**Investing for Innovation and Quality**

A Sector Briefing From

The New Zealand Disability Support Network (NZDSN) July 2015





About Us



***Our vision is an inclusive New Zealand.***

***Our purpose is to lead and influence change that supports inclusive lives for disabled people. We aim to provide a strong voice and policy advice to Government on matters of common interest and***

***to facilitate innovation and quality with our provider members.***

The New Zealand Disability Support Network (NZDSN) is an incorporated society of member organisations that provide support services to disabled people. We have more than 150 members providing a wide range of community residential, supported living, specialist employment and community participation services.

This briefing is the first of what will become an annual report to the sector in which we will outline:

* issues and concerns that are significantly impacting service providers and the lives of disabled people
* recommendations to government for addressing the identified issues and concerns
* NZDSN’s own commitment to supporting innovation and quality

# Executive Summary



There are a range of issues and concerns that are currently making it difficult for providers to achieve the outcomes that everyone in the sector, including disabled people, are seeking. There is broad consensus that disability support services should provide:

* Quality services that can respond to evolving best practice in a timely way
* A capable and professional workforce
* Person directed supports and services that achieve the ordinary life outcomes sought by disabled people and their families/whanau
* Services that provide good value for money in terms of government funding and policy goals
* Services that should be informed and driven by the goals and intent set out in the UN Convention on the Rights of Persons with Disabilities, The New Zealand Disability Action Plan and the New Zealand Disability Strategy.

We have identified that an overall lack of investment by successive Governments over several decades is the largest contributing factor to the challenges that face the

sector. The sustained shortfall has affected workforce development, service quality and innovation, fair pay, service capacity, and staff recruitment and retention.

### *This substantial under-investment reflects the lack of real value and recognition being placed on the aspirations of disabled people to simply live ordinary, inclusive lives in their communities.*



NZDSN also argues that simply increasing the “pot,” though itself essential, is not enough. A quantum leap in investment in the sector cannot be for “more of the same” but has to be matched by a corresponding leap in innovation and quality on the part of service providers. Moreover, NZDSN also maintains that despite current levels of funding there is much that can and already is being done to foster innovation and quality. We recognise our responsibility to facilitate and support such developments.

We have a duty to challenge Government, but also to challenge ourselves, to respond to the changes that disabled people are so clearly demanding from service providers – in whatever funding climate we face.

NZDSN in this, its first sector briefing, takes a wide look at the issues for the sector, but emphasises the overall lack of investment and the absence of fair pay as central to making headway on many other priorities.

### *It is our hope that this sector briefing will highlight the disability sector’s most pressing concerns, promote sector wide dialogue and lead us towards solutions that improve the lives of the people we seek to support.*

**Dr Garth Bennie Wendy Becker**

**Chief Executive Chairperson**

**NZDSN NZDSN**

**July 2015**



Contents

1. [About Us](#_bookmark0)
2. [Executive Summary](#_bookmark1)

[7 Fair Investment for Fair Wages](#_bookmark2)

[**7 Some Observations:**](#_bookmark2)

[**9 Recommendations to Government:**](#_bookmark4)

[**9 NZDSN’s Commitment:**](#_bookmark4)

[11 Fostering Innovation and Quality Development](#_bookmark5)

[**11 Some Observations:**](#_bookmark5)

[**13 Recommendations to Government:**](#_bookmark7)

[**13 NZDSN’s Commitment:**](#_bookmark7)

[15 Workforce Development](#_bookmark8)

[**15 Some Observations:**](#_bookmark8)

[**17 Recommendations to Government:**](#_bookmark10)

[**17 NZDSN’s Commitment:**](#_bookmark10)

[18 Responding to the Employment Aspirations of Disabled People](#_bookmark11)

[**18 Some Observations:**](#_bookmark11)

1. [**Recommendations to Government:**](#_bookmark13)
2. [**NZDSN’s Commitment:**](#_bookmark15)

[22 Individualised Funding](#_bookmark16)

[**23 Some Observations:**](#_bookmark17)

1. [**Recommendations to Government:**](#_bookmark19)
2. [**NZDSN’s Commitment:**](#_bookmark20)

[28 Multiple Frameworks/ Multiple Projects](#_bookmark21)

1. [**Some Observations:**](#_bookmark21)
2. [**Recommendations to Government:**](#_bookmark22)
3. [**NZDSN’s Commitment:**](#_bookmark23)



[31 Cultural Responsiveness](#_bookmark24)

[**31 Some Observations**](#_bookmark24)

1. [**Recommendations to Government:**](#_bookmark24)
2. [**NZDSN’s Commitment:**](#_bookmark25)

[33 Affordable and Appropriate Housing](#_bookmark26)

1. [**Some Observations:**](#_bookmark26)
2. [**Recommendations to Government:**](#_bookmark28)
3. [**NZDSN’s Commitment:**](#_bookmark30)

[36 Purchasing and Contracting](#_bookmark31)

1. [**Some Observations:**](#_bookmark31)
2. [**Recommendations to Government:**](#_bookmark32)
3. [**NZDSN’s Commitment:**](#_bookmark33)

[39 Complaints/Safeguarding](#_bookmark34)

[**40 Some Observations:**](#_bookmark35)

1. [**Recommendations to Government:**](#_bookmark38)
2. [**NZDSN’s Commitment:**](#_bookmark39)

[44 Inclusive Education](#_bookmark40)

[**44 Some observations:**](#_bookmark40)

[**47 Recommendations to Government:**](#_bookmark41)

[**47 NZDSN’s Commitment:**](#_bookmark41)

[48 Developing the Evidence Base](#_bookmark42)

1. [**Some Observations:**](#_bookmark42)
2. [**Recommendations to Government:**](#_bookmark43)

[**49 NZDSN’s Commitment:**](#_bookmark43)

1. [Bibliography](#_bookmark44)
2. [Endnotes](#_bookmark45)

Fair Investment for Fair Wages



Wages make up at least 80% of most providers operational costs, therefore the connection between appropriate levels of investment and fair wages is obvious. However there are also direct consequences for recruitment, retention and workforce development. Moreover, widespread implementation of innovation and quality (and achieving the outcomes sought by disabled people) is unlikely without a significant lift of overall investment in the sector.

Some Observations:

* + Research undertaken in 2012 clearly indicates that wages in the sector are between 22-52% lower than comparable roles in other parts of the workforce1.
  + The annual investment needed by government to close this gap is significant, depending on which comparator roles are used, however we acknowledge updated research is required.
  + Current wage levels are making recruitment and retention extremely challenging. In March 2015 SEEK New Zealand released information on employment opportunities in Community Services and Development2. Across the industry, the number of employment opportunities increased 4% from 2013 to 2014, and applications rose at a similar rate indicating that supply and demand are in sync. However, the data identified significant shortages in the Aged and Disability Support sector with lower numbers of people applying for roles. SEEK surmised the low candidate interest in Aged and Disability roles is due to lower pay rates.
  + The 2012 PSA/NZDSN Report (Improved Funding for Disability Support Services and Disability Support Workers – a Business Case) cites studies that indicate turnover is high. The report noted that literature suggests turnover in disability support is an international problem and one that is described as chronic3.



