

NSW DISABILITY NETWORK FORUM

Submission on Information, Linkages and Capacity- Building Commissioning Framework

22 April 2016

About the NSW Disability Network Forum

Initiated in June 2011, the NSW Disability Network Forum (DNF) comprises non-government, non-provider peak representative, advocacy and information groups whose primary aim is to promote the interests of people with disability. The aim of the NSW Disability Network Forum is to build capacity within and across all organisations and groups so that the interests of people with disability are advanced through policy and systemic advocacy. The Council of Social Service of NSW (NCOSS) provides secretariat support to the DNF.

NSW Disability Network Forum Member Organisations:

Aboriginal Disability Network NSW	Multicultural Disability Advocacy Association of NSW
Association of Blind Citizens of NSW	Being Mental Health and Wellbeing Consumer Advisory Group
Synapse (Brain Injury Association NSW)	NSW Council for Intellectual Disability
Deaf Australia NSW	NSW Disability Advocacy Network
Deaf Society of NSW	People with Disability Australia
DeafBlind Association NSW	Physical Disability Council of NSW
Deafness Council (NSW)	Positive Life NSW
Information on Disability and Education Awareness Services (IDEAS) NSW	Self Advocacy Sydney
Institute For Family Advocacy	Side By Side Advocacy Incorporated
Intellectual Disability Rights Service	Council of Social Service of NSW

Introduction

The DNF welcomes the opportunity to provide input into the Information, Linkages and Capacity – Building Commissioning Framework (Commissioning Framework). The ILC is critical in ensuring members continue to be able to provide quality support to people with disability, so the National Disability Insurance Scheme (NDIS) can deliver in line with its full potential.

The Commissioning Framework builds positively on the ILC Policy Framework released last year. DNF members are pleased to see our feedback reflected in the Commissioning Framework's focus on outcomes and its priority investment areas.

This submission:

- identifies strategies critical to engagement with marginalised groups and argues for a process of prioritising the most marginalised who are usually under-represented in service provision;
- outlines principles for person-centred and measurable outcomes and outputs, and some examples of such measures;
- describes how practical training and technical support can assist the sector to transition to outcomes-based measurements;

- highlights independent information, disability support organisations and well supported volunteers as strategies to retain and grow social capital; and
- emphasises the importance of collaboration and suggests other factors to be weighed in the sourcing process.

Comments on specific cohorts

The DNF commends the National Disability Insurance Agency (NDIA) on its recognition that the Commissioning Framework needs to ensure targeted funds are directed to assisting vulnerable cohorts, many of whom have had little previous engagement with disability services. Delivering for these cohorts requires intensive engagement— often through non-traditional means.

This engagement needs to be resourced and delivered by a skilled workforce sensitive to the needs of the cohorts they support.

Strategies relevant to specific cohorts are outlined below.

Aboriginal and Torres Strait Islander (Aboriginal) and culturally and linguistically diverse (CALD) people

A recent NCOSS report analyses the barriers and enablers to Aboriginal and CALD people with disability accessing the NDIS.¹ Enablers identified which have implications for the commissioning of ILC services include:

- Before commissioning services, consumer engagement strategies should be developed in consultation with Elders and members of Aboriginal and CALD communities. Engagement strategies need to be resourced at levels that allow effective community engagement to occur.

Engagement should begin at least six months before the ILC is rolled out, and include targeting of people who do not currently use disability services. Strategies should include outreach strategies with non-disability services (for example medical services) and through non-traditional channels (for example community radio).

- To enhance relationships of trust, Aboriginal and CALD controlled organisations should be commissioned to work in their communities.
- Funding levels should recognise commissioned organisations may need to provide more intensive ‘case management’ style support, or deliver more face-face workshops, than generalist services.
- The Commissioning Framework should use mechanisms such as funding contracts to incentivise organisations to employ and train Aboriginal and CALD staff at all levels, building cultural competence.

