Submission to the Department of Social Services on Foundational Supports –

General Supports Consultation Paper

December 2024

The government needs to lead a whole of Australia cultural development education strategy to overhaul who is responsible for Inclusion - it's everybody's business.

I am yet to hear or read anything that gives me hope for the future for people with milder disability. I fear that they will be dumped off the NDIS once reassessed and deemed ineligible under the now tighter eligibility process and there will be nothing other than their parents to fall back on. Please, please, please prove me wrong.

A message from *Parents of a child with a disability, November 2024*

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Acknowledgement:

Family Advocacy would like to acknowledge the traditional custodians of the lands on which this report has been written, reviewed and produced, whose cultures and customs have nurtured and continue to nurture this land since the Dreamtime. We pay our respects to their Elders past, present and future. This is, was and always will be Aboriginal land.

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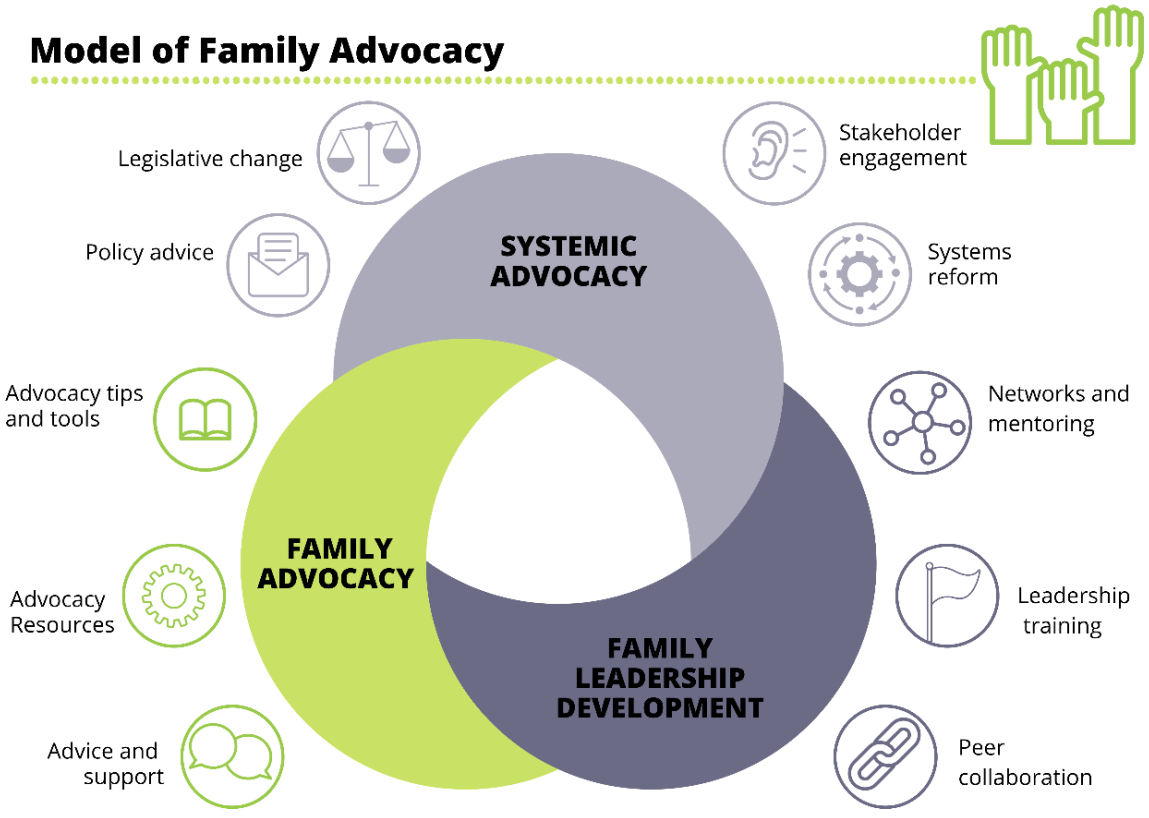
Introduction

