

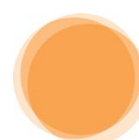
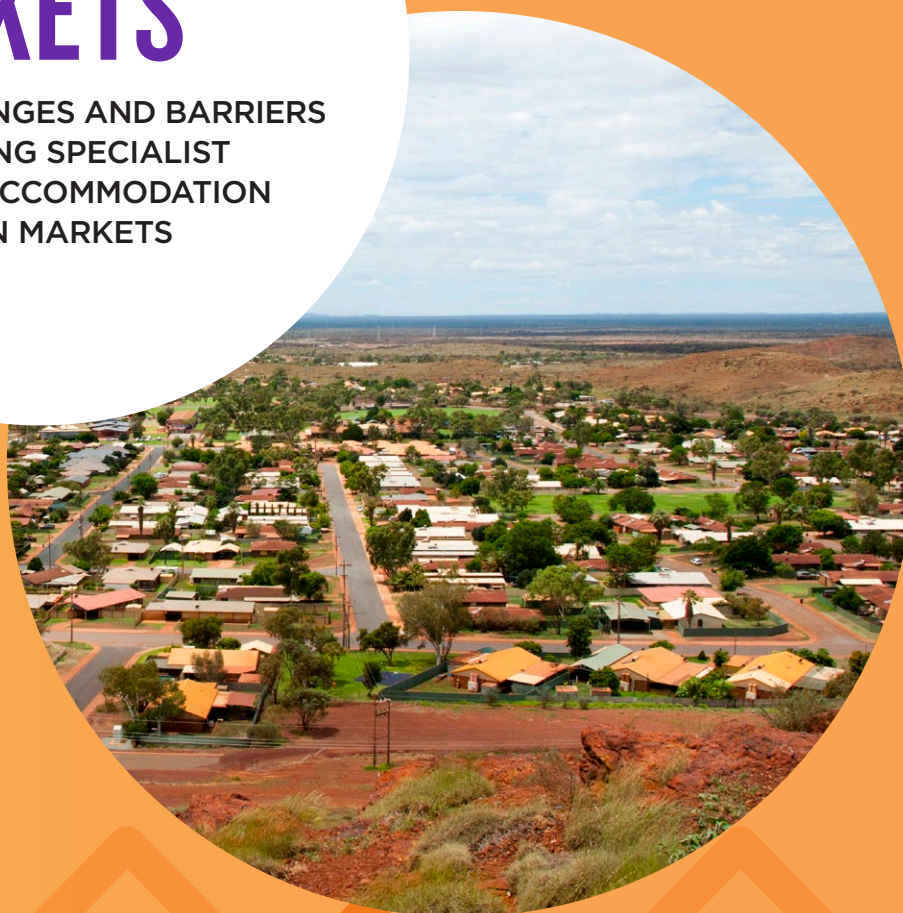


NDIS HOUSING  
OPTIONS

# SDA IN THIN MARKETS

THE CHALLENGES AND BARRIERS  
TO DELIVERING SPECIALIST  
DISABILITY ACCOMMODATION  
(SDA) IN THIN MARKETS

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SUMMER  
FOUNDATION

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# ACRONYMS

**SDA** = Specialist Disability Accommodation

**NDIS** = National Disability Insurance Scheme

**NDIA** = National Disability Insurance Agency - the agency that implements the NDIS

**NDIS participant** = People with disability accessing the NDIS

**SDA provider** = The landlord of an SDA enrolled dwelling

**NDIS service provider** = All parties that provide a service through the NDIA

**SIL** = Supported Independent Living

**LAC** = Local Area Coordinator

**OOA** = On-site Overnight Assistance

**OT** = Occupational Therapist



# INTRODUCTION

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This resource looks at the barriers and impediments to the development of Specialist Disability Accommodation (SDA):

- In thin markets, of Western Australia and Queensland
- For NDIS participants living in rural and remote areas
- For NDIS participants with high and complex needs requiring a Robust SDA design category

This resource has been published as part of the NDIS Housing Options project, funded by the Australian Government Department of Social Services (DSS) to assist housing providers across Western Australia and Queensland to gain a better understanding of the challenges and barriers to the delivery of SDA in thin markets.

## Specialist Disability Accommodation

Specialist Disability Accommodation (SDA) is housing that has been specially designed or modified to suit the needs of people who have an extreme functional impairment or very high support needs. It is estimated that around 6% (28,000) of NDIS participants will be eligible for SDA funding.

**Extreme functional impairment** means that, even with appropriate home modifications and/or assistive technologies, a person with disability will still need support with daily activities such as:

- Getting in and out of bed
- Getting dressed
- Moving around
- Preparing meals
- Accessing the community

**Very high support** needs means 1 or more of the following:

- That 'informal supports' (often family or friends) can't meet the personal care needs of the person with disability
- The person with disability has spent a long time in a group home or residential aged care
- The person with disability has behaviours that pose a risk to themselves or others<sup>1</sup>

For more information on what SDA is please refer to the resource '[About SDA](#)' on the Summer Foundation website.

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<sup>1</sup> NDIS SDA Rules: Division 2—Eligibility to receive support for specialist disability accommodation Section 12 & 13  
<https://www.legislation.gov.au/Details/F2020L00769>

## Thin markets

A 'thin market' is a term used to describe a gap in the market. In some markets this may mean there is demand but low or no supply or the demand is unknown. By comparison, a strong market is one in which there are many suppliers and users of a service with reasonable and fair prices for easily accessible services.

Thin markets are often referred to when talking about geographical areas such as rural and remote locations, but can also refer to service types, including allied health services, SDA and support services. It is important to think about thin markets broadly to understand where there may be market gaps in traditionally busier markets with good supply.

Once a market gap is identified, approaches to address the gap can be understood and market stewardship can take action. SDA has been identified as a thin market in rural and remote Queensland and Western Australia.

### **Features of a thin market in SDA** (including but not limited to)

- Minimal understanding of SDA by NDIS participants and SDA providers
- Low or no supply
- Rural and remote areas
- Systemic challenges to building supply
- Unknown demand of potential tenants (NDIS)

### **Features of a strong SDA market**

- NDIS participants have choice and control over where and how they live
- SDA providers and NDIS participants have a strong understanding about SDA and opportunities
- Demand is understood
- NDIS participants, SDA providers and NDIS service providers work collaboratively in an ongoing capacity



# THE SDA MARKET IN QUEENSLAND AND WESTERN AUSTRALIA

There is currently a shortage of SDA supply in rural and remote areas of Western Australia and Queensland. This is likely due to the lack of understanding of demand and therefore understanding of supply needs. Only having a few SDA providers, NDIS service providers and building/construction companies in these areas makes the delivery of SDA difficult. The National Disability Insurance Scheme (NDIS) was rolled out in full in Queensland and Western Australia in 2019 and 2020 respectively. With the NDIS being new in these areas, there are gaps in supply. Some supports including SDA and allied health services will take time to reach levels required to meet demand. One of the main underpinning principles of the NDIS is choice and control for NDIS participants. Gaps in SDA supply and NDIS service provision limit an NDIS participant's ability to have true choice and control within the NDIS.

