

VisAbility

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164 Elizabeth Street

North Hobart 7002

TASMANIA

9 April 2021

To whom it may concern,

Re: Inquiry into Disability Support Services in Tasmania

Thank you for the opportunity to contribute to the inquiry into disability services in Tasmania. VisAbility, including Guide Dogs Tasmania and Kites Children Therapy, provides specialist services to Tasmanians who are blind or vision impaired.

With respect to your terms of reference, we offer the following:

1. Consideration and management of the State based costs of long-term care and support for people who are not eligible for the NDIS

Many people with disabilities are unable to receive services under the National Disability Insurance Scheme (NDIS) owing to the criteria for entry to the scheme. This is because NDIS eligibility require a precise diagnosis and a prognosis of permanent disability. It can be very difficult to give a prognosis in a situation where a precise diagnosis is not possible owing to



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an evolving diagnosis, inadequate or incomplete medical testing, and/ or lack of knowledge or understanding in certain areas.

We have encountered, for example, several young people who have a significant vision impairment which functionally affects their ability to fulfil their study requirements, communicate effectively and live as independent community members with gainful employment. Examples of these disabilities include but are not limited to functional neurological disorders, auto immune disorders and genetic complications which are difficult or impossible to diagnose.

Many families have chosen to bear the brunt of significant costs to mitigate the impacts of these disabilities and obtain appropriate therapies and services to give their children the best chance to gain independence. This has flow on impacts with the family's own support systems, productivity, employment and living circumstances. Increased reliance on Centrelink for social housing and support is not uncommon.

Similarly many people with dual disabilities are rendered ineligible for the NDIS owing to, for example, lack of information about their secondary disability. VisAbility is aware of at least one long-term client who is severely vision impaired and has a mild cognitive disability. This client's application to join the NDIS was refused owing to lack of evidence of her intellectual disability, despite clear evidence from respected professionals about vision impairment and opinions provided regarding her secondary disability.

There is also a lack of professionals able to assist in these situations, and whilst we recognise the potential for appealing such decisions, many clients lack the experience, confidence, money or other capacity, to take advantage of these options.

2. The range of support services available to Tasmanians who are not on, or eligible for, the NDIS

Schemes such as the NDIS and My Aged Care have changed the sector which in many respects has been extremely positive. However, it has significantly increased stress on the existing limited network of Allied Health Professionals (AHP) and in particular, Occupational Therapists (OTs), Orientation and Mobility Instructors (O&Ms), and Speech Pathologists.

When narrowed further to a particular specialist clinical scope, for instance low vision and blindness, specialist staff are infrequently available in Tasmania leaving the sector at risk of inability to function. VisAbility has undertaken several unsuccessful recruitment campaigns for

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allied health employees to work out of its offices in Hobart and Launceston. At times only one, or no, applications for these roles were received.

Demand for the limited supply of allied health professionals, and subsequent competition for recruitment and retention, has also drastically increased the cost of service provision, even on a fee-for-service basis.

For example; an older person who suddenly acquires significant vision loss and requires Orientation and Mobility (white cane training and learning to navigate around the community) in order to complete errands and access the community the costs can be significant. No subsidies are offered for these services and to learn a route, for example home to local shops and back, could cost in excess of \$1000. Many cannot afford this which leads to loss of independence and potential physical and social isolation.

3. Funding for organisations that service those not eligible for the NDIS

Children's Services

There are very limited options for therapy services for paediatric population with a disability who do not qualify for the NDIS. Particular areas of concern are young children requiring speech pathology services.

Our primary source of publicly funded out-patient therapy is St Giles in Hobart and Launceston and the THS on the North West Coast. St Giles provides some outreach to areas including Kingston, Chigwell, Bridgewater and New Norfolk in the South and is facilitated greatly through the Child and Family Centres. These services have reduced significantly since the roll out of NDIS. THS provide some services to the paediatric population with a disability, including clinics for premature babies (who are more likely to have a developmental delay or disability) and specific medical issues such as talipes equinovarus (club foot), cystic fibrosis and diabetes.

There are other organisations that are available to privately service this population however, these services are often filled with NDIS participants with long waitlists, even for private paying consumers. Based on waitlists, number of families looking to access therapy services and decreased frequency of visits to outreach clinics it could be assumed this funding is not sufficient to support children in early intervention requiring services.

Aged Care Services

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For many years VisAbility/Guide Dogs enjoyed block funding which enabled these people to access essential services such as Orientation and Mobility, Occupational Therapy, Assistive Technology training and assessment, Guide Dog services and more.

Recognising that this inquiry limits itself to people who are not eligible for the NDIS, people over 65 years will be impacted. Tasmania has a significantly higher ratio of people over 65 than in most of the mainland states. Vision loss commonly affects people as they age so a large portion of the community which VisAbility/Guide Dogs Tasmania represents is over 65.

This demographic relies on organisations, like VisAbility, to assist them to resuming a normal life after acquiring vision loss. Those over 65 often require additional training to communicate effectively with friends and family using computers or other electronic communication.

Aged Care funding, while welcome, is not enough. Typically these community based, in-home, rehabilitative services are now provided under the guise of the Commonwealth Home Support Program, Allied Health Therapy and Social Support categories. The CHSP offers limited subsidies and can necessitate clients, living on an aged care pension, to be up to \$120 per hour out of pocket for allied health services, unless the provider agrees to cover the shortfall. VisAbility have established that it costs us 4x the amount of fees we recover to deliver this service, meaning the service is unsustainable on it's own merits and requires significant philanthropic support (which may or may not be attainable).

