**Special Series: Living with COVID**

**Interview with Acting NDIS Quality and Safeguards Commissioner, Samantha Taylor**

**George Taleporos:** Hi and welcome to Reasonable and Necessary, Australia’s premier podcast series, on everything you’ve ever wanted to know about the National Disability Insurance Scheme, brought to you by the Summer Foundation. I’m your host Dr George Taleporos and in this episode of our special series on COVID-19 we talk to the acting NDIS Commissioner, Samantha Taylor, about mandatory vaccination and the role of disability service providers in supporting us to stay safe.

Hi Sam. Thank you for joining us.

**Sam Taylor:** Hiya George. It’s great to be here with you again.

**George Taleporos:** I’m going to start with a really important question, and that’s about the vaccination roll out for people with disabilities. How are you feeling about how we’ve done, considering that NDIS participants are still falling behind compared to the general population?

**Sam Taylor:** Oh, George, look, that is a really good question and a really controversial one. I don’t want to – the Royal Commission’s already given its view about how we’ve gone with the vaccination program for people with disability, and of course they’ve heard directly from people with disability about their feelings about how that’s gone. And so I’m not going to add to that. I think we should be in a much better position than we are now. I think that people with disability have, once again, come out and asked for the support they need to engage with the vaccination program. Providers in the main have supported them where they’ve needed that assistance. But we are behind in a number of areas. And we’ve been working so hard to try and make up the pace.

**George Taleporos:** Why do you think we’re behind?

**Sam Taylor:** Well, we’re a little bit behind the general -

**George Taleporos:** No, why. Why do you think we’re behind?

**Sam Taylor:** I think we’re behind because I think the places that people – that have been set up for people to access the vaccination, the general accessibility of those places, are not always what’s going to suit people with disability. I reflect on my own experience of living in Sydney and going out and making – trying to make a booking myself to go and have a vaccination. It was hard enough for me to do that. And then going to a really big area that had thousands of people all lining up, and waiting to be vaccinated for a really long time. Well, those 2 things – the booking system, and the need to wait in such a big crowd, that’s not going to work for every person. People are going to be nervous. They’re going to need help.

They might just be really hesitant about going out into the community with that number of people in the middle of a pandemic, for goodness’ sake, where they feel vulnerable. So I just don’t think that the things that have been set up for the general population, in vaccination, has necessarily been designed in a way that’s going to meet the needs of people with disability. I think there’s been some in-roads into that, but there’s more to be done. And there are new and innovative ways of supporting people to be vaccinated that have popped up over the last few months, that are really great.

Like some of the very specific vaccination centres that are conducive to people with autism, for example. That’s fantastic. But they certainly weren’t part of the original roll-out, and we probably should have thought better about some of the more accessible ways of supporting people to access their vaccination.

**George Taleporos:** Do you think that support providers are doing enough?

**Sam Taylor:** Look, I think the large providers, a number of providers around the country, have been absolutely doing more than their fair share. We’ve had large providers who have set up vaccination hubs. They’ve made sure that the vaccination has been offered to people that they support. And they’ve done a terrific job with that. Absolutely terrific. I think there are some providers – many providers who might not really have understood how powerful their support for a person might be in helping them to be vaccinated. So we’ve done a lot of work in reminding providers just what they can do. That they can help people to make a booking.

They can help them to go along to that appointment. They can help them go to their GP, if they’re worried or they feel like they need more information about how their vaccine affects them. And providers, I think, have started to take up that call, where maybe they don’t have a very ongoing relationship with participants in the NDIS, and they understand that they’ve got a role now. And we’re certainly reminding them of it. They can do more. There’s no doubt. They’re trusted people in people’s lives, and they should be providing them with support when they ask for it and need it.

**George Taleporos:** Yes, absolutely. I want to talk to you about the vaccination of support workers. Obviously we need those numbers to be very high, especially when the numbers of NDIS participants are low. How are you feeling about the mandatory vaccination? And are you concerned about how that’s going to work?

