



We acknowledge and pay respect to the Traditional Owners of the lands upon which our campuses are situated. We would like to pay our respects to the past, present and future Elders across the Goulburn, Ovens Murray, Loddon, Central Highlands and Western District regions of Victoria, where this project was undertaken.

University Department of Rural Health

The perspectives of National Disability Insurance Scheme service providers on student placements in rural Victoria

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Summary Report
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What was the study about?

The National Disability Insurance Scheme (NDIS) signifies a major change to the way rural health and human service organisations receive funds and provide services to people with disability. These changes may impact on the way these organisations carry out other activities, such as building inclusive communities or supporting students on placement. Given the substantive role of nursing and allied health student placements in securing the future rural disability workforce in Australia, **the aim of this study was to explore the perceived impacts of the NDIS on nursing and allied health student placements among staff in organisations funded at least partly by the NDIS and located in rural areas of Victoria.**

How was the study undertaken?

Staff involved with student placements from health and human service organisations in the Goulburn, Ovens Murray, Loddon, Central Highlands and Western District regions of Victoria who were funded at least partly by the NDIS, were asked to be interviewed. Face-to-face interviews were conducted with 20 staff: nine community health service employees, four disability service employees, four private practitioners and three hospital employees. The interviews were recorded and transcribed, and all identifying information was removed from the transcripts. The transcripts were then analysed for content relating to student placements in NDIS-funded services, impact of the NDIS on organisations, services and student placements, and ways to support NDIS-funded organisations to provide student placements.

What did the study find?

Student placements in NDIS funded services

Participants considered student placements as an important way for rural health and human service organisations to recruit health professionals and to participate in building the rural health workforce:

“One of the ways to ensure yourself against workforce issues is to have students.”

Participants highlighted a number of existing enablers to offering placements, for example, having basic resources, support from external stakeholders, stable team conditions and having capable students. They also highlighted a number of barriers to offering placements, including difficulties working with distant universities, mis-matching placement expectations and needing to prioritise service user and organisational requirements over placements.

“We do need to pay attention, if we want to have a vibrant and viable workforce... And that is not just the responsibility of the organisation to provide placements.”

Impact of the NDIS on organisations and services

The perceived impact of the NDIS varied according to the nature of health and human service organisation. Participants from larger organisations, such as hospitals and complexly funded community health services as well as private practices that were accustomed to the “fee-for-service” funding, described the NDIS as having little impact on their organisation and the services provided:

“I don’t feel our day-to-day work has had to change drastically.”

However, participants from organisations, such as disability services and community health services that previously relied on “block-funding” and were transitioning to a fee-for-service funding model, suggested the NDIS had significantly impacted on the organisation and their activities. The new funding model led to service closures, staff redundancies and increased casualisation of staff:

“There is no money in the NDIS for planning, for administration, for office... none of that back of house stuff is funded at all. We’re going to have staff who have to figure out ...all that sort of stuff on the fly.”

“Our service [valued as a six-figure amount] went down to [approximately half this amount]. ...We had to make people redundant and [the service team] halved.”

Impact of the NDIS on student placements

Participants from larger organisations, such as hospitals and complexly funded community health services as well as private practices that were accustomed to the fee-for-service funding, described the NDIS as having a minor impact on their capacity to offer student placements:

“The NDIS is having an impact in funny little areas, but definitely really nothing to do with the students.”

However, many **participants suggested the NDIS presented new challenges for some organisations to offer student placements**. The changes experienced with the roll out of the NDIS reduced organisational capacity to offer student placements:

“Our [funding] bucket is tipping and emptying over to the NDIS as people get their packages and move away. ...That’s impacted on what we can do and how we can do it. But yeah... student placements now are intermittent.”

“The reality is, you still need someone who is scheduling their [students] time, initially even- who's checking in with them, making sure that things are running smoothly each day, providing direct teaching opportunities for them, providing direct feedback, filling in the assessment forms? All of that is non-billable and it takes time.”