As reported in the [NDIS Quarterly Report, March 2021](#), there are currently 18 SDA providers who have been active in 2020/2021 Quarter 3 in Western Australia and 50 in Queensland.<sup>2</sup>

**Table 1 – Active SDA Providers by jurisdiction as at 31 March 2021**

State/Territory	SDA providers that have ever been active	SDA providers active in 2020-21 Q3
NSW	150	116
VIC	85	53
QLD	72	50
WA	20	18
SA	25	18
TAS	15	9
ACT	10	4
NT	4	3
OT	0	0
<b>National</b>	<b>324</b>	<b>250</b>

SDA providers are a fundamental stakeholder group who require support and stewardship from the NDIA, local and state governments to deliver SDA.

<sup>2</sup><https://www.ndis.gov.au/about-us/publications/quarterly-reports> Appendix P, pg 533

## Queensland

It is anticipated that 6% of NDIS participants will have SDA funding in their plan. Therefore it is estimated that 5,656 Queenslanders will require an SDA housing response. Current SDA data released by the NDIA includes information relevant to the 1,595 NDIS participants in Queensland that have SDA included in their plan.

As per the **NDIS Quarterly report, March 2021**, there were

- 4 new build enrolled SDA dwellings in Darling Downs - Maranoa
- 6 new build and 1 refurbished enrolled SDA dwelling in Fitzroy
- No enrolled SDA dwellings in Mackay and Queensland - Outback<sup>3</sup>

The **Specialist Disability Accommodation Supply in Australia** Report (SDA Supply report) released by the Summer Foundation in January 2021, reported 366 new SDA dwellings expected to be built over the next 12 months in Queensland. However, there are no SDA dwellings expected to be established for the regional, rural and remote areas of Darling Downs - Maranoa, Fitzroy, Mackay and Queensland - Outback. See Table 2.<sup>4</sup>

**Table 2 – Estimated number of SDA dwellings and places for each SA4 region in the pipeline in Queensland**

QLD SA4 region	Region Classification	Number of dwellings	Number of places
Brisbane – East	Metro	20	26
Brisbane – North	Metro	8	8
Brisbane – South	Metro	55	77
Brisbane – West	Metro	0	0
Brisbane Inner City	Metro	22	24
Cairns	Regional	14	20
Darling Downs – Maranoa	Regional/Remote	0	0
Fitzroy	Regional/Remote	0	0
Gold Coast	Metro	101	116
Ipswich	Metro	12	14
Logan - Beaudesert	Metro	9	20
Mackay	Regional	0	0
Moreton Bay – North	Metro	25	61
Moreton Bay – South	Metro	20	38
Queensland – Outback	Very Remote	0	0
Sunshine Coast	Metro	45	63
Toowoomba	Regional	18	30
Townsville	Regional	15	17
Wide Bay	Regional	2	6
<b>Total</b>		<b>366</b>	<b>520</b>

<sup>3</sup> <https://www.ndis.gov.au/about-us/publications/quarterly-reports> , Appendix P, pg 534

<sup>4</sup> **Specialist Disability Accommodation Supply in Australia January 2021** Table 23 – Estimated number of SDA dwellings and places for each SA4 region in the pipeline in Queensland (QLD) p. 61



## Western Australia

It is estimated that 2,985 Western Australians will require an SDA housing response. Current SDA data released by the NDIA identifies 1,160 NDIS participants in Western Australia who have SDA included in their plan.

As per the **NDIS Quarterly report, March 2021**, there were no enrolled SDA dwellings in Bunbury, Western Australia - Outback and the Wheat Belt region.<sup>5</sup>

The SDA Supply report indicated a total of 229 new SDA dwellings to be built over the next 12 months with none expected in the very remote area of Western Australia - Outback and only 3 in the remote Wheatbelt area. See Table 3.<sup>6</sup>

**Table 3 – Estimated number of SDA dwellings and places for each SA4 region in the pipeline in Western Australia**

WA SA4 region	Region Classification	Number of dwellings	Number of places
Bunbury	Regional	35	35
Mandurah	Regional	12	13
Perth – Inner	Metro	32	32
Perth – North East	Metro	21	32
Perth – North West	Metro	54	84
Perth – South East	Metro	36	52
Perth – South West	Metro	36	39
Western Australia – Outback	Very Remote	0	0
Western Australia – Wheat Belt	Remote	3	3
<b>Total</b>		<b>229</b>	<b>290</b>

<sup>5</sup> <https://www.ndis.gov.au/about-us/publications/quarterly-reports> , Appendix P, pg 535

<sup>6</sup> Specialist Disability Accommodation Supply in Australia January 2021 Table 24 – Estimated number of SDA dwellings and places for each SA4 region in the pipeline in Western Australia (WA) p. 63

## What work is currently being done?

There is currently a lot of work being undertaken to encourage new builds and infrastructure in rural and remote areas where the SDA market is thin. Some SDA providers are looking to collaborate with rural and remote communities and Aboriginal communities to understand the cultural needs and expectations to delivering successful SDA.

The **Queensland Productivity Commission** recently delivered a final report to Queensland Government inquiring into the NDIS in Queensland, looking into rural and remote areas as well as Aboriginal and Torres Strait Islander people and the NDIS. Inquiries like these are an opportunity for stakeholders to consult with state and territory governments to improve the NDIS market.

The Australian Government is committed to ensuring no younger person (under the age of 65) lives in aged care, unless in exceptional circumstances. The aged care system is designed to support the needs of older people and is not designed for younger people with a disability.

The Australian Government's Young People in Residential Aged Care (YPIRAC) Targets, unless in exceptional circumstances, seek to ensure there are:

- No people under the age of 65 entering residential aged care by 2022
- No people under the age of 45 living in residential aged care by 2022
- No people under the age of 65 living in residential aged care by 2025

The **Younger People in Residential Aged Care Strategy 2020-25** covers all younger people with disability under the age of 65 living in, or at risk of entering, aged care, including providing choice to Aboriginal and/or Torres Strait Islander people between 50 and 64 years of age who are eligible for the aged care system.

The Strategy includes 4 priority areas to give younger people with disability greater choice and control over where they live and what supports they need to either transition out of or avoid entering residential aged care. They are:

- Priority 1: Understanding younger people and systems
- Priority 2: Improving the systems
- Priority 3: Creating options
- Priority 4: Supporting change

In March 2021 the **final report** of the Royal Commission into Aged Care Quality and Safety was released by the Honourable Tony Pagone QC and Lynelle Briggs AO with recommendations relating to young people with disability living in aged care which closely aligns with the YPIRAC strategy. The **final report** of the of the Royal Commission into Aged Care Quality and Safety recommends the NDIA to publish an annual SDA National Plan setting out, among other things, priority locations and proposed responses to thin or underdeveloped markets; as well as providing directly for, where appropriate and necessary, accommodation in the SDA market, particularly in thin or underdeveloped markets.

In response to the final report of the Royal Commission into Aged Care Quality and Safety, the Australian Government announced, in May 2021, a \$17.7 billion **aged care reform package**. The Australian Government also introduced its **first legislation in response** to the Royal Commission into Aged Care Quality and Safety.

