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Specialist Disability Accommodation in the social housing sector: Policy and practice

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Acronyms and abbreviations used in this report

AHURI   Australian Housing and Urban Research Institute Limited

AAT   Administrative Appeals Tribunal

AT   Assistive technology

ACT   Australian Capital Territory

CHP   Community housing provider

CRA   Commonwealth Rent Assistance

CRPD   United Nations Convention on the Rights of Persons with Disabilities

DSP   Disability Support Pension

FCA   Functional capacity assessments

LHA   Livable Housing Australia

NCC   National Construction Code

NDIA   National Disability Insurance Agency

NDIS   National Disability Insurance Scheme

NHFIC   National Housing Finance and Investment Corporation

NSW   New South Wales

OT   Occupational therapist

SA   South Australia

SDA   Specialist Disability Accommodation

SIL   Supported independent living

WA   Western Australia

WHO   World Health Organization

Executive summary

Key points

- Specialist Disability Accommodation (SDA) is a support program provided by the National Disability Insurance Scheme (NDIS) for Australians with extreme functional impairment or very high support needs to access specialist housing solutions.

- Research respondents overwhelmingly viewed the program as a positive contribution to the delivery of housing for people with disability. It was recognised that the program was still in a maturation phase and that there remained scope for improvement.

- Interactions between the social housing sector and the SDA program are complicated. State and territory government roles need to be further defined. Community housing providers (CHPs) have specialist knowledge and skills that could be leveraged to improve delivery of, and access to, SDA.

- The application process—described by participants and their support teams as exclusionarily complex—shapes access to SDA and impacts the ability for people with disability to meet their Home and Living goals.

- Central tenets of choice and control are constrained by the need to ensure that all SDA provisions are 'reasonable and necessary' (NDIS 2019). Subjectivity around this phrase results in opaque and inconsistent decision-making, and undermines participant outcomes and housing provider confidence.

- Assistive technology is not well integrated into the SDA program, despite sound evidence that it supports Home and Living goals and offers a cost-saving mechanism.

Specialist Disability Accommodation (SDA) is a support program provided by the NDIS for Australians with extreme functional impairment or very high support needs to access specialist housing solutions. Prior to the SDA program, many people with disability lived in group homes, with parents or family, or in institutional settings (Bostock, Gleeson et al. 2001; Priest and Bruno 1990). People living in these housing arrangements lacked independence and autonomy, and had little choice in where or with whom they lived. Collectively, these factors resulted in very poor housing outcomes for people with disability (Beer, Faulkner et al. 2011; Beer, Flanagan et al. 2019). In response, the SDA program aims to provide people with disability choice and control in relation to where, and with whom, they live (NDIA 2022a). Through the provision of specially designed housing, the program aims to empower NDIS participants by increasing independence, maximising social and community participation, and transitioning away from congregate living arrangements (COAG 2021; NDIS 2021a; Winkler, Aimers et al. 2021).

The SDA program is structured to create a demand-driven market, where recipients have more agency in the properties they can access. It is considered one of the largest social-impact investment opportunities in Australia, with the potential to generate long-term stable returns to investors while delivering appropriate housing solutions for people with extreme functional impairment and very high support needs (Winkler, McLeod et al. 2020). A core goal of the program is to encourage investment and growth of appropriate housing supply, while reducing reliance on public funding mechanisms. By leveraging the financial resources, skills and expertise available within the mainstream economy, the anticipated outcome of the program is to increase the diversity of adequate, affordable and appropriate accommodation available to people with disability across a range of locations (Beer, Flanagan et al. 2019).

Key findings

Access to appropriate housing is crucial for upholding the dignity, wellbeing and overall quality of life for individuals with extreme functional impairments. This study underscores robust endorsement for the SDA program, which enables people with disability to secure housing that is both well-designed and strategically located. Nevertheless, various impediments to accessing and delivering SDA pose challenges that impact the program's effectiveness.

Social housing and the SDA program

Interactions between the social housing sector and the SDA program are complex. The market stewardship function of the SDA program sits within the remit of the Commonwealth government, which creates ambiguity around the role of the state and territory governments within the program, and around housing for people with disability more broadly.

Consequently, roles adopted by state and territory governments are not nationally uniform. Initially a core developer of SDA, some Community Housing Providers (CHPs) are pausing delivery of SDA. Simultaneously, there is recognition in the SDA sector of the unique skills that CHPs can offer through their extensive knowledge of the program, as well as the expertise to produce good housing outcomes for tenants with high and complex needs. CHPs argued that this role is not recognised, and that they are shouldering the financial risk associated with SDA delivery until late in the development stage, with a potentially negative impact on smaller providers.

Communication channels between the National Disability Insurance Agency (NDIA) and the social housing sector are limited, which amplifies risk for CHPs and affects decisions relating to the delivery of dwellings under the program. This constraint also impedes the planning decisions of state and territory governments—particularly regarding the reform of disability and housing policies at the state and territory level. This limitation has significant implications for NDIS participants with high needs who are ineligible for SDA funding and depend on state government intervention. Despite recent improvements, data provided by the NDIA continued to be viewed as unreliable, inaccurate or not detailed enough to fully inform investment decisions. Consequently, challenges persist in identifying housing need and mitigating vacancy risk—both of which hinder SDA development. The lack of data granularity further complicates the identification and matching of NDIS participants with appropriate SDA dwellings.

SDA program processes are complex

The complexity of the SDA program represents a significant barrier for applicants. The research found a dearth of information and education for NDIS participants in navigating the program, including the process of applying for, finding and securing appropriate SDA. As a result, informal support networks shoulder a significant portion of the workload associated with negotiating and interpreting the program and its processes on behalf of NDIS participants. The lack of education and awareness about the SDA program often leads families to mistakenly perceive group homes as the sole alternative.

Functional capacity assessments (FCAs) and the resulting reports are an essential component of SDA funding outcomes. The quality of these reports depends on the knowledge of individual occupational therapists (OTs) and their familiarity with NDIS processes and protocols. Our findings show that knowledge of the SDA program differs nationally and between support coordinators—as a result, not all applicants are afforded equal access. A need for greater standardisation of the SDA application process was observed. At the same time, it is critical that standardisation does not compromise the allied health process. This outcome relies on the consistency and transparency of decision-making by the NDIS when assessing applications for SDA funding.

Finding suitable SDA for NDIS participants requires thorough knowledge of the available options, clear communication, and a focus on the participants' preferences. The NDIS has structured the SDA program as a marketplace. However, there is no centralised database that NDIS participants can search for vacancies. Instead they must traverse websites of third-party entities, some of which may be unknown to the participant. Therefore, the search for SDA differs across states and territories, and between metropolitan and regional areas. This exacerbates a process that is already complicated and difficult to navigate.

Insufficient information, support and education on how to navigate the SDA program, coupled with the potentially difficult decision to transition into SDA, can create an emotionally complex experience for participants and their families.

Funding decisions are inconsistent

The SDA program is designed as an individualised, participant-led funding model. The program attempts to balance empowering NDIS participants with choice and control against the 'reasonable and necessary' criteria used to inform NDIA decision-making. Specifically, the subjective nature of 'reasonable and necessary' has resulted in a lack of transparency and consistency in SDA funding determinations, which has undermined both participant outcomes and provider confidence. Panels and interviews conducted as part of this research found evidence of inappropriate determinations made in contradiction of clinical evidence provided, and without justification. Examples were cited of participants with similar housing needs receiving very different funding outcomes. As a result, the SDA program often falls short in achieving the desired outcomes for NDIS participants—specifically relating to the aspiration to live alone.

SDA funding approvals that do not meet the needs of NDIS participants can result in lengthy, costly and complex appeals processes, which also carry tangible health and wellbeing repercussions for people with disability. For housing providers—CHPs, in this case—delivering appropriate housing solutions becomes a challenge, increasing vacancy risks and ultimately affecting the delivery of SDA.

Pricing arrangements need to reflect the true cost of delivery

The mismatch between the current price guide and the true cost of delivering SDA has a significant impact on the sector. Also, delayed payments from the NDIA have substantial financial implications for CHPs, particularly those with limited financial capacity. Extended wait times to secure overdue payments have implications for managing debt finance, SDA portfolio growth, new entrants and retaining current providers. The pass-back mechanism, a bilateral agreement to ensure the same net effect on scheme funding (NDIS 2016a), also hinders the substantial improvement required of 'Basic' SDA stock, as well as limiting the extent to which CHPs can leverage against this housing to reinvest in new SDA. Subsequently, the cost of dwelling upgrades is not feasible under the current pricing framework.

Assistive technology is not well integrated into the SDA program

This research underscores a critical gap in the integration of assistive technology (AT) within the SDA program. The lack of comprehensive AT inclusion across all design categories poses challenges for both SDA providers and recipients. Although some CHPs voluntarily integrate AT infrastructure into 'New Build' stock, this practice is not mandated in SDA policy. Retrofitting AT infrastructure post-build incurs substantial cost, which further complicates the issue.

Additionally, a misalignment exists between the NDIA's vision of AT (NDIA 2015) and the practical categorisation and funding of AT (NDIS 2022a; 2022b). The NDIA largely excludes AT designed for universal use from NDIS funding. This:

- contradicts the World Health Organization's (WHO) inclusive definition of AT
- limits access to transformative technologies for people with disabilities.

The NDIA's attempt to distinguish between AT exclusively designed for people with disabilities and 'mainstream' AT raises ethical and practical concerns that conflict with the NDIS's goals for choice, control and the principles outlined in the Convention on the Rights of Persons with Disabilities (CRPD) (United Nations 2006, Articles 9, 19, and 28).

Policy development options

Policy and practice opportunities exist to improve the efficacy of the SDA program while delivering significant wellbeing and quality-of-life benefits to people with disability nationwide. From a policy perspective, solutions exist to strengthen the SDA program, which is regarded as an important and necessary funding stream under the NDIS. For instance, policy change is needed to further support participants' rights to sole-occupancy housing outcomes, which would give NDIS participants genuine choice and control over their Home and Living goals. Policy also needs to ensure that the pricing of SDA accurately reflects the true cost of delivering SDA and establishes a funding mechanism for enhancing the quality and performance of 'Basic' SDA.

The onus is also on the NDIA to establish clearer guidance on state and territory government involvement in the program. Broadly, policy should further recognise the pivotal role of CHPs in the SDA program, particularly in regard to education, support and specialist tenancy management. This recognition should reflect the true cost of delivering and operating SDA. Additionally, the definition and application of AT (including 'mainstream' technologies) within the NDIS needs to be reviewed to mirror universal design principles and United Nations recommendations, ensuring its application to all SDA design categories.

Practice elements identified offer low-cost solutions to access and delivery barriers within the program that would have a positive impact on all stakeholders. These include:

- developing more accessible information and education pathways for NDIS participants
- establishing stronger communication channels between the NDIA and all SDA stakeholders
- continuing to improve the quality and granularity of demand data.

The NDIA must ensure that payments are accurate and timely, and that funding decisions are more transparent and consistent across applications. Implementing these recommendations concurrently will improve participant housing outcomes and improve the overall delivery of SDA.

The study

This research examines the interface between the social housing sector and SDA-funded dwellings, including NDIS participants' experience of accessing these homes and the extent to which they are equipped with AT. It also explores policy and practice opportunities available to improve the delivery of SDA.

Funded as part of AHURI's National Housing Research Program, this research used a qualitative research approach to understand the interaction between social housing and SDA, as well as the participant experience of SDA. A policy review of federal, state and territory government housing strategies, and of housing and service strategies for people with disability, identified the role of governments in the SDA program. The interaction of the SDA program with the social housing sector was explored through interviews with 22 individuals nationally working directly with NDIS participants, eight interviews with state and federal government representatives, and an online panel with 10 CHPs. Through Diverse Voices roundtables, 19 people with disability shared their views on SDA policy documents and accessing SDA. Finally, a second panel interrogated opportunities for policy and practice change to improve the delivery of, and participant access to, SDA.

1. Introduction

- Specialist Disability Accommodation (SDA) is one support program provided by the NDIS for Australians with extreme functional impairment or very high support needs to access specialist housing solutions.

- Although 40 per cent of social housing households include at least one person with a disability, social housing often does not fully meet the needs of people with disability due to limited supply and accessibility requirements.

- The transition of housing provision for people with disabilities from state to federal levels is complex. It brought about changes and challenges to the role of the social housing sector in delivering appropriate housing for people with disabilities.

- This research examines the interface between the social housing sector and the SDA program, as well as the experiences of those participating in the SDA program.

- Assistive technology (AT) is a crucial component for NDIS participants to achieve their Home and Living goals. This research seeks to understand the barriers and opportunities to the delivery of AT in SDA homes.

1.1 Why was this research conducted?

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) is an international human rights convention that sets out the fundamental human rights of people with disability. Comprising 50 articles, it articulates the rights that all people should enjoy regardless of impairment. Australia's Disability Strategy 2010–2020 was implemented to fulfill the nation's commitments under the CRPD (DSS 2012). Subsequently, the NDIS was introduced in alignment with the strategy and the CRPD, with the aim of upholding the rights of people with disability in Australia. Notably, housing features as a priority in all three landmark documents.

Access to appropriate housing is fundamental for dignity, wellbeing and quality of life. The NDIS provides funding for support and services to Australians under 65 years of age with a permanent and significant disability (NDIS 2020). Specialist Disability Accommodation (SDA) is the national support program for Australians with extreme functional impairment or very high support needs and it provides access to specialist housing solutions (NDIA 2022a). Current policy states that NDIS participants should have choice and control about where and with whom they live, as well as the type of dwelling in which they reside (NDIS 2020). Accordingly, the SDA program is designed to provide eligible NDIS participants with appropriately designed and well-located housing that increases their independence, wellbeing and greater community connection and access to informal supports, empowering them with genuine choice and control over their Home and Living goals[1] (NDIA 2022a; Summer Foundation 2020; Wellecke, Robertson et al. 2022). Current demand for housing under the SDA program is high and expected to grow (NDIA 2022c; Social Ventures Australia and Summer Foundation 2020). By 2025, it is anticipated that 30,000 participants will have SDA in their NDIS plans (Commonwealth of Australia 2021). However, as of December 2022, only 18,219 participants had SDA in their plans, the majority of which constituted existing state-owned housing for people with disability in the form of group homes or institutional accommodation settings (NDIA 2022c).