¹ NCOSS (2016) [Plan First, Don't 'Retrofit': Delivering on the promise of the National Disability Insurance Scheme \(NDIS\) for Aboriginal and CALD people in NSW.](#)

People ‘on the fringe’

Although it is positive that “hard to reach” groups are mentioned as a specific cohort, the Commissioning Framework needs to require and resource specific action for this group. The DNF believe this investment should have two components:

- The ILC should fund some services that specialise in working with hard to reach groups. These services should provide outreach, engagement, capacity building, support for decision making and support in legal processes such as police interviews, courts and meeting court imposed conditions.
- Through required outcomes and other means, all services commissioned in the ILC should be required not just to assist people who come to them but also to reach out and engage with hard to reach groups, for example people with intellectual disability who lead isolated lives on society’s fringe. Outcome measures should ensure that this outreach is occurring.

People with mental illness

This cohort may not identify as having a disability, and inconsistently applied NDIS eligibility criteria has led to some lack of confidence in NDIS systems.²

Accordingly, commissioned organisations will need to be resourced to engage with mental health consumers through consumer groups, mainstream media such as radio and television.

People with deafblindness

People who are deafblind are not identified as a specific cohort in the Commissioning Framework. Although relatively small in number, people who are deafblind are excluded from most services because services lack the knowledge, skills and resources to provide the intensive support people who are deafblind need to participate. For example, people who are deafblind and communicate using “Hand Over Sign” need assistance of three people.

The most effective strategy to assist people who are deafblind to participate is to commission skilled organisations to up-skill and support other ILC organisations to include people who are deafblind.

Prioritising cohorts who are missing out

It is important to ensure that the limited funds for specific cohorts are directed towards cohorts who would otherwise not be able to obtain the benefit of ILC services.

To ensure this occurs, the DNF recommends that:

- ILC outcome measures are able to identify the extent to which ILC services engage with each of these most marginalised groups; and
- the ILC has the capacity to commission additional targeted work to bridge identified gaps.

²NDIS Independent Advisory Council (2014) IAC advice on implementing the NDIS for people with mental health issues.

Recommendation 1

That when commissioning services in the ILC, the NDIA ensures that hard to reach marginalised groups have equitable access to ILC services.

Recommendation 2

That the NDIA commission additional targeted work with marginalised 'hard to reach' groups if they remain under-represented in ILC service provision.

Rural and remote service delivery

The DNF notes the NSW Government has recently launched a \$5 million Transition Assistance Program to assist smaller regional and remote providers transition to the NDIS.³ The grants of up to \$35 000 are a welcome recognition that additional costs (including time costs) can be involved in engaging marginalised populations.

The DNF believes equitable outcomes for people with disability in rural and regional areas will be facilitated if the Commissioning Framework recognises the additional costs of providing services in these areas. This will require the commissioning of services that have adequately demonstrated that their costings allow for quality service provision within these environments rather than pitching a low-cost model in which costs are drawn away resources aimed at producing outcomes to manage additional operational costs.

To facilitate choice and control, a variety of services need to be commissioned in all areas.

Recommendation 3

That the Commissioning Framework places a price value on operating within rural, regional and remote areas that is additional to outcome-producing activity costs to ensure ILC services are positioned to deliver equitable outcomes regardless of location.

The proposed outcomes for ILC and the best ways to measure them

In our submission to the ILC Policy Framework, the DNF argued that the ILC should have a focus on services achieving outcomes for people with disability. We are pleased with the focus on outcomes in the Commissioning Framework.

In terms of developing specific outcomes, the DNF puts forward the following principles:

- The Commissioning Framework should clarify that services only need to *contribute* to the achievement of the Outcomes.
- "Assisted individuals" should be referred to as "supported individuals", increasing empowerment.
- Outcomes need to be measurable and specific; to achieve this, a process to capture improvements against concepts such as "security" and "independence" will need to be

³ See NSW Government (2016) [Transition Assistance Program](#).

operationalised. The NDIA “Outcomes Framework Pilot Study” provides some good examples of operationalised outcomes; for example “quality of relationships” is measured “someone to call for support in a crisis”.⁴

