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The information service is designed to provide information to the busy person who does not always have the time to seek out various material for themselves. However even an organisation like ours is constantly on the lookout for new material. Therefore if you have anything you would like to share on a wider scale we would only be too happy to distribute it on your behalf.

If the material you wish to distribute is of an advertising nature then a small fee will be charged to cover our photocopying and handling expenses. Costs will be made available on request by telephoning Guna Adens at our office on 02 6296 4400, faxing 02 6231 7319 or e-mail guna.adens@ncid.org.au
Examination of the communication interface between students with severe to profound and multiple intellectual disability and educational staff during structured teaching sessions

Background  Individuals with severe to profound and multiple intellectual disability (S-PMID) tend to function at the earlier stages of communication development. Variable and highly individual means of communicating may present challenges to the adults providing support in everyday life. The current study aimed to examine the communication interface between students with S-PMID and educational staff.

Methods  An in-depth, observational study of dyadic interaction in a class within the secondary part of a special school was conducted. The designated educational level was Key Stage 3 under the National Curriculum of England, which is typically for children from age 11 to 14 years attending a state school. There were four student-teacher dyads in the class. The students had multiple impairments with severely limited communication skills. Video capture of dyadic interaction was conducted during five English lessons and sampled to 2.5 min per dyad per lesson. The video footage was transcribed into standard orthography, detailing the vocal and non-vocal aspects. A coding framework guided by the principles of structural-functional linguistics was used to determine the nature of dyadic interaction, comprising linguistic moves, functions and communicative modalities. The relative contributions of student and teacher to the interaction were examined.

Results  Significant differences were found between the students and educational staff on the majority of the measures. The teachers dominated the interaction, occupying significantly more turns than the students. Teacher turns contained significantly more initiations and follow-up moves than the students, who used more response moves. Teacher communication mainly served the functions of requesting and information giving. Feedback and scripted functions were also significantly greater among teacher turns, with only limited occurrence among the students. Self- or shared-expression was greatest among the students. The modalities of speech, touch, singing and objects were used by the teachers for the purpose of communication, whereas vocalization and gesture were used by the students.

Conclusion  Despite differences in the availability of communication skills, both student and teacher were able to make their respective contributions to the interaction during classroom activity. Features of the student-teacher interface retained critical features seen in studies of more able individuals with intellectual disability. Scaffolding provided by teachers appears to be relevant to the communicative contributions of individuals functioning at the earliest stages of communication. The coding framework based on structural-functional linguistics provides some new potential for examining and enhancing the communication interface between individuals with S-PMID and the people who support them.

Urban-rural differences in the nature and prevalence of mental ill-health in adults with intellectual disabilities

Background  In the general population there are statistically significant urban-rural differences in the rate...
of common mental disorders. In people with intellectual disability (ID) no study has attempted to address this issue.

**Aims**  
To compare the prevalence of mental illness, autism spectrum disorder (ASD) and behavior disorder in people with ID living in urban areas with those living in rural areas.

**Methods**  
Cross-sectional study of 2713 individuals registered with an ID service. Participants were assigned to urban r rural groups using the Department for Environment Food and Rural Affairs rural/urban local authority classification for their district. The main outcome variable was a clinical diagnosis of mental illness, ASD and behavior disorder. Differences between diagnoses of mental illness in urban and rural areas were evaluated using the chi-squared test for the difference in two independent proportions.

**Results**  
No differences were observed between gender, age and level of ID of service users based on their place of residence. But more people from an ethnic minority background were living in urban areas than rural areas. No differences were observed in the overall prevalence of mental illness by place of residence. However, the results showed that ASD was more common in people living in rural areas.

**Conclusions:**  
We found these results surprising and at odds with the majority of studies carried out in the general population and propose several reasons for the differences found. We believe that the results and further studies in this area will help inform health service provision for those with ID who live in different geographical areas.