* **Staff turnover is a major threat to quality services because it undermines the very relationships between service users and direct service staff. These relationships are at the heart of quality delivery.**
* Developing the workforce beyond level 3 qualifications becomes extremely problematic if wages cannot match higher qualifications.
* New service paradigms and models require a much broader and more complex range of skills and knowledge on the part of direct service staff – and their managers (meaning higher qualification levels). This means the widespread implementation of new service models beyond one-off pilots and demonstrations is problematic.
* During the last 5 years a number of legal challenges have been mounted to address wage inequities and disparities in the sector: the so called “sleepover case,” the “Terra Nova case” which highlighted pay equity issues, and the “in between travel negotiations” for home help workers which has led to even broader discussions about the need to “regularise” the workforce.
* Without exception the courts and other negotiated settlements have found in favour of the complainants. These decisions are themselves strong evidence of a workforce that is riddled with pay inequities and disparities and the likelihood of further cases with similar decisions is very high. This is a complex, expensive and time consuming way to address the fair wage issue and the outcome is a very piecemeal approach to reform with decisions that often leave neither party entirely satisfied.
* Government is struggling to implement new service models and pricing frameworks because investment levels overall are too low – whether this be in the upscaling of pilots and demonstration projects, establishing independent service planning, moving from traditional residential programmes to supported living options, more effective approaches to employment support or simply attempting to create equity and transparency with existing contracts.



* + **NZDSN does not accept the “there is no more money” argument, but does acknowledge that spending on the aspirations of disabled people for an ordinary, inclusive life currently appears to be a low priority for the**

**Government. It is difficult to see how the full implementation of the Disability Action Plan can be achieved without some fundamental policy shifts and changes in the current level of investment.**

Recommendations to Government:

* Acknowledge the obvious lack of investment and how it is holding back the systemic implementation of change, innovation and quality demanded by disabled people and called for in the UN Convention, The NZ Disability Strategy and the Disability Action Plan.
* Abandon the piecemeal approach being progressively decided through the courts in favour of a staged, integrated sector wide approach to lifting investment to appropriate levels as a matter of priority spending. The “ in between travel” negotiated settlement offers an example for a possible

approach of how broader workforce investment issues could be addressed. NZDSN would endorse such an approach by Government to address fair pay and related workforce issues in the disability sector.

* Work with sector providers and DPOs to use the research evidence and the decisions already made by the courts as a basis for influencing the appropriate level of investment.

NZDSN’s Commitment:

* Continue to collect evidence across the sector that highlights wage disparities, the impact on workforce and service development, and that identifies what appropriate wage levels should be.
* Work with the sector to update the business case for improved funding developed in 2012.



* Draw attention to the links between inadequate investment, low wages, recruitment/retention and workforce development challenges.
* Draw attention to the economic and social benefits of increased investment in achieving service system transformation and the consequent outcomes sought by disabled people in terms of living options and employment.
* Support the pursuit of legal and negotiated remedies to address fair wage issues as an “in the meantime” solution to the broader problem of systemic underinvestment in the sector.

# Fostering Innovation and Quality Development



Despite the constraints of funding, NZDSN believes there is always room for innovation and quality development. History tells us that what becomes a new government policy or programme has often been well established practice in non-government settings for anything up to a decade beforehand.

### *The challenge in front of us is that, in the context of pervasive underinvestment, many innovations and quality developments are likely to be in isolated pockets, fleeting or temporary at best, and not lead to widespread implementation.*

Given such a constrained environment it is essential that government and the sector work in real partnership to shine a light on promising innovations, ensure a level of investment that enables widespread implementation – and without losing the essential values and practices that underpin them.

Some Observations:

* + The design and implementation of pilot projects and demonstrations has on occasion been fraught with an overly complex project management approach by government whereby the values and driving principles that originally underpinned the innovation are at risk of being lost or even hijacked by competing government policies. Examples include the benefit reform agenda that appears to be driving the proposed new Ministry of Social Development (MSD) Outcomes framework and the primacy of individualised funding as a “silver bullet” in the Enabling Good Lives (EGL) projects.



* That the Government is supporting the trialling and demonstration of new approaches (EGL, Choices in Community Living, Local Area Coordination and various approaches to individualised funding) is commendable. However to date there is scant evidence of an overarching evaluative framework for these projects and what approach will be used to determine how this work will be used to inform any future changes. EGL has emerged as encapsulating the defining principles that should guide any system transformation, however how this position was arrived at and the degree of consensus about these principles across the sector is not clear.
* Given the wages paid to key roles in some pilots and demonstration projects it is difficult to see how any widespread implementation could be achieved without substantial increases in funding. In the absence of this we run the risk of a legacy of well resourced pockets of innovation that cannot be replicated anywhere else.
* System change and transformation does come with an additional financial cost. The legacy of the large deinstitutionalisation programmes of the 1970s and 1980s clearly demonstrated this. Many of the changes now being demanded around personalised, individualised and person driven approaches require a paradigm shift (in thinking and action) of a similar magnitude. **To embark on such changes without acknowledging either the cost of the transformation itself, or the historic underinvestment in the sector over the past two decades, would seem to be the ultimate folly.** The draft Productivity Commission Report on More Effective Social Services emphasises that “good design takes time and resources” (P.14 appendix D).
* The Government is clearly struggling to understand and practice the realities of a true partnership approach as required under the auspices of the UN Convention and as outlined in the Disability Action Plan4. **Much of the current activity related to “consultation” often feels more like the “selling” of**

**pre-determined Government policy.**



* There is a need for the Sector and the Government to arrive at a shared understanding of what “co-design” looks and feels like in order to avoid misplaced expectations of each other.

## Recommendations to Government:

* Recognise and plan for the costs of transforming the disability sector in the context of new service and support paradigms, particularly when it comes to upscaling pilot programmes and demonstration projects.
* Reassess its approach so that it can work in real partnership with the sector and DPOs. This would mean a shared understanding of what a co-design approach to change means and subsequent development of new frameworks, policies and programmes – as required in the UN Convention and the Disability Action Plan.
* Articulate the over-arching approach to system transformation including: the role and functions of various trials and demonstrations (and how they are linked) the evaluative framework to assess the outcomes of these projects, and the approach that will be developed to guide implementation once trials and demonstrations are complete.

NZDSN’s Commitment:

* Continue to engage and participate with Government at every opportunity and at all levels in the design and development of policy and programmes.
* Provide advice and guidance on partnership and co-design approaches and commit to working together with DPOs – and work collaboratively to arrive at a sector wide shared understanding of what a co-design approach is.



* Develop and provide a comprehensive programme of activity for providers and relevant stakeholders in relation to innovative practice, leadership development and organisational capability. This will occur through a national Provider Development programme and our annual National Conference.
* Develop a leadership mentoring programme to ensure organisational capability, especially in the context of new paradigms and organisational transformation.
* Develop “communities of practice” for front line staff to ensure that learning is consolidated in the workplace and translated into practice.

# Workforce Development



It is essential that the sector workforce is developed in a way that anticipates the skills and knowledge that will be needed in the future.

### *We are on the cusp of some major paradigm shifts in how we think about services and support, what disabled people are demanding, how providers should transform themselves to respond effectively – and therefore where and how direct service staff will be working.*

There is also a growing commitment to a co-design approach to policy and system design with disabled people – which needs to be matched with a corresponding investment in Disabled Peoples Organisations to support the level of participation that this approach requires.