Family Advocacy is a community based, state-wide disability advocacy agency, funded by state and federal funding programs to promote the rights and interests of people with developmental disability across NSW. The main objective of Family Advocacy is to support families to advocate with, or at times, on behalf of the person with disability, with the goal to support people with disability to realise their goals, hold valued roles and lead lives embedded in the community to experience the same things that most Australians take for granted: an education alongside their same aged peer, a job and a home of their own. We continue to be governed by families and provide support in the following ways:

- Advocacy advice and advocacy information to individuals
- Advocacy development for family members of a person with disability - Advocacy is often undertaken by families and can be required over the lifetime of their family member. Strengthening the advocacy capacity of families is essential to this.
- Systemic Advocacy

For more information of the Model of Family Advocacy, it is discussed in much more detail in UNSW, Social Policy Research Centre's (SPRC) report, Family Advocacy Model Research (on Page 8).



Family Advocacy also has an initiative, Resourcing Inclusive Communities, also working across NSW, and holds the philosophy that people with disability thrive in the heart of the community, sharing the same everyday experiences as their fellow Australians. It provides information and resources to assist people with disability to live meaningful lives, as valued members of their communities. Inclusive communities are diverse and are made better when all people are actively involved and able to make a contribution. We share our vision of social inclusion with the United Nations Convention on the Rights of Persons with Disabilities (CRPD). Resourcing Inclusive Communities works with many allies in the community to support this vision. Of note, is the National Alliance of Capacity Building Organisations (NACBO) and this model is discussed in detail under "Questions about Capacity Building Supports".

Family Advocacy appreciates the opportunity to provide a submission to the Australian Department of Social Services (DSS) on Foundational Supports – General Supports Consultation Paper. We note the Questions about scope and intended outcomes, Questions about capacity building supports, and For organisations and the broader sector. We will address those that relate to the current lived experience and direct feedback we hear from families who have a loved one with disability and as an organisation who observes what provides genuine inclusive outcomes for people with disability.

At this particular point in time, the disability policy landscape is in a state of flux, with a swathe of reforms stemming from the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (hereinafter, Disability Royal Commission) Final Report providing 222 recommendations in September, 2023 and the NDIS Review final report "Working together to deliver the NDIS" proposing 26 recommendations and 139 actions in December, 2023. The official response to the NDIS Review is due to be released in December 2024 and Foundational Supports are due to commence being phased in July 2025.

Despite not yet receiving an official response from the NDIS review, we are deeply concerned to hear at a Parliamentary Hearing last month, the NDIA confirmed that they have increased their staff team to focus on completing over 1200 "eligibility reassessments" each week. Of these, 48% are having their NDIS access revoked i.e. approximately 600 participants each week. 80% of those receiving eligibility reassessment letters, are the early childhood group, children aged 5-9. The remaining 20% are from other groups of participants, across a range of disabilities[1]. We are also hearing from other families that their loved one's NDIS plan have been significantly reduced when there has been no change of circumstances.

Not surprisingly, these actions undermine trust and people with disability and their families are feeling extremely uncertain about the future, the NDIS, and what foundational supports will actually look like. There are grave concerns their loved one will no longer have the supports they need to be able to participate meaningfully in and contribute towards their community, particularly where we see this dangerous gap where NDIS supports are significantly reduced or revoked prior to the commencement of Foundational supports. Good faith is not unlimited in the absence of delivery. It is important for the Australian and NSW government to take steps to foster trust in the system's ability to meet people needs effectively.

[1] https://everyaustraliancounts.com.au/growing-concern-regarding-increased-rate-of-eligibility-reassessment/

Family Advocacy strongly encourage DSS to assure the disability community that no further changes are made to NDIS participants plans or funding until Foundational Supports are fully implemented nationally, to reduce the negative impacts during implementation. Another way to build trust is to communicate clearly around the guidelines for eligibility to Foundational Supports, ensure meaningful involvement of people with disabilities, their families and relevant stakeholders in designing and implementing capacity building programs to better meet their needs and preferences. This will improve the cost effectiveness and sustainability of the supports.