**Students’ Attitudes towards Peers with Disabilities: A review of the literature**  

The trend towards inclusive education has led to an increase of studies focusing on peer attitudes. This review study presents an overview of studies describing attitudes of students, variables relating to students’ attitudes, and the relationship between students’ attitudes and the social participation of peers with disabilities. Based on a literature search we selected 20 studies that were conducted in seven different countries. Outcomes were described in terms of negative, neutral or positive according to three attitude components (cognitive, affective and behavioural). The results show that students generally hold neutral attitudes towards peers with disabilities. Several variables were found relating to their attitudes (i.e., gender, age, experience with and knowledge about disabilities, parental influence). Moreover, the results indicate that attitudes of peers relate to the social participation of students with disabilities. Implications of the findings we discussed in terms of promoting positive attitudes of peers.

**A descriptive examination of the types of relationships formed between children with developmental disability and their closest peers in inclusive school settings**  

**Background**  
One of the most commonly cited rationales for inclusive education is to enable the development of quality relationships with typically developing peers. Relatively few researchers have examined the features of the range of relationships that children with developmental disability form in inclusive school settings.

**Method**  
Interviews were conducted with 25 children with developmental disability, aged 5 and 12 years, their 3 closest peers, and parents and teachers to examine 6 types of relationships.

**Results**  
Behaviours associated with general friendship and acquaintance were the most commonly reported. Few dyads reported high rates of behavior associated with special treatment, helping, ignoring, or intimate best friend relationships.

**Conclusions**  
The relationships of the majority of dyads were characterized by friendship or acceptance, but evidence of more intimate relationships was limited. An important direction for future research is the examination of ways to encourage more intimate relationships.
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Better Start for Children with Disability initiative
Information for Parents

Are you looking for a Better Start Early Intervention Service Provider

- What does the Better Start initiative include?
- Who is eligible to receive support under Better Start?
- How can I register my child?
- More information about Early Intervention Funding
- Fact sheets and further information

What does the Better Start initiative include?

The Better Start for Children with Disability (Better Start) initiative includes:

- up to $12,000 in funding for early intervention services and treatments for eligible children
- additional assistance for eligible children who live in outer-regional, rural or remote locations to help with the costs of accessing services
- a Medicare item for the development of a treatment and management plan for eligible children up to the age of 13
- Medicare items for up to four allied health diagnostic services, the results of which contribute to the development of the treatment and management plan, and
- Medicare items for up to 20 relevant allied health services in total for each eligible child up to the age of 15 provided the treatment and management plan is in place before the age of 13.

More information on early intervention services is available below.

Who is eligible to receive support under Better Start?

Eligible children who are aged under six years and have been diagnosed with:

- Down syndrome
- cerebral palsy
- Fragile X syndrome, or
- a moderate or greater vision or hearing impairment, including deafblindness.
From 1 January 2013, Better Start has been expanded to include children diagnosed with:

- Prader Willi syndrome
- Williams syndrome
- Angelman syndrome
- Kabuki syndrome
- Smith-Magenis syndrome
- CHARGE syndrome
- Cornelia de Lange syndrome
- ‘Cri du Chat syndrome or
- microcephaly.

Children in this group who are under six (or turn six) on 1 January 2013 are eligible to register for Better Start.

Children with one of the listed disabilities are also able to access Medicare rebates under Better Start.

How can I register my child?

Parents or carers of eligible children will need to register their child for the Better Start early intervention funding before the child turns six years of age.

Registration of eligible children is managed by the dedicated Registration and Information Service (RIS), which is operated by Carers Australia.

To register a child for the Better Start early intervention funding parents and carers must call the RIS on 1800 242 636.

To successfully register a child for the early intervention funding, parents or carers must be able to provide the RIS with evidence of:

- the child’s age (e.g. the child’s birth certificate or passport)
- the child’s residential address (e.g. a recent utilities bill or rates notice)
- the child’s diagnosis (details provided via the link below)
- residential status (if applicable- details provided via the link below), and
- the child's Centrelink generated Customer Reference Number (CRN).

The RIS employs suitably qualified and experienced front line staff to provide assistance to eligible children, their parents and carers, including those living in regional and remote areas and those from Indigenous or culturally and linguistically diverse (CALD) backgrounds. The RIS are able to assist with:
More information about early intervention funding

Eligible children can be registered to access early intervention funding of up to $12,000 (up to a maximum of $6,000 in any one financial year).