## NDIS Housing Options Project

The NDIS Housing Options project aims to provide information to NDIS participants and housing providers in Western Australia and Queensland about the range of housing options that are available.

Through this project state specific resources have been developed to assist SDA providers looking to deliver SDA as well as tools to help NDIS participants understand and explore better housing options, and to think about their housing needs and preferences.

In 2021 the Summer Foundation held 15 Housing Connections Events, with most sessions held in regional areas of Western Australia and Queensland. The Housing Connections Events aimed to connect SDA providers looking to deliver SDA in these areas with NDIS participants, families and supporters requiring SDA. Through these events SDA providers have been engaging with community groups in rural and remote areas to develop relationships with key stakeholders.

More capacity building and networking opportunities are required to ensure providers and NDIS participants are well informed about what is happening in the SDA market in their area.

To access the tools and resources and for more information on this project please visit [NDIS Housing Options project webpage](#).

## The Housing Hub

The Housing Hub is a nationwide matching platform created by the Summer Foundation as a social enterprise. The Housing Hub is a way for people with disability to find suitable housing and providers to list housing available. Properties listed on the Housing Hub may include existing SDA properties, new SDA builds, non-SDA accommodation, private rental, properties for sale, community housing and shared accommodation. More and more properties are listed on the [Housing Hub](#) each week.

The Housing Hub offers [Housing Seekers](#) the ability to create their own profile, identifying their housing needs and preferences.

The Housing Hub has recently developed a market data report for accessible housing that shows both demand and supply indicators. People searching on the Housing Hub enter information about the type, location and features of a property they are searching for. This data can be used as an indicator of demand in a given location. Data is available regarding either SDA properties or non-SDA properties. The [data report](#) shows what Housing Hub users are looking for in a property and location. This aims to provide an indication of alignment of demand and supply or if there is a gap between what people are searching for and what is being provided.

## UpSkill

Finding skilled and experienced support coordinators who can work with people with complex needs has been identified as a current challenge by people with disability, hospital staff, residential aged care (RAC) staff and the NDIA. This can be more difficult in rural and remote areas where support coordinators often have no experience in supporting a person to apply for SDA funding or looking for an SDA property.

The [UpSkill](#) program aims to build the capacity of the support coordination and allied health workforce to meet the needs of people with disability. Support coordinators and allied health workers are among the most critical professionals assisting people with complex disability support needs to achieve positive outcomes under the NDIS. It is these professionals who assist young people to explore their housing options and find alternatives to residential aged care.

## Hospital system

The Summer Foundation has been delivering projects, training and resources within mainstream health systems since 2016, with the aim of reducing RAC admission rates and the length of time spent in hospital, improving housing outcomes and providing younger people with disability with the support they need to live well in the community.

A Leaving Hospital Well **Community of Practice** has been created for health professionals specifically in the discharge space.

The Summer Foundation established the **Housing Brokerage Service (HBS)** in April 2020. The service was established in response to COVID-19 to support the discharge of people with disability from hospital to housing that aligns with their housing needs and preferences through an innovative housing search. The service continues to see positive outcomes through a rights-based approach that incorporates principles of choice, control and inclusion for people with disability. The HBS team uses a model of secondary consultancy to support and build the capacity of key professionals working alongside people with disability who are stuck in hospital and require suitable housing.

# BARRIERS IMPACTING THE DEVELOPMENT OF SDA IN THIN MARKETS

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## Challenges to the delivery of SDA in rural and remote locations

There are many challenges and impediments to the delivery of SDA in rural and remote areas. SDA providers looking to deliver SDA in these locations will need to consider many factors such as remoteness, existing infrastructure, cultural appropriateness, community participation, availability of SIL and NDIS service providers and NDIS participant demand.

In 2020 interviews were conducted with organisations and providers looking to deliver SDA in rural and remote areas and Aboriginal communities. While there are many barriers and impediments to the development of SDA in rural and remote areas, the following are 4 areas predominantly indicated by these interviews:

- Limited workforce
- Unknown demand
- Financial risk
- Market coordination

## Limited workforce

### NDIS workforce

Collaboration across the sector between SDA providers, support coordinators, occupation therapists and NDIS service providers is crucial to the successful delivery of SDA. Providers looking to develop SDA in rural and remote locations report difficulty in connecting with a local skilled workforce to support the delivery of SDA.

SDA providers in rural and remote areas rely on a local workforce, people who understand the community, culture and its complexities. Without a variety of SDA and NDIS service providers in the community, it impedes on an NDIS participant's choice and control around the NDIS services they engage with. This leaves limited options to choose from. It is often not possible for people with disability with complex needs to travel long distances to access services only available in metropolitan areas.

For example, due to a lack of specialised occupational therapists in rural and remote areas, NDIS participants are having to wait until occupational therapists are able to fly in from metro areas. Therefore, the access to an allied health professional to write a functional assessment report to form evidence that an SDA response is required can take a long time. To better support the process, some support coordinators are coordinating demand among people with disability to identify a group of clients who require an occupational therapist. When the quantity of demand is known, occupational therapists can better coordinate travel into the area.



Providers spoke about the challenges with the local workforce in delivering SDA in rural and remote areas:

***"Essentially the build is the easy part, finding the right people to team up with is a lot more difficult"***

– SDA provider, WA

***"Support providers are relying on an available workforce in remote areas to deliver SDA. Workforce planning for thin markets can be challenging and [as an SDA provider] needs to be factored in when developing a business model for new developments"*** – SDA provider, QLD

## Building and construction workforce

Ideally, construction of SDA in rural and remote areas should increase job opportunities. A scarce workforce in rural and remote areas is not limited to NDIS service providers. The ability to attract construction workers can also be difficult in more remote locations as tradespeople are often employed within the mining sector with relatively high remuneration. As a result, this workforce needs to come in from cities, increasing the cost of labour.

Providers interviewed commented:

***"Connecting with [building] contractors in remote locations is really difficult. I think you also need to come up with innovative solutions, taking a community by community approach, when looking at SDA designs [and support models] for remote locations"*** – SDA provider, QLD

## Opportunities for further education

Creating more education pathways and career opportunities will build the capacity of support coordinators and allied health workers and attract more workers therefore supporting a fully operational NDIS market in rural and remote areas. In turn, NDIS participants will have more choice and control, with more local providers and support options. For this to occur, collaboration is required between the relevant Governments and high schools, training providers, universities and TAFEs to deliver more training, education and incentives for employment in rural and remote areas, to develop a skilled workforce.

## Unknown demand

There is minimal or no demand data available to demonstrate NDIS participants' needs and preferences for SDA, including **SDA design category** required, build type required and preferred location. For SDA providers to make informed decisions about the SDA they wish to build, they need to understand the local demand, specific requirements and existing or pipeline supply.

In some ways, this can be simplified for a well connected SDA provider in rural and remote communities through the close knit relationships and knowledge of community needs. Yet this isn't always practical as SDA providers may not be from the local community. To overcome this, SDA providers working with local councils, community leaders, NDIS participants and other stakeholders will help to build understanding and enable collaboration for the delivery of SDA.