Participants also noted how increased competition in the service market (encouraged by the NDIS) made it difficult to involve students in service provision. They suggested that students could jeopardise the reputation and future income of these organisations:

“People are saying, ‘We’re paying for qualified staff to... look after our child.’ What would they think about having a student?”

As a result, participants described narrowing the scope of student involvement in service provision and offering placements that comprised mostly observational or independent tasks and low levels of supervision. Many of the organisations significantly impacted by the NDIS chose not to offer student placements during transition to the NDIS:

“We made a conscious decision to not offer student placements in 2017 because we were transitioning to the NDIS and needed all our time and energy focused on that transition, rather than on student placements.”

Many participants were unaware of the National Disability Insurance Agency’s (NDIA) guidelines on involving students in service provision. The participants who were aware of the guidelines believed they failed to address the financial barriers that prevented an organisation offering student placements within a fee-for-service funding model:

“The NDIA... expect[s], if you had a student working with a participant, that you might offer that participant some additional sessions... That, financially, isn’t going to sit well with my organisation... That’s again, not covering the therapist’s time.”

“Our understanding is that we can’t charge for NDIS services if a student delivers them and until we’re told otherwise—or if we’ve got that wrong, tell us now.”

Going forward, many participants suggested their organisation would not offer student placements unless they were given the resources to offer high quality placements that enabled student learning:

“We [calculated the cost of placements] before we transitioned to the NDIS... When the data came back, it was a bit staggering how much time was spent just on doing supervising of students and writing reports up for students...that you don't get paid for...that's when we sort of went, ‘Whoa. We're probably not going to be able to do that.’”

“We would either focus on a quality placement or not take a placement. ...We would just say, ‘We haven't got the capacity to take a student at the moment’, not, ‘We're going to give you a half-baked opportunity.’”

“We didn’t take students this year because of the NDIS.”

Overall, the findings of this study suggest the NDIS may reduce the number and nature of allied health student placements in rural Victoria and diminish the rural allied health workforce in services, particularly in disability services and community health organisations servicing people with disability:

“[Allied health staff] will be so focused on having to meet such-and-such a code to be able to bill [the service]... The placement will be different to what it used to be.”

“We’re going to end up... with gaps in services because we don't have clinicians trained to meet some of the most complex needs of people that we have in the community.”

Ways to support organisations to have [more] student placements

Participants explained that rural health and human service organisations providing NDIS services require support and incentives from government bodies and universities to offer student placements:

“They're [universities are] the ones asking us to do the placements... Are they going to pay the real cost to do the placements? ...It's not enough just to say, 'Oh, we'll have an external supervisor come in and support the students.'”

“So what role does the NDIS see they have in developing the workforce?”

Participants suggested universities increase their involvement in organising and facilitating student placements, such as supervising students on placement. Participants also suggested that universities work with allied health professional bodies to evaluate and redesign student placements so they are achievable within the current policy environment:

“The universities need to link back in with the supervisors about what the real expectations of placement are. Sometimes I think there can be a bit of a gap between real life and university life.”

“It's perhaps about unis looking at what their requirements are in a placement... And maybe they need to revisit that now in NDIS-land.”

“For us, there is a desire and a commitment to student placements, but it's actually whether that becomes financially viable for us to offer them.”

Conclusions

Interviews with staff in rural, NDIS funded health and human service organisations revealed a general concern about a future without student placements in rural Victoria. The findings suggest that organisations significantly impacted by the NDIS may need further support to continue to host students and to continue their role in training the rural allied health workforce in disability practice. Three recommendations are made: (1) The NDIA may consider providing further financial or other incentives to meet organisational requirements to host students on placement; (2) universities, state and federal government departments and agencies such as NDIA, allied health professional bodies, student support schemes, and rural allied health and human services work collaboratively to ensure student placements are offered; and (3) the NDIA clarify billing for student-led services and payment for student supervision. Addressing these issues and continuing to monitor and research student placement opportunities in NDIS funded services will ensure the rural health workforce are prepared for disability practice.

Thank you for participating and sharing your experiences with us

For more information about this study or a copy of the full report, please contact Claire Quilliam via email: claire.quilliam@unimelb.edu.au or telephone: 03 5823 4576.

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