- Outcomes should be designed to align with the goals and vision of the person with disability, and on a person’s fulfilment rather than simply functioning. In some cases, continuation of current arrangements may not align with this vision. For example, proposed Outcome 3 “Informal support and care arrangements are upheld” rewritten as “informal support is maintained and enhanced” allows for creative approaches and adjustment from business as usual if this aligns with the person’s vision.
- Outcomes for individuals need to reflect *change and improvement* in individual behaviour, for example “*more able* to make decisions”.
- Outputs need to reflect a change in service behaviour, showing the active intervention of ILC services in the lives of people with disability, for example services producing more accessible information.
- Both outcomes and outputs should encourage collaboration. As will be explored below, services working together will improve the breadth of depth of quality service provision.
- Both outcomes and outputs should promote a focus on equity.

It is important that the ILC outcomes acknowledge that long-term outcomes are preceded by interim accomplishments, which can create a platform for change.⁵ For example, for an individual to be more independent and more self-directing, they will often need additional skills and experience as well as confidence in their own abilities. For a person who has lived for ten years in a group home to be able to live in their own home, the person may need targeted capacity building to enhance skills for daily living, the opportunity to hear about and experience other living arrangements (for example, through meeting people who live in their own home, or having a weekend away in a less restricted environment), support in making decisions and the opportunity to practice speaking up for themselves. These interim and important accomplishments are pivotal in creating the conditions that will enable the person to be more independent and self- directing.

In line with these principles, some suggested outcomes and outputs are outlined below.

ILC outcome	New Outcome	Outputs
Choice and control	Supported individuals have <i>more</i> understanding of NDIS/ ability make decisions.	Percentage of supported individuals/families who feel they are able to make more decisions/decisions in more areas.
Social and economic participation	Supported individuals have <i>more</i> friends outside family/stronger relationships.	Percentage of individuals reporting more connection to the community.

⁴ National Disability Insurance Agency (2015) [Outcomes Framework Pilot Study: Summary Report](#).

⁵ Teles S and Schmitt M, (2011), “[The Elusive Craft of Evaluating Advocacy](#)” *Stanford Social Innovation Review*, Summer 2011.

Appropriate support	Supported individuals report they have the assistance they need.	Additional output 'percentage of referrals received by ILC providers of individuals and families from groups who seldom access the NDIS'.
People with disability can shape their supports	Supported individuals report that the support they receive allows them to live the life they want.	Percentage of people who feel their support is tailored to their goals and circumstances. Service can demonstrate changes made to policy as a result of consumer feedback.

Alternatively, outcomes could be measured across the 5 streams of the ILC Policy Framework, as follows:

ILC Policy Stream	Outcomes for Individuals	Outputs from services
Information, Linkages and Referrals	<ul style="list-style-type: none"> • Individuals have the information in a form they can use to make an informed choice. • Individuals make use of the information to get what they need. 	<ul style="list-style-type: none"> • Organisations provide information that is clear and accessible. • Information is current. • Warm referrals are provided • Consumer feedback informs policy and practice
Capacity Building for mainstream services	<ul style="list-style-type: none"> • People who are traditionally under-represented in disability services use ILC services. • Users find mainstream services welcoming. 	<ul style="list-style-type: none"> • More people with disability including people from marginalised groups use mainstream services. • Mainstream services demonstrate policies and practices that welcome people with disability. • Mainstream services demonstrate how they make adjustments to core business to facilitate appropriate practice for people with disability.
Community Awareness and Capacity Building	<ul style="list-style-type: none"> • Individuals join more community activities / groups in the mainstream community. • Individuals feel a greater sense of belonging in the mainstream community. 	<ul style="list-style-type: none"> • More people with disability including people from marginalised groups use community organisations. • Community organisations demonstrate policies and practices that welcome people with disability. • Percentage of staff with lived experience of disability. • Community organisations demonstrate how they make

ILC Policy Stream	Outcomes for Individuals	Outputs from services
		adjustments to core business to facilitate appropriate practice for people with disability.
Individual Capacity Building	<ul style="list-style-type: none"> • Individuals have increased ability to speak up for themselves (self advocacy). • Individuals have increased ability to make decisions for themselves. 	<ul style="list-style-type: none"> • Number of people with disability who develop self advocacy skills through training and/or other programs. • Organisations offer supported decision-making.

