

Feedback and recommendations regarding the Queensland
Community Support Scheme

**Submission by the
Queensland Independent Disability Advocacy
Network (QIDAN)**

Department of Child Safety, Seniors and Disability
Services (DCSSDS)

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Introduction

The Queensland Independent Disability Advocacy Network (QIDAN) thanks the Department of Child Safety, Seniors and Disability Services (DCSSDS) for the opportunity to escalate feedback and provide recommendations regarding the Queensland Community Support Scheme (QCSS). As disability advocates supporting people with disability and their families, we have identified a prevalence of ongoing issues with the QCSS.

Although QCSS matters accounted for just 1% of QIDAN advocacy services during 2022, they took an average of 19.7 hours of advocacy compared to the overall average of 11.6 hours. This made QCSS matters the most time-consuming matters during the 2022 period. Furthermore, 58% of the advocacy services provided for QCSS issues were for people from Culturally and Linguistically Diverse backgrounds and 17% of individuals from Aboriginal and Torres Strait Islander backgrounds.

It is also worth mentioning that individuals frequently seek advocacy for another service system like NDIS, housing, or health, which are reported accordingly however, in the scope of the advocacy services experience issues with the QCSS. For example, 16% of advocacy services were provided to individuals seeking advocacy for NDIS access in 2022. Additionally, 4% of the advocacy services providers were related to mainstream service provision, which includes QCSS service providers. Considering these factors, the actual prevalence of QCSS issues among individuals seeking advocacy is likely to be significantly higher.

Our report provides feedback, case studies and recommendations on these issues with the hope that we can raise awareness of the challenges and barriers faced by individuals who have engaged with the QCSS.

QIDAN's recommendations

1. The QCSS eligibility criteria should be transparent, accessible, and readily available.
2. The QCSS manual and framework should be adjusted to acknowledge the nature of disability for many of the people who access the QCSS. This includes by removing the time-limit parameter on QCSS services.
3. The QCSS eligibility should not be prohibitive of people with complex needs and those who the QCSS deem eligible for NDIS access.
4. The Department of Communities should implement rigorous process to ensure compliance with the QCSS manual for the QCSS Access Point and all service providers. This should ensure compliance with the intake processes, communication of wait times, appropriate information sharing, plan reviews.
5. The QCSS should establish a universal standard of practice for all service providers which should include, standardised fees, fee waivers and reduction requests, regular



training on disability awareness, cultural awareness, culturally safe practice, and access to free interpreting services.

6. The Department of Communities should extend registration for QCSS service providers to additional local organisations to ensure greater choice of service provision for QCSS participants.
7. The QCSS should ensure that its manual, policies, and procedures are informed by the Queensland Human Rights Act 2019. In particular, ensuring that the fee arrangements support a basic standard of living.
8. The Government should increase funding to the QCSS to reduce waitlists, meet the needs of participants, and eliminate the fee gap. Additionally, there should be transparency as to how service providers are funded to provide supports under the QCSS.

1. QCSS eligibility

- 1.1 People requiring QCSS access have described feeling confused and misled by the QCSS eligibility criteria. For instance, people have met all the eligibility criteria listed on the QCSS website but have had their applications for access rejected.
- 1.2 Section 2.1.4 of the manual states that people with complex needs and who require a high level of support are ineligible for the QCSS. It goes on to say that the QCSS is unavailable to individuals deemed eligible for National Disability Insurance Scheme (NDIS) access. Though the QCSS may determine that people with complex needs are eligible for the NDIS, there are many factors that prohibit a person from accessing the NDIS. Furthermore, only the National Disability Insurance Agency (NDIA) can grant a person access to the NDIS.
- 1.3 Section 1.2 of the manual states that the QCSS is intended to be a time-limited service “targeted to enhancing an individual’s capacity to self-manage”. Moreover, section 1.3 of the manual asserts that the QCSS focuses on increasing a participant’s ability to be as “independent as possible”. For many individuals who require access to the QCSS, “self-management” and total independence may not be possible.

2. Access

- 2.1 Advocates have observed extensive waitlists for QCSS access, with reports of wait times of up to two years. Those applying for QCSS access report receiving little-to-no notice or updates on wait times by QCSS Access Point. Section 2.2.4 of the manual states that the QCSS Access Point is responsible for actively managing a triage process involving regular reviews of a participants needs at least every three months to ensure that appropriate referrals are made, including updates on the availability of support.



