the role. We are concerned that the Plan does not clearly state how the Government will guarantee the NDIS attracts the stated 83,000 additional workers, required by 2024, to ensure supply meets demand. If demand outweighs supply, people will experience diminished choice, control and quality of supports which can put them at risk of poor health outcomes.

Sexuality and relationship support spans a broad range of topics including building capacity to manage puberty changes, comprehensive sexuality education, supporting healthy relationship and identity development, and advocacy for rights. The provision of sexuality and relationship support include disability support workers providing a person with resources or information, making a referral to a service and supporting access to the service. With appropriate training, sexuality and relationship support for people with disability can be provided by a range of support people including sexuality educators, clinical and allied health workers, disability support workers, teachers and informal carers.

There is limited access to sexuality and relationship and specialised sexuality therapeutic supports in disability services under the NDIS, which is due to the limited number of specialised services available. This is especially the case in rural, regional and remote areas where there is very little access to specialised sexuality and relationship support for people with disability and training for workers. The limited availability of support increases vulnerability to poor reproductive and sexual health outcomes, violence, exploitation and abuse. Women with disability are twice as likely to report sexual violence over their lifetime than women without disability. Similarly, men with disability are 2.6 times more likely to report sexual violence compared to men without disability.(2)

Additionally, we are concerned about the quality and availability of sexuality and relationship support being provided to people with disability by the NDIS workforce and wider disability sector under the NDIS. The NDIS relies heavily on a skilled workforce, competent to meet the needs of participants,(3) however, the workforce does not currently have the skills required to meet their complex sexuality and relationship support needs, nor access to adequate training and organisational support.(4)

In NSW there are 11 locations where sexuality educators, counsellors and psychologists who have experience in supporting people with disability with more complex sexuality matters (including our Sexuality and Disability Service in Newcastle) offer services, however, the majority are located in the Sydney metropolitan region. We are aware of significant waitlists for each of these services which demonstrates the need for a more robust NDIS workforce in this area. Additionally, we understand that there are similar circumstances in other Australian states. We encourage the Government to include the importance of specialised NDIS workers, including psychologists and counsellors who are trained to provide sexuality and relationship support, within the Plan.

All members of the NDIS workforce and wider disability sector should be able to provide consistent, quality sexuality and relationship support, information and/or referral to people with disability. In 2019, Family Planning NSW conducted a needs assessment to investigate sexuality support provision from the perspective of disability sector workers across NSW. Of specific interest were the experiences of individual workers in providing sexuality support to people with disability as well as systematic factors impacting the provision of sexuality support within disability services. Of concern, our 2019 *Disability Needs Assessment* found that 50% of respondents did not consider providing sexuality and relationship support was part of their role.⁽⁴⁾ As a result, people with disability may not receive the sexuality and relationship support, information and education they require, leading to poorer reproductive and sexual health outcomes and higher vulnerability to abuse.

There is significant need for the NDIS workforce to reflect the needs of NDIS participants, including their relationship and sexuality support needs. An understaffed, under-skilled and non-specialised workforce is unable to meet the specific needs of people with disability.

Recommendation: the National Disability Insurance Agency (NDIA) prioritises and improves the consistency and quality of sexuality and relationship support the NDIS workforce and wider disability sector provides to people with disability.

Recommendation: the NDIA increases the availability and accessibility of sexuality and relationship services for people with disability, particularly in regional and remote areas.

b) Challenges in attracting and retaining the NDIS workforce, particularly in regional and remote communities

Evidence shows that disability support workers and other members of the NDIS workforce, experience high rates of workplace stress and burnout which contributes to a high turnover rate of employees.^(5, 6) These factors, accompanied by limited access to professional development, reduced staff support and ambiguity regarding the scope of disability support workers' roles, make it challenging to attract and retain workers to the NDIS workforce.^(5, 6)

Research suggests that in order to reduce the impact of burnout on the workers, organisations should look to address employee workload and staffing ratios, provide increased staff support and training in a wide variety of areas, and provide greater clarity on the expected scope of work of NDIS staff.^(6, 7) Greater acknowledgement of the importance of the NDIS workforce along with improved understanding of the benefits of working in the care and support sector, as highlighted in the Plan, is needed to attract skilled potential NDIS workers. Investment in career support and training of workers under the NDIS is also needed. Further, a culturally safe and responsive approach is particularly needed in regional and remote communities in regard to recruitment and retention.