Some Observations:

* + There is now a great deal of activity taking place in relation to workforce development, both in terms of engagement with formal qualifications and in-service training opportunities.
  + Much of the activity in relation to formal qualifications is at the 1-3 level on the qualifications framework. While there is a growing recognition that we really need to be focused on level 4, 5 and 6 (and beyond) it is difficult see how this can be realised with current pay levels. For example who is going to invest in a level 4 or level 6 qualification (and higher) and still only earn $16 an hour? People with this level of qualification are snapped up elsewhere in the market, further feeding a major retention problem in the sector.



* Funded in-service training opportunities are now regularly available; however there are concerns about complex application processes and multiple funding streams.
* There is a big difference between “supervising” the activities of a group of disabled people in a traditional day programme facility and identifying, facilitating and brokering natural supports in a community that enables participation/contribution by an individual in a range of settings (who may

also have some challenging behaviour). The latter requires well developed analytical and communication skills, strong values around person centred approaches, independent decision-making, and high levels of confidence in a range of settings. The roles required of the workforce are becoming more complex and demanding – and more rewarding – which unfortunately is not reflected in current pay rates.

* Individualised funding and personalised approaches to support mean an itinerating workforce will become the norm. This increases the demands on staff for well developed planning and organisational skills, an ability to operate with high levels of autonomy and consequently new demands for providers

in terms of effective models of supervision, guidance, in-service training and support for staff.

* There is some excellent work being done to provide guidance for the sector, for example the “Let’s Get Real” framework and accompanying resources that reinforce the changing demands being placed on the workforce5.
* Co-design approaches to policy and system design that involve disabled people as equal partners need to be matched with investment in DPOs to support this level of participation.



Recommendations to Government:

* Look to simplify approaches for funding in-service training.
* Recognise the reality of a rapidly evolving workforce that requires a far broader and deeper range of knowledge and competencies, higher levels of qualifications and consequently, pay rates that reflect this.
* Invest in DPOs to support the level of participation required in co-design approaches to policy and system development.

NZDSN’s Commitment:

* Continue to advocate for investment in higher level qualifications to reflect the increasing demands and competencies required of the workforce and that pay rates move to reflect the new reality.
* Ensure the content of NZDSN’s Provider Development Programme exposes providers to the very latest developments in best/next practice and anticipates the needs of leaders and managers in the context of service transformation.
* Support the need for investment in DPOs to enable full participation in co-design and consultation processes.

# Responding to the Employment Aspirations of Disabled People



### *The Disability Action Plan is clear on the priority we should all be giving to lifting the economic prosperity of disabled people by increasing*

***their participation in the labour market. However current policy and funding frameworks seem to be entirely at odds with this priority – and in fact present as major barriers to employment opportunity.***

Some Observations:

* Funding for employment support and vocational programmes has remained static for many years and is even acknowledged by the Government as contributory funding only.
* A proposed new MSD outcomes framework:

» Describes a very narrow investment approach that is really only interested in prioritising those disabled people who are, or are likely to work, for more than 15 hours per week (thereby delivering significant reductions in benefit payments),

» **Adopts the rhetoric of the UN Convention, EGL and the Disability Action Plan and then proceeds to offer a proposal completely at odds with the principles outlined in these documents,**

» Relegates those working less than 15 hours per week to a service option that is usually funded at a lower rate and does not have a central focus on employment,

» Ignores the wider economic and health benefits of employment - even when its less than 15 hours per week,



» **Sets up Work and Income as the gatekeeper of a targeted approach to managing access to services – placing disabled people on an endless cycle of eligibility assessment and transitions between service options,**

» Will incentivise providers to focus exclusively on those disabled people who will be the easiest to achieve an employment outcome for (so called “cherry picking”). This will be exacerbated in a proposed outcomes based milestone payments funding arrangement if there is not a significant lift in the overall level of funding (NZDSN submission to MSD proposals, April 2015: [**www.**](http://www.nzdsn.org.nz/)[**nzdsn.org.nz**](http://www.nzdsn.org.nz/)),

» Creates the possibility of people being without support services for part of their day/week with immediate consequences for families and/or residential and supported living programmes,

» Has come as a major surprise to the sector given the supposed consultation that preceded it and completely contravenes the stated aim of the UN Convention and Disability Action Plan to engage in co-design approaches,

» Appears to be driven entirely by a benefit reform agenda rather than the goals outlined in the Disability Action Plan, and as such, presents as welfare rather than as an employment strategy,

» Does not increase the investment in employment support for disabled people.

* There is a widely recognised economic argument for increasing investment in supporting disabled people to participate in the labour market6. Rapid demographic changes over the coming decades will significantly reduce the size of the working age population (which itself will be aging with an increasing proportion that will be disabled). It therefore makes sense to increase investment now in sectors of the working age population that are

under-represented in the labour market – disabled people are the most under- represented group7. This economic argument seems to have entirely escaped the attention of current Government policy makers.



* There is no shortage of evidence in the literature of longitudinal studies that identify employment support programmes that can consistently deliver positive cost benefit ratios8,9. This evidence does not seem to be informing policy and programme design to the extent that it should be.
* There is an emerging crisis in the availability of what are generally described as community participation or “day programmes:”

» Disability Support Services (DSS) funded programmes are gradually becoming non-viable as the original participants exit and cannot be replaced; MSD funded programmes are only partially funded and with numbers capped; there is an increasing gap between the programmes currently on offer (usually based around a building and a congregate support approach) and demand for more personalised and inclusive options,

» The combined effect is a growing number of disabled people who simply either don’t have access to these programmes or do not want to use what’s on offer – particularly younger people transitioning from what has largely been a more inclusive education experience,

» There is no quantifiable data on the numbers of individuals without options or how they are spending their time. This data gap urgently needs

addressing as part of a re-think of both funding and service design regarding these programmes,

» This service gap urgently needs a combined response from DSS/Ministry of Heatlh (MoH) and MSD.

Recommendations to Government:

* Provide data and evidence that what is being proposed with the new outcomes framework for employment/vocational services will actually lift employment opportunities for disabled people.
* Abandon its proposed Outcomes Framework (MSD) and other changes to vocational services and begin again in genuine partnership with DPOs and the sector to co-design an approach that is based on sound research and evidence of what works.



* Recognise that a sound “investment approach” takes account of the full range of costs and benefits associated with supporting disabled people to participate in the labour market, and must include a strong commitment to equity, to ensure that all disabled people can aspire to the possibility of employment.
* Embark on a cross MSD/MoH approach to address the emerging crisis in the availability of appropriate community participation/day programme options.

NZDSN’s Commitment:

* Commit strongly to participate with government in developing changes to employment and vocational support services based on genuine partnership and a co-design approach.
* Work with others to update and assemble evidence of employment support approaches that deliver equitable employment outcomes alongside economic, social and health benefits – to disabled people and society at large.
* Welcome the opportunity to partner with government and other interested parties in a comprehensive cost/benefit research study of employment support programmes in New Zealand.
* Initiate a cross sector project to develop a set of Service Standards to guide the delivery, fidelity and quality improvement of specialist employment services.
* Work with government to quantify the service gaps regarding the availability of community participation/day programmes and promote examples of personalised and inclusive approaches.

