

# National Council on Intellectual Disability

## *Self Directed Support*

### *Principles & Implementation Guidelines*

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This document outlines the principles adopted by NCID for the flexible use of self-directed support by people with an intellectual disability. Key implementation guidelines needed to implement these principles are included.

Self-directed support begins with an allocation of funds to an individual, that can be used flexibly to support the person live as satisfying a life as possible. Funding is controlled by the person with a disability. If a person has limited decision making capacity, others formally responsible for their well-being will make decisions on their behalf, in consultation with the person as much as possible. When needed, support is provided by family, carers, advocates, friends and professionals.

Creative and innovative ways of meeting the person's needs and enhancing their quality of life are sought using self-directed support. Information, planning and support services need to be available as required. Possible sources of support include informal networks, community groups and the formal disability service sector. Self-directed support is an option that should be available to everyone receiving Government financial support as long as adequate supports and safeguards are in place. If the person with a disability receiving funding has reduced capacity to make decisions, the person or persons responsible need to be identified and accountable. Planning and review mechanisms are needed for all self-directed support users.

Principles underpinning self-directed support and key implementation guidelines are outlined below.

### **Principles**

Principles for the use of self-directed support have been drawn from the United Nations *Convention on the Rights of Persons with Disabilities* (2006) and the Objectives set out in the Commonwealth and State/Territory Disability Services Acts<sup>1</sup>. These principles are important because self-directed support is not just a funding mechanism. Self-directed support promotes the independence and well-being of the person concerned. The key principles for each person are:

- Respect for the inherent dignity.
- Individual autonomy and independence.
- Self-determination and choice.
- Opportunities to realise individual capacity for physical, social, emotional and intellectual development.
- Opportunities to participate in the social, economic, cultural, political and spiritual life of society.
- Adequate resources being available to meet needs.

## **Implementation guidelines**

NCID has identified the key features of self-directed support, which need to be included to ensure that the principles outlined above are enacted.

### **Support and information**

- The person with the disability is supported to make their own decisions as much as possible.
- Self-advocacy and advocacy training is available. Ongoing support is available as required by the person, their family and others who represent them to manage funding and to meet accountability requirements.
- Information is available to the person and their family and others responsible or involved in their care and well-being. Independent advice\* is provided regarding supports, resources and options available. Information and advice provided is timely and appropriate considering all communication and cultural needs.
- Support is available to the person, their family and others who represent them to be active partners with Government in developing self-directed support options.

### **Planning and review**

- Planning is based on the person's needs as well as their aspirations and goals, as much as possible, and takes into account the likely available resources.
- Planning considers all aspects of the person's life and all sources of available funding and support including informal, formal and Government sources.
- Planning is conducted in a transparent and person centred manner. Planning considers the person's rights, their well-being, opportunities available; it promotes access to community and universal services. A reasonable balance is needed between safeguarding the person's wellbeing and the right of the person to choose to participate in activities involving a degree of risk.
- Planning is conducted with an independent facilitator\*\*. Planning involves others as appropriate who are responsible or involved in the person's care and well-being, such as family, carers, advocates, friends and professionals.
- Planning facilitation is funded by Government and offered independent of service providers, including Depts and others with a potential conflict of interest.
- If verification of the plan and the budget is required, there is a simple and timely process.
- Plans can be reviewed and changed as required. Reviews ensure that the needs of the person with a disability are being met, quality outcomes are being achieved and the person's well-being is safeguarded.

## **Funding mechanisms**

- The funding allocation is adequate to ensure satisfactory access to a range of programs, services and activities that achieve quality outcomes.
- All allocated funding is brought together into one budget to the extent possible.
- Funding is allocated to the person and not allocated in blocks to disability support services.
- Funding is spent in accordance with an approved support plan.
- Funding can be used for activities, supports and services from informal networks, community services and from the formal disability service sector.
- The person, or their representative, can choose to manage the funding in one of three ways. Funding can be held by the person or their representative, by a financial intermediary\*\*\* service or by a disability service provider. Funds are portable and can be moved from one financial intermediary service or one disability service provider to another.
- When the person or their representative holds the funds, accountability requirements are as simple as possible.
- Unspent funds can be ‘rolled over’ from one financial year to the next.
- Financial intermediaries and disability service providers holding the person’s funds provide monthly accounts for all expenditure.
- Safeguards against emergencies and unforeseen circumstances needing more funding can be managed in one of two ways. Contingency funding can be kept available or there can be re-assessments of needs with the possibility of higher funding allocated when required.

## **Support workers**

- Support workers can be employed in one of three ways:
  - (1) Recruited from the open market by the person, or their representative, who becomes their legal employer;
  - (2) Recruited by the person or their representative and legally employed by a third party agency (a disability service provider or cooperative);  
or
  - (3) Supplied by a disability service provider who is the legal employer.
- Support workers will be employed in accordance with industrial awards and conditions.

## **Range of available options**

- Government ensures that a satisfactory range of support and activity options is available. This needs to include infrastructure that ensures quality disability services offering individualised supports as well as community activities.

These implementation guidelines are designed to reflect the principles outlined above. As self-directed support projects for people with an intellectual disability expand and it is expected that new and improved ways of implementing these principles will become available.

## References

*Commonwealth Disability Services Act 1986.*

*Convention on the Rights of Persons with Disabilities, 2006, United Nations.*

## Notes

- \* ‘Independent advice’ means advice provided by someone who does not stand to gain from decisions.
- \*\* ‘Independent facilitator’ means a facilitator who does not stand to gain from decisions.
- \*\*\* ‘Financial intermediary’ means a service that holds the funds, pays the bills and provides regular accounts but does not make planning decisions or provide other support services.

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## <sup>i</sup> DISABILITY SERVICES ACT 1986 - SECT 3

### Objects

(1) The objects of this Act are:

- (a) to replace provisions of the *Handicapped Persons Assistance Act 1974*, and of Part VIII of the *Social Security Act 1947*, with provisions that are more flexible and more responsive to the needs and aspirations of [persons](#) with disabilities;
- (b) to assist [persons](#) with disabilities to receive [services](#) necessary to enable them to work towards full participation as members of the community;
- (c) to promote [services](#) provided to [persons](#) with disabilities that:
  - (i) assist [persons](#) with disabilities to integrate in the community, and complement [services](#) available generally to [persons](#) in the community;
  - (ii) assist [persons](#) with disabilities to achieve positive outcomes, such as increased independence, employment opportunities and integration in the community; and
  - (iii) are provided in ways that promote in the community a positive image of [persons](#) with disabilities and enhance their self-esteem;
- (d) to ensure that the outcomes achieved by [persons](#) with disabilities by the provision of [services](#) for them are taken into account in the granting of financial assistance for the provision of such [services](#);
- (e) to encourage innovation in the provision of [services](#) for [persons](#) with disabilities; and
- (f) to assist in achieving positive outcomes, such as increased independence, employment opportunities and integration in the community, for [persons](#) with disabilities who are of working age by the provision of comprehensive rehabilitation [services](#).

(2) In construing the objects and in administering this Act, due regard must be had to:

- (a) the limited resources available to provide [services](#) and programs under this Act; and
- (b) the need to consider equity and merit in accessing those resources.