There are additional benefits of connecting with NDIS participants to understand their SDA needs, particularly when designing SDA. Incorporating individual preferences of the person who will call the SDA home makes for a positive experience for the NDIS participant and provides a level of certainty to the SDA provider.

Providers say their main challenge in the delivery of SDA is finding eligible NDIS participants:

***"I have found it difficult to connect with NDIS participants in remote areas"*** – SDA provider, WA

***"We have struggled to find tenants in regional/rural/remote areas. Lowest tenancy numbers are observed in rural regions"*** – SDA provider, QLD

***"If we know that there are specific people in the area that need SDA, then there isn't a problem to build for them"*** – SDA provider, WA

***"It has been very difficult to engage SIL providers to contribute knowledge to the design when we don't know who will be living in it. Ideally, we would like to have the tenant chosen [prior to building], but it just hasn't worked out that way"*** – SDA provider, QLD

The data in NDIS participants' plans could be used by the NDIA to facilitate greater market stewardship of SDA by informing the market about SDA demand. The Queensland and Western Australia State Governments can work alongside the NDIA to provide further information about the needs of thin markets and provide insight into how NDIS service providers can better support the needs of NDIS participants.

## Financial risk

SDA, like all housing, comes with financial risks. These risks have been explained in the **Specialist Disability Accommodation (SDA) Explainer for Investors** resource. Investors and SDA providers have identified vacancy risks, pricing uncertainty and government regulations as the biggest barriers in the development of SDA<sup>7</sup>. In previous NDIS market position statements, the NDIA reported that more financial certainty is required so that providers can develop sustainable business models and confidently commit to investing in remote communities.

In the **Review of the NDIS SDA Pricing and Payments Framework Joint Submission**, June 2018, 20 organisations that are advocates for people with disability and providers of SDA housing came together to articulate the risk of having uncertainty around pricing, developing 26 recommendations for the NDIA to consider. Recommendation 9 of the Joint Submission suggests that pricing reviews should be conducted by a party external to the NDIA; include a reference group of relevant stakeholders with expert knowledge of SDA projects; and allow sufficient time for stakeholders to participate.<sup>8</sup>

The costs of developing SDA in rural and remote areas is higher because of longer distances between towns, poor infrastructure, few travel options and additional construction requirements due to extreme weather conditions. Providers in rural and remote locations can work with their local communities and council(s) to explore ways to overcome barriers to cost effective delivery, such as tax or other concession, grants, or subsidised or shared build costs.

<sup>7</sup> Winkler, D., McLeod, J. Mulherin, P. Rathbone, A. & Ryan, M. (2020) Specialist Disability Accommodation (SDA) Explainer for Investors. Melbourne, Australia: Summer Foundation and JBWere

<sup>8</sup> <https://www.summerfoundation.org.au/resources/joint-submission-review-of-the-ndis-sda-pricing-and-payments-framework/>

In rural and remote areas, NDIS service providers also experience increased costs per NDIS participant due to fewer NDIS participants and difficulty connecting with NDIS participants, combined with the geographic spread of NDIS participants across rural and remote areas.<sup>9</sup>

The **SDA pricing framework** includes additional funding for location factors. However it often does not reflect the true build and delivery cost in rural and remote locations, where the costs are typically higher.

SDA providers made the following comments about the financial challenges of delivering SDA in rural and remote areas:

***"Understanding the pricing framework as well as securing support from banks has also been difficult"*** – SDA provider, QLD

***"WA providers need to develop strategies that support the development of SDA in rural and remote areas. The WA landscape has longer distances between towns and securing builders/developers in remote locations can be difficult and expensive"*** – SDA provider, WA

SDA providers can actively engage with the local councils and state governments to highlight the high costs of building in rural and remote areas. Speaking with the local NDIA office to demonstrate the unique challenges faced in some communities will also support a greater understanding of the additional costs required to build and deliver SDA in rural and remote areas.

## Market coordination

Organisations delivering SDA in areas where they may not have a thorough understanding of the community, culture and complexities should look to engage and collaborate with local NDIS service providers and other organisations who are experienced in working with their community. The importance of this exercise cannot be overestimated as the knowledge and experience that can be gathered will significantly contribute to the planning and success of the establishment of SDA in a community.

From the events run by the Summer Foundation in 2020/21 through the Housing Options Project, it is evident that more education is required for NDIS service providers and SDA providers to better understand the complexities of SDA including what SDA is, outcomes for NDIS participants and preparing NDIS participants for an SDA determination.

Providers spoke about the importance of networking and connecting with the community in rural and remote areas:

***"We have only been in the [SDA] space for 12 months, so it has been a very steep learning curve. Knowing who to speak to and team up with is really important"*** – SDA provider, WA.

<sup>9</sup> NDIS Thin Markets Project Discussion paper to in form consultation Page 4.  
<https://engage.dss.gov.au/wp-content/uploads/2019/04/Thin-Markets-Project-Discussion-Paper-2019-04-05.pdf>

Support coordinators play a key role in assisting people with complex disability support needs to achieve positive outcomes under the NDIS and to explore their housing options. Finding skilled and experienced support coordinators who can work with NDIS participants with complex needs as well as find appropriate housing options has been identified as a current challenge. Support coordinators have an important role in facilitating market coordination in rural and remote areas. Due to the nature of their role working closely with NDIS participants they have a greater understanding of NDIS participants' needs and can use this oversight to enable greater cohesion between various local NDIS services providers and NDIS participants.

In the recent NDIS **Service Improvement Plan 2020-21 (SIP)**, the NDIA has committed to working with communities in remote areas and other thin markets to trial new ways of organising services. This is an opportunity for NDIS planners, Local Area Coordinators (LAC) and support coordinators who have oversight of NDIS participants' plans to facilitate market coordination in rural and remote areas where demand is smaller.

The NDIS is underpinned by a market-based approach. The NDIA is responsible for enabling the NDIS and ensuring it is running efficiently. However, market coordination is the responsibility of NDIS service providers themselves. NDIS service providers are responsible for ensuring they are up-to-date with the latest information and ensuring that they connect and coordinate among themselves. This is especially true in thin markets, where communication is vital. Support coordinators should take advantage of activities such as the Summer Foundation **UpSkill** program for further capacity building and professional development.

## GRAHAM'S STORY

**This is Graham's story about his experience and challenges of seeking SDA in a rural area.**

Graham is 54, deafblind, Autistic and living with an intellectual disability. For many years he has resided in a group home. Graham is awaiting approval for Robust SDA and is seeking a home in a rural area.

Due to staff not being able to meet his high level of support needs, Graham was recently forced to move out of the group home and is now living with his 80-year-old mother. Graham desperately needs to find sustainable, suitable housing.

There are many challenges that Graham's family face in supporting Graham to find an appropriate place to live. Some of these challenges are due to living in a rural, remote area where a smaller population means fewer choices.

There is a challenge in connecting with a skilled workforce, which is a vital component to moving successfully into SDA. Graham's sister, Annette, explains, *"there is a limited choice of support providers and difficulty finding support staff who can meet Graham's complex needs"*.