# Individualised Funding



There is currently a significant level of activity across several trials, pilots and demonstration projects looking at various approaches to individualised funding. The idea that system transformation can be achieved through locating funding with disabled individuals/families as consumers and that through their purchasing power they will create an appropriate market place of quality services/support has been

around since the mid 1980’s. While such an approach may make intuitive sense at one level, we have all witnessed the downside of market driven ideology, particularly in

an economic climate of government austerity. That services and support for disabled people should be personalised, person centred and person driven is without question, however the idea that individualised funding approaches can be *the* central vehicle

to achieve system transformation is frequently oversold without due consideration to some of the complexities and risks associated with such an approach.

“Individualised funding” is being used here as an umbrella term that includes descriptors such as client directed funding, direct payments, host agency and host provider models, vouchers, and Client Directed Budgets (CDBs) – the latter term being the one adopted by the recently released draft Productivity Commission report on More Effective Social Services (May 2015).



## Some Observations:

* **Individualised funding needs to be a critical component of the transformation needed in the disability service system, not the least because it is a clear demand on the part of some disabled people and families. The various models and approaches to individualised funding are an important contribution to the move away from “services” and “programmes” to truely personalised approaches to support that are not just person centred, but person driven. The implementation of these approaches needs to occur in**

**a way that ensures that benefits accrue to participants and that risks are identified and managed effectively with appropriate safeguards.**

* Experience with individualised funding in other jurisdictions has had mixed results, particularly when it comes to scaling-up implementation beyond pilots and demonstration projects. It is important to note that most overseas trials and demonstrations have operated in larger metropolitan areas where there is a sizable potential “market place.” With New Zealand’s small and sparsely distributed population any translation of these experiences needs to be

accompanied with a great deal of caution and detailed modelling in the context of this country’s demographics – with particular attention to the needs of Māori and Pasfika.

* Although the draft Productivity Commission Report (“More Effective Social Services, 2015) describes the literature and research on individualised funding outcomes as “mixed”, it then proceeds to endorse the approach as having much promise.
* Without appropriate safeguards and infrastructure there is a tendency for the workforce in individualised funding environments to become more fragmented, more casualised and it can put downward pressure on wages that are already very low to begin with (Jackson, 2015). It can also contribute to a provider landscape, or “market place” that is similarly fragmented and ever-changing – a challenging environment for the “consumer” to engage with.



* Provider choice is often cited as a critical feature (and driver) for introducing individualised funding, however the reality for many disabled people using services is that the more critical choice factor is having a say on who exactly it is that turns up to provide care/support and the ability to exercise choice at this level – including the ability to retain people consistently once choices are made. The critical factor is the provider’s ability to respond to choice at this level, not the choice of provider per se. Simply increasing the choice

of providers can add unnecessary complexity and reduce choices about who provides care/support. Changing providers has never been a simple or straightforward exercise from a service user perspective. An over emphasis

on the notion of provider choice can have the effect of undermining the more critical relationship – between disabled people and the individuals actually providing care/support.

* Initial enthusiasm for individualised funding approaches tends to diminish over time as system volume and complexity increases – along with cost due to multiple transactions as funding is shifted around the system. The consequence is that consumer purchasing power diminishes in a market place of providers that may still not meet expectations, particularly if the wider economic climate is characterised by Government austerity (Jackson 2015, Power 2014).
* **The concept of “natural supports” is frequently associated with notions of individualised funding and inclusion, but is poorly understood and is often a euphemism for an approach that comes with little cost – especially when promulgated by funders. Even a cursory synthesis of the research literature reveals “natural supports” to be an effective evidence based approach**

**that requires a high level of practitioner skill (and time) to successfully implement**10 **and often, in a disabling society, to maintain and at times rebuild.**



* There is no doubt that some disabled people and families find individualised funding approaches empowering and that they deliver in terms of quality and outcomes (Productivity Commission Draft Report 2015), but it is clearly not for everyone (Jackson 2015, Power 2014)
* Individualised funding approaches need to be an available option for disabled people and families who prefer this approach – whether this be through direct payments systems, vouchers or through “host” agencies and providers.

However care needs to be taken to carefully research and determine which groups and demographics these approaches can benefit, rather than heralding them as a universal panacea for all that ails the disability service system.

* **While individualised funding can contribute to the development of more responsive services, there is scant evidence that it can be a single solution to transform the disability service system.** However, it is also essential that providers improve their ability to change and respond to the demand from disabled people for more personalised and person directed services – whatever the funding system is.
* **Individualised funding signals the advent of new relationships between disabled people, providers and those in paid support roles. There is a need for some careful thinking and planning about the kind of infrastructure needed to effectively support disabled people and families in their role**

**as employers/fund managers/”consumers” on the one hand, and the development needs of providers that encourage and enable them to anticipate, transition and transform to meet demands for person centred/ directed support.**



* + There is some evidence that Individualised funding approaches can be more expensive and that it is essential to invest in infrastructure support so that both clients/families and providers can participate with confidence (Draft Productivity Commission Report (Chapter 11 and Appendix D). It is important to note that Australia’s National Disability Insurance Scheme (NDIS) is being introduced on the back of a massive increase in overall funding levels.
* **Independent support for disabled people and families to plan, navigate and source supports and services emerges as a critical element in a system that is truly person centred and person directed, whatever the funding system might be. Developing a nationally consistent approach to provide this independent support that addresses some of the inconsistencies and inequities that characterise the current NASC system is essential.**

Recommendations to Government:

* Take a cautious approach to the scaling-up of current pilots and demonstrations with careful evaluation and analysis of outcomes and costs, with particular attention to those groups and demographics where it is likely to have a positive impact on outcomes, and those where it may not.
* Ensure that pricing frameworks in an individualised funding environment reflect the actual and real cost of service delivery. This includes provision for providers to maintain a level of reserves that enables the management of cash flow

when payment systems are retrospective and to invest in infrastructure and innovation.

* Invest in the infrastructure and capacity building that will be needed to enable:

» Disabled people and families to participate with confidence in an individualised funding/person centred environment – as planners/architects of their own futures, as fund managers, as employers, and as informed and confident consumers,

» A nationally consistent approach to the availability of independent support for planning support options and navigating the service system,



» Provider development so that current and potential providers can anticipate what they need to do, plan strategically the changes they need to make, plan transitions and embark on organisational transformation where necessary,

» Cross agency initiatives so that communities of interest can take a proactive, collaborative approach to system transformation, thereby anticipating the changing demands of disabled people and families,

» Planning for a provider market place that has a bedrock of sustainable funding.

## NZDSN’s Commitment:

* Identify and disseminate effective practice and infrastructure support that enables disabled people, families and providers to participate with confidence in individualised funding environments.
* Include relevant content in its provider development programme that highlights the need for change, and offers tools and strategies for organisational change and transformation, including cross-agency collaborative approaches to system change. This will include unpacking the reality of “natural supports.”
* Continue to participate in opportunities to assist with the development and implementation of current pilots and demonstration projects, along with their monitoring and evaluation.