The increased access to targeted early intervention in the pre-school years is intended to complement existing Commonwealth and State and Territory government services and to assist these children to have the best possible preparation for the transition to school.

The funding can be used to pay for early intervention services provided by a range of early intervention professionals who are members of the Better Start Early Intervention Service Provider Panel.

The professionals on the panel include:

- speech pathologists,
- audiologists,
- occupational therapists,
- physiotherapists,
- psychologists,
- orthoptists,
- teachers of the deaf,
- optometrists and
- others.

Eligible children must be registered before their sixth birthday and families will have until their child turns seven to use the early intervention funding.

Can some of the funding be used to buy items for my child?

Up to 35% of a child’s early intervention funding can be used for the purchase of resources. This means that up to $4,200 in total out of the $12,000 can be used for resources, up to a total of $2,100 in any one financial year.

Resources that are purchased with Better Start funds must:
• be recommended by the child’s Better Start service provider, and
• be directly linked with the early intervention services being delivered to the child, and/or
• provide support for the delivery of interventions at home.
If deemed suitable by the child’s Better Start service provider, parents may use some of their child’s resource funding to pay for accredited Auslan courses delivered by a registered training organisation. Certificates II and III level courses for parents are in scope under Better Start.

Please note: the Better Start resources component of the early intervention funding cannot be used to pay for

• items or interventions that are out of scope for Better Start, such as swimming lessons.
• items or services that are provided through other schemes or funding arrangements, such as incontinence aids or reading glasses.

What support is there for those families who find it difficult to access early intervention services?
Families who reside in an outer regional or remote area may be eligible for a one-off payment of $2,000 per eligible child, to cover the additional expenses associated with accessing early intervention services. Eligibility for this payment is based on the Accessibility/Remoteness Index of Australia + (ARIA+) classification.

In exceptional circumstances, families who experience significant and multiple barriers to accessing early intervention services, including location, financial and personal circumstances may also be eligible for the Access Payment. The information guide and application form providing further details of exceptional circumstances are available below and from the Registration and Information Service.

Please note that any exceptional circumstances claims need to be submitted via the Registration and Information Service (1800 242 636).
The information guide and application form.

Fact sheets and further information

• Parent and Carer Brochure
• Parent and Carer Fact Sheet
• Parent and carer fact sheets in a range of other languages are available elsewhere on this site
Other contacts
If you require further information about the Better Start initiative, you are welcome to contact the Better Start Helpline on **1800 778 581**. This helpline operates from 9:30am – 5:00pm Monday to Fridays (excluding public holidays).

Specific enquiries can also be emailed to **Better.Start@fahcsia.gov.au**

Other support
Please note that Better Start is not intended to replace or reduce disability support services that are provided in each jurisdiction.

State and Territory governments are the main providers of specialist disability services, including early intervention services for children with disability. Families and carers of children with disability are encouraged to contact their relevant State or Territory government disability service for further information about the types of assistance to which they may be entitled.

**Victoria**
Call Disability Services (Victorian Government) on 1800 783 783

**New South Wales**
Call Ageing, Disability and Home Care (New South Wales Government) on 02 8270 2000

**South Australia**
Call Community and Home Support SA – Disability Services on 1300 786 117

**Queensland**
Call Disability and Community Care Services (Queensland Government) on 1800 177 120

**Western Australia**
Call Disability WA (Western Australian Government) on 1800 998 214

**Australian Capital Territory**
Call Disability ACT (Australian Capital Territory Government) on 133 427

**Northern Territory**
Call The Office of Disability (Northern Territory Government) on 1800 139 656
Tasmania

Call Disability and Community Services (Tasmanian Government) on 1300 135 513
New job service to open in Frankston and Mornington Peninsula for people with disabilities

Herald Sun
Frankston Standard Leader
January 19, 2013

A NEW employment service will be operational from March, helping people with disabilities living in Frankston and the Mornington Peninsula find work.

Training and employment will be available through a partnership between experienced service providers Marillac and Job Futures Ltd.

The organisations will bring their combined experience to deliver a new Disability Employment Service, funded by the Federal Government through the Department of Education, Employment and Workplace Relations.

Job Futures and Marillac will work closely with providers of disability employment services in the region, and with employees and employers, to offer new opportunities.