Measurement of outcomes and effectiveness

In line with a person-centred system, the DNF believes measurement of outcomes should occur via feedback from people with disability (and or their supporters) who use their services. It would also be valuable for participants to evaluate elements of the service outcomes (for example, judging whether information provided by the service is accessible).

Effectiveness should be measured across the ILC streams and relate to the culture of the service. For example, an effective ILC service would:

- empower people with disability, both in its policies and procedures and by including them in the governance of the organisation, and as employees; and
- demonstrate a warm and inclusive attitude, for example by providing accessible information and staff training on disability inclusion.

The DNF believes that a person's experience of interacting with a service be used as a measure of effectiveness. This is important because in order to be truly effective in supporting the person to exercise their choice and control, a service needs to be respectful and empathetic in their interactions with the person.

An example of how the NDIA can measure people's experiences is the national Your Experience of Service (YES) survey of people's experiences in the mental health sector.⁶ The survey measures include 'you felt welcome at this service'; 'staff showed respect for how you were feeling'; and 'the effect the service had on your ability to manage your day to day life'.

Recommendation 4

That measures of effectiveness incorporate a person's experience of a service, perhaps using the Your Experience of Service (YES) survey as a model.

Funding periods should enable outcomes

The DNF agrees that funding should be matched to the aim an organisation is trying to achieve. For example, over two years, peer supports may only be beginning to achieve results.

⁶ For more information, see <https://mhsa.aihw.gov.au/committees/mhissc/YES-survey/>

Providing ILC funding for five years, as recently recommended in a NSW context by the NSW Legislative Council⁷ would give organisations the ability to develop programs addressing long term outcomes.

Recommendation 5

That funding for ILC organisations be provided for up to five years, depending on the outcome an organisation is trying to achieve.

Preparing the sector for outcomes-based performance measurement

A significant shift will be required when organisations transition from measuring outputs to outcomes. Investment in training, flexibility in measuring outcomes and continued co-design will assist in this transition.

Training

Outcomes workshops highlighting demonstrative examples

In order for outcomes-based performance measurement to be effective, it is important that a ‘common language’ is used by the sector and Government when referring to outcomes. To ensure all organisations begin with at least a basic level of knowledge in this area, training on outcomes measurement should be provided to organisations as part of the transition to the ILC.

This training should provide an explanation of the outcomes measurement system being used and the basis for it. In addition, it would be helpful to outline the NDIA’s expectations by using a hypothetical example to demonstrate what evidence would be needed at each stage of the process of outcomes measurement (including the acquittal process). This demonstration could include providing organisations with templates and other tools so that evidence can be measured efficiently and outcomes collected in the manner and detail required.

Recommendation 6

That training on outcomes based measurement is provided to organisations as part of the transition to the ILC. This training should include templates, tools and hypothetical examples to demonstrate what evidence would be needed at each stage of the process of outcomes measurement.

Technical support function

To complement the toolkit proposed in the Commissioning Framework, the DNF believes that funding a technical support function in the ILC for two years would hasten the ability of the sector to respond effectively to outcomes-based funding and to offer evidence based support. This technical support function could, for example:

⁷ NSW Legislative Council Committee on Social Issues (2015) [Service Coordination in Communities of High Social Needs: Final Report](#) Recommendation 11 p57.

- promote and demonstrate evidence-based approaches especially in relation to experiencing positive risk and developing safeguards; and enhancing independence, social inclusion and self-management;
- develop and enhance communities of practice; and
- highlight successful systems for measuring and reporting outcomes from other sectors and/or jurisdictions.

Recommendation 7

That the NDIA fund a technical support function in the ILC for two years and hasten the ability of the sector to respond effectively to outcomes-based funding and employ evidence-based approaches.