**Sam Taylor:** I am very pleased that National Cabinet said, some months ago, that they thought that mandatory vaccination for support workers would be necessary, and the Commission has been doing a lot of work with Health, and with states and territories, to help them set the parameters for mandating vaccinations for workers working for people with disability. Particularly workers that are working really closely and intimately with people. I think it’s really necessary. People are getting support. They expect, when they’re receiving that support, to not be exposed to things that are going to harm them.

And if being vaccinated – if a support worker, being vaccinated, on top of good quality infection control, well done infection control, gives an added layer of protection for a person who relies on that worker for their support, I think that that is a good thing. And if the health advice is that that creates that added layer of protection and safety for a person with disability, then I welcome those health orders. And we will certainly be looking to monitor providers’ compliance with them. It’s really important. If the health advice is that this will make a difference to people’s safety, then absolutely, mandatory vaccination should be something that we welcome.

**George Taleporos:** How do you monitor compliance?

**Sam Taylor:** Well, we’ll be asking providers. Because of course, at the end of the day, it’s the employer’s obligation to make sure that the people that they employ and send out into the world to provide supports actually have been vaccinated. So we’ll be asking providers to give us access to their records, to help us be assured that they are actually vaccinating – well, that their workers are in fact vaccinated, and they’ve got records of those vaccinations. Of course we won’t ask for private information. We’ll ask for evidence that they’re maintaining those records.

And it’ll be included as part of their cyclical audits about how they’re maintaining those records, and are making sure that they’re assuring themselves that the people who work for them, and are delivering the support – the kind of supports that are covered by a mandatory requirement to be vaccinated, are in fact vaccinated. It’s absolutely their obligation.

**George Taleporos:** They’ve said now about people with disabilities who want to make sure that their workers are vaccinated, and some people might be self-managing or directly employing. Are you allowed to ask your worker if they’ve been vaccinated?

**Sam Taylor:** Yeah, of course. If you're employing someone, and you want to be sure that they’ve been vaccinated, then you should be asking them for proof. I do, George. Whenever anyone comes into my home, I want to know. I want them to show me proof of vaccination. It’s my right as a citizen. It’s the right of people with disability as citizens to ask people that they’re relying on, people coming into their own homes, to show them that they have that vaccination, if that’s what you want, and if that’s what you're telling people that they’re signing up for when they’re delivering supports to you. If they refuse – they can refuse to provide that. And you might then make a decision that they’re not going to be supporting you anymore, if they won’t give you that evidence.

**George Taleporos:** Yeah. I think it’s important that people know that they can ask that for that information. And also that they are able to have that conversation. I had to have that conversation a few weeks ago. It was actually after months and months and months of asking someone to get vaccinated. And it got to the point where I said, “I can’t have you on my team anymore until you do.” And that’s been really hard. It’s not easy to have those conversations.

**Sam Taylor:** It’s not. It’s not. I agree. It’s not an easy conversation, and – because some people have really incredibly strong views about not being vaccinated, for whatever reason. And they have a right to those views, and they have, of course, a right not to be vaccinated. But where it’s your decision, and you want to make sure that people who are coming into your house and providing you with support, and you want them to be vaccinated, that is your right. And people need to weigh up what is more important to them in that situation. Is it more important for them to not be vaccinated? Or is it more important for them to continue to work with you, if that’s your – the choice; the decision to be made?

**George Taleporos:** That’s good advice. Are you concerned at all about the impact that mandatory vaccination is going to have on the availability of support workers?

**Sam Taylor:** Look, George, it’s going to be hard to know. But really, the indications have been pretty good out of the mandatory vaccination examples that we’ve had. So quite a few months ago now, New South Wales put in place mandatory vaccination requirements for people in the local government areas of concern. And we didn’t have any catastrophic failures in the workforce. Providers monitored that really closely. Certainly there were some people that said that they wouldn’t do it, but we have seen an exponential increase, whenever that’s been introduced, as I know it has in Victoria, of rates of vaccination of support workers.