In contrast to the longstanding historical funding and delivery approach of housing for people with disability through state-level capital grant schemes, the SDA program constitutes an individualised, participant-led funding model designed to create a demand-driven market governed by the Australian Government (NDIA 2018). The process of transitioning the remit of housing provision for people with disability from the state to federal level is complicated, and has not been without its challenges (Flanagan, Levin et al. 2020; Social Ventures Australia and Summer Foundation 2020). As part of this transition, the role of the social housing sector in the delivery of housing for people with disability has shifted.

The SDA program is not designed to provide housing for all NDIS participants. Funding for SDA is sought under a participants' individualised NDIS plan, if it is identified as a 'reasonable and necessary support' and approved by the NDIA (NDIS 2020). To this end, it is anticipated the program will provide a housing pathway for approximately 6 per cent of NDIS participants. The remaining 94 per cent are expected to secure suitable accommodation in the social housing sector, in housing provided by disability support organisations or the private housing market (NDIA 2018; 2022a; 2022b; Summer Foundation 2020). However, finding accommodation in the private housing market is far from ideal. Recent analysis shows that only 0.2 per cent of listed private rental properties across Australia are affordable for a person living on a Disability Support Pension (DSP) (Anglicare 2023).

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[1]   NDIS Home and Living goals are personalised objectives that individuals with disabilities set as part of their NDIS plan to support their living arrangements. These goals are tailored to the specific needs and aspirations of the participant, and are designed to enhance their independence, quality of life and inclusion in the community (NDIS 2022g).

The social housing sector is a collective term for subsidised rental housing delivered to eligible tenants, which is owned and managed by state or territory governments, community housing providers (CHPs) and State Owned and Managed Indigenous Housing (SOMIH) programs. In June 2020, 40 per cent of all social housing households included at least one person with a disability (Australian Institute of Health and Welfare [AIHW] 2022), which may also include people over 65 years (who are ineligible for NDIS funding). In 2019, the community housing sector constituted one of the largest providers of SDA (Beer, Flanagan et al. 2019). More recently, private market providers have greatly outpaced the position of CHPs in the direct development of SDA (see Table A1 in Appendix 1), with CHPs representing only 11 per cent of SDA development and ownership by 2022 (Aimers, Rathbone et al. 2022).

While the role of the social housing sector is to offer affordability and relative tenure security for tenants (Pawson, Milligan et al. 2020), research shows that social housing allocations for people with disability do not always meet their needs and they face restricted supply and availability of support (Flanagan, Levin et al. 2020; Padgett, Henwood et al. 2016). Moreover, given the longstanding absence of minimum standards across the Australian housing system (Aimers, Rathbone et al. 2022), very few dwellings meet even the lowest level of certified accessibility and liveability design principles (Livable Housing Australia 2017)[2]. At the same time, social housing providers often lack the resources required to adequately meet the housing needs of people with high and complex needs who are not eligible for SDA funding (Flanagan, Levin et al. 2020).

These limitations shape the social housing sector's capacity to respond to the unmet housing needs of people with disability. In addition, with only a small proportion (about 6%) of NDIS participants qualifying for SDA funding in their plans, a considerable number of individuals just below the support threshold cannot access this financial support (Flanagan, Levin et al. 2020; Wiesel 2020). Critical commentators have called for improved coordination between the social housing sector and the NDIA to enhance access to appropriate housing that supports independent living (Flanagan, Levin et al. 2020). However, less is known about the interactions between the social housing sector—particularly public and community housing—and the SDA program. Given the substantial representation of people with disability in the social housing sector, a deeper understanding of this relationship is required.

Housing is addressed in articles 9, 19 and 28 of the CRPD and, like the NDIS, emphasises choice and control (United Nations 2006). Assistive technology (AT) is a key theme that runs throughout the convention, and commonplace technologies, such as smart systems and devices, are becoming an integral part of accessible housing for Australians with disabilities. AT is also an increasingly important aspect of accessibility and liveability design in the home. Where life was once served by individual tools and analogue devices with a singular purpose—phone, television, computer, address book, to-do list, bus timetable, home security system, doorbell, food delivery service—daily essentials today are often contained or controlled by one single device. Media scholars such as Jenkins (2006) coined the term 'convergence' to describe the dramatic shifts associated with this evolution. Importantly, convergence is not just a technological phenomenon, but represents a fundamental transformation of the social, cultural and economic landscape.

Using AT, people with disability are able to personalise their home environment, augmenting or potentially replacing the need for in-person supports, while promoting improved health outcomes, increased independence and empowerment and enhanced economic and community participation (Callaway, Tregloan et al. 2016; Corallo, Bonanno et al. 2014; Ellis 2019; Ellis and Kent 2011; Jamwal, Callaway et al. 2018; Hwang, Weng et al. 2014; Ramsten, Martin et al. 2019; Silvera, Packer et al. 2022; Van Walsem, Howe et al. 2016). Yet current NDIS-funding policies limit funding for AT, and to date there has been limited advocacy in this area. To this end, this is the first Australian study to examine AT access for people with disability as a housing policy issue.

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2   In 2022, the silver level of Livable Housing Australia's design principles was integrated into the National Construction Code (NCC) for all new and substantially renovated dwellings (Australian Building Codes Board 2022). However, as the NCC is voluntary, states such as Western Australia will not be adopting the NCC 2022 Livable Housing Provisions (DMIRS 2023).

This research seeks to understand the interaction between the social housing sector and the SDA program to ensure that people with disability have true choice, control and independence over the type of housing they receive. The research poses the overarching question:

- What is the interaction of policy and practice systems between the NDIS, specifically the SDA program, and social housing and the experience of those accessing and living in social housing designed for NDIS participants with SDA funding?

The research addresses the following research questions:

1. What is the nature of the interactions between the social housing sector and the SDA program, and what are the associated barriers and opportunities to accommodation delivery, including the inclusion of AT in these homes?
2. What is the experience of accessing housing that meets the needs of NDIS participants through the SDA program?
3. What policies and practice could be changed to improve both the delivery of, and participant access to, SDA and AT in the context of the NDIS?

1.2 Existing research

1.2.1 Industry perspective

Previous research has examined SDA funding from an industry perspective, exploring program operations and the experiences of those delivering or investing in SDA (Aimers, Rathbone et al. 2022; Beer, Flanagan et al. 2019; Madhavan, Mulherin et al. 2021; Wellecke, Robertson et al. 2022). Industry, including the not-for-profit sector, has generally responded positively to the SDA program. Nevertheless, barriers to supply, such as uncertainties around the volume and specific types of SDA, as well as the locations in which these dwellings are needed, have been identified (Beer, Flanagan et al. 2019). These findings point out the importance of the structure of the SDA sector along with risks such as vacancy rates and changing policies, as well as the challenges posed by the flow of information—particularly relating to demand, which is not centralised (Aimers, Rathbone et al. 2022; Beer, Flanagan et al. 2019; Callaway, Tregloan et al. 2020; Madhavan, Mulherin et al. 2021; Skipsey, Winkler et al. 2022; Winkler, McLeod et al. 2020).

Within the social housing sector, similar challenges have been identified, particularly relating to communication between the NDIS and the social housing system to ensure the delivery of appropriate housing (Aimers, Rathbone et al. 2022; Flanagan, Levin et al. 2020; MS Australia 2018). The evidence-base points to a lack of stewardship by the NDIA as a primary driver affecting SDA-provider confidence in the SDA market (Aimers, Rathbone et al. 2022; Skipsey, Winkler et al. 2022; Wellecke, Robertson et al. 2022). Market stewardship issues have been attributed to various factors, including:

- unreliable demand data released by the NDIA
- lack of quality and transparency regarding SDA funding decisions
- lengthy decision timeframes for SDA funding
- delayed payments to SDA providers
- a complex and confusing funding system.

These challenges can result in prolonged vacancies for SDA providers, carrying significant financial implications—particularly for CHPs operating with limited access to capital and tight cashflows. For instance, a 2022 study exploring the participation of CHPs in the SDA program found a 10 per cent vacancy rate among 2,485 enrolled SDA dwellings, with one CHP reporting a vacancy rate of 35 per cent (Aimers, Rathbone et al. 2022).

Meanwhile, payment delays from the NDIA to SDA providers are well documented. A 2021 survey of 37 SDA providers revealed that over half (51.4%) were owed payments from the NDIA, and at least $3.7 million was overdue by more than 90 days across 14 SDA providers. Collectively, these providers had committed over $1.2 billion in the SDA program, constituting 50 per cent of the total market (Winkler, Aimers et al. 2021). This survey was repeated in 2022 and showed minimal change regarding overdue payments (Wellecke, Robertson et al. 2022). Inappropriate SDA determinations and payment delays, coupled with lengthy and complex SDA processes, heighten vacancy risks and exacerbate financial risks to SDA providers, prompting many CHPs to suspend plans for further SDA delivery (Aimers, Rathbone et al. 2022; Aimers, Wellecke et al. 2021; Beer, Flanagan et al. 2019; Madhavan, Mulherin et al. 2021; Skipsey, Winkler et al. 2022; Wellecke, Robertson et al. 2022; Winkler, Aimers et al. 2021).

Additional barriers for CHPs participating in the development of SDA include high land and construction costs, a lack of certainty with the forward progression of the SDA program, overall lack of confidence in the SDA market, and the resources required to acquire specialist knowledge in order to interpret and navigate complex NDIA systems and processes, coupled with the comparable ease of investment in other ventures (Aimers, Rathbone et al. 2022; Beer, Flanagan et al. 2019; Winkler, Aimers et al. 2021). To this end, previous research suggests that the SDA program favours larger established entities with access to significant capital (Beer, Flanagan et al. 2019; Winkler et al. 2020).

1.2.2 Participant perspective

Accessing appropriate accommodation within the SDA program is a complex and protracted process, with many NDIS participants denied SDA support in their plans, receiving incorrect SDA determinations or enduring extensive wait times (Carey, Weier et al. 2020; Skipsey, Winkler et al. 2022).

Inappropriate determinations by the NDIA constitute a significant issue for participants. Studies undertaken by the Summer Foundation have clearly illustrated that the level of approved SDA funding in a participant's plan is often not aligned with their demonstrated housing need and the clinical evidence presented in applications (Winkler, Aimers et al. 2021). Furthermore, adequate reasoning for decisions is rarely given by the NDIA (Skipsey, Winkler et al. 2022). Participants may appeal the NDIA's decision if they believe it to be unreasonable—however, the process is long, arduous and costly (Summer Foundation 2022; Winkler, Aimers et al. 2021) and participants must often advocate for themselves (MS Australia 2018).

A recent study of 172 NDIS participants found that only one-quarter (25%) received the SDA funding they requested from the NDIA, with a median wait time of 96 days. For those who appealed the decision and underwent an extensive review process lasting an average of 205 days, 92 per cent received the SDA funding outcome they had originally requested (Skipsey, Winkler et al. 2022). Poignantly, 60 per cent of all appeals to the Administrative Appeals Tribunal (AAT) identified the initial NDIA determination to be incorrect (NDIA 2023b). In response, the Summer Foundation, a leading peak body in the SDA sector, has frequently published reports, emphasising the need to address the mismatch between NDIA legislation, including SDA rules, and the way in which the NDIA make SDA determinations (Summer Foundation 2022).

Once an applicant is deemed eligible for SDA funding, finding an appropriate and well-located SDA dwelling can be difficult. In most cases, participants receive SDA funding for shared accommodation arrangements with other SDA recipients (NDIA 2018: 9–12). Value for money is often cited over sole-occupancy SDA, regardless of whether participants would prefer to live alone or with family (Summer Foundation 2022). A 2022 study found that of 3,507 people receiving SDA funding for the first time, only 567 (16%) were funded to live in sole-occupancy SDA (Skipsey, Winkler et al. 2022)—indicating that most SDA requests to live alone are rejected. While recognising that some participants may prefer shared accommodation arrangements, the option to live alone or with family, as mandated under the CRPD (United Nations 2006), should be universally accessible. Contrary to the principles of the SDA program, Wiesel (2020: 219) notes that 'the rights to exercise choice and control and to have one's privacy and dignity respected cannot be fulfilled for those who are forced to share with others'. To this end, the Summer Foundation (2018) posit that the NDIA has unevenly weighed the balance between choice and control for the NDIS participant, and what is deemed 'reasonable and necessary' and 'value for money' by the NDIA.

Concerns have also been raised regarding the lack of separation between SDA and supported independent living (SIL) and the capacity of these providers to promote true choice, control and independent living (Aimers, Rathbone et al. 2022; Winkler, McLeod et al. 2020). Despite NDIA policy requiring housing and support services to be provided by separate organisations, the separation model is severely compromised, as a significant proportion of SDA constitutes former group homes (Aimers, Rathbone et al. 2022; Aimers, Wellecke et al. 2021). Moreover, researchers have observed that some SDA providers partner with SIL providers to fill vacancies—a practice resulting in third line forcing[3] —undermining the core NDIS pillars of choice and control (Winkler, McLeod et al. 2020).

1.2.3 Assistive technology

AT plays a pivotal role in enhancing the quality of life for individuals with disabilities, promoting better health outcomes, increased independence and empowerment while enhancing economic and community participation (Callaway, Tregloan et al. 2016; Corallo, Bonanno et al. 2014; Ellis 2019; Hwang, Weng et al. 2014; Jamwal, Callaway et al. 2017; Jamwal, Callaway et al. 2018; Ramsten, Martin et al. 2019; Silvera, Packer et al. 2022; Van Walsem, Howe et al. 2016). As noted in a 2022 CSIRO report, over 70 per cent of NDIS participants use some form of AT to meet their daily needs (Silvera, Packer et al. 2022). Integrating AT into the homes of people with disability can yield multifaceted benefits, including:

- improving housing accessibility through home automation features
- improving safety via alert systems
- fostering independence in daily activities (Jamwal, Callaway et al. 2018; Yusif 2021).

Notably, AT can function as an alternative support-delivery method, either augmenting or potentially replacing in-person supports (Callaway, Tregloan et al. 2016; Hwang, Weng et al. 2014; MS Australia 2018; Naick 2017).

The World Health Organization (WHO) defines AT as an 'umbrella term' covering products and services that 'maintain or improve an individual's functioning and independence, thereby promoting their wellbeing' (WHO 2023). As shown in Table 1, the NDIA uses a similar definition for AT regarding it as a 'large and diverse group of products, systems, devices and technologies used by people with a disability to support and enhance their economic and social participation' (NDIA 2015: 4), and perform daily tasks more easily and safely (NDIS 2023a).