# Multiple Frameworks/ Multiple Projects



There appears to be a wide consensus that funding and services based on achieving identified outcomes is a sensible direction to take. The challenge for the sector however is that the Ministry of Health (MoH), the Ministry of Social Development (MSD) and the Ministry of Education (MoE) are all currently, but independently, working on the development of outcomes frameworks – with the wider sector being invited to have varying levels of input into each of these separate pieces of work. This seems quite at odds with the current Government’s repeated calls for “whole of Government” approaches.

However, work on outcomes is just one example of the multiplicity of Government sponsored working parties and reference groups focused on various aspects of change, reform and development in disability policy, programmes and services.

## Some Observations:

* + **Developing outcomes frameworks with agreed outcome measures is something of a “holy grail” – eagerly sought after, but very difficult to achieve and implement.**
* It is very time consuming (and expensive) for the wider sector to be consulted on three significant pieces of work on outcomes that need to be inextricably linked.
* When such projects do reach fruition government tends to default to a continued emphasis on measurement of outputs anyway, because many outcome measurements are long-term, hard to measure and their achievement tends, in the end, to be the result of multiple inputs from various sources.



* The current plethora of project working groups and reference groups, often focusing on similar goals, but operating independently (or even without the knowledge) of each other has been observed across the sector and also from within Government. The eagerness of the Government to consult with the sector is commendable, however:

» It is frequently commented that much of this activity sometimes feels like “tick the box” consultation – often with very tight time frames,

» Some consultation seems more an opportunity for the Government to “sell” changes rather than genuinely consult,

» The sector is sometimes left wondering if the absence of content knowledge within the Government (of disability and the sector) is a driver for so much consultation,

» The level of activity and what seems like a lack of coordination may be the result of responsibility for disability policy and funding being split across several government Ministries/Offices,

» NZDSN is aware , that a reduction in the level of activity and number of groups could be easily interpreted as a lack of consultation by the sector.

* In a sector that is struggling because of a lack of investment, the cost of all the current activity, and its apparent lack of coherence, is of some concern.

Recommendations to Government:

* Consider a single integrated outcomes project across relevant Ministries that reflects a Whole of Government approach.
* Consider a stronger cross-government approach to disability policy development and programme design that results in a more coherent and manageable work programme.



* Consider the upcoming review of the Disability Action Plan and NZ Disability Strategy as an ideal opportunity to develop a more integrated approach.
* Consider establishing a sector wide panel to “take stock” of current policy and programme development activity with a view to establishing a single point of leadership responsibility.
* Consider an orientation/induction programme for government officials involved in disability policy and programme development that provides immersion experiences to develop content knowledge of services.

NZDSN’s Commitment:

* Continue to participate and contribute to the various outcomes projects, but advocate for a more integrated approach.
* Continue to monitor and comment on current activity.
* Advocate for a single point of leadership responsibility for disability policy and programme development.
* Work with government to develop regular immersion experiences that grow service content knowledge of those involved in disability policy and programme development.

# Cultural Responsiveness



There are a number of strategies and action plans across government focused on improving outcomes for Māori and Pacific Peoples. Within the MoH Whāia Te Ao Mārama: The Māori Disability Action Plan for Disability Support Services and Faiva Ora – National Pasifika Disability Plan offer some guidance in terms of what Disability

providers can be doing to further develop responsiveness to Māori and Pacific Peoples.

## Some Observations

* + **NZDSN is aware that provider development in these areas is variable with many agencies unsure of where to start and what practical steps need to be taken.**
  + **NZDSN is also aware that it has some work to do on itself as a national peak body in this regard.**
  + **It is important that organisations get beyond “introductory Treaty training” and cultural awareness to engagement with the practical steps and organisational change that leads to embedding practices that recognise and effectively respond to peoples’ culture and identity.**

Recommendations to Government:

* Continue to develop and promote Māori and Pasifika resources, guidelines and plans.
* Continue with its expectations that providers are responsive to the needs of Māori and Pacific peoples.

NZDSN’s Commitment:



* Engage with appropriate providers to offer training and development leadership workshops on bi-cultural journeys. These will be offered through NZDSN’s provider development programme for those in leadership roles.
* Engage with Le Va to offer their Pasifika leadership programme based on the Faiva Ora Organisational Guidelines for Disability Support services. This will be offered through NZDSN’s national provider development programme.
* Ensure that NZDSN staff and Board participate in the above learning opportunities.
* Look to establish an NZDSN Board Committee to provide advice and leadership around bi-cultural development, including a Kaumatua role.

# Affordable and Appropriate Housing



A recent report released by the Article 33 New Zealand Convention Coalition Monitoring Group11 highlighted that access to safe, accessible housing was a major concern for many disabled people. People with intellectual disability suggested some particular issues with access to housing. For example, the cost of housing was seen as a major barrier for people with intellectual disability who currently live in group homes but would like to live independently12. Some people with intellectual disability, especially those living in private housing and working in low paid employment, were identified as being in vulnerable housing situations. It was further noted in the report that some people reported being offered state housing that was far away from their work, family, and disability services. This made it difficult for them to participate in social and family networks. For others, the lack of suitable housing meant that they were continuing to live with their parent/s, despite wanting to live independently.

## Some Observations:

* Accessibility is often an issue with very few affordable and accessible houses available for rent in the private sector. Often landlords are unwilling to do the modifications required to make them accessible.
* Living in poor housing (such as those that are damp, cold, poorly insulated, and in areas of high deprivation and levels of crime) lead to many downstream issues for people such as poor health, increased costs in heating, social isolation, and being vulnerable as targets for crime. Often landlords are unwilling to undertake the necessary repairs to make the dwelling liveable.



* For many people who are considering moving from a group home residential setting to a more independent living situation they are confronted with the unenviable choice of moving into housing of much poorer quality than that of the group home. Urgent work is required to explore how to transfer resources currently tied up with residential support service providers to better meet the needs of disabled people, providing them with greater flexibility and choice in housing. Increasingly, the significant investment in “residential or group home” housing stock is at odds with the living arrangements that disabled people are now seeking.
* Recent moves by the Ministry of Business Innovation and Employment (MBIE) to impose a single set of fire regulations for all community residences illustrates the lack of awareness of the strong desire for disabled people to live in homes, not “facilities.” As the result of strong advocacy from the sector there is now a working party looking at a more sensible solution.
* **Many disabled people are excluded from work and are therefore on benefits. This leads to a significant degree of poverty. This in turn means that many disabled people live in very poor housing conditions (rented) at a very high percentage of their total income. Few have the opportunity to own their own home and receive all the benefits that brings.**

Recommendations to Government:

* Require all new houses to comply to a minimum 3 Star Lifetime Design rating13.
* Continue to address the current housing shortage by finding ways to make more good quality social housing that is accessible available immediately.
* Investigate with residential support service providers options to transfer or transition some of the current housing stock to better meet the needs of disabled people.

NZDSN’s Commitment:



* Pursue contracting arrangements that make it straightforward for residential providers to start transitioning to supported living options for those who want this opportunity.
* Explore options such as benefit capitalisation or similar so disabled people can buy their own house.
* Continue working with the sector to arrive at a sensible solution around fire regulations in community residences.
* Promote Lifetime Design standards and the principles of universal design as best practice in the provision of social housing and for the building of new houses.
* Work with government and residential support service providers’ to explore options to transfer some of the current housing stock to better meet the needs of disabled people.
* Work with the Government to explore options to assist disabled people to obtain long-term affordable housing, including shared accommodation options and being able to purchase housing.
* Continue to work with the Government to arrive at a sensible solution for fire regulations in community residences.