We seek the DSS adopt the Recommendations suggested in this submission. We look forward to the outcomes of this Consultation Paper and being meaningfully involved in the process.

Questions about scope and intended outcomes

We are interested in hearing from people with disability, the community and service providers about:

1. **Is the broad focus and scope of information, advice and capacity building supports aligned to what you would expect? Are there any gaps?**

The broad focus is aligned to what we would expect. However, we see the following potential gaps:

- **Access to Information:** There may be issues with accessibility for certain groups (for example individuals with intellectual disabilities, language barriers, or low literacy), making it important to provide information in a variety of formats (for example Easy Read, Read Aloud, Braille, AUSLAN).
- **Personalised Support:** While broad-based information and advice are useful, some individuals may require more personalised assistance. This could mean one-on-one guidance with tailored advice for those with complex needs and their supporting family member.
- **Cultural Competency:** There may be gaps in addressing the needs of diverse cultural groups, such as First Nations or CALD or Deaf communities. This requires developing culturally sensitive supports.
- **Technology Access:** If information is primarily available through digital platforms, people with limited access to technology or digital literacy may face barriers to obtaining the necessary advice and resources.

2. **Are the intended outcomes the right ones? Are there any gaps? How would you measure them or like to see progress and improvements measured?**

The intended outcomes listed are the right ones. However, the potential gaps we see are:

- **Long-Term Impact:** While increasing access to supports and empowerment are important, there may be gaps in tracking long-term outcomes, such as sustained community participation or long-term independence.

- **Emotional and Psychological Well-Being:** While physical and social inclusion are often the focus, emotional well-being, mental health, and self-esteem may be overlooked. These are important aspects of a person's overall quality of life and should be included in the measurement of success.
- **Systemic Barriers:** The focus may be too individualistic, missing the broader systemic barriers that hinder full inclusion. This could include societal stigma, lack of accessible infrastructure, or even inadequate government policies for inclusive education. An outcome measure might include assessing progress in reducing these barriers.
- **Community Attitudes and Awareness:** Measuring the effectiveness of community education programs in changing attitudes towards disabilities and promoting inclusivity would provide insight into how well the broader society is adapting.

Measuring Progress and Improvement:

Surveys and Feedback: Regular surveys, focus groups, and interviews with people with disabilities, and their families, can provide qualitative and quantitative data on how supports are being utilised and the effectiveness of information and capacity-building programs. See the discussion on NACBO below.

- **Outcome-Based Metrics:** Progress could be measured through specific indicators such as:
    - Increased number of individuals accessing services.
    - Improved satisfaction and empowerment levels as reported by individuals with disabilities and families.
    - Service providers' improved competency, as measured by certifications or training participation.
    - Increased community engagement, participation, and reduced discrimination.
- **Qualitative focus:** how included is the person in their community, how much of a good life does the person have, being known, valued and connected in community**.**
- **Longitudinal Tracking:** To gauge long-term effectiveness, tracking the progress of individuals over time in terms of social inclusion, employment, and independence could offer a clear picture of sustained impact.
- **Case Studies:** In-depth case studies could track individual progress in navigating systems, accessing resources, or achieving personal goals. These could provide insights into the effectiveness of supports in real-life scenarios.
- **Disability Inclusion Action Plans:** Measure community inclusion for example, how accessible in physical/sensory/cognitive etc are community spaces like libraries, pools, shopping centres, beach, parks. This could be linked to the local Council's Disability Inclusion Action Plans.

Overall, these questions highlight the importance of ongoing engagement and feedback to ensure that foundational supports are designed in a way that truly meets the needs of people with disabilities and promotes broader societal inclusivity.