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3   According to the Australian Competition and Consumer Commission (ACCC), third line forcing occurs 'when a supplier of goods or services imposes a condition requiring the buyer to also acquire goods or services from a particular, unrelated, third party, or refuses to supply because the buyer will not agree to that condition. The conditional supply may relate to the product itself or to the supply of the product at a particular price or discount.' (ACCC 2022: 1).

An analysis of what is included as AT by the WHO compared to the NDIA reveals further similarities across the six functional domains of mobility, vision, hearing, communication, cognition and self-care (WHO 2022; NDIS 2022a). Both definitions refer to equipment such as wheelchairs or adjustable beds, instruments such as hearing aids, glasses or special cutlery to software and apps, such as those that might assist with a speech impediment (Table 1). AT is also specifically mentioned in the NDIA's vision, which is to:

> *build an empowering, sustainable and consistent approach to ensuring NDIS participants have choice in, and access to, individualised assistive technology solutions that enable their economic and community participation. (NDIA 2015: 1)*

As noted in this vision, AT is an important element designed to empower people with disabilities, allowing them to maximise their abilities at home, in the community and in the workplace. The relative value of AT is measured by outcomes achieved compared to associated costs (Jamwal, Jarman et al. 2022; Silvera, Packer et al. 2022). The NDIA recognises the cost-effective potential of AT in supporting independence and participation, with projections from the AT strategy indicating 'net incremental financial benefits' (NDIA 2015: 7) for the NDIS. This observation underscores the long-term economic advantages of funding and investing in AT.

While assistive products (whether physical or digital) can include purpose-built technology specifically developed to support people with disability, there is also a range of 'mainstream' AT products, such as smartphones, tablets and apps that are used routinely by people without disability that also meet the needs of people with disability (Silvera, Packer et al. 2022: 6). These AT devices and systems enable users to 'complete tasks, control their environment, or communicate with others [… they] may also support activity tracking via home-based sensors, to monitor a person's health and safety remotely' (Jamwal, Jarman et al. 2022: 624). For example, screen readers that translate text into speech, and listening devices that allow voice-activated commands around the house. Wahab (2016) demonstrated how home automation systems using networked devices can significantly support people with serious difficulties and impairment, such as monitoring electrical equipment controlling ambient temperature and lighting via smartphone technologies (cited in Ismaeel 2020: 10). Such systems typically utilise tailored dashboards where household appliances and infrastructure are connected through wireless networking systems that can be operated from a laptop, tablet or smartphone, often through voice recognition (Ismaeel 2020). It is evident that these AT products could be used equally by people with or without disability.

The NDIA has recognised the benefits of mainstream technologies for people with disability:

> *Beyond the traditional aids and equipment used by people with disability and, including home and vehicle modifications, prosthetics and hearing aids, AT in the NDIS includes devices used by people without disabilities … that are offering new ways to form connections and increase participation. (NDIA 2015: 4)*

The NDIA also states that:

> *Mainstream technologies like smartphones and tablets are offering potential solutions in some parts of the disability sector. [They] may provide similar functionality to a specialist disability device and are generally lower cost. These mainstream devices often have accessibility functions that provide an increasing range of specialist applications and are more integrated with broader community activities and needs, easier to upgrade and more adaptable to meet a participant's changing needs. (NDIA 2015: 13)*

To this end, proposed initiatives to meet the NDIA's Strategic Priorities include 'stimulat[ing] the uptake of existing, new and mainstream technologies' (NDIA 2015: 2).

However, there is a misalignment between the NDIA's definition of 'mainstream technologies' and vision of AT in policy documents, and the way in which AT is categorised and funded in practice (NDIA 2015; NDIS 2022a; 2022b). Technologies designed to assist everyone (rather than people with disability specifically) are classified by the NDIS (2022a; 2022b) as 'general' or 'mainstream' forms of AT and largely considered outside the scope of NDIS funding (see Table 1). For example, smart homes[4] and the 'Internet of Things' (Lopes 2020) are considered mainstream technologies used by the entire population, yet they are not covered under NDIS funding because they were not designed exclusively for people with disability:

> *Smart devices and computers are a general household appliance. Most Australian homes have them, and they are used by most of the community. A household appliance that most people are likely to have at home is a day-to-day living cost, not funded by the NDIS. (NDIS 2023b: para. 3)*

This exclusion contradicts the WHO's inclusive definition of AT, and limits access to life-enhancing technologies for individuals with disabilities. Further, the NDIA's attempt to distinguish between AT designed exclusively for people with disabilities and mainstream AT poses ethical and practical challenges. Limiting the scope of what technologies are deemed acceptable for funding effectively marginalises people with disability, restricting access to life-enhancing technologies that have become an integral part of universally accessible housing (Ellis 2019; Ellis and Kent 2011; Jamwal, Jarman et al. 2022; Paz c. 2021; Hwang, Weng et al. 2014), while impeding the aspirations of the NDIS for choice, control and to meet the full objectives of the CRPD (United Nations 2006, articles 9, 19 and 28).

Overall, there is a need for seamless interaction between SDA, the NDIS and social housing to ensure that people with disability have choice, control and independence over the housing they receive—including digital AT. In this respect the project looks beyond the 'bricks and mortar' aspects of SDA to investigate how the goals of the NDIS can be better realised through inclusion of AT across the SDA program.

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4 According to the LD Resources Foundation Action: 'A smart home is a residence that is equipped with smart home technology, which allows for the automation and remote control of various household systems and devices, such as lighting, heating and cooling, appliances, security, and entertainment' (Paz c. 2021).

Table 1: Defining 'assistive technology': WHO and NDIS

	World Health Organization	NDIS
Definition	• 'Assistive technology is an umbrella term covering the **systems and services** related to the delivery of assistive products and services • Assistive products maintain or improve an individual's functioning and independence, thereby promoting their well-being.' (WHO 2023)	• 'When we talk about assistive technology, we mean equipment, technology and devices that help you do things you can't do because of your disability. Or, things that help you do something more easily or safely. • Assistive technology involves things designed to improve your daily life and help you do everyday things.' (NDIS 2022a)
Includes	• 'Assistive products include devices, equipment, instruments or software from six functional domains: mobility, vision, hearing, communication, cognition and self-care. • Examples of assistive products are physical products such as **wheelchairs, spectacles** and **hearing aids**, and **digital products** such as **software and apps**.' (WHO 2022)	• '[Assistive technology] could be small things like **non-slip mats**, or special **knives** and **forks**. • It could be big things like wheelchairs and powered adjustable beds. • It could be **technology** like an **app** to help you speak to other people if you have a speech impairment.' (NDIS 2022a)
Excludes	• Nil.	• Smart devices and computers • 'Smart devices and computers are a general household appliance. Most Australia homes have them, and they are used by most of the community. A household appliance that most people are likely to have at home is a day-to-day living cost, not funded by the NDIS.' (NDIS 2022a)

Source: Authors.

1.3 Research methods

A multimodal qualitative research approach was designed to respond to the research questions. A policy and literature review, interviews, a series of Panels and Diverse Voices roundtable discussions captured a range of similar and divergent views, and fostered data triangulation to deliver the outcomes of this project. The relationship between the five data collection methods and the research questions is shown in Table 2

Table 2: Research questions and methodology

Research question	Methodology
• What is the nature of the interactions between the social housing sector and the SDA program, and what are the associated barriers and opportunities to accommodation delivery, including the inclusion of AT in these homes?	• Policy and literature review • Interviews • Panel 1
• What is the experience of accessing housing that meets the needs of NDIS participants through the SDA program?	• Interviews • Diverse Voices
• What policies and practice could be changed to improve both the delivery of, and participant access to, SDA and AT in the context of the NDIS?	• Interviews • Diverse Voices • Panel 1 • Panel 2

Source: Authors.

1.3.1 Policy and literature review

An extensive policy review of state and territory government housing and disability service strategies was undertaken to identify the role of state and territory governments in the SDA program. In total, 18 housing and disability services policies were reviewed (Table A2 in Appendix 1). In addition, a significant review of NDIA documents was undertaken, including analysis of instructional material on the SDA itself, investor briefs, information statements and quarterly reports. These policy reviews were supported by a review of academic and grey literature designed to further understand the shift away from housing services for people with disability being provided by the states and territories. This policy and literature review identified emergent themes associated with SDA policies, practices and, in some cases, participants' experiences.

1.3.2 Interviews

Interviews with 22 individuals working directly with NDIS participants were conducted nationally to understand the interface between social housing and SDA-funded dwellings. The function of these interviews was to explore the relationship between CHPs and those working on the frontline, as well as the barriers and opportunities faced by frontline workers when advocating for participants—particularly regarding the design category and preferred location of SDA.

Five groups of frontline workers were interviewed: local area coordinators, support and specialist support coordinators, allied health providers including OTs, SDA advocacy organisations, and government representatives (Table 3). Government representatives were from state government departments in Victoria (n=2), New South Wales (n=2), South Australia (n=1) and Tasmania (n=3), as well as one representative from the federal government. Interviews followed a semi-structured format. Interviewees were asked to discuss how SDA is being delivered, whether it is being delivered in a way that meets the needs and preferences of NDIS participants, and the utility of information provided by the NDIA to stakeholders. Interviewees were also asked about any challenges encountered and to identify opportunities for change. All interviews were audio recorded, transcribed and analysed thematically to identify common themes and topics among the interviewees.

Table 3: Number of interviews conducted, by profession

	n
Local area coordinators	3
Support and specialist support coordinators	5
Allied health providers	3
SDA advocacy organisations	2
Government representatives	9
Total	**22**

Source: Authors.

1.3.3 Panel 1: Community housing providers

The first Panel facilitated for this study was designed for CHPs. Participants were recruited through PowerHousing Australia's Disability Housing Community Practice group. An introductory letter seeking expressions of interest from the researchers was circulated to the Community Practice group. All expressions of interest to participate in the panel were accepted. The 2.5-hour online discussion considered the barriers and opportunities to the delivery of SDA as experienced by representatives of the community housing sector, including accommodation delivery (supply), challenges associated with anticipating demand, the impact of allocation policies, as well as the inclusion of AT in homes. As some panellists were unavailable on the scheduled day, two smaller panels were also held. In total, 10 CHP representatives participated in Panel 1 (Table 4).

Table 4: Number of Panel 1 participants, by state

State	n
New South Wales	1
Queensland	2
South Australia	2
Tasmania	1
Victoria	3
Western Australia	1
Total	**10**

Source: Authors.

1.3.4 Diverse Voices roundtable discussions

It was crucial that this research considered the perspectives and experiences of those most impacted by the SDA program: people with disability. This is congruent with the priority placed by the NDIA on participant experience with the NDIS overall in the most recent annual report:

> The NDIA continues to focus on improving participant experience and outcomes. We will continue to put participants at the centre of everything we do—listening and responding to their needs so we can support people with disability to live the life they choose and contribute to a more inclusive Australia. (NDIA 2022d: 63)

People with disability played a significant role in this research through four Diverse Voices roundtable discussions where people with lived experiences of disability and SDA shared their perspectives on the SDA program, focussing in particular on navigating the policy and accessing appropriate SDA homes.

Roundtable participants were recruited through an open call issued via online networks and a flyer was distributed to help attract further attention (Figure A1 in Appendix 1). A total of 34 expressions of interest to participate in the roundtables were received, suggesting very strong interest in the topic of housing for people with disability. Participants who did not meet our inclusion criteria of living in Australia and in SDA, or supporting an individual in SDA, were excluded.

A total of 19 people with disability from across Australia participated in the online discussions (Table 5). Facilitated by researchers with disability, these roundtable discussions were designed and implemented in accordance with the Diverse Voices method (Magassa, Young et al. 2017).

Diverse Voices was developed in 2015 by the University of Washington's Tech Policy Lab to facilitate targeted conversations with 'experiential experts' from under-represented groups (Magassa, Young et al. 2017). Diverse Voices emphasises the importance of inclusive policy development by inviting feedback from under-represented groups that are not typically consulted during policy development. Short and targeted conversations about the language used in policy documents yield insights that can be incorporated into policy revisions. This approach averts injustice and exclusion. By using this method, this research provides a richer understanding of how SDA policy, documents and processes are received by the people they are designed to assist.

The Diverse Voices method was adopted in this project because the focus is on a person's experience with policy and seeks to understand the ways a particular group would improve a policy based on their lived experience expertise. The focus was therefore on the SDA policies and the individual's interaction with the system, not a person's experience of disability. As such, no questions were asked about an individual's particular impairment. This approach was a deliberate decision to take a non-medical and ethical approach to disability research. The roundtables adopted a relaxed tone and recognised the participants with disability as the experts. Facilitators invited participants to speak about aspects they deemed important through prompts such as 'What does the document not say that you wish it said?' and 'What is not working in this document?' (Magassa, Young et al. 2019).

Two NDIS policies were selected for analysis: the SDA policy (NDIS 2020) and the AT policy (NDIA 2015; NDIS 2022a). Following the Diverse Voices requirements, each policy document was transcribed into an Accessible Word document and emailed to participants a week prior to the roundtable. Participants were individually contacted about any alternative formatting requirements; multiple modes of communication were offered in the roundtables themselves.

Table 5: Number of Diverse Voices roundtable participants, by state

State	n
New South Wales	3
Queensland	6
Northern Territory	1
Tasmania	2
Victoria	4
Western Australia	3
Total	**19**

Source: Authors.

1.3.5 Panel 2: Policy and practice

Panel 2 was formed by representatives from CHPs, allied health professionals and SDA advocacy organisations, the majority of whom had been involved in earlier stages of the research. The panel comprised eight members including Chief Executive Officers, General Managers, Housing Strategy and Project Managers and Director Operations (see Table 6). The key findings from the interviews, Panel 1 and the Diverse Voices were drawn together to inform a discussion paper, which was circulated to Panel 2 members prior to the meeting. During the 90-minute video conference, the panel explored potential policy and practice opportunities to improve the delivery of, and participant access to, SDA, including the provision of appropriate AT. The deliberations were structured around the following five themes:

- state government and the SDA program

- community housing sector and the SDA program

- interactions and relationships with the NDIA

- participant experience and the SDA program

- AT and the SDA program

All panel sessions and roundtables were audio recorded, transcribed verbatim and synthesised for thematic analysis. The emergent themes from all stages of methodology were used to develop the Final Report.