Flexible funding

At the same time as training is provided to the sector, NDIA staff who will undertake commissioning should receive training and capacity building about the nature of the sector's work. This will assist in recognising outcomes which may be different to those normally required in contracts (for example outcomes measured using qualitative data).

Additionally, assessors should recognise that specified funding criteria can curtail the efforts of organisations to flexibly respond to need. The DNF emphasises that flexibility allows organisations to align resources with community priorities including the context and culture of the community—increasing the responsiveness of service provision.⁸

Recommendation 8

That funding in the ILC supports flexibility in approaches to ensure that strategies are responsive to need, culture and context.

Continued co-design

The DNF commends the NDIA on the consultation process around the Commissioning Framework. Consultation is an important way of ensuring the outcomes (and the data needed to collect them) are relevant, reliable and viable to collect without negatively impacting on the assistance provided by the organisation to people with disability. Consultation should continue to ensure identified outcomes work in practice and to make refinements as necessary.

To implement true co-design, people with disability need to be involved in the development of the Commissioning Framework.

Recommendation 9

That people with disability are involved in continual refinement of the ILC Commissioning Framework, which has been made in response to feedback from people with disability and ILC providers.

⁸ Bugg-Levine, A. and Sullivan, K (2015) "Improving Corporate-Nonprofit Partnerships" *Social Innovation Review*, July 2015, online at http://ssir.org/articles/entry/improving_corporate_nonprofit_partnerships

Growing social capital in the sector, particularly volunteering

Independent information as social capital

The DNF believes independent information is a form of social capital, as it empowers people with disability to make decisions, exercise choice and control and advocate for themselves more effectively.

Information services can:

- support people in times of crisis;
- empower people by informing them about their rights,
- play a safeguarding role and facilitating self-advocacy;
- link people with community activities and options for support; and
- assist mainstream services to communicate in an accessible way;

Information provision is complex, with inquiries often involving research, investigation, follow up and producing specialist responses. To be valuable, information needs to be interpreted, disseminated and evaluated. For many people with disability, the human element of information, “talking to someone who gets it” is crucial.

The Productivity Commission recognised independent information was cost effective.⁹

An example of information highlighting possibilities is the “Liveable Design Display” run by the Independent Living Centre NSW.¹⁰ This display allows people with disability (as well as older people) to be exposed to a broad range of assistive technology devices ‘in situ’, increasing their knowledge of ways they can become more independent. The fact that the display is independent rather than market driven ensures a broad range of stock is available to raise awareness of possibilities. A market driven service would lead to an item only being available if it was commonly used; whereas the display creates and stimulates demand.

⁹ Productivity Commission (2011) [Disability Care and Support](#), p56.

¹⁰ For more information, see https://www.ilcnsw.asn.au/assets/ILCNSW_Livable_Design_Apartment.pdf.

A member of the DNF, Information on Disability and Education Awareness Services (IDEAS) NSW clearly illustrates the vital role played by independent information in empowering people with disability. IDEAS have a wide variety of resources available on its website¹¹, as well as in accessible formats. Information officers respond to enquires in person, and by phone, email or text.

In 2014-15:

- IDEAS hosted or attended 105 community events and expos on NDIS readiness in Penrith and Maitland, attended by 7 666 people;
- A 'PossABLE Expo' in Penrith, organised by IDEAS in six weeks, attracted 102 exhibitors providing information to 3 000 people;¹²
- 164 840 people connected with IDEAS in some form.¹³

The DNF is unaware of where Local Area Coordinators will source their information. To continue to be a social good, it is important that information be:

- publicly available, rather than being held by an organisation;
 - obtained from a variety of independent sources; and.
- built on existing resources so there is a site that is offered by an organisation that has corporate knowledge of a broad range of mainstream and disability services, how they work and pathways for access that will work for people with disability.

Recommendation 10

That the NDIA ensure that independent information is publicly available, rather than being held by an organisation for internal use.

User-Led Disability Support Organisations

The DNF is pleased to see a user-led stream in the ILC and believes the emergence of a strong user-led sector will be positive for people with disability. Their self-help ethos has the opportunity to contribute to less reliance on paid service provision and their contribution to the vision of people with disability as capable productive contributors will be inestimable.