Marillac's general manager services Anne Bavington said: "We really want to highlight the mutual benefits and make sure people with disabilities and employers feel supported and motivated to develop lasting working arrangements."

The service will focus on the strengths people with disabilities can bring to a workplace.

Details: email info@marillac.com.au or phone 9591 6400.
Disability rules should be stricter to ensure equity for all students

Date
January 25, 2013

Opinion

EDITORIAL

Education and equality for disabled students ... more support needed.

EVERY parent wants the best for their child. Where rules such as the disability provisions for NSW school exams aim to help needy students, parents and schools are entitled to apply.

Rather than drag down those who do, public policy should aim to make the rules clear, medically sound and fair. Every child deserves the same, higher level of pastoral care.

But the NSW disability provisions are delivering skewed outcomes.

When the O'Farrell government receives a report on the issue from the NSW Ombudsman in the next few weeks, it must commit to a thorough independent review and overhaul of the rules. It should also embrace the Gonski reforms to help improve education for all disabled children.

The disability provisions offer special arrangements for those who could otherwise not make a fair attempt at doing their best in the exam room. They cover intellectual, psychiatric, sensory, neurological and learning difficulties. Separate illness/misadventure rules cover migraine, asthma attacks, illness and accidents.

A total of 5464 Higher School Certificate candidates sought to use the disability provisions in 2012. More than one in 10 from private schools applied, almost twice the rate of government schools. One in three at some independent schools applied. There is nothing wrong with that. Schools that offer pastoral care and enrol children with special needs deserve support. Many with the most applicants do very good work. And when events such as family tragedy occur, the rules must help.

But the rules must not work against other needy groups. The current process often requires expert medical reports, thereby locking in the inequity of access to healthcare due to income. The criteria are loose enough to cover conditions not regarded elsewhere as a disability. They
fail to counter the incentive to over-medicalise student conditions, be it deliberate or not. They also benefit students at well-resourced schools while others - public and private - are overwhelmed.

The Board of Studies oversees a panel that has fully or partly approved more than 93 per cent of applications. The most common help is five minutes extra rest time per hour of exam. This helps students who have "demonstrated pain, anxiety or concentration issues who have difficulty completing the exam without a break".

One problem arises when parents do not apply for help. In 2011 the board asked two retired school principals, Damian Ellis and Beverley Johnson, to review the provisions. They concluded "the better informed the parent the more likely they are to apply". They found shame was behind some reluctance to apply, along with "the inability of parents or schools to pay for specialist reports disadvantages students". Their recommendation, that the board review the need for medical reports, falls well short.

The inequity problem is most pressing for psychological conditions because poor students have less access to mental healthcare, while paediatricians fear over-diagnosis of wealthier ones. Ellis and Johnson's answer again offered little to limit inequity or overreach. Their report said schools they had asked believed the board processes "were so stringent" as to make rorting unlikely. Professional bodies "would never collude to support unwarranted applications". Yet fewer than 5 per cent of the 60-plus schools Ellis and Johnson consulted had the top rates of applying for the provisions. The Ombudsman has rightly consulted schools "with high and low numbers of applications and different social backgrounds".

The Herald believes criteria should be stricter and applications subject to independent medical review. The criteria can be tailored from workers' compensation schedules. Sound process can help identify more needy cases and guard against abuse. More disability cases will emerge as a result, stretching under-resourced schools. The Gonski report offers hope there as it promises individualised funding based on disability, not school or financial advantage.

Bullies win the day again!

Attorney-General must not be intimidated by the attack on vulnerable people by elites within society

With the announcement today that the Attorney-General, Nicola Roxon, is considering removing or making major changes to section 19(2)(b) of the consolidated Bill to replace the 5 discrimination Acts, including the Disability Discrimination Act, the powerful in society have demonstrated that bullies exist at all levels of the Australian community.

With respect, Justices Callinan and Spigelman, Professor Triggs and all sections of the media will never be subjected to “conduct that offends, insults or intimidates”; and if they are, they have the social and financial resources to seek redress. People with intellectual disability who suffer insults and intimidation, some every day, do not!