Table 6: Number of Panel 2 participants, by area of expertise

	n
CHPs	6
Allied health providers	1
SDA advocacy organisations	2
Total	**9**

Source: Authors.

2. Understanding Specialist Disability Accommodation

- SDA is a market-based approach to housing for people with disability guided by demand, supply and perceived value for money. Funded under the NDIS Capital Support category, SDA and AT are funded as two separate streams.

- SDA dwellings are broadly described as being 'New Build' or 'Basic'. The majority (56%) of enrolled SDA falls under the 'Basic' design category, with a significant portion situated within the social housing sector. Only one SDA design category, High Physical Support, is required to be AT-ready.

- Dwelling supply has slowed since 2021 despite high demand for SDA among NDIS participants.

- The NDIA's 2018 pivot away from sole-occupancy allocations has led to vacant SDA, prompting some providers to offer tenancies to SDA recipients with lower funding levels. This shift has contributed to a supply imbalance in specific design categories and increased risk for SDA providers.

It is well understood by users and service providers that the SDA program is complex (Aimers, Rathbone et al. 2022; Beer, Flanagan et al. 2019; Callaway, Tregloan et al. 2020; Madhavan, Mulherin et al. 2021; Skipsey, Winkler et al. 2022; Winkler, McLeod et al. 2020). This chapter, informed by the review of policy documentation and academic and grey literature, provides a concise background on the SDA program. It describes the funding mechanism associated with the SDA program and explains how AT is linked to SDA funding. This chapter also explains the process participants must navigate to identify and access SDA that meets their needs, preferences and approved level of funding.

The SDA program has been structured to create a demand-driven market, with the aim of giving recipients greater agency in the housing they can access compared to previous schemes. As such, it is considered one of the largest social-impact investment opportunities in Australia, with the potential to generate long-term stable returns to SDA investors while delivering appropriate housing solutions for people with extreme functional impairment and very high support needs (Winkler, McLeod et al. 2020). A core goal of the program is to encourage investment and growth of appropriate housing supply for people with disability, while reducing pressure from public funding mechanisms. By leveraging the financial resources, skills and expertise available within the mainstream economy, the anticipated outcome of the SDA program is to increase the diversity of adequate, affordable and appropriate accommodation available to people with disability across a range of locations (Beer, Flanagan et al. 2019).

SDA funding constitutes an adjusted contribution to the capital costs of dwellings only—in other words, the cost of building supply including land. The NDIA provides SDA pricing strategies, which include guidance on cost benchmarks for factors such as design categories, building types and sizes, and location. SDA funding is allocated to each dwelling for a 20-year period. After this, the dwelling can be sold into the private market. According to the NDIA, $700 million per annum will be allocated through the program over a 10-year period, which is anticipated to leverage an additional $5 billion in private market investment (NDIA 2018). As it stands, only $214 million in SDA payments were made in 2022 (NDIA 2022c). More recent reporting has increased investment forecasts to over $12 billion in private market investment once the SDA program reaches maturity (Wellecke, Robertson et al. 2022). However, only $3.5 billion was invested into the SDA market between 2017 and 2022 (Wellecke, Robertson et al. 2022).

2.1 NDIS-funding mechanisms

In order to understand the SDA program, it is necessary to explain the configuration of the NDIS-funding mechanism. NDIS funding is divided into three main support categories:

- Core support
- Capacity Building support
- Capital support (Figure 1).

Within each support category there are discrete funding streams for more specific support needs. For example, SIL funding is situated within the 'Core support' category and support coordination within the 'Capacity Building' support category. 'Capital support' is the NDIS support category of most relevance to this project. It includes three funding streams: SDA, AT and home modifications (Figure 1). Each of these funding streams is separate and has its own application criteria and assessment processes. SDA funding only applies to the dwelling in which a person lives and is separate from other services available through the range of additional NDIS-funding streams (NDIA 2018). This demonstrates that SDA funding is one of a number of funding streams available to eligible participants, but also highlights the separation between the funding for SDA and AT.

Figure 1: Funding SDA and AT under the NDIS
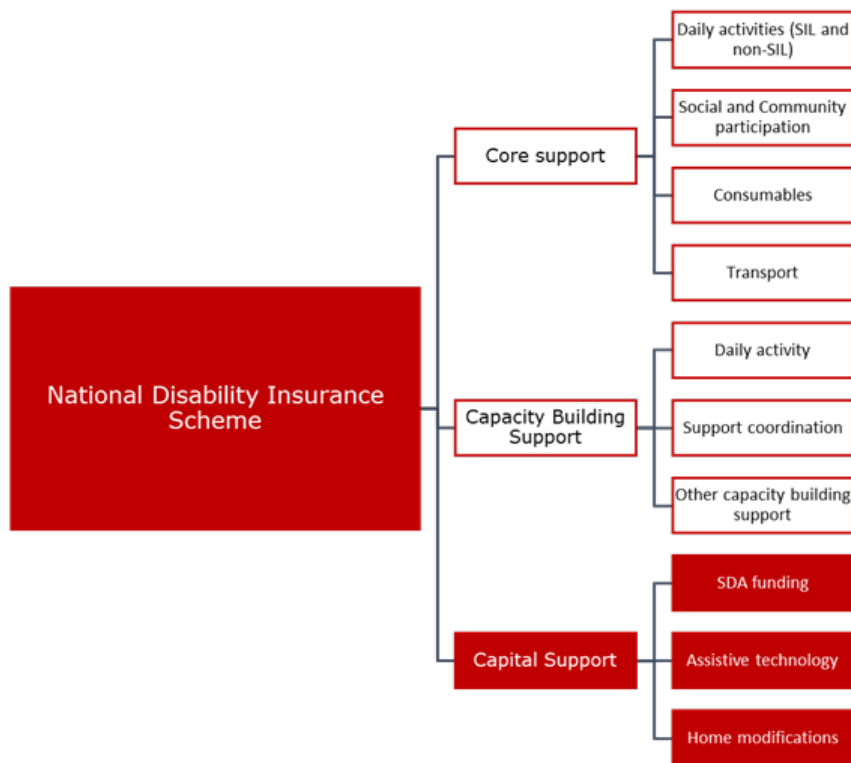
Source: Authors.

2.1.1 SDA funding

SDA funding is allocated to eligible participants as part of their NDIS package (NDIA 2022a; NDIS 2020). The SDA program is designed to enable participants to choose an SDA-funded dwelling that meets their housing needs and locational preferences. At the same time, the type of housing and household size is determined by the actual level of SDA funding approved in a participant's package.

Annual payments are then made by the NDIA to a registered SDA provider who may own or manage an enrolled property that is tenanted by a participant with SDA funding in their plan. Payments contribute towards the cost of developing, operating and maintaining an enrolled dwelling (NDIS 2016a; 2020; Sarkodee and Martel 2018). Participants are also required to pay a 'reasonable rent contribution' (NDIA 2022a) to the registered provider, typically limited to 25 per cent of their DSP plus Commonwealth Rent Assistance (CRA), if eligible.

Price serves as a crucial determinant in shaping the NDIS quasi-market for many services, including SDA. Each SDA dwelling is priced according to a standard set of factors set out in the NDIA Pricing Arrangements (NDIA 2023a), such as building type and design category (discussed in section 2.2), and location.

The pricing arrangements are designed to deliver long-term certainty for SDA providers and investors 'as accommodation support services transition from block grant funding into the market' (DSS 2020: 2). Under the NDIA, pricing arrangements should be sufficient to cover the costs of delivering and maintaining appropriate accommodation for a participant. This also takes into account a participant paying a reasonable contribution for the rent, and land price inflation.

Research shows that quasi-markets thrive with flexible pricing arrangements, which are responsive to local market conditions (Carey, Malbon et al. 2018). At present, it remains ambiguous whether the NDIS can adequately consider local market conditions when establishing local prices due to the centralised structure of the scheme (Carey, Malbon et al. 2018). Under the SDA Pricing and Payments Framework, the NDIA is required to review the pricing arrangements every five years (DSS 2020). A review took place throughout 2023.

This review considered the methodology that informs the pricing of SDA (NDIS 2022e), including:

- construction costs for building types and categories
- cost of land
- costs that vary by geographic location
- vacancy rates
- costs of ownership including property management (NDIS 2022e).

It also assessed the supply and demand of SDA nationally. Expert panels were convened to work with the NDIA to achieve the terms of reference associated with the 2023 SDA Pricing Review. Based on the findings, new SDA prices will be set to direct market investment towards areas that should best serve individuals with disabilities who require SDA in the next five years. This research took place prior to implementation of the new pricing rules for SDA.

2.1.2 Home modification funding

Home modifications refer to physical changes made to the built environment. This might include changes that assist participants or their carers to access or use areas of their home. Modifications are described as being either 'minor' or 'complex' alterations.

- Minor home modifications are generally non-structural—for example, widening a doorway to ensure wheelchair access.
- Complex modifications involve structural changes to the home—for example, removing walls and combining rooms. In these cases, home modification funding can be used to meet Home and Living goals.

Home modifications are not the focus of this report. However, it is worth noting this funding stream as it cannot be used in conjunction with SDA funding, which assumes that an SDA-funded home has been built to one of the four SDA design categories (NDIA 2022a). This funding is therefore primarily utilised by NDIS participants who are not eligible for SDA funding and are residing in mainstream social and private market housing.

2.1.3 Assistive technology funding

AT is broadly defined by the NDIA as supports that improve the daily life of participants (NDIS 2022a). Under the NDIS guidelines this refers to equipment, technology and devices that help an individual do something that they cannot because of their disability. It also includes supports that may assist an individual to do something more easily or safely. AT therefore includes a wide variety of functional items from a non-slip bathmat or shower stool, for instance, to a wheelchair or walking frame to bodily prosthetics and mechanical supports. AT can also include vehicle modifications. An application made for an AT product must satisfy the 'reasonable and necessary' criteria that determines all NDIA funding and is assessed according to an associated 'risk level' (Table 7).

The onus is upon each applicant to justify the cost of their chosen technology and provide significant evidence that it is essential, directly impacted by their disability; it must also be the most appropriate, low-risk and cost-effective choice. Applicants are advised to consult with others, including their OTs, local area coordinators or an AT advisor in order to ensure they have satisfied these extensive requirements. In NDIA parlance, an AT advisor refers to allied health practitioners, AT mentors, orientation and mobility specialists, continence nurses and rehabilitation engineers (NDIS 2023c).

The AT funding stream is broken down into two application processes:

- AT valued below $15,000

- AT valued above $15,000.

The cost of the AT being applied for also determines the time in which a decision should be made. For example, a low-cost AT item is categorised as an item costing less than $1,500 and the NDIS must make a decision within 28 days (NDIS 2022a). This is considerably shorter than the 50 days the NDIS has to make a decision on high-cost AT for items valued at $15,000 or above (NDIS 2022a).

A flexible approach to purchasing low-cost AT was implemented temporarily in response to the Covid-19 pandemic, which allowed participants to spend up to $1,500 from their existing Core budget on low-cost AT items such as smart devices and fitness equipment (NDIS 2023a). It remains unclear whether this flexible approach to low-cost AT will remain a permanent policy fixture.

Maintenance and repair of AT is another cost issue, requiring negotiation with the NDIS. A portion of funding is included in capacity building support budgets 'to help you get advice or an assessment for your assistive technology' (NDIS 2023e). It is the responsibility of the NDIS participant to manage their budget to cover repairs or maintenance: 'When we include funding in your budget for assistive technology, we include enough to cover maintenance and repairs. It's up to you to manage your budget so you have enough for these costs' (NDIS 2023d). Decisions regarding AT funding are ultimately referred to the baseline criteria; despite all supporting evidence, if the NDIS panel decides AT funding is not 'reasonable and necessary' then it is not approved.

Table 7: Assistive technology product risk criteria

Risk level	Broad description	Selected examples
Low-risk AT products	Products that need very little advice or setup support from AT advisors to use them safely. Low risk of causing harm when used in day-to-day life.	• Non-slip bathmat • Knives, forks or other eating utensils • Large print labels • Shower stool or chair • Handrails • Portable ramps • Mainstream computer technology
Higher-risk AT products	Products that generally need advice from an AT advisor or AT assessor to confirm the right item selection and the best outcomes.	• Bed sticks and other transfer aids • Items that might restrict voluntary movement (including bed rails, bed covers, weighted blankets) • Powered devices for magnification or hearing • Mobility and postural support or correction devices • Motor vehicle adaptations • Pressure care devices • Beds adjustable while occupied • Prosthetics or orthotics • Devices to support breathing

Source: NDIS (2022a).

'Mainstream' AT funding

While AT is broadly described in the NDIS guidelines as 'equipment, technology, and devices', in practice the information provided in these documents skews away from universally used technologies such as smart home systems and devices, both directly and indirectly discouraging people from considering them for funding support (NDIA 2022b). Discrete machines and products are presented as examples, rather than connected digital devices such as tablets, and there is no discussion of the possibilities afforded by digital networked technology around the home—for example, smart technologies that control lights and appliances in the home.

The vision of AT presented here, as a series of distinct items with limited uses, beneficial only to people with disability, is quite removed from the convergent technological landscape developing in wider society (Jamwal, Jarman et al. 2022; Lopes 2020; Yusif 2021). The benefits of smart home technology and the accessibility potential of emerging digital devices for people with disability is not engaged with in NDIS policy, despite being a key aspect of the NDIA's (2015) vision in the AT strategy.

The NDIS groups 'mainstream computer technologies' into both the low-risk and low-cost categories of AT funded by the scheme (NDIS 2022a). Therefore, these should be the easiest category of AT items for which funding can be accessed. However, there is an expectation that participants will finance these technologies themselves rather than include them under the AT funding stream.

Requests for AT such as computer-based smart devices and systems are typically declined by the NDIA due to being considered a 'day-to-day living cost' (NDIA 2022b). They are not considered a 'reasonable and necessary' support for participants as they constitute general household appliances that 'most Australian homes have […] and they are used by most of the community' (NDIS 2022c). As such, these technologies 'are unlikely to be an extra living cost due solely and directly as a result of [an individual's] disability needs' (NDIS 2022c).