- 2.2 Several QCSS participants report they have never been offered a comprehensive intake process and have therefore have not received individualised plans tailored to their specific needs and goals. Section 2.2.1 of the manual states that information obtained from the QCSS Access Point referral should inform the service outlet of the participant's identified needs, goals, and objectives. Furthermore, the service outlet is expected to use this information when working with the participant to identify their goals and plan further.
- 2.3 There have been reports from eligible QCSS participants that service providers have declined providing services to an individual due to the 'risks' of knowing that an individual requires more than 5 hours per week of support allocated. Therefore, no supports are provided at all.

3. Service provision

- 3.1 QCSS participants are offered limited-to-no choice on who provides services, particularly in regional, rural, and remote communities where only one service provider may be available. QCSS participants who live in regional, rural, and remote areas report feeling impacted by the limited options of QCSS providers available. In particular, an impact on the complaints process and the quality of the service provided. QCSS participants have described experiencing discrimination by service providers and feeling unable to make a complaint due to the lack of alternative support options available.
- 3.2 QCSS participants report not receiving the total hours of support that they are entitled to in their plans. Additionally, advocates have received feedback from participants advising that their support hours were reduced to cover "administration" tasks. For example, a disability advocate reported working with an individual eligible for the full five hours of support per week where their support hours were reduced to three hours per week after being advised the remaining two hours were dedicated to administration tasks.
- 3.3 Advocates have observed numerous occasions where QCSS support services have been cancelled last minute. Often, cancellations leave participants without support for essential needs like personal care services.
- 3.4 QCSS participants have raised complaints about the general quality of service provided, including a lack of skilled workers, a lack of disability awareness, and unrealistic expectations from service providers. For example, a participant was advised by their service provider that a cleaning service would be provided anywhere between 9:00 am and 5:00 pm and that they must be present at home for the service. The participant tried to schedule a specific time for a cleaner each week, however, the service provider refused to change the arrangement. Another example is of a person requiring assistance with showering and being offered the only available timeslot of 3pm or receiving no service.
- 3.5 QCSS participants report frequent changes to support workers, resulting in inconsistent and unreliable services. Often, new support workers are unaware of the person's situation and



needs. Participants describe having to repeat their stories, needs and goals to new support workers on a regular basis.

- 3.6 Advocates have observed service providers contacting people from culturally and linguistically diverse (CALD) backgrounds without providing an interpreter service. There are reports of individuals from CALD backgrounds not understanding the service provider over the phone and, therefore, not providing accurate information. This is particularly problematic when the service provider calls to determine QCSS eligibility.
- 3.7 Service providers often send written correspondence in English only, and advocates have observed that service providers are quick to exit clients from the service if they do not receive a participant's response to queries and correspondence. For example, a participant from a refugee background received a letter from their service provider to renew their financial hardship form. As the letter was in English, the participant did not understand what they needed to fill out and did not respond. The participant was charged for their QCSS services, and the service provider ended their plan. The service provider informed the participant they would not reinstate their services without a new QCSS referral.
- 3.8 QCSS participants have reported never receiving a formal support plan review. In one instance, a QCSS participant of five years advised they had never had their support plan reviewed, and their plan has not changed at all during this time. Section 2.3.3 of the manual describes a support plan as a "living document" that should be updated as a person's needs and goals change and that a service outlet must "formally review each person's support plan at least every six months".
- 3.9 Advocates report several occasions where QCSS service providers and support workers have refused to provide evidence to support participants with their NDIS access applications. Section 1.3 of the manual states that QCSS service providers play a "significant role" in supporting people to engage with other services, such as the NDIS.

4. Fees

- 4.1 The gap fee that participants are expected to pay can be prohibitive, particularly for those who rely on Centrelink benefits. Though section 3.1 of the manual states that costs should be charged on a scale of fees appropriate to a person's income level, QCSS participants describe feeling that the charges are still too high and unmanageable.
- 4.2 The procedures to request fee reductions and waivers are inconsistent since fee-related processes are managed by each service provider individually. As the QCSS engages several different service providers, it is suggested that the viability of a fee waiver or reduction request depends on the service provider. Additionally, QCSS participants have disclosed that their requests for fee waivers have been rejected by their service provider without adequate explanation.