The constant attacks on the Attorney-General by those who have access to the media is surely an attempt to intimidate her into backing down. Why?

Why is it OK to offend, insult and intimidate a person with intellectual disability, people who have no power in Australian Society and who have no access to the media to have their hurt addressed?

To hide behind the concept of ‘free speech’ to protect people who will intimidate, insult and offend people with intellectual disability is a disgrace and an insult.

People with intellectual disability deserve better. People with intellectual disability expect the more privileged members of our society to stand up for their rights, to ensure that all people have access to redress; the right of redress is not the sole preserve of those who are wealthy and socially well connected.

Section 19(2)(b) must remain for people with intellectual disability. Without this section people with intellectual disability will remain vulnerable to bullying, intimidation and insults; people with intellectual disability will remain powerless to confront the hurt they frequently suffer.

People with intellectual disability will be speaking about their experiences of being intimidated and insulted at the Having a Say Conference being held in Geelong from 6 - 8 February: www.valid.org.au

Contact:
Mark Pattison
Executive Director
0407 406 647

Judy Huett
Chairperson
Our Voice Committee
Aged care, disability services cut

February 2, 2013

Christopher Knaus
Police reporter for The Canberra Times.

Queanbeyan Mayor Tim Overall. Photo: David Butler
Queanbeyan City Council will cut its provision of aged care, disability and respite services next year, as it tries to curb the soaring costs of "non-core" local government services.

Queanbeyan mayor Tim Overall has foreshadowed some backlash from 1400 carers and clients affected by the decision, despite his assurances the move will not create any disadvantage, disruption, or gap in service delivery.

The council announced the plan on Friday, saying its hand was forced by "unsustainable" costs, which have risen to $1.8 million a year.

It will look to the private sector to take over responsibility for the community services, and is working with state and Commonwealth funding bodies to find suitable providers.

The decision leaves 15 full-time staff, 17 casual workers and 27 volunteers in limbo, although Mr Overall said he would fight to ensure they were re-employed by the companies that take over.

"We can only do our best and make those representations and work in close co-operation with those providers," Mr Overall said.

"We'll be doing our best to secure their ongoing employment," he said.

Mr Overall said the changes were likely to cause some frustration for carers and clients.

"We expect that there will be concerns, change is always difficult for many in our community to accept."

The council approached federal and state funding bodies, and the relevant ministers, for extra funding, but was told none was available.

Mr Overall rejected any link between high-cost capital projects, notably the $4.45 million revamping of Crawford Street in Queanbeyan"s business area, and the lack of grant funding available for community services.

He said he was aware of several other councils in NSW that were making similar moves away from providing community services.
Concerns over disability draft law

Canberra Times
February 11, 2013
Jane Lee

The agency given the job of launching the National Disability Insurance Scheme (NDIS) will not be allowed to fund legal help for people who want to review its decisions, under a draft law.

The draft National Disability Insurance Scheme Bill allows its launch transition agency to give prospective and existing participants of the scheme financial support. But it prohibits the agency from funding legal assistance for challenging its decisions about whether people are eligible for the scheme, and the level of funding they are entitled to.

Victoria Legal Aid's director of civil justice access and equity, Kristen Hilton, said people with a disability were twice as likely to experience legal problems as those without one.

"We think that recognising [the importance of] legal assistance and the ability to review decisions, so that the scheme is holding up a very high standard of transparent and fair decision-making, is crucial in the early stages of the establishment of the agency," she said.

Ms Hilton said the prohibition should be removed and replaced with a commitment to refer people with disabilities to legal support services early on. "There is a real opportunity for the NDIS to be a one-stop shop in making referrals to relevant agencies which can assist people with disabilities. Where they can get early assistance, it's actually going to save money down the line in terms of those issues being resolved more quickly."

Victoria Legal Aid is undergoing a funding crisis, which it expects will cause its budget to blow out more than $3.1 million this financial year.

A spokeswoman for Disability Reform Minister Jenny Macklin said people with disabilities would be able to request reviews of decisions regarding eligibility and entitlement. "There is a detailed merits review process outlined in the bill," she said. "The NDIS is not intended to replace existing systems such as the legal or medical systems. Funding for legal aid is already provided through other channels."
The chief executive of the Australian Federation of Disability Organisations, Lesley Hall, said the government should sufficiently fund legal aid services to help people with disabilities generally.