To be considered for AT funding, a participant must provide additional written evidence demonstrating that the cost of the AT is an extra cost that is solely and directly because of an individual's disability needs. This represents a further boundary discouraging people from applying, while simultaneously making assumption that NDIS participants have the financial wherewithal to purchase commonplace technologies that have been demonstrated to significantly increase quality of life, promote independence and empowerment while enhancing economic and community participation (Ismaeel 2020; Jamwal, Jarman et al. 2022; NDIA 2015).

2.2 Design categories and building types

SDA is divided broadly into two groups. The first is known as 'New Build', which constitutes dwellings built after 1 April 2016, that also meet all best practice requirements under the SDA rules and NDIS price guides (NDIA 2023a; NDIS 2020). This might also include a refurbished dwelling that has undergone substantial renovation since 1 April 2016 and meets all of the requirements for a 'New Build'.

The second group is referred to as 'Basic' design. This includes dwellings built prior to April 2016 and typically house someone who was funded for disability-supported accommodation under previous state, territory or federal programs. The category was created in recognition of NDIS participants who are already living in this type of accommodation and either choose to remain or may not have alternatives available to them (Beer, Flanagan et al. 2019). These dwellings constitute disability support accommodation that does not include specialist design features but may exhibit other features that cater for the needs of people with disability and assist with the delivery of support services (NDIA 2020).

Each group is further divided into design categories. For example, 'New Build' includes Improved Liveability, Fully Accessible, High Physical Support and Robust designs. While 'Basic' can be further divided into Existing or Legacy dwellings. Collectively, the SDA design categories may take the form of a number of building types including apartments or flats, semi-detached dwellings such as townhouses or villas, detached dwellings or group homes. The design category framework is shown in Figure 2 and is described in the remainder of this chapter.

Figure 2: SDA design category framework

Source: Authors.

2.2.1 'New Build' design categories

Under the SDA, 'New Build' dwellings fall under one of four design categories (NDIA 2023a). The inclusion of a range of features assists in determining the design category of a dwelling. Features might include:

- no steps at external doors and external outdoor private areas

- bathroom vanity/handbasin accessible in seated or standing position

- power supply to doors and windows (blinds), for retrofit of automation as necessary

- structural provision for ceiling hoists.

A detailed description of the minimum requirements for each design category can be found in Table A3 in Appendix 1.

The national Livable Housing Design Guidelines, as set out by Livable Housing Australia (LHA), also inform the design category of an SDA dwelling. The guidelines outline 15 housing design elements that make homes more accessible for all people, including those with disability (LHA 2017). Under the LHA guidelines, performance is linked to the inclusion of these Livable Housing design elements into new dwellings:

- Platinum Standard: all 15 design elements are included.

- Gold Standard: fewer than 15 elements but with generous room dimensions.

- Silver Standard: seven of the 15 design elements, but the structure remains flexible and adaptable.

SDA Guidelines are closely linked to the Livable Housing Design Guidelines. Dwellings built to the Improved Liveability and Robust design categories must meet the Silver standard and have seven of the 15 core liveable housing design elements outlined in the Liveable Housing Design Guidelines (LHA 2017). Fully accessible and high physical support must meet the Platinum Livable Housing Design Standard.

Table 8 provides a description of all SDA design categories, and also indicates whether or not the category is associated with assistive technology.

Table 8: SDA design categories

Design category	Description	LHA standard requirement	Prescribed assistive technology requirements
'New Build'			
Improved liveability	Housing designed to improve 'liveability' by incorporating a reasonable level of physical access and enhanced provision for people with sensory, intellectual or cognitive impairment.	Silver	No
Fully accessible	Housing designed to incorporate a high level of physical access provision for people with significant physical impairment.	Platinum	No
High physical support	Housing designed to incorporate a high level of physical access provision for people with significant physical impairment and who also require very high levels of support.	Platinum	Yes
Robust	Housing designed to incorporate a high level of physical access provision and be very resilient, while reducing the likelihood of reactive maintenance and reducing risk to the participant and the community.	Silver	No
'Basic'			
Existing	Dwellings built before 1 April 2016 that were used as disability-related supported accommodation under a previous government scheme.	N/A	No
Legacy	Existing dwellings that do not meet the requirement of five residents or less.	N/A	No

Source: NDIA 2023a.

Notably, there is only one design category that the NDIS guidelines state must be 'Assistive Technology ready': those dwellings categorised as High Physical Support (NDIS 2019). In practice, being AT-ready means these dwellings must have an internet connection and a video, intercom or communication system (NDIS 2019), or include heating/cooling and emergency power to cater for a minimum 2-hour outage where the welfare of residents is at risk (Summer Foundation 2020). Compared to the full scope of AT possibilities described in subsection 2.1.3, this is extremely limited.

2.2.2 'Basic' design categories

'Basic' design housing falls under one of two categories: Existing and Legacy (NDIA 2023a).

Existing dwellings constitute any accommodation built before 1 April 2016 that was used as disability-related supported accommodation under previous state, territory or federal programs. Many Existing dwellings were formerly recognised as group homes—a model of housing developed in response to the issues associated with institutional, congregate care accommodation. Group homes were part of a larger deinstitutionalisation process, often depicting smaller-scale, neighbourhood-based dwellings reflective of a typical suburban home (see Bostock, Gleeson et al. 2001; Priest and Bruno 1990). To be enrolled in SDA, existing dwellings must substantially comply with the requirements of a 'New Build' and must meet the maximum residential requirements of five residents or less (NDIA 2023a).

Legacy dwellings are defined as SDA dwellings that exceed the maximum residential requirement of five residents or less. Legacy dwellings include a congregate care model of accommodation that constituted a substantial feature of housing for people with disability across Australia (see Bostock, Gleeson et al. 2001). Such institutionalised accommodation settings often housed more than 20 residents. This form of housing is scheduled to exit the program in the coming years, as the NDIA will stop making SDA payments to Legacy dwellings. SDA payments for Legacy properties with 11 or more residents will cease five years after transitioning into the program, and 10 years for Legacy properties with six to 10 residents (NDIA 2023a).

Many tenants of Existing or Legacy dwellings were 'grandfathered' into the SDA program, as these dwellings were enrolled as SDA. The specific selection criteria employed to determine the enrolment of these dwellings into the SDA program is not clear, nor is the housing outcome of respective tenants as 'Basic' SDA exits the program.

2.3 Registered SDA providers and enrolled properties

In 2022, there were over 300 registered and active SDA providers across Australia (NDIA 2022c). An SDA provider is an entity that is a registered NDIS provider and is also registered to provide SDA. To become an SDA provider, an entity must register through the NDIS Quality and Safeguards Commission. The Commission regulates the NDIS market, enforces quality and safety services, and is responsible for identifying challenges and areas for improvement (NDIS 2023b). Once an SDA registration application is submitted, it is assessed by an approved quality auditor. If the Commission is satisfied, the applicant can proceed to provide housing supports to people with disability.

Where a property has been completed for the purpose of providing SDA, the dwelling must be enrolled into the program before it can be tenanted by a participant. To enrol an SDA dwelling with the NDIA under the SDA program, the property must meet a number of NDIA requirements and certification standards, as well as meeting all applicable state-level building codes and laws (NDIA 2018: 11). Providers must also submit information on the design category, building type, number of bedrooms and location of the property. Most significantly for this research, properties can only be enrolled by a registered SDA provider (and, in some cases, also by state and territory governments).

2.4 National delivery of SDA

Approximately $3.5 billion was invested into the SDA market between 2017 and 2022 (Wellecke, Robertson et al. 2022). This investment delivered a total of 7,451 enrolled dwellings into the SDA program nationally as at 31 December 2022 (Figure 3). The rate of growth in the SDA market has slowed since 2021 (Figure A2 in Appendix 1), despite the program not yet achieving market maturity.

NDIA reporting shows there are more 'Basic' (Existing and Legacy) stock (56%) enrolled in SDA than 'New Build' (44%) meeting best practice design standards (Figure 4). The majority of this 'Basic' stock is situated within the social housing sector. Although Queensland and Western Australia constitute the only two states where the proportion of 'New Build' exceeds 'Basic' dwellings, it should be noted that very little SDA has been delivered across Western Australia compared to other jurisdictions, with a total of only 157 dwellings. The state also has a much smaller number of 'Basic' dwellings, with only 10 Existing dwellings and one Legacy dwelling enrolled in the program (Table A5 in Appendix 1).

The SDA program has increasingly spurred interest among for-profit investors and developers because of the attractive returns potentially available. In some cases, this had led to the speculative delivery of select design categories and dwelling types at the most profitable segment of the market, such as sole-occupancy apartments built to High Physical Support design specifications (Aimers, Rathbone et al. 2022).

In 2018, a NDIA decision to restrict the number of sole-occupancy approvals (NDIA 2018) impacted SDA providers of such dwellings. The decision resulted in vacant SDA stock as many providers had enrolled properties for sole occupants. As a result, some providers were forced to offer tenancies to SDA recipients with lower levels of funding than could be received for the dwelling (Beer, Flanagan et al. 2019). Consequently, the decision created a supply imbalance for some SDA categories and increased risk for SDA providers in both the social housing sector and the private sector.

For instance, although the majority of apartments enrolled in SDA are of High Physical Support design (63%), High Physical Support SDA apartments constitute the largest proportion (37%) of total SDA dwellings under development (NDIA 2022b: 10). As at December 2022, there were 2,104 High Physical Support dwellings under development (equivalent to 3,634 SDA allocations according to the NDIA). Despite constituting the fastest growing design category in terms of dwellings delivered (see Figure 3), there were only 1,279 eligible participants seeking High Physical Support SDA allocations (NDIA 2022b).

Furthermore, the greatest demand for SDA in the future is anticipated to be for the Improved Liveability design category which, under the current price framework, generates much lower returns than High Physical Support dwellings. As a result, Beer, Flanagan et al. (2019: 32) predicted that the majority of SDA would be delivered by the not-for-profit sector rather than the private market. However, as noted in Chapter 1, this has not been the case, with private housing providers delivering more to the market than community housing and not-for-profit providers.

Figure 3: Number of enrolled SDA dwellings by design category, 2019–2022
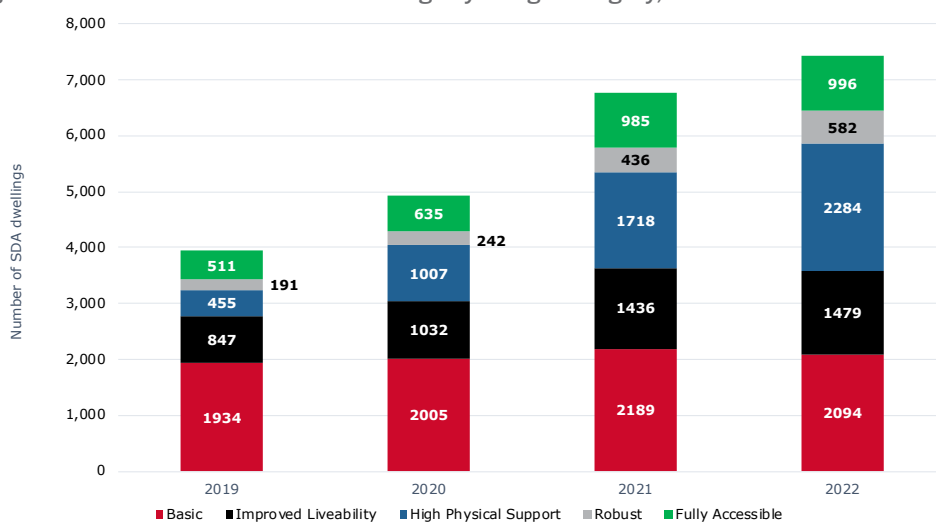
Source: Adapted from NDIA 2022c.

Figure 4: Proportion of enrolled SDA dwellings by 'Basic' and 'New Build' design categories across Australia
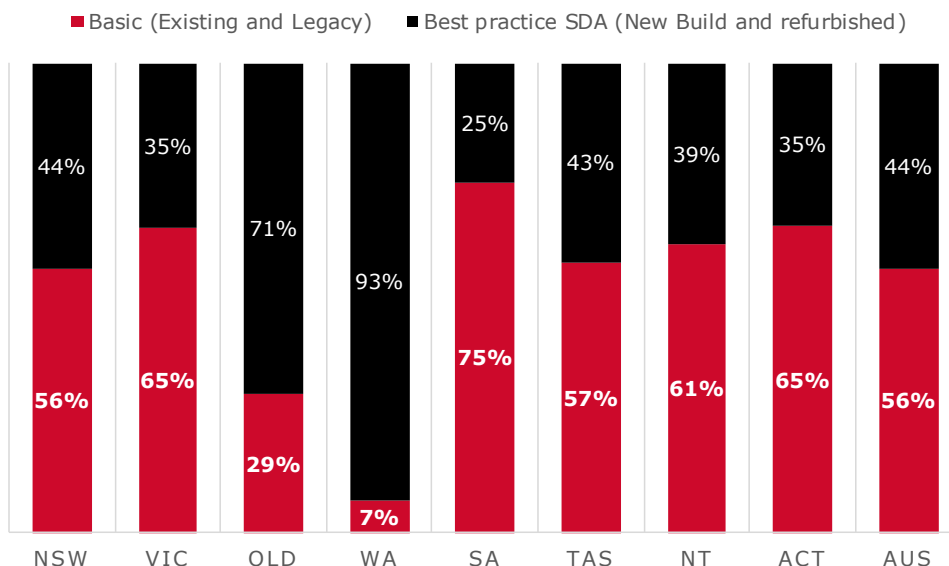
Source: Adapted from NDIA 2022c.

2.5 NDIS participant access to SDA

2.5.1 Applying for SDA

SDA funding is only allocated to NDIS participants with extreme functional impairment or very high support needs who demonstrate that such housing is 'reasonable and necessary'. To apply for SDA funding, NDIS participants must provide the following evidence to support their request:

• Approved 'capacity building funding' in order to search for suitable housing, usually with the assistance of a support coordinator.

• A housing goal in their NDIS plan.

• A participant housing statement.

• A Home and Living request form.

• A Functional Capacity Assessment, completed by allied health professionals.

• Any additional assessments and evidence required to support the application (Skipsey, Winkler et al. 2022).

A participant typically then submits an application to the NDIA for housing or support funding to be allocated to their NDIS plan. The NDIA will review the application and is expected to make a funding decision, or determination, and communicate the outcome to the participant within 56 days (as stated in the NDIA Participant Service Guarantee Policy[5]).