4.3 QCSS participants have reported that the fee waiver process can be invasive, with service providers scrutinising bank statements and demanding participants to justify why they can't afford the fees.

5. Case studies

Case study provided by Speaking Up For You

Pat* is an Aboriginal man with an acquired brain injury (ABI). He has been a QCSS participant since 2019, and one of his primary needs is assistance with lawn and garden maintenance.

Pat's lawn and outdoor area have become significantly overgrown due to a lack of assistance, information, and support from the QCSS and the service provider, and he feels that the service provider is unwilling to engage in yard work. The extent of the overgrowth has caused structural damage to his house due to overgrown tree limbs protruding into the house, mould inside and outside his house, and a pest problem in his ceiling. Pat's home is a fire hazard, a health risk, and a safety risk.

Pat cannot recall ever receiving an assessment of his individual needs by his appointed service provider and has never engaged in a discussion with the QCSS about the services that could make a meaningful difference in his life. Additionally, Pat has repeatedly asked his QCSS service provider for consistent workers, citing his memory issues and communication difficulties caused by the ABI. He has described the fatigue and distress caused to him by constantly repeating his needs and goals to new workers. Despite his requests, the service provider does not provide consistent workers, and Pat reports feeling as though he is perceived as being difficult by his service provider.

Pat has described feeling judged and admonished by his service provider and support workers, and has recalled an instance where a support worker called their boss in front of him to report Pat for not assisting with the washing up. At this time, he was unaware that he was expected to help with the washing up. Furthermore, Pat's ABI causes severe fatigue, brain fog and affects his body to the extent that he needs to sleep for days at a time – all of which impacts his ability to attend to household chores.

Since first becoming a QCSS participant, Pat's health and well-being have continued to decline. Pat has expressed that as an Aboriginal man his outdoor space is vital for his connection to Country, nature, and his ancestors. He reports feeling he can no longer enjoy his space for fear of falling or being bitten by a snake or spider. Pat has stated that the *"QCSS is not enabling it is disabling and makes me feel like I am virtually hobbling through life"*.

**name changed to protect confidentiality*



Case Study provided by Queensland Advocacy for Inclusion

Charlotte* lives with disability and has been a QCSS participant for several years. Charlotte wished to engage with a disability advocate to help her communicate with her QCSS service provider.

Charlotte received an email from her service provider stating that the head office feels that they are “overservicing” QCSS participants and, as a result, will reduce the support services they provide to her and all other QCSS participants. The support provider also claimed to be supplying Charlotte with two domestic visits a week and two weekly social visits for a total of 8 hours. However, Charlotte has stated that she has never received the 5 hours that she is eligible for, let alone 8. Charlotte disagreed with the service provider’s decision, particularly considering she already wasn’t receiving the total hours of support that she was entitled to.

The QCSS service provider refused to provide yard maintenance and claimed it was not one of their services. However, Charlotte had previously been told that yard maintenance would be part of her service provision. Charlotte’s lawn was at chest height and completely unusable. Charlotte used to have a vegetable patch that she attended to that was very important for her overall well-being and recovery.

Charlotte felt that the support provider did not want to provide her with support because she does not pay fees due to financial hardship. The service provider previously tried to cease her QCSS funding, stating that she only had five months of service due to her age (she was aged 47 at the time).

Eventually, Charlotte decided to transfer to a new QCSS service provider. Charlotte stated that she feels that her service provider “does not enable individuals they disable them.”

**name changed to protect confidentiality*

Conclusion

QIDAN recognises that many people with disabilities have positive experiences with the QCSS. Building upon this foundation, QIDAN would like to work with the QCSS to further enhance the quality of life for people with disabilities.

QIDAN thank the Department of Child Safety, Seniors, and Disability Services (DCSSCS) for the opportunity to report on some of the issues faced by people with disabilities and their families who are engaged with the QCSS. QIDAN appreciates the DCSSCS raising our feedback and recommendations with relevant Departments, and for listening to people with disability, their families, and their advocates. We hope that our recommendations can be considered by the QCSS for the improvement of collaboration, future operations, and service delivery.