Furthermore, there is the challenge of finding the appropriate home for Graham to live in. Annette explains, *"Graham requires Robust SDA. His needs are specific, he requires narrow hallways, with rails, so he can feel both sides at the same time, for mobilising. He also needs the same arrangement in a shower. Graham would like a booth arrangement for his dining space, so there is stability of furniture placement for orientation. This is opposite to the Improved Livability designs that predominate in the market. In addition, he needs maximum insulation to support his playing music loudly without disturbing others and also provide a sound barrier relating to his significant phobia of rain."*

Annette hopes to engage with an SDA provider who understands Graham's needs and preferences to build him a suitable SDA home where he wants to live.

Annette knows that Graham would benefit immensely from finding the right SDA and building a team of consistent support workers around him.



# ROBUST SDA DESIGN CATEGORY

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The **NDIS Price Guide 2020-21** for Specialist Disability Accommodation describes Robust SDA as:

The Robust SDA design category is for people who have complex behaviours that pose a risk to themselves or others. Typically a Robust dwelling will have the following features as a minimum:

- Adequate space and safeguards for the needs of residents with complex behaviours, to reduce the risk of residents hurting themselves or others
- Secure windows and doors to and within all areas
- Impact-resistant walls, fittings and fixtures (e.g. blinds, door handles)
- Appropriate sound proofing, to minimise the amount of noise passing from one area to another
- Laminated glass
- Areas of retreat for staff and other residents to avoid harm if required
- Meets Livable Housing Australia 'Silver' standard<sup>10</sup>

Funding for Robust SDA will be made available for NDIS participants who require a dwelling that is more resilient to damage and incorporates safety features to protect themselves and others. Robust SDA is often suited to those with a cognitive and/or psychosocial disability.

A person requiring a Robust SDA dwelling may typically require a house to live in on their own, with or without On-site Overnight Assistance (OOA). Other building types such as villa/duplex/townhouses and group homes may not meet their requirements as often additional space and stand alone dwellings are required.

## Robust SDA data

NDIS data reveals that there are only 254<sup>11</sup> Robust SDA dwellings nationally. Of the 254 Robust dwellings:

- 129 are existing stock and legacy stock, excluding in-kind
- 125 are new build/refurbished
- 191 of these dwellings are for 2+ residents
- 63 are 1 resident, villa/duplex/townhouse

The **Summer Foundation's SDA Supply in Australia Report** highlighted very low numbers of Robust SDA being built across all states. The report indicated out of a total of 1,324 new SDA dwellings being built, only 113 will be of the Robust SDA design category, in addition to the 254 currently in the market. Only 16 are estimated to be built in Western Australia and Queensland.

<sup>10</sup> Price Guide 2020-21 for Specialist Disability Accommodation PG. 16 <https://www.ndis.gov.au/providers/housing-and-living-supports-and-services/specialist-disability-accommodation/sda-pricing-and-payments>

<sup>11</sup> <https://www.ndis.gov.au/about-us/publications/quarterly-reports> , Appendix P

See figures below.

Figure 1 – Estimated number of SDA places by design category across Australia

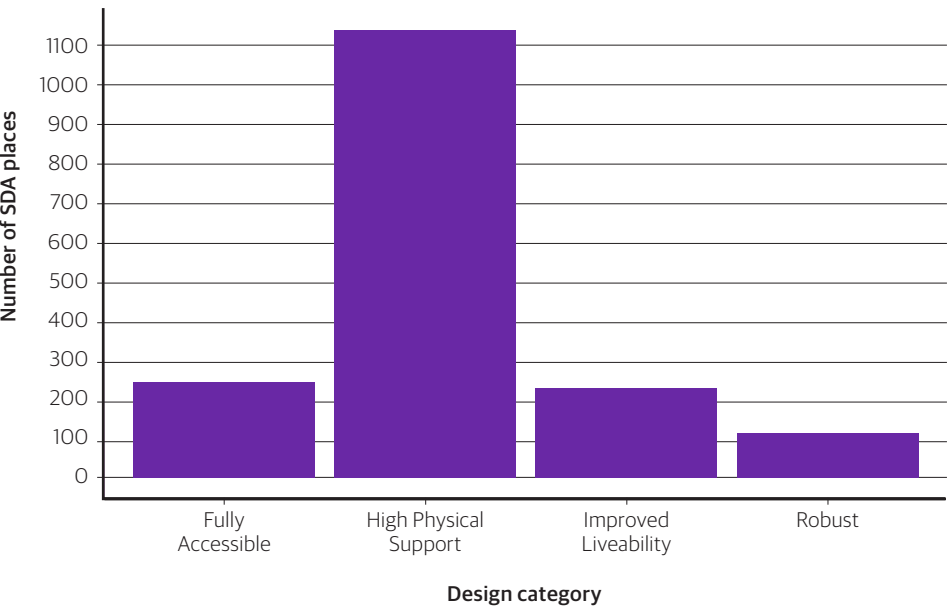
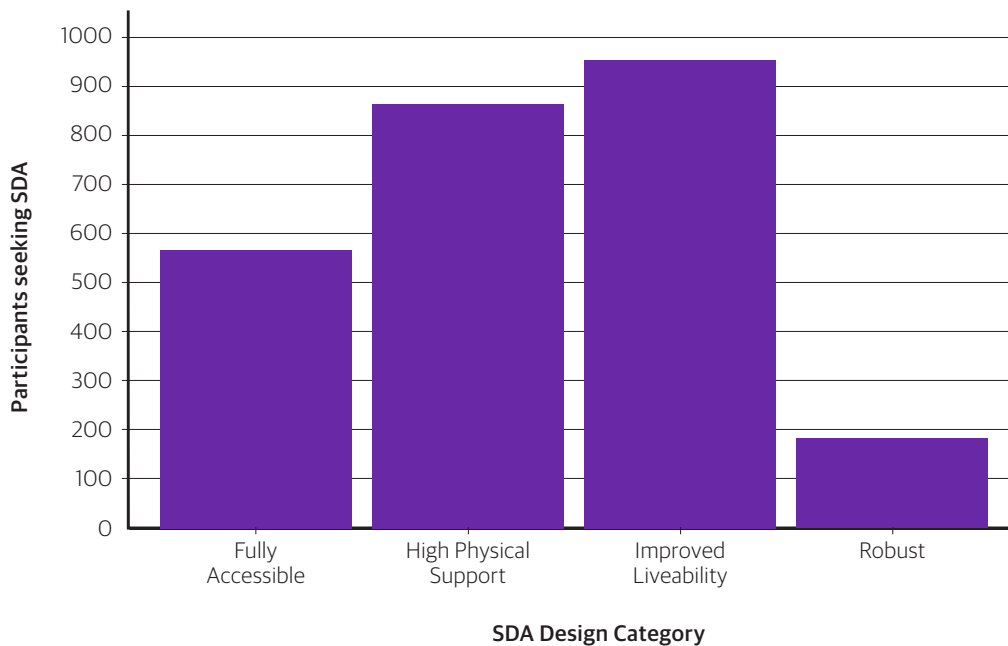