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5   https://www.ndis.gov.au/about-us/policies/service-charter/participant-service-guarantee.

2.5.2 Searching for suitable SDA

The search for suitable SDA typically occurs once a NDIS participant has been approved for SDA funding. NDIS funding is available to assist participants to navigate the process of finding a home. For instance, funding for a support coordinator can be accessed via a participant's Capacity Building funding. A support coordinator can assist with all aspects of exploring a participant's SDA options, making applications and negotiating tenancy arrangements (NDIA 2018: 12).

However, there is no centralised and comprehensive database or hub from which NDIS participants can search for SDA. Due to the structure of the NDIS as a marketplace, the search for SDA differs across states and territories, and between metropolitan and regional areas. Throughout the interviews and panels, a range of private and not-for-profit methods were identified that NDIS participants can use to search for available SDA. These include:

- working directly with SDA service providers

- working with support and specialist support coordinators

- using online platforms such as SDA Finder, Housing Hub or Go Nest.

NDIA SDA Finder

The NDIA SDA Vacancy Finder[6] is a tool that assists users in searching for accommodation vacancies that match their needs. By using filters such as building type, SDA design category, number of residents, price and location, users can refine their search results. Although not all SDA vacancies are advertised on the platform, users can discuss suitable options with their planner, support coordinator or local area coordinator. It is crucial to verify that the dwelling meets an individual's needs before committing to a service agreement, and users should seek independent advice tailored to their circumstances.

While the NDIA Finder tool includes information about some SDA vacancies, the NDIA would prefer participants to consider a variety of private advertising platforms when seeking a vacancy, similar to the process of other mainstream housing markets, citing this as a way to promote choice and control (NDIA 2018: 12). The NDIA does not endorse third-party platforms and is not liable for any claims or losses arising from services provided by them. Interviewees have commented on the limitations of the platform in terms of usability and reliability—which means that many providers and participants have turned to non-government online solutions. Two prominent platforms are the Housing Hub and Go Nest.

The Housing Hub

The Housing Hub[7] was initiated in 2017 by the Summer Foundation. It is a social-impact enterprise that assists people with disability in finding suitable housing across Australia, including SDA and other accessible options. The platform offers:

- a personalised Housing Seeker Profile

- a NDIS Housing Advice Line

- a provider portal

- an extensive database of resources.

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6 https://www.ndis.gov.au/participants/home-and-living/specialist-disability-accommodation-explained/sda-finder.
7 https://www.housinghub.org.au/

Additionally, the Housing Hub has launched a Specialist Home and Living Support Coordination Service for NDIS participants. Over its first five years, the Housing Hub has listed over 9,900 properties, hosted over 4,000 workshop attendees, and supported over 900 people in securing SDA properties and funding from the NDIA. Focussed on delivering positive social impacts for people with disability, the Housing Hub prioritises the needs and preferences of its users.

Go Nest

Go Nest[8] is a free, accessible and independent online platform that connects people with disability to suitable housing options, including those offered by providers of housing for people with disability, community and social housing providers, real estate agents and private landlords. By creating a personal profile outlining their support, accessibility requirements and preferences, users can be matched with properties that meet their needs. Housing providers can also list their properties and preferences for residents, allowing them to efficiently fill vacancies. Developed by Northcott Innovation, a disability-focussed innovation company, Go Nest has expanded its scope to include all housing options for people with disability, not just those allocated SDA funding.

2.5.3 Appealing an SDA determination

If a participant is not satisfied with their SDA funding determination, they are entitled to request a review of the funding decisions made by the NDIA. This involves an internal review within the NDIA's Home and Living panel, which participants must request within three months from the date they receive a decision (NDIA 2022a). If the outcome of this review remains contested, participants have 28 days to request an external review to be conducted by the AAT. The AAT is an independent body that reviews all evidence included in a participant's application and makes a decision regarding the level of SDA funding to allocate (Skipsey, Winkler et al. 2022).

2.6 National demand for SDA

Seven years since the inception of the program, 18,219 NDIS participants (61%) of the anticipated 30,000 have received an SDA allocation and moved into an SDA-enrolled property (NDIA 2022c). Subsequently, the demand for SDA remains high among NDIS participants with approved SDA funding. Table 9 shows that as of 31 December 2022, 5,231 NDIS participants were waiting for an SDA allocation. Of this cohort, 3,848 NDIS participants in SDA dwellings were seeking an alternative SDA dwelling. An additional 1,382 NDIS participants with SDA funding were searching for an appropriate SDA dwelling (NDIS 2022c).

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8   https://gonest.com.au/

Table 9: SDA need, by state and territory

State/territory	Participants with SDA need	Participants in SDA dwelling	Participants in SDA dwelling, seeking alternative	Participants not currently in SDA, seeking dwelling
New South Wales	7,594	5,891	1,335	368
Victoria	6,922	5,366	1,194	362
Queensland	3,572	2,506	728	338
South Australia	2,400	1,882	365	152
Western Australia	1,787	1,568	116	103
Tasmania	557	487	42	28
Northern Territory	287	249	19	19
ACT	331	270	49	12
AUSTRALIA	**23,450**	**18,219**	**3,848**	**1,382**

Source: Adapted from NDIS 2022c.

Figure 5 illustrates the number of NDIS participants seeking SDA dwellings by design category across Australia between 2021 and 2022. It depicts participants' diverse housing needs, which have continued to outpace the level of new SDA dwellings enrolled into the program (see Figure 3).

A more granular interpretation of this data is shown in Table A4 in Appendix 1, which illustrates the level of SDA need by design category across each state and territory. These data only include NDIS participants with approved SDA funding in their plan—which means that the unrecognised need for SDA is likely much higher.

Figure 5: NDIS participants seeking SDA by design category, 2021 and 2022
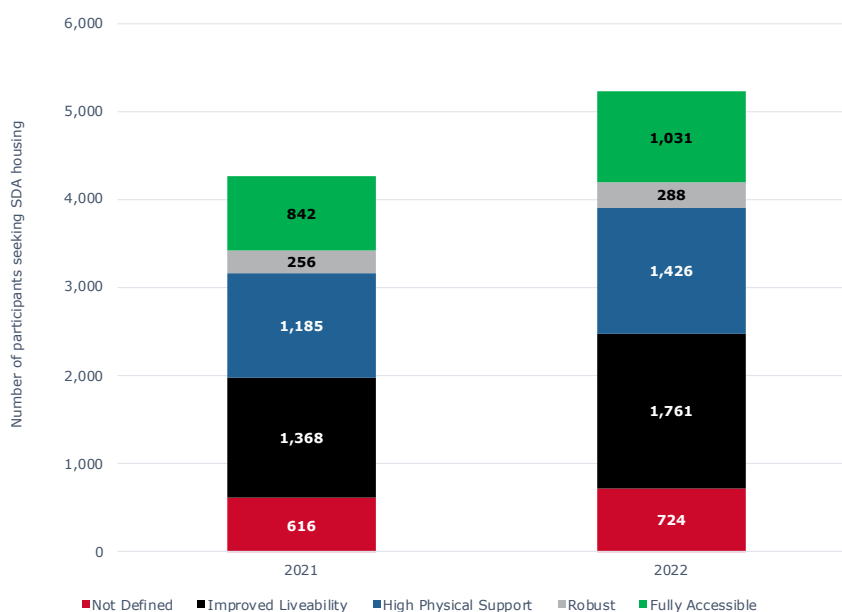
Source: Adapted from NDIA 2022c.

According to recent NDIA reporting, the 18,219 participants approved for SDA payments received just over $15,000 per year on average (NDIA 2022c). This means that the average NDIS participant with SDA funding is excluded from accessing most 'New Build' SDA, other than a shared Improved Liveability dwelling with five residents (NDIA 2023a). In most cases, accessing Existing or Legacy SDA dwellings is the only option available to the average SDA recipient.

2.6.1 Anticipating demand

Demand data is made available to SDA providers in various ways. The primary source of information is provided by the NDIA. This is to be expected, given the NDIA's central role in the SDA program and the NDIS more broadly. As the custodian of identified NDIS participant housing needs and preferences, the NDIA disseminates information to SDA providers through the following sources:

- SDA quarterly reports (2020–current)

- SDA provider and investor briefs (2018–current)

- NDIS quarterly reports (2013–current)

- SDA pricing arrangements

- SDA demand data website

- SDA Finder tool

- SDA Reference Group 2019–2021

The NDIA's quarterly reports and the provider and investor briefs constitute the most detailed source of data to inform SDA providers about NDIS participant housing need. Since October 2020, the quarterly reports have been refined to include:

- longitudinal datasets of enrolled SDA dwellings by state and territory

- design category

- building type and size

- residents per dwelling

- number of pipeline dwellings

- number of active and inactive SDA participants with approved SDA supports

- participant demographic information

- locational information published at the scale of local government area (SA3 level) (NDIA 2021).

The NDIA also provides information about established SDA dwellings via the SDA Vacancy Finder, an interactive tool launched on the NDIS website in August 2021. While this tool is designed to assist NDIS participants and their support networks to identify suitable SDA vacancies, it also offers providers insight into the level of existing supply at the scale of local government area,[9] including the design category and building type. Moreover, it allows providers to share information about their dwellings, including vacancies, enabling better visibility of established SDA supply where eligible participants can connect with providers (NDIA 2021).

In addition to NDIA-released demand data, the NDIA expects SDA providers to develop a range of alternative methods to determine demand for SDA housing (NDIA 2018).

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9   Locational information regarding SDA supply is provided at the Statistical Area Level 3 (SA3) as defined by the Australian Bureau of Statistics. SA3s closely align to local government areas in metropolitan Australia (ABS 2016).

2.7 Summary

Research shows that well-designed and well-located SDA can substantially improve the quality of life for people with disability (Beer, Flanagan et al. 2019; Douglas, Winkler et al. 2023). In addition to improved health, wellbeing and community integration outcomes, best practice SDA and access to appropriate assistive technologies can significantly reduce SIL costs over time, further supporting the sustainability of the NDIS (Aimers, Wellecke, et al. 2021). In turn, the cost of SDA and AT should be considered in conjunction with SIL and other NDIS support costs.

3. Delivering Specialist Disability Accommodation through the social housing sector

- Interactions between the social housing sector and the SDA program are complex, and involve multiple models of dwelling delivery.

- The role of state and territory governments in the SDA program is not clear and needs to be further defined. CHPs have specialist knowledge and skills that could be recognised and funded as part of the SDA program.

- The NDIA has a role in reducing risk for social housing providers through data delivery, simplifying systems, and providing a dedicated communication channel.

- SDA listings are routinely filled by non-eligible SDA tenants because of prolonged vacancies and a mismatch between available SDA and NDIS participant housing need.

- Future growth in 'New Build' SDA is contingent on the implemented outcomes from the SDA Pricing Review 2022–23.

This chapter details the historic role of state and territory governments and housing for people with disability. It interrogates the nature of interactions within the social housing sector, with a focus on public and community housing, and the SDA program. It also examines the barriers and opportunities experienced by the sector regarding accommodation delivery for people with disability—including the integration of AT in these homes.

3.1 Historic role of state and territory governments in housing for people with disability

Prior to the establishment of the NDIS and the SDA program, funding and management of housing for people with disability was largely the responsibility of state and territory governments.

State and territory government–owned and operated housing for people with disability predominantly took the form of institutional accommodation settings. However, these congregate models of care did not always fully support the rights of people with disability (Bostock, Gleeson et al. 2001; United Nations 2006). In the 1990s, a policy shift towards group home accommodation[10] situated within mainstream communities was identified as a more appropriate housing alternative for people with disability (Bostock, Gleeson et al. 2001: 17). In turn, significant state and territory funding was committed to transitioning people with disability from institutional to group home accommodation settings.

During this period of deinstitutionalisation, the approach to housing for people with disability varied between states, with each jurisdiction operating unique programs and schemes governed under various iterations of the multilateral Commonwealth State Disability Agreement, as well as discrete state- and territory-specific Disability Service Acts (see Parliament of Australia 2007). The development of federal, state and territory policy programs for people with disability and housing were often misaligned, ultimately weakening program linkages and affecting housing outcomes (Bostock, Gleeson et al. 2001: 16). The SDA program represents a targeted response to the shortcomings of previous policy approaches to housing for people with disability.

3.2 Social housing in the context of the SDA program

Analysis of panel discussions with CHPs and interviews with state government representatives show multifaceted interactions between social housing and the SDA program (Figure 6). Panellists revealed that there is no one single model of dwelling delivery under the SDA program by the social housing sector. Moreover, interactions differ by jurisdiction, pre-existing state and territory government programs, and from project to project depending on the developer or investor.

The individual NDIS participant is at the centre of the interaction between social housing and the SDA program. Figure 6 points to a number of different ways that state and territory housing departments interact with the SDA program, which is discussed further in subsection 3.2.1. Similarly, CHPs' interactions with the program are linked to both the state and territory housing departments and the private sector. Both entities have links to the NDIS and NDIA. However, as will become evident, those communication links are not as strong or effective as desired. It was argued in interviews that the complexity of the interactions between social housing and the SDA program may be due to organisations trying to work out the most suitable way for them to operate within a newly marketised SDA sector.

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10 Group Homes largely consist of small-scale, neighbourhood-based housing reflective of the typical suburban home (Bostock, Gleeson et al. 2000: 5).

Figure 6: Interactions between social housing and the SDA program
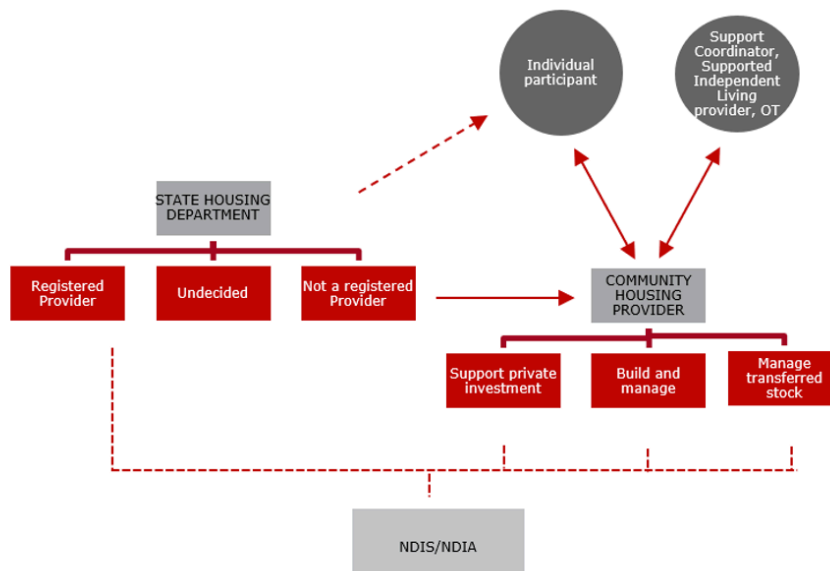
Source: Authors

3.2.1 State and territory housing interaction with the SDA program

The role of state and territory governments in the provision of SDA is complex, un-unified and largely shaped by existing and former state-level policies and strategies that vary by jurisdiction. Longstanding housing policy and programs for people with disability established prior to the NDIS create additional complexity regarding state and territory government involvement in the SDA program.