I think once this becomes a national expectation, and as each state and territory brings this in and we’re able to talk about this as something that is not going away, it’s going to be an ongoing obligation for people. And as people are settling into the idea of what opening up means, and what benefits there are in vaccination, I think that that will become even more – even easier as the whole of the population embraces the benefits of vaccination. But certainly we didn’t see the issues in New South Wales. And we haven’t seen them in Victoria, in terms of workforce failures coming out of that mandatory requirement.

**George Taleporos:** Yeah. I think that’s been very, very positive, that the take up has increased as a result of the mandatory orders. I do feel concerned, though, if there are people who might be left without support.

**Sam Taylor:** And, look, I’ve had a couple of people contact me, actually, to say, “what do I do? I’m a self-managing participant, and a couple of my support workers are saying that they’re not going to be vaccinated. It’s going to take me months to try and find replacements. The mandate is coming in. Can they continue to work for me while – when the mandate’s in? What am I going to do?” And it is going to be quite difficult for people who – where people do say, “no, I’m not going to continue to work with you if you require me to be vaccinated.” We are putting in place as many supports as we possibly can. Mostly the NDIA is doing that to make sure that, if people are worried that they’re not going to have the right support, that there are people who can assist in fast-tracking, bringing on other people.

That is going to be a particular issue though for people who are self-managed, where, as you've described yourself, support workers are deciding that they can’t continue, and you've got to mandate date looming, and you've got to try and find someone else to cover those shifts. That is going to be tricky. There’s no doubt about it. There are – all the public health orders though do give exemption provisions for those dates. And where you are self-managing, I have no doubt that there would be opportunities to seek exemptions for short periods of time to maintain workers, if you weren’t able to replace them. I couldn’t guarantee that, but I do know they’ve all got exemption provisions, which are about trying to be as flexible as possible for people.

We’ve been working really closely with providers, where – with the NDIA as well, where we’re monitoring that take up rate of vaccination, and where providers are looking like there might be some issues. Working with them around making sure those shifts are filled, so people aren’t left without support.

**George Taleporos:** I think that’s very important. You have been in the thick of it through the last 18 months, particularly now that you've stepped into the role as the acting NDIS commissioner, and obviously before then as the registrar, what lessons have you learnt from the last 18 months? Can you share with us some of your words of wisdom around what you've -

**Sam Taylor:** Oh my goodness!

**George Taleporos:** And I’m interested, because the pandemic has been something that we all didn’t really expect. And we’ve all been trying our best to navigate our way through. But you’ve had a helicopter view of what’s been going on. What have you learnt? And what can we do better?

**Sam Taylor:** I’m going to start with something a little bit controversial. But I know you don’t mind a bit of controversy, George!

**George Taleporos:** No, you know I love it!

**Sam Taylor:** <laughs> Look, I am shocked when I go on – I do a number of speaking engagements, and I do a number of webinars; a lot of them with providers. So I talk a lot about what the Commission’s doing, and what we expect of them through the pandemic. And I talk about how they can’t underestimate just how much of an impact the societal changes, and the fact that this is a pandemic that has a characteristic that could be incredibly detrimental for so many people with disability. But that they can’t underestimate the anxiety, and the stress, and the difficulty that people with disability have faced throughout this whole thing. And that that is different to the rest of the population.

I continue to be shocked by the questions that I get in those forums, and disappointed that I have to constantly say, “but it’s a person’s right to make a decision about their support. A person with disability has a right to feel protected and safe, and you have a responsibility as a provider to make sure that you're doing everything – absolutely everything – in your power to make sure that person understands what you're doing to keep them safe from this thing.” I just – it’s like I’ve got to answer questions that – well, often I respond by saying, “you know people with disability are citizens of this country. They’re citizens in this community. And they have these added complexities in a pandemic, which you need to think deeply about as the provider of really intimate supports to them.”