Figure 2 – Estimated number of SDA places across design category for each jurisdiction

Design category		Fully Accessible	High Physical Support	Improved Liveability	Robust
Jurisdiction	NSW	60	151	120	44
	VIC	60	266	35	53
	QLD	24	424	47	15
	WA	37	236	16	1
	SA	22	51	4	0
	TAS	0	1	1	0
	ACT	0	10	0	0

It is hard to have a clear understanding of the demand for Robust SDA as there is currently no data available which indicates the total number of NDIS participants with Robust SDA approved in their plans. Nationally, the **NDIS Quarterly report, March 2021**, identifies 'Participants seeking SDA by required SDA Design Category' with 191 NDIS participants seeking Robust SDA, compared to 949 seeking Improved Livability, 866 seeking High Physical Support and 582 seeking Fully Accessible. This gives some understanding as to what the determination rates of NDIS participants securing Robust SDA are.<sup>12</sup>

**Figure 3 – Participants seeking SDA by required SDA Design Category**



While there are many challenges to the development of SDA for NDIS participants requiring Robust SDA we will be focusing on the following 3 areas:

- Pricing Framework
- Individualising Robust SDA design needs
- Robust SDA determination in plans

## Pricing Framework

The **Price Guide for SDA** allows for Robust SDA design in villa/duplex/townhouse for 1 resident. However, SDA providers developing Robust SDA report that the tenants they are working with have identified (by a health professional) needing to live in a 1 resident house. This build type is currently not listed in the Price Guide for Robust SDA.

To overcome this, an SDA provider in Queensland is building 2, 3 bedroom houses for an NDIS participant requiring the Robust SDA design category. One bedroom is for the resident, 1 room for the support (OOA) and 1 room as a breakout room. Though the SDA provider is aware they will not be able to claim a payment for the other 2 rooms they are bearing this financial burden in order to provide positive outcomes for their tenants.

The Price Guide for SDA is reviewed every 5 years, with the next review occurring in 2023. This gives SDA providers the opportunity to influence future price setting by providing evidence about the true cost of delivering SDA.

<sup>12</sup> <https://www.ndis.gov.au/about-us/publications/quarterly-reports> , Appendix P Pg 555

## Individualising Robust SDA design needs

When designing for Robust SDA it is important to design with the intention of creating a home environment that is safe and comfortable for the individual person who will live there and reduce support services over time. Some SDA providers developing Robust SDA have achieved this by responding to the individual needs and requirements of the NDIS participant and working with their team of supporters to ensure the features of the home have a positive impact on the NDIS participant.

Providers interviewed about the complexities of Robust SDA commented:

***'Well-designed and built Robust SDA needs to respond to the individual and should have a positive impact on their behaviour.'*** - SDA provider, WA

SDA providers who have developed Robust SDA commented that although the minimum design requirements are set to ensure tenants are safe, they can make the home look somewhat institutionalised. This unintended result can be difficult for people with high and complex needs who often are likely to have a history of negative institutional living and can have a perverse impact on their behaviour. SDA providers are encouraged to think innovatively and creatively when designing Robust SDA to overcome the appearance of an institutionalised home. SDA providers report developing Robust SDA above the minimum standard to ensure the environment is pleasant and desirable to live in.

There is currently little research available to best inform SDA providers about how the living environment of a Robust SDA home can impact an NDIS participant's behaviours and what design elements can reduce behaviours of concern. More research is required to better understand the outcomes for NDIS participants living in various Robust SDA settings. Ultimately, best practice for the design of Robust SDA is done in collaboration with the tenant and their supports to determine their individual needs and preferences.

## Robust SDA in plans

One of the biggest barriers to the development of Robust SDA is the lack of clarity and varying interpretation about who is eligible for Robust SDA. Receiving a Robust SDA determination in a plan can be a complex process for NDIS participants and families due to the level of evidence required for this determination.

In an effort to streamline access to SDA and provide more consistency determining plans the NDIA has recently introduced the **Home and living supports request form**. This is a step in the right direction to improve the communication between the home and living panel (formally known as the SDA panel) and the NDIS participant as well as improving the time it takes to receive SDA determination to enable a better understanding of NDIS participants' SDA needs.

The NDIA has released the **Our Guidelines: How we make decisions webpage** to provide more transparency to NDIS participants and SDA providers about what the NDIA considers when making decisions regarding NDIS participants' plans. Having a better understanding of what the NDIA considers when making decisions will help to prepare NDIS participants when completing forms such as the home and living supports request form.

More programs such as the Summer Foundation **UpSkill program** are required for support coordinators and allied health professionals to build their capacity and understand what is required when filling out forms such as the home and living form and collating evidence for a Robust SDA determination.

## RYAN'S STORY

### **This is Ryan's story of his challenges in finding a suitable Robust SDA home.**

Kathleen's 23-year-old son Ryan has had Robust SDA in his NDIS plan since September 2020. Ryan and his family are working tirelessly to find a suitable home for Ryan to live in however are finding the process extremely difficult.

Kathleen explains that the key barrier that is stopping Ryan from moving into a Robust SDA property is it is seen as too expensive for providers. In Kathleen's experience providers would rather build the other types of SDA that are easier to replicate, such as High Physical Support. *"Robust is so much more than Perspex and stronger walls, they are individualised and they are not run of the mill."* Kathleen says, *"Robust SDA is not cookie cutter, it is so individual".*

For example, Ryan needs a bath in a bathroom, he can't have a vanity unit because it will flood, an open plan kitchen is too dangerous. Ryan needs a backyard to run off steam, in a position where he can't see neighbours.

Kathleen has discussed Ryan's SDA needs with 3 SDA providers to secure suitable housing; however they cannot get it off the ground. The first provider hasn't understood Ryan's needs and believes it is too expensive to build in Redlands. The second provider understands Ryan's needs but has explained that it can't be a duplex, it needs to be 3 units. They are now trying to find an appropriate size block of land with room for an outside yard. The third provider says the land is too expensive, which is an issue nationwide.

Ryan, Kathleen and their family are hopeful that by working closely with their SDA provider to identify Ryan's needs, they will be able to develop the right house for Ryan.



# THE IMPACT OF THE LACK OF SDA IN THIN MARKETS ON OTHER SYSTEMS AND SECTORS

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For NDIS participants who intersect with the criminal justice system, mental health system and/or homelessness system, they can experience poor outcomes across aspects of their lives due to the lack of SDA and accessible housing available. The impacts can be significantly greater due to the lack of SDA and accessible housing available. This could result in re-offending and re-entry in the criminal justice system, cycles of homelessness, mental health issues exacerbated by inappropriate accommodation and young people being forced into aged care facilities because there is nowhere else to go.

In Western Australia, there are currently 16,660<sup>13</sup> people on the social housing waitlist and 25,853<sup>14</sup> in Queensland. Social housing is for people who are on very low incomes and may have recently experienced homelessness, family violence, have a disability or have specific housing needs.<sup>15</sup> These figures show that more social housing is needed across both states to house people experiencing vulnerability. There is currently a national undersupply of SDA for people with a disability, meaning that for anyone, including people with a disability leaving correctional facilities, experiencing homelessness or leaving hospitals the options are scarce and often non-existent.