The interaction between the states and territories and the SDA program differs nationally from a hands-off approach to operating in a housing provider capacity. As state and territory governments navigate the transition of housing for people with high and complex needs from the state to the federal level, their interactions with the SDA program can be summarised into three categories: 'registered provider', 'not a registered provider' and 'position being developed' (Figure 6).

State and territory government housing and disability service strategies were examined to identify their role in the SDA program (Table A2 in Appendix 1). While most policy and strategy documents emphasise the need to improve housing outcomes for people with disability, there is little reference to SDA, and the position of state and territory government participation in the program is generally not well documented. Interviews with state government representatives revealed inconsistencies between jurisdictions regarding their role within the SDA program, with many still in a process of navigating their position.

However, it should be noted that although the responsibility for SDA has been transferred from the state to the federal level, state and territory governments are still the responsible entity for people with disability with housing need who are ineligible for SDA funding, or who are not yet receiving it. In turn, state and territory governments remain entangled in the SDA program regardless of the policy shift away from their role as housing provider for people with disability.

Registered SDA provider

Some state governments have decided to register, or are in the process of registering, as SDA providers. As a provider, states will enrol and manage properties funded by SDA, as well as commit funding to deliver new SDA and increase the quality of longstanding state-owned and state-managed housing for people with disability, in line with SDA minimum standards.

For example, the Victorian government has taken an active role in the sector. At the time of writing, Victoria constitutes the only government jurisdiction to register as an SDA provider and directly manage SDA properties. The state government is the largest provider of SDA in Victoria, and provides more than 50 per cent of all SDA. Most of this stock is of a 'Basic' design category and has been transitioned into the SDA program from previous government housing schemes for people with disability.

As a registered provider, the Victorian government can collect SDA payments on enrolled dwellings. In this regard, government representatives explained how they are reinvesting these payments into the program through the redevelopment of Legacy dwellings (6+ bedrooms) into smaller (2–4 bedroom) dwellings enrolled into the SDA program. This is being achieved through major renovations or stock replenishment via the state's periodic asset replacement cycle (Interview, state government representative). The Victorian government recently announced a commitment of $30 million to upgrade and improve the standard of 'Basic' state-owned SDA (Department of Families, Fairness and Housing 2022).

According to government representatives, the Tasmanian government aims to follow a similar path as Victoria, and was seeking registration as an SDA provider at the time of research. As part of this approach, Homes Tasmania has established a Specialist Accommodation and Support Team structured to assist people with disability into appropriate accommodation, including SDA (Interview, state government representative).

An estimated 200 Tasmanian Government-owned properties have been headleased to SIL providers and enrolled as 'Basic' SDA. Representatives spoke of a high (21%) vacancy rate among the state-owned SDA properties, citing poor-quality dwellings and compatibility issues related to living in group home environments as the driving factors.

Recent NDIA reporting indicates that Tasmania is the only jurisdiction where state-owned SDA dwellings have not begun the transition into non-government ownership (see NDIA 2022c). It was revealed that the Tasmanian government was working to resolve legislative challenges currently hindering the SDA registration process, largely due to the current leasing arrangements with SIL providers.

Not a registered SDA provider

Other state and territory governments have taken a more hands-off approach to SDA, and transferred the responsibility for disability services to the federal government and the NDIA. This has included a decision to not register as an SDA provider and either selling-off or headleasing state and territory housing for people with disability to non-government entities such as community housing organisations and SIL providers, some of which have been enrolled as SDA.

According to recent NDIA reporting, almost half of government-owned dwellings for people with disability in New South Wales (44%) and South Australia (45%) have been transferred to non-government entities and enrolled into the SDA program (NDIA 2022b: 8).

The South Australian government has transferred responsibility for the funding and regulation of disability services to the federal government and the NDIA (Department of Human Services 2020). However, the state continues to act as a limited-service provider under the NDIS, specifically regarding group homes and individuals with high and complex needs yet to receive funding through the NDIS or the SDA program. Approximately 400 formerly state-owned and state-managed disability properties have been headleased from the SA Housing Authority to CHPs that are the registered SDA providers. Of the 400 homes enrolled in SDA, the majority are a 'Basic' design category (Interview, state government representative). The South Australian government has reported cases of NDIS participants expressing the view that they had been abandoned by the state government in the transitional process to the NDIS (Department of Human Services 2020).

By a similar token, the NSW government is in the process of divesting itself from the provision of housing strategically designed for people with high and complex needs. The NSW government previously owned and operated a significant proportion of housing for people with disability, most of which constituted large, institutional accommodation settings (Bostock, Gleeson et al. 2001). Between 2016 and 2021, the NSW government led a transition program whereby the majority of this stock was headleased to CHPs and SIL providers. Where possible, the providers have enrolled eligible properties into the SDA program. According to a government representative, the remaining government–owned institutional accommodation is either 'under occupied or not occupied' (Interview, state government representative).

NSW is the only state to have implemented a unique policy relating to SDA and the social housing sector. In NSW, NDIS participants with SDA funding—including those in the process of applying for SDA funding—are classified as ineligible for social housing. Where a NDIS participant is on the social housing waitlist, their position is suspended during the process of applying and being assessed for SDA funding (pending assessment), which can take up to 18–24 months. If their SDA application is unsuccessful, their position on the social housing waitlist will be resumed (Department of Communities and Justice 2022). A NSW government representative provided justification for this policy decision, explaining that as social housing is often a suitable housing option for a person with high and complex needs, it is therefore easier from a state government perspective to clearly separate the two programs (Interview, state government representative). However, this policy decision is not without consequences for NDIS participants with housing need, as discussed in section 3.3.

Position still being developed

Not all state and territory governments have a clear position regarding their role in the SDA program.

In Western Australia, the government has seemingly changed course during the progression of the SDA program. For example, a media statement released in December 2020 announced the WA government's commitment to register as an SDA provider and enrol approximately 400 state-owned group homes into the SDA program (Dawson and Tinley 2020). The state government reported that approximately $4 million of SDA funding entitlements would be generated, which would then be reinvested to modify and refurbish existing group homes and build new SDA.

However, as of May 2023, there was no evidence to support the commencement of this transition of former state housing for people with disability into the community housing sector for enrolment in the SDA program. Nor were any state government funding commitments to the SDA program identified (Department of Communities 2020a). The WA Housing Strategy reported that the state government had delivered at least one dwelling to Robust SDA standards (Department of Communities 2020b). However, there were no details about ownership or management, the funding structure, or whether the dwelling is enrolled in the SDA program.

In February 2023, a representative from the WA government informed the research team that a state government position on participation in the SDA program had not yet been determined. The WA government continues to operate the Community Disability Housing Program (CDHP), which is targeted toward people with a disability who require specialist and ongoing support (Department of Communities 2021).

The interaction of the state and territory governments in Queensland, the Northern Territory and the ACT regarding SDA was not easily identifiable. Government representatives from the respective departments for disability and housing policy were not available to participate in this research. A review of the housing and disability policy and strategy documents generally found that state and territory governments recognised the need for further housing that met the needs of people with disability which were not being met elsewhere. However, this was not always in reference to the SDA program. Where the SDA program was mentioned in the policy documents, both the ACT and the NT referred to the program as a way to leverage funding options and increase supply by working with external stakeholders, such as CHPs (Department of Local Government, Housing and Community Development 2020; Department of Environment, Planning and Sustainable Development 2018). Little detail was provided about how this would be actioned.

No mention of the SDA program was made in the state housing or disability service strategies in Queensland (Department of Communities, Housing and Digital Economy 2017; 2021).

3.2.2 Community housing interaction with the SDA program

The community housing sector has a significant and varied function in the SDA program. It intersects with participants, private investors, state and territory governments as well as the NDIS to support the delivery of appropriate housing for people with disability. The sector undertakes a range of roles including:

- educating investors and participants
- identifying tenants
- understanding participant housing needs
- providing compliance with the SDA program as a registered provider
- providing tenancy management and support once a project is operational.

As shown in Figure 6, interactions between the community housing sector and the SDA program can be conceptualised through three primary avenues:

- supporting private investment
- developing and managing SDA dwellings
- managing stock transferred from state and territory government housing authorities.

The following description from one CHP representative demonstrates the varied role of the sector in the SDA program:

> [Of our 4,500 properties] we have about 60 SDA properties as part of that portfolio which are group homes ['Basic']. So, in terms of bed numbers, it's quite high. And those are largely ones that we manage on behalf of the [state] government. But we also have quite a number of properties outside of that number, which are fee-for-service arrangements with either private property owners and developers for whom we provide the services of SDA management to those properties. In addition to that, as a Tier 1 provider, we also have our own built SDA properties that we are managing. And we have a pipeline of SDA developments in our own construction pipelines for the future as well. (Panel, CHP)

The interactions that deliver housing through the SDA program also involve liaison with individual NDIS participants and their support providers to understand the housing needs and Home and Living goals.

Liaison with participants

Developments that include SDA-enrolled dwellings are maximised when tenanted by NDIS participants with SDA funding in their plans. The identification of NDIS participants who may be suitable to tenant the dwellings can (and does) occur at the early stages of development and contribute to the feasibility analysis. Alternatively, participants may be matched with SDA-intended properties further along the development process. Panellists mostly argued that participants should be identified early in the development process; however, other panellists suggested that it was possible to wait until after construction. To an extent, this was dependent on location, with non-metropolitan locations requiring more certainty before development took place.

The importance of matching NDIS participants with appropriate properties is twofold. First is to ensure that a NDIS participant has access to the level of SDA funding that supports them to be successful—which in turn creates a sustainable tenancy. Second, although a sustainable tenancy is central to the purpose of the SDA program as well as the remit of CHPs, there is also a financial consideration. Investors and CHP boards view the early identification of specific participants for their developments as central to understanding and ensuring the viability of a project.

Supporting private investment in the SDA program

CHPs work alongside a range of private investors or developers seeking to participate in the SDA program (Figure 6). These range from small-scale investors developing a few dwellings to be tenanted by NDIS participants, to larger-scale developers producing multi-unit developments with a much higher risk profile. Larger-scale developers may hold or on-sell the dwellings. The involvement of the CHPs differs in each scenario, depending on the needs of the investor or developer. For example, a small-scale 'mum and dad' investor might develop an SDA project with the view of retaining ownership. In this case, the role of the CHP is arguably more intensive than working with larger developers. One panel member explained that in this scenario the CHP will:

> … work through everything with them. And obviously, there's different levels of communication, different levels of engagement with each of those, you know, when you're dealing with a developer who's dealing with large multi-unit developments, it's a much more commercial relationship than dealing with an individual who's building four houses. It's a much higher risk profile for [the smaller investor]. They're investing a lot of money into this project, and they're really worried about it. So, there's a lot more hand-holding going on. (Panel, CHP)

CHPs also support larger-scale developers and investors that build SDA projects for the purpose of holding on to them as an asset. In this scenario, the developer wants:

> … someone to act as their SDA compliance to the rest of the compliance piece and their tenancy management. So, they want to take an active role [in the SDA project] but not the day-to-day activities. So, there are developers in there for the long haul rather than those in there for short-term gain to flip it and move on to the next project. They are into developing and holding [on to the SDA project]. (Panel, CHP)

Not all developers of SDA projects retain ownership of their assets. Where a developer intends to sell an SDA development to an investor, the services provided by the CHP such as SDA compliance or tenancy and property management are sold as part of the development:

> We have a relationship with the developer, who then on-sells it to an owner. And we [the CHP] are part of that package … We are sold as a job lot to the investor. So, the investor doesn't need to do anything about [SDA compliance or tenancy management]. (Panel, CHP)

In each model, CHPs identify potential or actual tenants by working with the support coordinator and, as a registered SDA provider, advise on the development of the dwellings according to the SDA design standards (compliance), which must be met for a dwelling to be eligible for enrolment as an SDA dwelling. Once the dwelling has been enrolled, the CHP may, and routinely does, continue on as the tenancy manager for the dwelling.

However, CHPs may choose to not manage privately owned SDA program dwellings if the quality does not meet the expectations of the organisation, regardless of whether the dwelling is SDA compliant. For example, panellists explained that they:

> … have a certain reputation as a quality SDA provider. So, we just wouldn't take on any SDA property if we don't think it's fit for purpose for the participant. (Panel, CHP)

CHPs may also take into account investor and developer motives when considering partnering with private organisations in the SDA program. This is in recognition of:

- the intensive process of working with private investors

- the need to ensure that the end product aligns with the CHPs' objectives.

As a result, CHPs audit potential partners to:

> … weed out which developers are in this for the right reasons and which ones we want to do business with because, obviously, we're quite coveted around being a community housing / SDA provider. (Panel, CHP)

Build and manage

Since the establishment of the SDA program, CHPs have led the development, and subsequent management, of dwellings under the SDA program (see Beer, Flanagan et al. 2019). This might be as independent developers or in conjunction with partners such as the National Housing Finance and Infrastructure Corporation (NHFIC 2022). Builds might be speculative, to produce a generic product that can be adapted in the future to be included in the SDA program or operated as traditional community housing accommodation:

> We've got a project that we're about to go into construction within the next couple of months. We're at the documentation stage now working with the SIL on what the layout of the unit is, and these are going to be relatively generic units, in that they can be adapted further for people's needs. (Panel, CHP)

> We are building 25 properties now. And we're doing some of them as SDA, sort of somewhat speculatively, where we're fortunate in that the project has sufficient sort of return that we don't have to run on SDA to actually make it work. (Panel, CHP)

Management of transferred stock

The final interaction of CHPs in the SDA program (as shown in Figure 6) is through the management of previously state-owned and state-operated housing for people with disability. In this scenario, Legacy and Existing stock from previous housing programs for people with disability or public housing are transferred to CHPs for SDA enrolment and management (as discussed in subsection 2.2.2). The vast majority of these dwellings are enrolled as a 'Basic' design category. These transfers might result in the CHP attaining ownership of the asset or headleasing the stock from the respective state or territory government. Dwellings may be transferred with an existing tenant who has funding for SDA in their NDIS plan.