# Purchasing and Contracting



Disability support providers understand the relevance of contracts to the funding and provision of support services. However the current contracting environment for disability support services is complex and requires providers to commit considerable time and financial resource to an array of associated transaction costs, particularly around RFP processes and reporting requirements. Many providers have multiple contracts with one or more government agencies, which further compounds the problem. Reporting is almost entirely restricted to inputs and processes rather

than outcomes. Providers are looking for arrangements that make the process of contracting significantly more straightforward and transparent. Many of these issues were identified in the Productivity Commission draft report on More Effective Social services (2015).

In the DPO Shadow Report (2014) on progress made between 2008 and 2011 on the implementation of the Convention on the Rights of Persons with Disabilities in New Zealand concern was raised regarding “a lack of long-term planning for disability services and support, and monitoring”. Service providers are largely working to

year-long contracts that are tightly prescriptive on what services can be delivered and provide little scope for innovation.

## Some Observations:

* + Inflexible service specifications restrict providers’ ability to respond to client needs. Service specifications often lock providers into hourly rates, types of services and specific delivery mechanisms therefore creating a “siloing” effect. This narrows the range of outcomes that can be delivered on and often leads to disabled people being offered services that don't fit with their requirements. The recent MSD proposal for employment and vocational services being a prime example.



* There is little opportunity in the current contracting environment for disability support service providers to negotiate with funders for contracts. Rather, service specifications are presented and providers agree to these. This approach provides little scope for funders and providers to work together to be innovative in service development and design.
* Supported Living is an emerging trend that is growing in momentum, however traditional residential/group home living is the default service specification driving the purchase of services. It would make sense to reverse this “default setting” so that the service specification driving purchasing embraced a personalised, person centred/driven approach – with provision for “residential” options within this framework. Alternatively, as an interim measure, all residential providers could be enabled to devote 25% of their contract to delivery of supported living services.
* Client-directed, client-centred services require new commissioning and contracting frameworks, however these are still in their early stages of development, and in the case of the Christchurch EGL demonstration, taking far too long to put in place.
* There is a sense across disability support providers that government officials sometimes have an inadequate knowledge of the service being commissioned.
* The work currently being undertaken by the MoH on Streamlined Contracting is a good start in the context of existing services.

Recommendations to Government:

* Work collaboratively with disabled people/DPOs and disability service providers to co-design outcomes frameworks that can inform and promote innovative and person-centred service designs that will support disabled people to live inclusive lives. MoH has made a good start in the context of streamlined contracting.

## NZDSN’s Commitment:



* Look to being more innovative and flexible in negotiating service specifications and contracts with providers in order to create an environment where different service designs and approaches can be trialled.
* **Take a cautious approach in developing greater competition in the disability sector as a means of improving services and outcomes for people and their communities. Greater competition will not of itself address the issues faced by providers resulting from significant under-investment over many decades.**
* Follow closely and continue to represent the views of our membership to the work of the Productivity Commission as it continues to explore and formulate alternative institutional arrangements and contracting mechanisms to achieve more effective social services and improve outcomes for individuals and populations.
* Actively support initiatives that streamline reporting and accountability requirements. NZDSN will work with government in the development of alternative contracting and commissioning arrangements including the new public sector procurement initiative (led by MBIE) - i) the new contracting framework for streamlined contracting with NGOs and, ii) the Results Based Accountability (RBA) system for outcomes reporting.
* Support providers to continue developing good practice/best practice models for defining, measuring and improving outcomes for disabled people and their families.
* Support competition within the sector, but in the context of an over-arching framework of appropriate pricing and funding.

# Complaints/Safeguarding



In December 2013 a report “Putting People First: A Review of Disability Support Services Performance and Quality Management Processes for Purchased Provider Services” was published (Van Eden, 2013). The review assessed the MoH's response to three high public profile cases of unacceptable treatment of disabled people

in residential services. The Putting People First Report highlighted a number of significant issues relating to systems and processes for contracting, evaluation and monitoring, and managing complaints about residential disability services in general. Recommendations were made to improve the MoH’s performance and to strengthen provider performance in delivering services that ensure the safety and well-being of people with disabilities.

### *A central premise of the recommendations was the importance of putting disabled people first in all its future decisions and*

***all its future actions relating to residential services.***

The DPO Shadow Report (2014) on progress made between 2008 and 2011 on the implementation of the Convention on the Rights of Persons with Disabilities in New Zealand identified a clear need for supported decision-making approaches to be developed and used as “first resort” and move away from turning to provisions for substituted decision-making under the Protection of Personal and Property Rights Act 1988, the Mental Health (Compulsory Assessment and Treatment) Act 1992 and the Intellectual Disability Compulsory Care and Rehabilitation Act 2003 (currently often used as first resort).



Some Observations:

* People with a disability, particularly people with an intellectual disability, cognitive, communication and/or sensory impairments, high support needs, and behaviour support needs, are much more likely to experience abuse, including physical and sexual assault, than the general population.
* Incidents and complaints of alleged abuse present many challenges for all concerned, with adverse impacts and trauma not only for those directly involved, but also for other clients, families and staff who may witness or

become aware of the incident. These incidents involve questions of breaches of rights, trust, duty of care, and reputation, and require sensitive and adept handling in relation to criminal, investigatory and disciplinary processes and effective responses to the client’s wellbeing, safety and access to justice14.

* Monitoring requirements for disability support service providers by funders are often time-consuming and punitive, rather than being used as opportunities

to be reflective and developmental. This often results in providers making an effort to not be seen to be doing wrong as opposed to systematically investing in quality improvement.

* **The Office of The Health and Disability Commissioner (HDC) data indicates that a significant area of complaint about disability providers is in fact about failure to respond adequately to complaints and poor communication with clients and families in this context (HDC 2013 Annual Report).**
* Quality and Safety in disability support services is achieved by having person- centred approaches, empowerment and choice. In a recent submission by the Australian NDS15 the need was emphasised for investment that fosters positive organisational cultures that value the rights, aspirations and individuality of people with disability as an essential foundation of an effective system.



* It is important that organisations have the know-how and tools to create internal quality systems where:

» the voices of participants and their families are heard and respected,

» organisations record and respond to complaints and incidents in a timely way and implement strategies to reduce negative incidents,

» providers collect information on customer satisfaction,

» providers engage and listen to disabled people and their families about their quality preferences, perception of outcomes, and as witnesses in any allegations or incidents.

* Disability support services operate in an environment that is often quite risk averse (for example, in response to requirements set out in building

regulations16, service standards and Health and Safety legislation provisions). **If restrictions on risk-taking are overly-broad, it can diminish a person’s quality of life. There is a need to manage risks by a more individual approach through individual plans that enable disabled people to take reasonable risks and make choices on the same basis as the rest of the population17.**

* The 2013 Putting People First Report found that abuse of disabled people in residential services is more likely to occur when providers are isolated. When providers stay connected with one another they are more likely to share knowledge and resources.
* With the move to a range of individualised funding arrangements where disabled people and/or their families may be in the employer/budget holder role, the obligations and risks in the context of existing and proposed health and safety legislation is not clear. In this context the position of the Health and Disability Commission in terms of investigating complaints, for example, where the “provider” is a family member also requires clarification.