## Criminal justice system

For a person with disability leaving correctional facilities not only are there not enough accessible housing options available but the quality of the housing is reportedly very poor. People with disability leaving the criminal justice system require a stable environment in appropriate housing to help prevent them from re-offending, experiencing homelessness, mental health issues, alcoholism, drug addiction and other general health issues.

A Not For Profit (NFP) organisation commented on the housing challenges for people leaving correctional facilities:

***"Having support and services for vulnerable people leaving the correctional facilities is important but what we require are the bricks and mortar, more housing options to be available."***

- NFP organisation, WA

<sup>13</sup> Current as at 30 April 2021, Department of Communities, WA

<sup>14</sup> Current as at June 2020, <https://www.data.qld.gov.au/dataset/social-housing-register>

<sup>15</sup> <https://everybodyshome.com.au/housing-infographic/>

At the Disability Reform Council meeting in October 2019, the Hon Stuart Robert MP, announced the introduction of Justice Liaison Officers, providing a single point of contact for workers within state and territory justice systems to coordinate support for NDIS participants.<sup>16</sup> The introduction of this role should improve the coordination of people entering or leaving the criminal justice system who require support from the NDIA, ensuring NDIS participants have access to appropriate services and supports including SDA.

In Queensland, state funded case workers can be contacted via the Queensland Government [website](#) and Transitional Managers in Western Australia can be contacted via the State Government [website](#). These state funded case workers work with people leaving prison to support their integration back into the community. When required, the case worker will assist to connect a person with disability to the NDIS, though this can be difficult as there is often no personal history, identification or health records available. Case workers often do not know about SDA, or how to determine whether a person may have a need for this type of housing. Support coordinators, LACs and SDA providers should connect with key stakeholders in mainstream services to work together to support a person with disability who intersects with multiple social services. This will help to improve linkages between mainstream services and disability services.

## Homelessness

For a person with disability experiencing homelessness or who is at risk of homelessness, there is often a need for a crisis response. If this person requires an SDA response, due to the severe undersupply, the options are often non-existent. SDA is a long-term housing solution and can often involve a considerable amount of time to access the funding and potentially waiting for vacancies to become available. For this reason SDA is not a crisis solution to homelessness.

Some NDIS participants whose current living arrangements break down or are in an emergency or crisis situation may be eligible for Medium Term Accommodation (MTA), an interim housing solution, while waiting for a longer term housing solution. For more information on Short Term Accommodation and MTA please visit [Housing Hub](#). This is an opportunity for SDA providers to expand their services beyond SDA to provide MTA as well.

In 2020, a number of providers were interviewed about common barriers and challenges for delivering and accessing SDA in thin markets. NDIS service providers identified the lack of support for vulnerable, at risk and homeless clients to be a major barrier to accessing SDA. It was reported that there was an urgent need to get NDIS participants into a safe home as soon as possible, often resulting in them being placed in unsuitable community housing. SDA providers are encouraged to connect with peak organisations such as [Queensland Shelter](#) and [Shelter Western Australia](#), who work to improve housing for people experiencing vulnerability, to understand the barriers and ways they can work together to increase SDA supply for this cohort.

<sup>16</sup> <https://www.ndis.gov.au/news/3781-disability-reform-council-update#:~:text=The%20introduction%20of%20Justice%20Liaison,youth%20and%20adult%20justice%20systems>.

## Hospital and mental health system

Leaving hospital and returning to the community can often be a difficult and complex transition after experiencing a traumatic accident or injury. Ensuring a person's living arrangements provide for suitable accommodation and care is essential for a positive transition out of hospital and to help prevent re-entering hospital. The development of more SDA is required to prevent the need for long stays in hospital and to avoid people being placed in aged care because there is nowhere else to go.

In October 2019, the Hon Stuart Robert MP announced that Disability Reform Council members will work together to improve access into the NDIS for people with psychosocial disability, as well as addressing how the NDIS and mainstream mental health systems work together.<sup>17</sup> The NDIA provides information as to how to access the NDIS for those experiencing mental health issues as well as information on how the two systems intersect and how the NDIA can support people not in the scheme. More information can be found [here](#).

In February 2020, Minister Robert announced the recruitment of Hospital Liaison Officers (HLO) to help at-risk NDIS participants interact with the NDIS in each state and territory to get them out of hospital quicker with access to the right support. This is an important role to improve the way hospitals and the NDIS work together to support people with disability to leave hospital and return to their community. SDA providers should seek opportunities to collaborate with local hospitals to ensure NDIS participants are being discharged from hospital to appropriate homes.

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<sup>17</sup> <https://www.ndis.gov.au/news/3781-disability-reform-council-update#:~:text=The%20introduction%20of%20Justice%20Liaison,youth%20and%20adult%20justice%20systems>

# BEST PRACTICE TO DEVELOPING SDA IN THIN MARKETS

Delivering SDA in thin markets requires a community by community approach, involving the collaboration of many stakeholders including the NDIA, state and territory governments, people with disability, SDA providers, support coordinators, NDIS service providers and advocacy groups. SDA presents a huge opportunity not only for NDIS service providers but more importantly for NDIS participants to reach their housing goals. Each of these stakeholders has a significant role to play in ensuring SDA continues to grow within thin markets.

## MELISA'S STORY

**Melisa's story of securing SDA in Cairns shows the outcomes that can be achieved when SDA providers work closely with NDIS participants to understand their needs and preferences. It also shows the importance of teaming up with a skilled support coordinator to help with finding a housing solution.**

Melisa is a 48-year-old who lives with Cerebral Palsy. In 2017 following a fall, Melisa moved into her parent's home in Cairns where they began the search for a new suitable place for Melisa to live. Now, Melisa is enjoying living independently in her own SDA home.

In their first NDIS planning meeting in July 2018, eager to find a skilled worker knowledgeable in the field of housing, Melisa's mum Lyn engaged a support coordinator in Townsville, unable to find a suitable support coordinator in Cairns. SDA was approved in Melisa's plan however there were no SDA homes in Cairns. The only offer available was an SDA home in Townsville, which according to Lyn, *"700 kms away is a bit far for a Sunday family lunch!"* Melisa was not prepared to live so far from her family.

There was nowhere else in Cairns for Melisa to go. That was until Melisa's support coordinator contacted MiHaven Care, a new social enterprise who delivers housing solutions for a range of groups in need. MiHaven Care built Cairns' first SDA home, which Melisa moved into.

Lyn's advice to people starting their own SDA journey would be to network with the right people to get the support you need, such as your federal parliament member. The first SDA approval in Melisa's plan was not exactly what she required; it was a stumbling block but with the support of their local member for federal parliament they were able to change it to something more suitable for Melisa.

Lyn explains the best thing about SDA is that it's Australia wide and the whole SDA community is extremely supportive. Lyn says, "SDA is the best initiative the NDIS has, let's keep working on it to make it the best it can possibly be".