The members of the DNF are user-led organisations who between them have decades of experience in advocating for people with disability. The trust established based on expertise and personal connections is a form of social capital which should be safeguarded.

¹¹ See Information on Disability and Education Awareness Services (IDEAS) NSW website at <http://www.ideas.org.au/category/mainCategories>.

¹² IDEAS (2015) [*"2014-15 Annual Report"*](#)

¹³ Ibid

The DNF believes that individual capacity building should only be provided by user-led organisations to minimise the actual or potential conflict of interest that exists when providers of core supports provide capacity building.

Recommendation 11

That individual capacity building funding in the ILC are commissioned to user-led disability support organisations.

Volunteers

The ILC Commissioning Framework expresses a concern that social capital will diminish with the individual focus of the NDIS. To properly build social capital, organisations should consult with their communities about the contribution that volunteers make to individuals. This approach will ensure volunteers meet community needs and also assist vulnerable individuals be more connected to the community.

Many DNF members rely heavily on volunteers to extend the breadth and depth of their work. A pertinent example is the Intellectual Disability Rights Service that runs a Criminal Justice Support Network (CJSN) of more than 140 volunteers throughout NSW. Trained CJSN volunteers support people with intellectual disability at police stations and appearing before Courts.

As another example, Side-by-Side Advocacy facilitates ongoing supportive relationships between people with intellectual disability and citizen advocates. These personal connections are beneficial in building a person's capacity.

It is critical to note that although volunteers may not be paid, they are not without cost. The effective utilisation of volunteers requires ongoing training and support (including de-briefing opportunities) and re-imbursement of out-of-pocket expenses. Organisations also need specific knowledge and skills to effectively direct volunteer resources to achieving specific outcomes for people with disability, a requirement which may be integrated into existing reporting requirements to avoid duplication.

Recommendation 12

That commissioning in the ILC requires services to demonstrate strategies they will use to maintain and develop social capital for the people who use their services.

Recommendation 13

That organisations be required to demonstrate specific knowledge and skills to effectively direct volunteer resources to achieving specific outcomes for people with disability.

Recommendation 14

That the Commissioning Framework recognise and provide for the cost of effectively utilising volunteers to achieve specific outcomes.

Preparing the sector for the requirements of the ILC sourcing process

Minimise conflict of interest

The DNF strongly believes that services that provide core supports should not be eligible for funding in the ILC. This is to minimise the perception or actual conflict of interest where trust built via ILC engagement enables an ILC provider to direct the person to core support services the organisation provides.

As discussed above, the DNF favours user-led organisations to provide individual capacity building. This capacity building of individuals assists to them to further their knowledge of available supports they may want in their NDIS plans. Accordingly, the DNF does not consider it a conflict of interest for ILC organisations providing capacity building to also provide planning support; the planning supports may be enhanced through the relationships of trust developed during capacity building. For conflict of interest purposes, the key distinction is between the providers of core supports and providers of capacity building supports. The DNF believes that organisations that provide core supports should be ineligible to tender for the ILC, but organisations providing capacity building services only should not be prohibited from tendering for ILC service provision.

Recommendation 15

That sourcing principles prevent organisations that provide core supports to provide ILC services.

Promote collaboration

The DNF is concerned that the competitive approach proposed in the Commissioning Framework could threaten the collaborative relationships and practices which are key positives of the disability sector and the community sector more generally. These positives flourished in the absence of competition and have allowed the sector to enhance its ability to respond to people's needs while maximising the value of scarce funding. This is particularly noticeable when services collaborate to respond to a person in crisis.

Conversely, competition has led to distrust and a reticence to share information or collaborate. For example, a DNF member reports being contacted by a person with disability who was not permitted to use the hoist in their group home if they used their funding to employ someone to assist them go to bed one hour later than the home's 9pm bedtime. This result undermines choice and control for people with disability and is likely to worsen in a competitive funding environment.

The DNF believes that collaboration would be encouraged and enhanced if sourcing principles required organisations to demonstrate collaboration with complimentary providers. This will enhance the depth and breadth of quality service provision.