Levy or GST rise could fund disability insurance, says lawyers' group

February 19, 2013
Canberra Times

Mark Kenny
Senior political correspondent

A lawyer's body has warned of a funding risk to the national disability insurance scheme.

Australia's Goods and Services Tax could be broadened or a Medicare-style levy considered to pay for the National Disability Insurance Scheme, a top lawyers' body believes.
The Australian Lawyers Alliance says Labor's proposed $8 billion-plus NDIS is a necessary social reform but risks becoming financially unsustainable over the longer term unless it is both well-designed and given dedicated funding.

It also wants to see rigorous external pricing oversight, perhaps using the corporate and consumer watchdog, the ACCC, to guard against private insurers offloading risk to the public sector.

The group, which is not claiming specific economic expertise, argues the funding base of the proposed scheme must be realistically confronted because it is impossible to guarantee individual legal rights if those same rights later become hostage to limited funding.

ALA President Tony Kerin will give evidence on Tuesday to a Senate inquiry into the NDIS in Adelaide where he will argue the design and funding arrangements need to be fully worked out to ensure the integrity of the NDIS for generations to come.

He told Fairfax Media the New Zealand experience showed the scheme would be vulnerable to a constant tinkering and narrowing of entry criteria unless its future operating costs could be accurately forecast and funded.

The ALA also believes the way the scheme is being legislated is problematic.

In a letter to Prime Minister Julia Gillard before the Senate inquiry, Mr Kerin said the ALA opposed establishing it through "shell" legislation, which left major design features to be set out in rules.

"The Bill grants power for 'NDIS Rules' to be created, at any time, without any extensive parliamentary scrutiny of such rules," Mr Kerin writes in the letter obtained by Fairfax Media.

"Insufficient clarity about what support people will receive, and what 'reasonable and necessary support' truly means, is another concern.

"We believe that this is liable to change in the future, under the NDIS Rules, unless people are protected by clearly defined legislation.

"It appears the individuals' current legal rights may be suspended, or revoked, under the bill's present wording – with potential catastrophic impact for people."
The government has so far ruled out using a special levy to meet the scheme's costs, but the ALA says merely funding its operation from consolidated revenue means it will always be buffeted by competing priorities and subject to contraction.

The government has not yet quantified how much the system will cost into the future but has allocated $1 billion for five introductory sites to begin operating from July 1.

It is consulting with interested groups as it works through initial design issues and will use the Senate inquiry to help inform its final design.

GST revenue, which is raised by the Commonwealth but provided directly to the states under the terms of its inception, is expected to collect about $54 billion next financial year.

However, discussion of either increasing its 10 per cent rate or broadening its incomplete scope to include fresh food for example, has been a political no-go zone since its inception in 2000.

MORE than 1000 Victorian preschool children have been on waiting lists for early intervention services such as speech and occupational therapy for longer than three months, with some missing out altogether before they start school.

Early childhood intervention services, funded by the Victorian Education Department, are regarded as critical for children with disabilities and developmental delays to get the best possible start in life.

However, in recent years demand has increased for places due to population increases and advances in medical interventions and diagnoses. As of February 1, 1021 children had been waiting more than three months for a place, according to an Education Department spokesman.

In November last year, the state government committed $3.7 million a year for an extra 500 places to address demand across the state. "These additional 500 places will be allocated in March," the spokesman said.

The Victorian chapter of Early Childhood Intervention Australia said the extra places would reduce the waiting list significantly but would not eliminate it.

"Hundreds of Victorian families in many communities will continue to wait for support, often for extended periods," the group said in its budget submission.

Executive officer Lauren Matthews said another 500 places would be really welcome.

She said the budget submission also recommended priority be given to waiting list support, to ensure families had a point of contact for advice and to refer them to services while they were waiting for a fully funded place.

"It is unfair to expect families to languish on waiting lists at such a challenging time and at such a crucial phase of their child's
development," the submission says. "Waiting list supports have the potential to remove much of the isolation that families experience and improve community connection."