In addition, many people over 65 have extremely long waiting lists for homecare packages, many in excess of two years. Many of these people are experiencing crisis situations owing to financial and housing stress and trauma associated with vision loss and acquiring of other disabilities.

4. Workforce development and training opportunities for the disability support sector, including allied health;

Recruitment,

Recruitment of staff in the therapy sector for disability is challenging. We have advertised for over 12 months to recruit to a speech pathology position without success. The network of professionals in Tasmania is exhausted, and there is limited/no incoming supply due to closed borders.

VisAbility is aware of moves within the University of Tasmania, to open an Occupational Therapy course. We believe this should be encouraged and would hope the course is

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successful and incentives are applied so that Tasmanian graduates will remain in-state to provide services and supports needed in the community.

However, we note that these courses may not be offered for up to two years meaning graduates may be at least five years off entering the workforce. While this is a promising medium term plan for allied health staffing in our state there needs to be far stronger incentives to encourage allied health staff to move and stay in Tasmania.

There is a growing community trend to have access to allied health services in outreach areas, including working groups for increased access to therapy services in Dunally. However, these working parties are usually driven by volunteers and retired therapists. At this stage there are a number of volunteer and community groups working towards these services being available

Salary and Benefits

The introduction of NDIS and My Aged Care schemes, and the added complication of Covid19, have also had a significant impact on the market price for employing an allied health professional.

In the most recent six months to April 2021; we have found it is not uncommon for us to offer a new graduate employee in Tasmania to commence at a Level 6.1 - \$76,541 per annum (was previously Level 5.1, \$67,754 per annum). Anyone with four years plus of clinical expertise also now has the expectation of being paid at the top of our therapist salary banding Level 7.3 - \$89,882 per annum (was previously Level 5.4 - \$73,047 per annum).

Additional benefits such as laptop, mobile phone, and home garaged vehicle are also standard. Our professional development allowance has increased from \$250 per person per annum to \$1,000. This is a huge impost on our bottom line. Yet we are aware we are bottom-to-mid range when comparing salaries across the sector, despite our allied health professionals being highly specialist.

New Graduate Support

Lack of experienced therapists means employing more new graduates. New graduate therapists require extensive support and training as they embark on their new careers, particularly in a niche field. This is difficult to facilitate in organisations, when there is already insufficient staff to service caseloads and waitlists, let alone provide mentoring and training.

Specialist Skills and Training

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In addition to all available staff having full work-loads and less opportunities to provide supervision and training to less experienced colleagues, there are also very few clinicians who have the time and opportunity to acquire qualifications to provide services in specialist niche areas, such as:

- Driving instructor training.
- Vehicle access for disability.
- Home and vehicle modifications.
- Dysphasia.
- PROMPT and other specific speech pathology techniques.
- Complex feeding and issues with PEG feeding.
- Neurological and physically complex adults.
- Complex equipment providers.
- Complex seating and wheelchair specialists.
- Hydrotherapy.

Covid has inspired some unique online training opportunities, including those with Royal Children's Hospital Melbourne and equipment suppliers such as Permobil and Medifab, which have benefitted Tasmanian therapists. However, given the hands on nature of allied health, face to face training is always preferred.

Specifically, access to professional development opportunities for paediatric allied health in Tasmania for both NDIS and non-NDIS providers is extremely limited. Staff and organisations are often required to fund travel to interstate centres to access training in this field. It is a niche market, but has the opportunity to drastically improve life outcomes for kids. Early Intervention research confirms that assisting children between 0-5 is critical. A dedicated service to bring allied health training and professional development providers to Tasmania would be invaluable.

5. Any other matters incidental thereto

Available Subsidies

VisAbility/Guide Dogs Tasmania recognises and applauds a recent decision to make all public transport services free to people who hold a Vision Impaired Persons' Travel Pass. This, along with the increased bus services between Hobart and Launceston, will have positive impact on the community as people can more easily travel across Tasmania.

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It is noted, however, that there have been recent moves to make significant changes to the Transport Access Scheme, particularly for NDIS participants. This will have a severe and negative impact on the blind and vision impaired community, which owing to the fact that they cannot drive, relies heavily on taxis and ride-sharing schemes on a daily basis. Many people must take long taxi trips to access work, school, to access vital therapies and simply to visit friends and family. This is owing to lack of useful public transport options or lack of appropriate training to access available options which represents a significant financial cost.

Rhetoric from the Australian Government at the commencement of the NDIS stated that “No one will be worse-off under the new scheme”. If the Tasmanian Government removes access to the Transport Access Scheme for NDIS participants who are blind or vision impaired, many people will be significantly worse off and will not be able to access work, study or other community activities which add value and meaning to their lives. Unless there is significant change within the available public transport infrastructure rendering it fully accessible and useable by blind and vision impaired people, the TAS should remain untouched or increased in order to provide access to additional, and potentially cheaper options, such as ride-sharing services.

Thank you for your time and consideration. We welcome any opportunity to discuss further and look forward to learning the outcomes of this Inquiry.

Yours sincerely,



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