Questions about Capacity Building Supports

4. What supports help families, carers and kin to support their loved ones with disability?

Our family has benefitted significantly from capacity building and leadership development - our child is on an inclusive life path (we have had to fight for it) but this is very much due to the capacity building in us as parents and our clear understanding of holding an inclusive life vision. It has helped us hold high expectations and resist wrong offerings that lead to segregation. Our child is connected and holds valued roles in their community, has a Microenterprise and we have benefitted from customised employment training.

Extract from the Consultation Paper (Page 13):

"For families, carers and kin this might look like better information, peer support, parenting groups and workshops, education and training (i.e. online or in-person parenting courses). This would have a focus on:

- disability and rights awareness
- building skills in decision-support
- enabling independence and participation
- family leadership and development.

These supports would be focused on helping families, carers and kin of a person with disability to build their own knowledge and skills so they can support the person with disability to exercise choice and control and fully participate."

Family Advocacy, is a member of the National Alliance of Capacity Building Organisations (NACBO), an alliance of not-for profit, values-based, capacity building organisations that span across Australia with a combined experience of 85 years. We hold a shared vision and belief that all people with disability are valued citizens and should be supported to contribute to society through all facets of social and economic participation. NACBO believes having access to the "Good things in life" must be a primary consideration of funded support for people with disability. These are the universal things that all humans value, enjoy, require and strive to achieve. These aspects of life give richness to who we are, who we are connected to and how we live our life. Below is an illustration of the NACBO Capacity Building Model for Social Inclusion and Change.

In our view, capacity building to be effective must be:

- Over the life course
- Mirrored on the typical experiences and roles that most Australians enjoy
- Rich in content, geared to high expectations
- Targeted at leadership development
- Led by lived experience
- Independent of the direct support sector

The critical aspect of person-centredness is where the person with disability, often with the supports of families and allies, drive the change required whereby supports are designed to suit the person rather than to suit the service or system. To achieve this, any capacity building needs to be content rich to inform decisions of what supports and

services will add value to the person's life versus simply meeting a lower level need, for example, a roof over someone's head such as in the group home context.

There must also be an acknowledgement that many people with developmental disability, particularly people with complex disability, require extensive support from families and allies to see this through. Family, in whatever shape or form it may have, has a critical and vital role in the care and support of any individual. For many people with disability, this reality can be lifelong.

Over many years of undertaking this work, with many successful outcomes for people with disability, NACBO understands the approach needed to shift societal expectations, including the expectations of families. For example, families are often told by professionals, experts, the disability sector and others that their child would be better placed in a program and alongside others with disability. They are also often told that work, living in a home of their own, accessing typical places in community as others do is unrealistic for their loved one. Many messages are also reinforced around the safety of the person and others as justification for this attitude/belief. This leaves many families in a predicament that this is the best and often the only option afforded to their loved one with disability.

For many families that encounter our capacity building work, there is a need to address this sharply as a means to cut through the limitations of disability specific thinking. A potent means to achieve this has been to harness the 'lived experience' that highlights the way forward. Investment in family leaders therefore has been a primary strategy for NACBO organisations and for some for nearly 35 years. Families learn and respond to the experiences of other families and also provide a sense of confidence in taking the steps away from institutionalised practices. Also, for many families there is a stricken mistrust of the experts and services that they have been utilising.

It's important to mention that the 'lived experience' of families through the work of the NABCO organisations is very intentional. People with disability and their families that have secured good outcomes that highlight the aspects of the capacity building that we are attempting to instil and the necessary markers of the development and use of family leaders. In this respect, capacity building and peer support structures, needs to be rich in understanding around the content, successful theories of change and strategies that invite action into the lives of people with disability. In many respects, it constitutes a social change endeavour.

NACBO also recognise that there is no neat timeline or sequence of events and supports that equips people with disability and their families to shift their expectations. The complexities of the family unit, their values and the many barriers faced within mainstream and community spaces can inhibit this. We understand that there isn't a silver bullet or just one approach to shifting many years of institutionalised thinking that captures society's thinking and responses to people with disability.