With the growth of the SDA market Melisa hopes to live rurally one day so she can live with animals, nature and quiet around her again.

## The importance of collaboration

NDIS service provider engagement and collaboration with NDIS participants for the delivery of SDA in rural and remote areas is an important factor in understanding the geographical context that they are looking to work in and what community means in that specific location. Engagement and collaboration with NDIS participants will also ensure that NDIS participants are at the centre of any decisions made in the process of developing SDA.

SDA in a rural and remote setting may require more innovative solutions to address cultural appropriateness and unique family settings. For this reason NDIS service providers who are responsible for market coordination need to understand the importance of collaborating with each other in these settings to ensure good outcomes for NDIS participants.

NDIS service providers have an important role in engaging with and influencing decisions and changes made by the NDIA and state and territory governments. NDIS service providers should seek out consultation opportunities with the NDIA to share learnings and experiences of delivering SDA in thin markets.

## Opportunities within other sectors

There is a current gap in the development of SDA for people who intersect with other sectors such as the criminal justice, homelessness, mental health and hospital sectors. There is an opportunity for SDA providers to connect with organisations in these sectors, which interface with NDIS participants who require SDA, to find potential tenants. Support coordinators should also be connecting with these networks to support NDIS participants who are experiencing vulnerability, requiring SDA to bridge the gap in these thin markets.

Other opportunities lie with NDIS participants who are the active consumers of SDA and have a unique position to influence the future of SDA using their voice to speak out about how SDA is going and what changes are required to ensure its further development and ultimately success.

## Market stewardship - NDIA and state governments working together to create a better market

Market stewardship is the NDIA stepping in to help steer the scheme when a thin market has been identified or issues need to be addressed.<sup>18</sup>

The **NDIS Market Enablement Framework** describes the NDIA's market stewardship role as including "monitoring, evaluation, oversight and, where necessary, intervention. The vision of the NDIS is to build a competitive and contestable marketplace that is flexible and responds to the choices and preferences of NDIS participants".<sup>19</sup>

To ensure the NDIS remains responsive to and appropriate for people with disability, their families and carers living in rural and remote areas the NDIA should consider renewing the **Rural and Remote Strategy** 2016-2019. This will assist to guide providers looking to expand services in these areas.

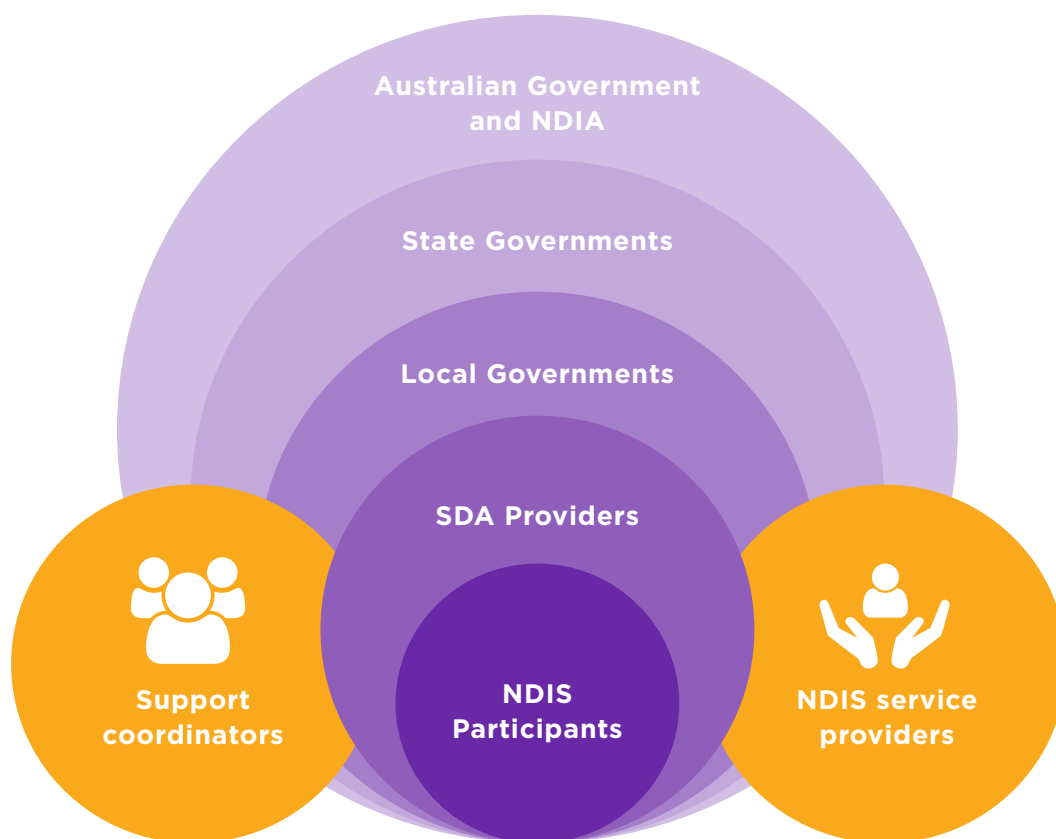
SDA providers require reliable data from the NDIA to respond to thin and underdeveloped markets to make informed SDA supply decisions. To assist with activating the demand of SDA, the state and territory governments must work together with the NDIA to provide active market stewardship.

In order for NDIS participants to achieve their goals and live ordinary lives in the community, collaboration between state and territory governments, providing mainstream services like education, health and housing and the NDIA is vital. Further investment from states and territories is required to create education and job opportunities for the local community, funding this will help to increase local workforce in rural and remote areas.

<sup>18</sup> <https://www.csi.edu.au/research/project/market-stewardship-actions-ndis-new-report/>

<sup>19</sup> National Disability Insurance Scheme Market Enablement Framework October 2018. Pg4





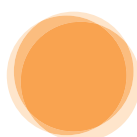
## What does success look like?

A successful SDA market in rural and remote areas of Queensland and Western Australia will mean NDIS participants have choice and control over where and how they live. NDIS participants will be able to choose from a range of SDA providers and services, offering various innovative housing models. This will allow the freedom and ability to move house and change NDIS service providers as circumstances in their lives change. The development and design of new SDA will be informed by demand and co-design, truly understanding participants' needs and preferences.

SDA eligible participants will no longer need to live in inappropriate arrangements like other government housing, hospitals or RAC. A successful SDA market in rural and remote areas will mean SDA providers are informed by reliable demand data, including building type, design requirements and location, to have confidence and certainty that their developments will be tenanted and the pricing framework will reflect the actual costs of delivering SDA.

A flourishing SDA market in rural and remote areas requires communities working together to support NDIS participants, creating innovative ways to provide SDA in their unique community setting. Successful SDA in a rural and remote setting requires community participation and the collaboration of SDA and NDIS service providers, changing and adapting to the ongoing needs of people with disability. This will create new education and employment opportunities in the disability sector and building sector.

The NDIS is the biggest social reform since Medicare and SDA has the potential to make a significant impact on the lives of people who have a history of inadequate housing outcomes. Everyone has an important role to play in the success of SDA.



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