And it just – the lesson is that we’ve still got a really, really long way to go with the principles that are in the NDIS around people with disability having rights, and what the purpose of the supports in the NDIS are around social and economic participation. And the roles of providers in facilitating that for people. I just – I told you it’d be a little bit controversial. But I’m just really disappointed. And I know that it’s stuff, George, that you would see and live every day, a lot of your listeners would see and live every day. But I just am – I just continue to be naively shocked, I think, by the level of such basic things that I need to continue to explain to providers who are in very senior positions, often, in organisations, so far, into the NDIS, in 2021, and in the middle of a pandemic.

The lesson is that we need to keep on, and we can never forget, the need to keep on reminding providers and people who work in this sector about what the NDIS is, what the convention is, and that the main thing here is the rights of the person with disability. And their job is to make sure that they’re acting on people – supporting people to exercise those rights.

**George Taleporos:** I think then those basic rights is the right to life, right?

**Sam Taylor:** Yep, yep.

**George Taleporos:** And that’s what’s been put at risk during this pandemic. And I’m very pleased that you're out there telling providers that they should do better and that they need – and you acknowledge that they’ve done some good work, and absolutely, some of them have. But those who are not quite there yet, yeah, they absolutely need to step up.

**Sam Taylor:** Yep. Yep. Look, I think – I could talk forever about lessons. I think we all started in this thing, thinking that it was going to be a much shorter event than it was. I think, intellectually, people didn’t really grasp what the effect of a 100-year pandemic event was. It’s hard to imagine how much your life would change. I guess I think one of the big lessons, and actually one of the big opportunities that’s come out of this, is such a strong connection between the health system and the disability system. And really breaking down a lot of the barriers that we’ve all – when you've worked and lived in the disability sector for so long, there’s been so many barriers over so many years to, “well, that’s a disability issue and that’s a health issue, and they’ll never meet.”

But I think through this we’ve really made some in-roads. And the national roadmap on health for people with intellectual disability is a great example of what can flourish when you get that acknowledgement about the importance of health systems responding well to the needs of people with disability. And I think we’ve had some real in-roads in recognition in the health system around the very particular needs of people with disability through this event. And George, I have to say, in no small part down to you and your colleagues in really pushing health to be responsive to the needs of people with disability, and to recognise the very particular needs.

I think you and your colleagues have done a spectacular job in making the deficiencies in the health system really, really clear. And the urgency in resolving those through the pandemic -

**George Taleporos:** I often say to people that – I often say to people the most terrifying aspect of the pandemic is that it’s meant that people have had to think about, “what happens to me if I’m in hospital, and I can’t have support workers who know what I need day-to-day? It takes months for people to learn how to support me.” And I really think that the health system and the NDIS, you're right, have started a really important conversation, but, boy, do we have a long way to go! [But it’s a start]

**Sam Taylor:** Yes, we do. But the conversation’s happening.

**George Taleporos:** [It’s started] Yes.

**Sam Taylor:** Would you have ever thought that you would be in fortnightly meetings with the Department of Health, talking about the needs of people with disability – what, even 3 years ago? It just wouldn’t have happened. So I think that it’s done a lot to raise that understanding. But, gee, yeah, a long way to go. Got to get into those hospital doors and create the change inside.

**George Taleporos:** We sure do. Samantha Taylor, acting NDIS commissioner, thank you for joining me.

**Sam Taylor:** Thank you George. It’s always a pleasure. And keep on doing what you're doing. It makes a huge difference.

**George Taleporos:** Thank you. You too. Bye.

**Sam Taylor:** Bye.

That’s all we have time for on today’s episode of Reasonable & Necessary, brough to you by the Summer Foundation. To be notified of future episodes, don’t forget to hit the subscribe button and the notification bell. Thanks for watching and until next time, stay well and reasonable.