To address this in any meaningful way, investment in capacity building needs to occur. Importantly, this focus must uphold the principles of the good life. People, their families and allies must have access to a suite of capacity building strategies to shift the reliance on historical thinking and challenge approaches, call out practices that lead to poor,

and at times, dangerous outcomes and provide the platform for creating valued social roles that lead to deep connections within the community.

UNSW and Flinders University conducted an evaluation of NACBO projects, which drew conclusions about the impact of the NACBO values-based capacity building model and activities on enabling social and economic contribution and leadership of people with disability and their families. We invite DSS to take a close look at the NACBO final evaluation report which outlines the principles of effective capacity building and describes how NACBO approaches this process. It covers the NACBO capacity building model, the outcomes and impact on people's lives and lessons for future capacity building initiatives, implementation and policies. Additionally, it identifies key elements of effective capacity-building that should be considered for future government policy and organisational practices. These include:

1. **"Principles.** The principles and rights to authentic inclusion in the community are embedded in the processes and life outcomes of capacity-building.
2. **Person at the centre.** Capacity-building prioritises the person's motivations and preferences, understanding their changing situation, interests and goals.
3. **Across the life course.** Capacity-building is a lifelong process. It takes time to address new goals and overcome challenges that change over a lifetime. People choose from a range of capacity-building options according to what is most useful at the time.
4. **Holistic and interconnected.** Capacity-building involves the person and their networks of support (families, allies and friends) to lead change according to the person's preferences. Information and resources are linked to activity that builds high expectations, follow up, leadership opportunities and networks of peers.
5. **Leadership.** Investing in intentional leadership of people with disability and families can have an impact on personal and community development, as well as peer learning and sustainability. Effective leadership can also drive positive change in systems and policies.
6. **Long term outcomes.** Achieving success in capacity-building requires taking incremental steps towards long-term outcomes. Maintaining ongoing connections with capacity-building organisations and networks is important to meet high expectations" (p.V)

"The evaluation found that the principled capacity-building processes used by NACBO, directly and indirectly, changed mindsets and outcomes for people with disability in regard to authentic inclusion. It also raised expectations and changed lives by empowering people with disability and families. People with disability experienced positive outcomes across a broad range of life domains. Outcomes in one area of life were often connected to outcomes in other areas, creating a more holistic impact and good life in the community" (p.IV)

The report also emphasised that uncertainty regarding funding and the reliance of short-term grants, hinders the impact of NACBO's capacity building efforts. This limitation affects NACBO's capacity to support individuals with a disability in influencing systems change. More importantly, it prevents NACBO from empowering people with disability to pursue meaningful roles and contribute to the social and economic fabric of their communities. Therefore, we

recommend the investment in the NACBO model of capacity building with a long-term focus such as 10 years so families can have the skills, knowledge and confidence to support their family member with disability to access the good things of life (see diagram overleaf).

People keep people safe and personal relationships are key

"Governments, funding and services cannot keep people safe on their own, nor can they replace the richness of typical, freely given, relationships. People keep people safe and personal relationships are the key. I encourage families and support workers alike to continue finding ways to initiate, embed and sustain freely given relationships for people with disability - in family, with friends and neighbours, in the broader community and as individuals as these relationships sustain us all".

Peer to peer supports

Peer to peer supports from a family leader has benefited me personally many times in helping my loved one be better at decision making, being independent and participating in society. Recently connected with a group of parents about Microboards and had specific problem solving conversations with other families further along the path than us. A Microboard will enshrine supported decision making in our child's life even if we suddenly weren't here. It also builds a team around a person.