Examples of collaboration that can add value include:

- A geographically focused provider collaborating with a provider in relation to a targeted population. For example, a Home Care service building cultural competence by collaborating with a service with CALD expertise.

- Providers of ILC support to different target groups in a specific location collaborating to offer support to a more diverse audience (eg disability peak collaborating with service for mental health consumers);
- Providers working together to offer capacity building workshops at an information day about the NDIS.

As an example of collaborative practice, Partners in Recovery grant applications require organisations to specifically demonstrate collaborate with other organisations.

Recommendation 16

That sourcing principles require organisations to demonstrate collaboration with complimentary providers.

Although cooperation is built into current practice, it is important that organisations be supported to adapt to formal collaboration, which can take time and resources. The NSW Legislative Council Committee on Social Issues has recently recommended longer lead time in the preparation of tenders to include joint tendering.¹⁴ The Committee also recommended that the NSW Government:

- mandate that a percentage of the value of human service contracts is targeted to undertake service coordination;
- develop a key performance indicator to measure coordination and collaboration;¹⁵

The DNF considers that these recommendations have merit in relation to the ILC sourcing process.

Recommendation 17

That the Commissioning Framework includes support for organisations to prepare for and adapt to formal collaboration processes, including longer lead times for tenders and a key performance indicator to measure collaboration.

As highlighted above, collaboration would also be enhanced if it were reflected in ILC Outcomes and Outputs.

Grant writing assistance

A competitive sourcing environment has the potential to favour large organisations which have the financial capacity to employ staff or consultants specially to write grant applications. The DNF believe that a diverse market with a variety of organisations is important to produce quality and diversity of services for people with disability.

¹⁴ NSW Legislative Council Committee on Social Issues (2015) [Service Coordination in Communities of High Social Needs: Final Report](#), Recommendation 12 p57.

¹⁵ NSW Legislative Council Committee on Social Issues (2015) [Service Coordination in Communities of High Social Needs: Final Report](#), Recommendation 13.

To promote a level playing field for small and medium sized organisations, the NDIA could provide smaller organisations training and assistance with grant application writing, or interview applicants as part of the assessment in order to focus on their skills in service delivery rather than grant writing.

Recommendation 18

That the NDIA provide smaller organisations with training and assistance with submission and grant writing, or interview applicants as part of the assessment of grants.

Factors to be considered in the sourcing process

Competitive tendering often means that local knowledge that can guide effective and targeted responses to community's needs is lost and people's access to appropriate services can be diminished. It is important to fund a variety of services to give consumers choice. This is particularly important in small communities where privacy concerns or other issues may make a service inappropriate for some users.

As highlighted above, local knowledge is particularly important with Aboriginal, CALD and rural and remote communities, where long term and deep engagement is often needed. One size does not fit all, and providers need to engage with communities to determine the best way to work with them.

To address this issue, the DNF believes grant applications should provide an opportunity for applicants to not only address the core requirements, but also to demonstrate their organisation's track record in meeting the needs of their clients and community and how that is applicable to areas they are applying to work in.

To ensure that local knowledge and expertise is valued and respected in the sourcing processes, the DNF recommends grant allocation processes provide a weighting for:

- a proven track record within the community;
- an understanding of the culture of a community (including the employment of local workers, such as Aboriginal and CALD workers to work with these populations);
- knowledge of hidden need;
- the trust that people have in a service;
- existing relationships that enable person-centred responses; and
- the ability to respond to those isolated by distance, lack of transport or barriers specific to that community.

Finally, a weighting for innovation could assist new players to enter the market, increasing the diversity of services.

Recommendation 19

That when assessing ILC grant applications, the NDIA give a weighting to factors beyond cost effectiveness, such as:

- an organisation's knowledge, relationship and understanding of their community;
- an organisation's record in service provision that works for the people it serves;
- an organisation's demonstrated cultural sensitivity, and ability to respond to the diverse needs of the community; and
- proposals demonstrating innovative solutions which enhance choice and control.