## Recommendations to Government:



* + Continue the work programme being led by the MoH to implement the recommendations made in the Putting People First Report to improve processes involved in evaluating, monitoring and managing complaints, and to support provider improvement and the safety and well-being of people with disabilities.
  + Continue the Review of Safety Regulation in Disability Support being led by the MoH. It is important to identify ways the regulation of safety in disability support services can be improved to make sure disabled people can make choices and live everyday lives without greater risk of harm than other New Zealanders. This needs to include an examination on how risks might be managed by a more individual approach, through individual plans.
  + Review the implications of Health and Safety legislation and the role of the Health and Disability Commission in the context of individualised funding arrangements to ensure that all parties remain adequately safeguarded.
  + Increase investment in strong peer support and independent advocacy services to help build social connections, natural safeguards and decision support systems/processes. This should include development for comprehensive systems for disabled people to access supported decision-making and replace the current reliance on substituted decision-making. Options need to be considered so disabled people living in residential services who are identified as having a lack of natural support networks will automatically be put in touch with independent advocacy services through NASCs, local area coordination services or other planners.



## NZDSN’s Commitment:

* + As part of our Provider Development Programme, develop resources and deliver education and training programmes for providers on service systems and features that prevent abuse occurring. These programmes need to address being able to recognise the incidence of all forms of abuse towards disabled people (especially in residential services) and how to respond appropriately when incidences occur.
  + As part of our Provider Development Programme, develop resources and deliver education and training programmes for providers to develop and implement approaches that enable supported decision-making by disabled people using their services.
  + Work to develop resources to ensure providers encourage service users to use complaints processes. Complaint processes will focus on ensuring service users and their families and advocates are heard, and that complaints are seen as providing important information to enable continuous improvement in services.
  + Continue to participate and contribute to the programmes of work being led by the MoH on the Review of Safety Regulation in Disability Support, and the work programme to implement the recommendations from the Putting People First Report.
  + Promote provider connectivity through its regional network meetings and provider development programme.
  + Examine the implications the health and safety legislation, complaints processes and the role of the Health and Disability Commission in the context of individualised funding arrangements.

# Inclusive Education



### *While there is some evidence that New Zealand’s education system is becoming more inclusive there are still frequent examples of disabled students and their parents being turned away from their local schools, or at least feeling unwelcome to the point of having to seek enrolment elsewhere.*

The 1989 Education Act provides for the right of disabled children to enrol in their local school/school of choice, however exercising this right remains problematic. There is also frequent commentary about the complexity of the special education system and the difficulties that both families and schools seem to have in accessing timely and relevant support. While the overall investment in special education compares well internationally it is characterised by fragmentation and multiple lines of responsibility.

Some observations:

* + - Measuring progress on inclusive education is somewhat problematic due to questions around the data being used to indicate progress – that includes ERO evaluations of small and varying sample sizes, and paper based reporting

versus actual observation. There continues to be a steady stream of complaints being laid with the Human Rights Commission.

* + - There does not seem to be the legislative and regulatory detail that can provide the legal framework for parents to truly exercise the rights of their disabled children to attend their local school/school of choice. The absence of independent mediation at a local level is a glaring gap in the current support available to parents.
    - The absence of adequate teacher-aide funding is frequently cited as a barrier to enrolment and full-time attendance at school. While effective inclusive



practice demonstrates that an over-reliance on teacher aides (at the expense of teacher leadership) can compromise learning outcomes the following is important to consider:

» Teacher aide funding is contributory only – leaving schools struggling to make up the difference between “allocated” and actual funding required – funding teachers in this way would never be tolerated,

» There are multiple streams of funding for teacher-aides, usually allocated individually and on a term-by-term basis. This creates time consuming processes for everyone involved – processes that are frequently the subject of litigation, review and complaint (the totality of all current teacher-aide funding is probably enough to put a teacher aide in every classroom in the country)

» Individualised funding arrangements such as the Ongoing Resourcing Scheme create a platform for a perceived “entitlement” approach that makes it very difficult to shift the conversation from resources to inclusive leadership and practice,

» Because the funding is individualised, teacher-aide employment is part-time, usually casualised and with patchy access to professional development.

» The current approach of attaching teacher-aides to individual students instead of classrooms frequently means that those students with the most complex learning needs spend the majority of their time with personnel who have the least teacher training.

* Access to other specialist services, for example technology and behaviour support, is frequently described as bureaucratic and with long wait times. The cost in staff time and administrative processes can far exceed the actual cost of the technology or equipment being applied for.



* **The MoE is currently facilitating a discussion with the sector on what improvements need to be made to special education. This has been done many times before resulting in only minor changes. It is time for some bold and transformative change.**
* The proposed “community of Schools” approach, as part of the MoE’s “Investing in Education Success” initiative, has potential to increase collaboration and consistent practice across schools. However, will inclusion be seen as a central component of “education success” and will those appointed to key leadership roles in this initiative be tasked with achieving inclusion outcomes?
* It has to be acknowledged that the “Tomorrow’s Schools” model of devolved decision-making and accountability to individual school boards introduced in 1989 makes the consistent and sustained implementation of public policy

severely problematic – whether this be school reporting, national standards, or inclusive education.

* Approaches that achieve effective transition from school are not widely available even though the evidence of what works has been around for some considerable time. A consequence is that many post-school responses to transition are focused on making-up for what did not happen at school.
* Recent developments such as the Enabling Good Lives (EGL) projects are reinforcing the outcomes that can be achieved when effective transition models are implemented, particularly when they begin earlier than the year before the student is due to leave school.

## Recommendations to Government:



* + Look to the regulatory framework that is needed to ensure that parents can truly exercise the right for their disabled children to enrol in their local school/school of choice. Such a framework needs to include the concept of “reasonable accommodation”.
  + Introduce a locally available independent mediation service so that addressing issues around enrolment and attendance can be resolved at the lowest level possible, before recourse to the Human Rights Commission and/or the courts.
  + Use the current consultation with the sector as a vehicle for some bold changes to the fragmented, bureaucratic and confusing world of special education funding and specialist services. Look to focus the majority of teacher-aide funding going direct to schools and classrooms (rather than entirely through individual students) so that the focus can shift from individual entitlements to the development of inclusive practice. This will also create a more regularised and permanent teacher-aide workforce with better opportunities for professional development.
  + Fund schools for the actual costs of employing teacher-aides.

NZDSN’s Commitment:

* Support the development of a regulatory framework that ensures parents are able to exercise their rights to enrol disabled children at their local school or school of choice.
* Advocate for the development of a mediation service to sort out enrolment and attendance issues at a local level.
* Identify and disseminate effective transition practice through its Provider Development Programme.
* Support the MoE to make bold and transformative changes to the current landscape of special education services and funding.

# Developing the Evidence Base



There is a great deal of rhetoric about the need for evidence-based approaches and programmes, often without a sound understanding of what is meant by “evidence.”