As mentioned in the introduction, Family Advocacy has an initiative, Resourcing Inclusive Communities, which assists in providing

- **Information:** Accessible and reliable information about the importance of holding a clear Vision for an inclusive life, thinking ordinary and typical, being included in mainstream, high expectations in the long term, good collaboration, the importance of having freely given supports as a safeguard, disability rights.
- **Peer Support Networks:** Peer support groups or online communities where families can share experiences, advice, and resources. These can also be a source of emotional support and solidarity. Resourcing Inclusive

Communities, runs peer to peer networks which are very effective in providing information but also building the capacity of the family member. In addition, these networks also provide the opportunities for family leadership development. These are done through face to face and online formats.

- **Training and Education:** Offering workshops, courses, and training for families on the importance of having a Vision for their loved one with disability, how to access the good things of life through having socially valued roles, disability rights, supported decision making. These can help families build their own capacity to support their loved ones.
- **Family leadership development:** Our core focus is to empower families to take on leadership roles, advocate for the rights and needs of their loved ones, and drive positive changes within their communities and the systems they interact with. In many cases, family advocacy is undertaken when their family member with disability experiences limitations in cognitive understanding, has limited decision making competencies and may not be able to express their own interests, needs or rights in a multitude of situations. By fostering family leadership, our family members can better navigate complex systems, influence policies, and create more inclusive, supportive environments for people with disabilities.

5. **What services and supports are needed to improve the capacity of communities to be inclusive, accessible and welcoming spaces for people with disability?**

The aim of community capacity building is about building the capability of community and non-government organisations to be disability- inclusive One of our concerns here is that Foundational Supports will fund segregated, congregated settings going back to the old days and thereby 'othering' people with disability. The Disability Royal Commission Final report made a clear connection with segregation and the violence, abuse, neglect and exploitation of people with disability. To ensure this does not happen and people with disability are genuinely part of their community, Foundational supports must be genuinely person-centred.

- **Starting with one person:** The principle of starting "one person at a time" acknowledges that lasting change often begins on a smaller scale. By focusing on individual needs, it is easier to build trust, tailor supports, and ensure that interventions are impactful. When one person is empowered to lead, advocate, or connect with others, they can act as a catalyst for further change. Empowering individuals to exercise their choice and control leads to a broader impact with a ripple effect. As people with disability and their family member gain confidence and skills, they can inspire others, spread knowledge, and influence community attitudes. This leads to a more inclusive society where others with disabilities can benefit from the same supports.
- **Building Family Leadership and Strong Family Support Networks:** By being person-centred, families develop greater capacity to support their loved ones effectively, leading to improved outcomes for the person with disability. In becoming advocates and family peer leaders, they ensure better community and service outcomes. By starting with families, we create a supportive environment that enables individuals with disability to thrive. Advocacy undertaken by families is the most significant and plentiful form of advocacy that exists, as families are advocating for their family member, in some form or another, sometimes from birth. Children cannot advocate for themselves and nor can many people with cognitive impairment without trusted support.

- **Building Social Networks:** Communities are strengthened when people with disabilities are supported to form relationships and connections. This can include connecting people with similar experiences or interests, as well as integrating individuals into broader social, educational, and recreational activities.
- **Disability Awareness and Inclusion Training:** Training programs for community leaders, employers, and the public to promote disability awareness, reduce stigma, and encourage inclusive attitudes. This could include workshops on inclusive hiring practices, disability etiquette, addressing unconscious bias/negative assumptions/ prejudice and creating welcoming environments.
- **Inclusive Recreation and Leisure Programs:** Communities should offer recreation and leisure programs that cater to people with different disabilities, ensuring they are integrated into sports, arts, and social activities.
- **Employment Opportunities:** A system focussed on increasing employment opportunities for people with disabilities, including through adopting the Customised Employment model.
- **Community-Based Mental Health Services:** Accessible mental health services that cater to the unique needs of people with disabilities, ensuring emotional and psychological well-being is integrated into the broader community.
- **Cultural and Religious Inclusion:** Services that ensure people with disabilities are able to participate in cultural, spiritual, and religious activities within their community, fostering a sense of belonging and acceptance.
- **Universal Design and Accessibility:** Investing in accessible infrastructure such as ramps, elevators, wide doorways, and accessible public spaces. This includes not just physical spaces but also websites and digital platforms that are accessible to people with sensory impairments for example, screen readers, captioning, etc.
- By focusing on one person at a time and fostering community capacity building, foundational supports should ensure that individuals with disabilities are empowered to be active participants and included in their communities. They should not support and perpetuate segregation and congregation. This approach builds stronger families, more inclusive communities, and creates a ripple effect of positive change, ultimately leading to a society where everyone, regardless of ability, has the opportunity to thrive.