When Jennifer Andersen's son William-Lee was four she put him on a waiting list for an early intervention place at Scope disability services in Gippsland. However despite being diagnosed with a global developmental delay William-Lee missed out on a place before he started school.

Ms Andersen said William-Lee's teachers at South Gippsland Specialist School believed early intervention services, such as a speech pathologist, would have helped her son.

"I think his speech and social interaction would be a lot more advanced," she said. "You try yourself at home, but you are flying blind."

Scope chief Jennifer Fitzgerald said Scope was funded to provide 50 early childhood intervention services places in Gippsland, with the waiting list managed by the department.

Since 2004 Scope has delivered the START program, also funded by the department, which is an interim service for families waiting for a place. Ms Fitzgerald said 150 children were in the START program in 2012. Of these, 23 were in the year before being eligible for school. "Many of these children may not have received full early childhood intervention services before commencing school."

Government promises disabled will keep their pension

February 21, 2013
Canberra Times

Stephanie Peatling
Senior writer

People with disabilities will still receive the pension once the national disability insurance scheme begins, the federal government has promised.

Disability advocates have told the parliamentary inquiry examining the scheme they are concerned the government will try to recoup the cost by winding back access to income support payments. The Welfare Rights Network says the government has been unclear about whether people who will be eligible for the NDIS will still be paid the disability support pension.

"People who obtain essential supports, aids and equipment and services under the NDIS will continue to require the level of income support provided by the disability support pension, while people whose disability is such that they do not require aids or personal care, for example, will still require the financial support of the disability support pension," the organisation said in its submission to the inquiry.

In 2011 the Productivity Commission recommended that a national disability insurance scheme be created. In the same report it also recommended the redesign of the disability support pension and its eligibility criteria.

The commission recommended that the pension become a transitional payment rather than an ongoing pension.

The opposition has flagged tightening eligibility for the disability pension and is considering a separate payment for people with disabilities that are not lasting.
However, the federal government on Wednesday said it would make no further changes to the payment after changing the criteria for the welfare payment last year. A spokeswoman for the Minister for Community Services, Jenny Macklin, said the government supported the commission's recommendation that the pension remain separate to the disability insurance scheme.

"The NDIS is not intended to replace the DSP," the spokeswoman said.

Queenslanders with disabilities raised almost 400 concerns with their disability accommodation provider in the past year. Their problems included poor care resulting in bed sores, inadequate attention, and illegal videotaping which resulted in calls to police.

The Brisbane-based independent disability access organisation, Speaking Up for You, fought for 159 different people and “was able to resolve 392 issues” in 12 months, according to the group’s annual report handed down in October.

However, government workers fear these sorts of issues will arise more often if the unions are correct in their assertion that the state government plans to outsource 1000 jobs involved in the accommodation of people with disabilities.

In the annual SUFY report, president Madonna Nicoll noted a number of cases of mistreatment of people with disabilities in the past year. One included a woman named Rose.

“The service provider had videoed Rose without permission and then showed this video to various parties,” she wrote.

“SUFY found that Rose was being unlawfully chemically restrained and that the service provider had misused her money.”
The body took the complaint to police but despite the fact Rose was under 24 hour care, no staff member "could remember what happened" and "no criminal charges could be laid".

In Queensland disability accommodation is provided by both the private sector and public sector.

Private sector providers insist they abide by tight standards enforced by the state government.

At the 2012 Budget Estimates Hearings, Minister for Community Services Tracy Davis said Accommodation Support and Respite Services within her department had more than 1800 direct service delivery staff and 900 permanent residential care officers.

Outsourcing of their work, and changes to the way prisons are run, are tipped to be among the recommendations from the third Commission of Audit report, set to be handed to Treasurer Tim Nicholls on Thursday.

On Monday the state government said no decision had been made about changes to the disability housing industry in Queensland.

Opposition Leader Annastacia Palaszczuk questioned the potential impact of outsourcing the jobs.

"As a former Minister for Disability Services I know those services are among the most intensive and critical delivered by government,” Ms Palaszczuk said.

“The Premier needs to outline his plans to guarantee service standards will not fall once the services are sold off to private providers.

“He also needs to give guarantees about the jobs of those delivering the services.”