### *There is also a major lack of the data needed to inform good decisions and to demonstrate a commitment to disabled people being both counted and accounted for.*

Some Observations:

* + - As we move beyond the cusp of a major paradigm shift from “programmes” and “services” to personalised and person-directed plans and supports, it is

imperative that we build a picture of what works – not on the basis of anecdote, but on the basis of sound research and evaluation.

* + - There are some good examples of how this has been done in the past – for example the MoE’s BES Programme (Iterative Best Evidence Synthesis

programme: [**www.educationcounts.govt.nz**](http://www.educationcounts.govt.nz/)) and the MSD’s 2007-2012 plan for Conduct Disorder/Severe Behaviour and the subsequent three reports outlining evidence based programmes for different age cohorts.

* + - While the outcome of such a project in the disability sector would be an extremely valuable source of evidence-based best practice, the process would, of itself, be an important learning and consensus building journey for all those involved.



Recommendations to Government:

* The Government’s recent decision to convene a Data and Evidence Working Group under the auspices of the Office of Disability Issues is an excellent start that should be built on.
* As part of this work, consider a cross government/cross sector project that assembles a synthesis of best evidence in relation to approaches that achieve sustainable outcomes in relation to inclusive living, employment and community participation.

NZDSN’s Commitment:

* Continue to assemble and expose providers to current and “next” practices based on sound research and evaluation.
* Willingly participate with Government on a project to bring together a comprehensive catalogue of best evidence that can be used to guide policy, commissioning, and provider development.

# Bibliography



Hnatuk Tyler, and Bach, Michael (2011). Achieving Social and Economic Inclusion: From Segregation to 'Employment First, Canadian Association for Community Living, Toronto, Ontario

Jackson, Robin (2005). Who Cares? The Impact of Ideology, Regulation and Marketisation on the Quality of Life of People with an Intellectual Disability. Centre for Welfare Reform, [**www. centreforwelfarereform.org**](http://www.centreforwelfarereform.org/)

Ministry of Social Development (2007). Inter-agency Plan for Conduct Disorder/Severe anti- social behaviour 2007-2012. Wellington: Ministry of Social Development.

New Zealand Productivity Commission (2015). More Effective Social Services Draft Report. Wellington: New Zealand productivity Commission.

New Zealand Public Service Association and New Zealand Disability Support Network (2012). Improved Funding for Disability Support Services and Disability Support Workers: A Report in Support of a Business Case to the New Zealand Government 2012

OECD Economic Surveys New Zealand June 2015: Overview

Statistics New Zealand (2014). Disability and the labour market: Findings from the 2013 Disability Survey. [**www.stats.govt.nz**](http://www.stats.govt.nz/)

Van Eden, Karen (2013). Putting People First: A Review of Disability Support Services Performance and Quality Management Processes for Purchased Provider Services - Prepared for Hon Minister Ryall, Minister of Health.

Power, A (2014) Personalisation and Austerity in the Crosshairs: Government Perspectives on the Remaking of Adult Social Care. Journal of Social Policy, Volume 43 pp 829-846

# Endnotes



1. PSA (2008) Community Support Workers: a job evaluation exercise cited in New Zealand Public Service Association and New Zealand Disability Support Network. Improved Funding for Dis- ability Support Services and Disability Support Workers: A Report in Support of a Business Case to the New Zealand Government, 2012, p13 [**http://www.nzdsn.org.nz/uploads/news/DSS\_funding\_re-**](http://www.nzdsn.org.nz/uploads/news/DSS_funding_report-December_2012.pdf)[**port-December\_2012.pdf**](http://www.nzdsn.org.nz/uploads/news/DSS_funding_report-December_2012.pdf)
2. [**http://www.scoop.co.nz/stories/BU1503/S00838/community-services-struggle-for-support.**](http://www.scoop.co.nz/stories/BU1503/S00838/community-services-struggle-for-support.htm)[**htm**](http://www.scoop.co.nz/stories/BU1503/S00838/community-services-struggle-for-support.htm)
3. PSA (2008) Community Support Workers: a job evaluation exercise cited in New Zealand Public Service Association and New Zealand Disability Support Network. Improved Funding for Dis- ability Support Services and Disability Support Workers: A Report in Support of a Business Case to the New Zealand Government, 2012, p16
4. New Zealand DPOs submission on the list of issues and questions for the New Zealand Gov- ernment: To help inform the Committee on the Rights of Persons with Disabilities’ consideration of New Zealand’s implementation of the Convention on the Rights of Persons with Disabilities. From: Disabled Persons Assembly (NZ) Inc., Association of Blind Citizens, Balance New Zealand, Deaf Aotearoa New Zealand, Deafblind (NZ) Inc., Ngā Hau e Whā, Ngāti Kāpo o Aotearoa Inc., People First NZ Inc – Ngā Tangata Tuatahi, 2014. p2.
5. [**http://www.tepou.co.nz/initiatives/lets-get-real/107**](http://www.tepou.co.nz/initiatives/lets-get-real/107)
6. Deloitte Report (2011). The economic benefits of increasing employment for people with dis- ability. Commissioned by the Australian Network on Disability. p.ii.
7. Statistics New Zealand (2014). Disability and the labour market: Findings from the 2013 Dis- ability Survey, p7. Available from [**www.stats.govt.nz**](http://www.stats.govt.nz/)
8. Hnatuk Tyler, and Bach, Michael. Achieving Social and Economic Inclusion: From Segrega- tion to ‘Employment First, Canadian Association for Community Living, Toronto, Ontario, 2011, p10.
9. [**http://www.workwise.org.nz/news/2012/02/27/analysis-shows-strong-financial-re-**](http://www.workwise.org.nz/news/2012/02/27/analysis-shows-strong-financial-returns-from-employment)[**turns-from-employment**](http://www.workwise.org.nz/news/2012/02/27/analysis-shows-strong-financial-returns-from-employment)



1. Kendrick, Michael J., The contribution of Service Workers In Getting The Relationship “Right” Between People With Disabilities And Their Communities, Crucial Times, Edition 21, July 2001
2. Disability Rights in Aotearoa New Zealand: Participation & Poverty - A report on what dis- abled people in New Zealand say about their human rights (Article 33 New Zealand Convention Coalition Monitoring Group, April 2015)
3. This finding was supported in the latest OECD report where it was highlighted that “The bur- den of housing costs has risen substantially for low-income households. Moves to bring the social housing stock more in line with demographic and geographic demand, as well as to reallocate it to those most in need, will help the hardest hit households”, p40-41.
4. [**http://www.lifemark.co.nz/about-lifemark/lifemark-standards.aspx**](http://www.lifemark.co.nz/about-lifemark/lifemark-standards.aspx)
5. Disability Services Commissioner (June 2012). Learning from Complaints - Occasional Paper 1: Safeguarding People’s Right to be Free from Abuse - Key considerations for preventing and re- sponding to alleged staff to client abuse in disability services, Victoria, Australia [**www.odsc.vic.gov. au**](http://www.odsc.vic.gov.au/)
6. National Disability Services (April 2015). Submission on the proposed National Disability Insurance Scheme (NDIS) quality and safeguarding system. [**http://www.nds.org.au/publications**](http://www.nds.org.au/publications)
7. C/AS3: Acceptable Solution for Buildings Where Care or Detention is Provided (For New Zealand Building Code Clauses C1-C6 Protection from Fire)
8. National Disability Services (April 2015) Ibid, p4.