7. **What specific outcomes for people with disability and their families, carers and kin would you like to see measured to demonstrate accountability over time?**

- **Empowerment and Independence:** Measuring the degree to which people with disabilities can make independent choices about their lives for example, in education, employment, living arrangements.
- **Family Satisfaction and Support:** Tracking the satisfaction and well-being of families through surveys, support group participation, and outcomes of training or peer support.
- **Community Participation:** Measuring the level of community engagement by people with disabilities, such as participation in local events, volunteering, or employment. This can also include assessing the number of community programs that are truly inclusive of individuals with disabilities.
- **Educational Outcomes:** Tracking the educational achievements and opportunities available to people with disabilities, such as the inclusion of students with disabilities in mainstream schools, Year 12 completion, attendance rates, suspension rates and post-secondary education opportunities.

- **Employment Rates:** Tracking employment outcomes for people with disabilities in typical workplace settings, including the number of individuals employed in typical workplace settings, types of jobs held, and whether workplaces are inclusive and accessible.
- **Access to Services and Resources:** Measuring how effectively individuals with disabilities and their families are accessing available support services for example, mainstream education, early childhood centres, health care, mental health, legal aid, etc. and whether there are any barriers to service access.
- **Psychological and Emotional Well-being:** Assessing the mental health and emotional well-being of both individuals with disabilities and their families, which might include indicators like self-esteem, stress levels, or perceived quality of life.
- **Community inclusion:** Measure community inclusion for example, how accessible in physical/sensory/cognitive etc are community spaces like libraries, pools, shopping centres, beach, parks. This could be linked to the local Council's Disability Inclusion Action Plans.

Specific Focus Areas for Families, Carers, and Kin:

- **Knowledge and Skills in Disability Awareness:** Measuring the extent to which families and carers feel informed and capable of supporting their loved one's needs for example, knowledge of the importance of having a strong Vision for an inclusive life, the importance of having socially valued roles to mitigate against devaluation, disability rights, and decision-making.
- **Family Leadership and Development:** Tracking family involvement in leadership roles or in advocating for change, as well as their capacity to support the individual with disabilities in exercising choice and control.
- **Access to Peer Support and Resources:** Measuring the availability and effectiveness of peer support networks and educational resources aimed at empowering families to provide better care and support for their loved ones.

By focusing on these outcomes and supports, communities, service providers, and governments can better design and implement programs that truly make a positive impact on the lives of people with disabilities and those who care for them.

For organisations and the broader sector

1. Are there critical or immediate sector capacity challenges or opportunities that should be considered as part of initial reforms? How would you propose these challenges or opportunities be addressed?

Mainstream Australia sees Inclusion as someone else's problem. (The NDIS is over there and will take care of it) Mainstream services, organisations from the top down (governance) and people at the participation level all need education and accountability to include people. Legislation to make sure there is a consequence if they don't. I have lived in a time when there was some funding for people with disability, providing them with some support and when lots of other people with milder disability

had nothing. I fear we will return to those days, as people with mild ID generally aren't considered 'eligible' for anything. The usual IQ tests don't test for poor judgement, poor decision making, lack of friendships, lack of critical thinking, inability to think quickly on your feet, poor financial management and planning, poor understand of the importance of seeing a dentist and Dr regularly etc. I am not confident that it is these things that will be available as part of Foundational Supports, but to me these things are the foundations of my son's life.