Recommendation: the NDIA increase governance and requirements to ensure NDIS funded organisations provide sustainable employee care and conditions to support skill development and staff wellbeing which will ultimately improve quality of participant supports received.

c) The interaction of the NDIS workforce needs with employment in adjacent sectors including health and aged care

It is well recognised that all professionals, no matter their working sector, require ongoing and continuous professional development to ensure best practice service provision. Research shows that NDIS workers receive inconsistent on the job training with many workers disinterested in completing 'traditional and generic' qualifications.(6) Workers prioritise specific training that is relevant to their role to upskill, however, training often has limited recognition across the broader sector.

The NDIS funding model has had a significant and negative impact on professional training around disability and sexuality and relationship support within the sector. Due to the lack of funding for training and professional development, we are concerned about the implication for workers' ongoing professional development and currency of skills, particularly in an increasingly casualised workforce. Since the rollout of the NDIS, there has been a marked decrease in course enrolments by the disability sector. Our 2019 *Disability Needs Assessment* found that only 45% of respondents were confident in providing sexuality support, and only half felt that they had the skills required to provide this support.(4) The *Disability Needs Assessment* also reported that NDIS service providers found it increasingly difficult to support workers to access training due to limited funds available to support professional development.(4) Where an NDIS workforce member wants to further their learning, they often have to access training at their own time and cost. Further, our needs assessment found that that the majority (69.2%) of the 45 respondents had not completed any formal sexuality and disability training.(4)

There are clear pathways, courses and opportunities for professional development within adjacent sectors, including education, health and aged care. Professional development completion is compulsory, in most settings, and is recognised under a governing body. Greater access to, and recognition of professional development within the disability sector is required. One such way to do this, as stated in the Plan, is the development of micro-credentials so that workers can learn and further develop their on the job skills while working towards a recognised qualification. Consideration of a governing body to assess relevant courses as part of the 'micro-credentialing program' is required.

The inconsistent nature of in-service training, accompanied by the fact there are currently no minimum qualifications required to work under the NDIS demonstrates the need for a clear qualification pathway to ensure quality of care for NDIS participants. Additionally, there should be a clear pathway and expectation that NDIS workers participate in cultural responsiveness training and certification to ensure the services they provide are culturally safe for Aboriginal and Torres Strait Islander peoples as well as people from culturally and linguistically diverse backgrounds.

Recommendation: the NDIA provides funding for professional development and training opportunities for the NDIS workforce, including in the areas of sexuality and relationships.

Recommendation: the NDIA foster a multi-sectoral approach to training between the NDIA, VET sector and disability organisations.

d) Any other related matters

Development of an NDIA sexuality policy

The NDIS system is complex and often confusing to navigate particularly for people with intellectual disability and low literacy levels. As an NDIS service provider, we continue to hear of confusion and are regularly requested to provide information around what sexuality and relationship supports can be funded for participants to access, and the correct codes to use for those supports. Disability workers, support people and NDIS participants are often unaware that sexuality and relationship support can be incorporated into NDIS plans as participant goals - and without these goals, funds are not allocated to provide support.

Our *Disability Needs Assessment* found that a lack of organisational policy, within disability provider organisations, and from the NDIA, around sexuality contributes to uncertainty around the provision of sexuality and relationship support and results in participants being denied access to these essential services.(4) For example, some NDIS workers are not aware that a participant can access therapeutic services for support on healthy relationships under the code 'Capacity Building, Daily Living, Improved Daily Living' meaning that the participant may miss out on essential services.

The NDIA has a responsibility to enable and ensure access to sexuality and relationship support services for people with disability. A skilled NDIS workforce and clear guidance in the form of an NDIA policy is needed to do this. FPNSW endorses the joint position statement 'A call for a rights-based framework for sexuality in the NDIS'.(8) The position statement recommends developing a comprehensive sexuality policy to provide support for sexual expression through NDIS funding. Without an NDIA sexuality policy, people with disability may not have the support they need to make healthy decisions around their reproductive and sexual health, and the NDIS workforce has little guidance on how to provide access to this support.

Recommendation: the NDIA provides clearer guidance for the NDIS workforce and wider disability sector about the kinds of services that can be obtained as part of sexuality and relationship support, in the form of a policy document.

References

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5. Judd MJ, Dorozenko KP, Breen LJ. Workplace stress, burnout and coping: a qualitative study of the experiences of Australian disability support workers. Health & social care in the community. 2017;25(3):1109-17.
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8. Disabled People's Organisations Australia. Joint Position Statement: A call for a rights-based framework for sexuality in the NDIS. Strawberry Hills: Disabled People's Organisations Australia; 2019.