A) Evidence from advocacy organisations show that demand for independent advocacy substantially increased with the introduction of the NDIS. People with disability needed assistance to access the Scheme, stay in the Scheme and appeal decisions made about their NDIS plans and individual funding. We foresee the same will be the case when Foundational Supports are rolled out, where advocacy will be required to rectify individual and systemic issues caused by unintended consequences or the lack of clarity around roles and responsibilities.

B) Further to this, it is absolutely critical that advocacy be independent from general foundational supports. The NDIS Review proposed that individual advocacy could be a foundational support, potentially shifting how individual advocacy is funded. In January 2024, National Cabinet announced that $11.6 million has been invested into a Foundational Supports Strategy. This followed an agreement brokered in December 2023 that state and territory governments will fund foundational supports in a 50-50 split. In addition, the Federal Government's response to the Disability Royal Commission in July 2024 announced a new advocacy program, without detail, about how funding would be distributed, how it would relate to the Foundational Supports Strategy, or which kinds of advocacy would be included. Without any clarity around this, it is difficult to provide an informed opinion.

Broadly speaking, advocacy should be free, and impartial (free from conflict of interest), readily available and accessible to all people with disability. The need to advocate with impartiality, free of conflicts of interest, has been an important principle and value driving the work of the disability advocacy sector. Advocates need to be on the side of the person with disability only, so that the interests of governments, service providers or carers and family members do not take precedence or obscure the rights, preferences and wellbeing of the individual.

It is worth noting here, individual advocacy will always be needed and cannot be replaced by self-advocacy. Individual advocacy is not a replacement for building self advocacy skills but rather a support that needs to exist alongside. One type of support does not replicate the other; both individual advocacy and self advocacy programs can help a person with disability build the skills to self-advocate, however there are matters including NDIS appeals that require specialist knowledge of professional advocates and are rarely able to be effectively navigated by a person with disability on their own. As stated in the introduction, the Family Advocacy Model of Advocacy provides individual advocacy supports to families to help them advocate for the rights and interests of their loved ones with disabilities to navigate barriers/issues faced in areas such as NDIS, guardianship, education, or employment rights.

C) We have concerns about the proposed Navigator role from the NDIS Review. This role ought to be a person who

has the skills and local knowledge to be able to be a community connecter, in a comprehensive way, to help identify needs and supports, understand the NDIS, and act as a triage system with foundational supports. This is akin to the original LAC when NDIS was first rolled out which had the depth required for this role to be effective. To this end, we refer DSS to read Power and Connection - The international development of Local Area Coordination and watch this video (32 minutes), Right Relationships – Is it possible to create a partnership between families and services that really works?

2. **Are there things that have worked well, or you have seen work well, to find suitable workers and develop the skills of the workforce to deliver services like the ones outlined in this consultation paper?**

See the NACBO final evaluation report as discussed above recommending the NACBO model of capacity building. What works well in finding good workers is about starting with the person and their needs and interests, having a long-term vision that workers understand and work with, emphasising the worker is a facilitator and is a bridge to community (and not just 'taking them into community' without authentic engagement), flexibility in workforce options (that is, a worker who is the right fit for the person with disability and not necessarily having to be reliant on disability support workers with a Certificate 3.)

3. **What could help support innovation, quality and best practice in the delivery of these supports?**

See the NACBO final evaluation report as discussed above recommending the NACBO model of capacity building.

4. **What would need to be considered to avoid market gaps in the availability of supports, including in lower population and regional and remote areas?**

To avoid market gaps in the availability of supports for people with disabilities, especially in lower-population, regional, and remote areas, it is essential to focus on accessibility, tailored services, workforce development, and sustainable funding. A combination of innovative service delivery models, collaboration between stakeholders, and community engagement will help ensure that people with disabilities in these areas have access to the supports they need to lead fulfilling and independent lives.