3.3 Key challenges for state government

3.3.1 Ambiguous role of state and territory governments

The SDA is a market-facing program governed at the federal level. As the market stewardship function sits within the remit of the federal government, the role of state and territory governments is both limited and convoluted. There is no defined policy strategy to guide their involvement in the SDA program.

The NDIA sets the framework and guidelines for the SDA program, is the custodian of SDA demand and supply data, and is the responsible entity for approving SDA funding applications. As a result of this, state and territory governments are relatively distanced from the SDA process. Challenges relating to this configuration become particularly pronounced when the SDA market does not deliver, as one state representative noted:

> The state doesn't have the levers now. It all sits with the Commonwealth to set prices, to set supply and demand, but it relies on the market responding. So when the market doesn't respond, there isn't a lot of [state government] intervention. (Interview, state government representative)

The described state-to-federal government shift is further complicated by the fact that state and territory governments continue to remain the responsible entity for providing housing for a large proportion of people with disability who are not eligible for SDA. As only 6 per cent of NDIS participants are anticipated to be eligible for SDA, state and territory governments play a key role in providing housing for people with disability, largely delivered through social housing and housing programs for people with disability. As previously highlighted, almost two-fifths (≈40%) of all social housing households are tenanted by at least one person with a disability (AIHW 2022). The role of state and territory government-operated housing programs for people with disability remains vital for those:

- unable to secure private market housing

- ineligible for SDA

- where social housing may be inappropriate or unavailable.

3.3.2 Restrictive regulatory barriers to participation

From a state and territory government perspective, a series of regulatory settings restrict their level of participation in the SDA program. With policies relating to the pass-back mechanism and in-kind arrangements, coupled with minimal intergovernmental collaboration, state and territory governments have little incentive to participate in the SDA program moving forward. This issue is further compounded by the fact that SDA is geared as a market-driven and federally governed program. Subsequently, beyond the transfer of existing portfolios of housing for people with disability into the SDA program, representatives explained that state governments, in many cases, will only intervene when all market options have been exhausted:

> We gain nothing by doing [SDA] within state government. We don't get the financial solution, we don't get the good solution from a physical amenity functionality point of view. (Interview, state government representative)

Under the current regulatory settings, state and territory governments are unlikely to participate in the delivery of 'New Build' dwellings.

The remainder of this chapter describes some of the key regulatory issues hindering further government involvement in SDA at the state and territory level, largely relating to the pass-back mechanism, limited access to information, the need to provide to high-needs NDIS participants, and the complicated process of registration as an SDA provider.

Constraints in the pass-back mechanism

Several policy settings limit the extent to which state and territory governments and CHPs can work together to deliver SDA. For example, funding arrangements relating to the pass-back mechanism—which is a bilateral agreement to ensure the same net effect on scheme funding (NDIS 2016a)—was cited as a key barrier constraining further delivery of SDA via this arrangement between state government and CHPs:

> There are number of clauses in there [pass-back] that basically say that if a state government agency is to lease at less than market rate to a CHP—an SDA provider—then the NDIA won't adjust the SDA that they provide to the SDA provider. But there's an expectation that we will recoup some of that and pass it back to NDIA. And I think most other jurisdictions have just avoided going down that path [of involvement in SDA]. (Interview, state government representative)

> So really, we've been waiting for that to be resolved. At the moment we've just been rolling over those leases with the CHPs on a 12-monthly or two-yearly basis. Because we can't go down the path of a longer-term subsidised lease arrangement while there's a big question mark over this concept of pass-back. (Interview, state government representative)

Issues relating to the pass-back mechanism were also raised by CHPs during the panel:

> Probably the biggest thing that's been a challenge from a state-based perspective around that is because of the pass-back mechanism in the pricing and payments framework. There's been some complexity around how those providers can actually spend the SDA [income] that our state [South Australia] has been very involved in. (Panel, CHP)

> It is a similar situation in [NSW] around the pass-back to state government and getting the money back out of state government to invest and provide repairs and maintenance to keep properties up to standard in their own properties, who they are the property owner for. So essentially […] we have to get on our hands and knees to ask for money back, which is given to the SDA property owner to make those properties keep [up] the standard, and government doesn't seem accountable for that. (Panel, CHP)

As the pass-back mechanism limits the extent to which CHPs can leverage against pre-NDIS housing for people with disability—through the collection of SDA payments—their capacity to upgrade 'Basic' dwellings and reinvest in 'New Build' SDA is severely constrained.

Limited access to information

Regulations limiting state and territory government access to SDA data created barriers when it comes to providing SDA as well as planning and reforming housing and disability service policy at the state level. The interview materials indicated there is minimal intergovernmental collaboration and data sharing between NDIA and state-level government, and that state and territory governments have access to the same information as other SDA providers. This includes information about NDIS participants, their level of SDA funding and preferences around location and dwelling categories, as well as data associated with enrolled SDA properties. State and territory governments have requested more data sharing from the NDIA—however, the NDIA routinely declines, citing privacy and confidentiality reasons.

Government representatives explained that the lack of data provided by the NDIA hinders state and territory government progress to effectively provide disability-appropriate housing both within and outside the SDA program. This includes ensuring housing is provided that meets the needs of people with disability that have SDA funding, as well as those who do not:

The NDIA aren't really keen to share a lot of the information that would really help us with our strategic planning, in identifying need and gaps at a level of detail that is a greater level of detail than is currently on the information that they publicly make available. (Interview, state government representative)

It's quite a tricky little space that we're operating in when we're trying to plan and, you know, do a little bit of reform, but actually don't have the information readily to handle ourselves […] We wanted to be up-front and transparent and say, 'This should be able to work. Let's work with our federal counterparts to make it work.' But here we are years and years later, and we still haven't resolved that. (Interview, state government representative)

Complicating the matter is the minimal collection of information regarding the housing needs of people with disability among state and territory governments. Social housing waitlists capture very little information about disability, or the form of housing required. Therefore, state and territory governments are dependent on external resources for information about SDA attributes and recipient need.

To overcome the missing information, some state and territory governments have dedicated additional staff and resources to review and analyse the NDIA quarterly reports, data from the SDA Finder tool, as well as third-party information from the likes of Go Nest and Housing Hub in order to crossmatch and better identify needs. However, all informants argued that if the quality of information provided by the NDIA were more granular and comprehensive, this would save government resources, and effectively contribute to streamlining the effective delivery of SDA to meet existing demand.

NDIS participants ineligible for SDA

Some NDIS participants' housing needs 'exceed' what is financially feasible in the SDA program. This issue was particular prominent regarding people in need of sole-occupancy homes that meet the 'Robust' design category. Described as a 'small number of very high-cost individuals' who sit outside current SDA pricing frameworks, state government representatives emphasised the difficult task of trying to anticipate, fund and deliver such individualised accommodation arrangements:

It's very hard to actually get the right approval process and get something built for [people with extremely high needs]. Even then it is probably still not financially quite working for any [SDA provider] to do that […] The role that state government had in planning, you know, identifying need and influencing and planning to meet that need, has sort of dropped by the wayside because SDA was supposed to be a market-based approach. And so we've fallen into this period of time where the market hasn't evolved quick enough to actually deliver all the SDA that is required, or they've delivered in spots and niches where it is financially viable. Therefore [the state government] must be ready to reinvest in a space that we haven't seen as being in our remit for the last little while. (Interview, state government representative)

Given that SDA is a market-driven program under the stewardship of the federal government, state and territory governments have fewer levers available to them to intervene when the SDA market fails to deliver. The outcome often results in lengthy stays in hospitals and residential aged-care facilities for participants.

Nonetheless, there are cases of state and territory government intervention when the NDIA, via the SDA program, fails to deliver accommodation for people with high and complex needs. For example, the governments of Tasmania and Western Australia have built housing for people with disability to 'Robust' SDA standards despite not receiving SDA funding. Meanwhile, the South Australian government is developing a $1.2 million community-care facility in direct response to a growing number of NDIS-eligible people with high and complex needs waiting to be discharged from hospital (Iovino 2022). This development, which is reflective of former institutional accommodation settings, is a contested issue among non-government entities and viewed as compromising participant Home and Living outcomes and, by extension, the core principles of the NDIS.

State registration as an SDA provider

Deciding whether to register as an SDA provider is a vexed issue for many state and territory governments. The SDA program being marketised and governed at the federal level is one deterrent, as is the complicated process of registering as an SDA provider. This was observed in the case of the Tasmanian government. Representatives from Homes Tasmania shared that they were in the process of applying for SDA registration. However, difficulties have been encountered because the 200 state-owned SDA are currently headleased to SIL providers through whom the SDA properties are currently enrolled. To resolve the issue, Homes Tasmania has requested legislative change permitting participants to be the leaseholder, instead of the SIL provider:

> *The providers of support [SIL] to each of the NDIS participants who live in the SDA properties, they are also the holders of the lease. That's actually an issue that's caused a problem for us in terms of our SDA registration […] there will need to be some kind of legislative changes to be made so that the lease arrangement could be made so that it's with individuals who live in those homes rather than […] with the service provider. So that's going to be part of the work that we'll need to do to achieve our SDA registration. (Interview, state government representative)*

It should be noted that the current lease, with SIL acting exclusively as the support and SDA providers, contradicts the NDIA requirement for SIL and SDA to be separate (NDIA 2021). The implications of such an arrangement were described at length by a peak body representative:

> *We don't accept those who are a care [SIL] provider and SDA provider in one entity into our membership. That's the old traditional model of providing disability housing. It's not good practice. It does not support quality and safeguarding. It's completely at odds with SDA. If you look at everything that's going up to the Royal Commission, you'll see all of the examples coming up through Royal Commission hearings are of those conjoined, where housing and support is all by the one organisation. So, we know that that's a problem for quality and safeguarding. But it's also a problem for maximising choice and control. (Interview, SDA Advocacy group member)*

3.4 Key challenges for CHPs

The panel and interview materials highlighted several key challenges faced by the community housing sector regarding the SDA program. These include elevated risk, resource-intensive participant engagement, insufficient education, outdated price guides, ad hoc communication channels, compliance issues regarding housing stock transfers, the complexity of the role of state and territory governments, and inconsistent inclusion of AT.

3.4.1 Risk in the SDA system

Previous research identified three broad categories of risk for CHP involvement in SDA, which centred on:

- unreliable or inaccurate demand data

- high vacancy rates

- uncertainty around the SDA policy environment (Beer, Flanagan et al. 2019).

These risk categories were experienced by private and not-for-profit sectors. Despite improvements to the SDA program, these three categories were echoed by panellists in this research as significant areas of risk to the delivery of SDA by the sector. An additional significant risk, in the form of the administrative and financial risk, specifically for CHPs, was also identified.

Demand data

Earlier research found three areas of demand data that affected the risk profile of SDA developments:

- Need: the number of people with disability currently without appropriate accommodation.

- Expressed demand: the number of NDIS participants applying for SDA funding as part of their individual plans.

- Approved demand: NDIS participants assessed as requiring SDA support and for whom payments were now made available (Beer, Flanagan et al. 2019: 34).

Since June 2019, the NDIS has published quarterly reports on SDA-eligible participants and SDA supply. These reports now include a series of 'dashboards' that provide information on NDIS plan utilisation, provider concentration, choice and control, participants per provider and provider growth/shrinkage. Variables are reported by state and territory government, service districts, local government, support categories and physical characteristics (NDIS 2021b). However, even with the dissemination of additional expressed demand data, there remains a view that further work is to be done on the identification of demand, as well as the mechanisms used to convey this to stakeholders with the SDA sector.

The majority of panellists considered the data to be unreliable, inaccurate or not granular enough to fully inform investment decisions. It was appreciated that participant confidentiality was paramount in the release of data; however, for many, the new data source was only for reality-checking. One panellist conveyed their frustration regarding policy uncertainty and the mismatch between expressed participant need and actual SDA funding outcomes:

> *We know there's demand for it, we know there's a lot of demand for it. But if no one's being approved for it, then how do you deliver it? How do you build? How do you build a delivery model around that? If you're not seeing how it's being played out in real life? (Panel, CHP)*

Rather than rely on NDIA data, panellists stated they seek alternative data sources. For example, several respondents explained that they compile information from the Australian Bureau of Statistics (ABS) data, the Department of Social Services, respective state housing departments, Summer Foundation reports and platforms such as Go Nest and Housing Hub, while also citing SIL providers and support coordinators as a preferred point of contact for demand data. (This is discussed further in subsection 3.4.3.)

The view that data provided by the NDIA needs to be improved was shared by the majority of informants in the research, but the view is not universal. A support coordinator interviewed said they support the minimal intervention of the NDIS in the market, particularly in metropolitan areas. It was argued that while the limited data creates more risk for SDA providers, it also ensures proper due diligence is undertaken to develop a successful SDA build for a participant.

While granular information does not exist in the social housing sector compared to SDA, the housing waitlist does provide very specific data on approved candidates in some states—for example, Queensland (Queensland Government 2023). Several panellists suggested establishing a dataset that emulates the social housing waitlist to inform providers of where participants are currently, where they would like to live and the dwelling characteristics that would meet their needs.

The transparency and consistency of NDIA decision-making remains obscure, as it did in previous research (Beer, Flanagan et al. 2019). In other words, people with equivalent scenarios submit SDA applications that are assessed and approved for different outcomes, as the following panellist explains:

> *Two different people will go through who have very, very similar needs and desires and come up with two very different decisions. And one will come out in 15 days and the other one will come out in 150 days. (Interview, SDA Advocacy group member)*

The most common disparity is between shared and individual living arrangements. Many accounts were provided where NDIS participants had their SDA applications refused without justification, despite approval seeming almost certain based on their demonstrated level of need. Panellists frequently cited cases of participants not receiving the level of SDA funding applied for and anticipated by clinicians, support coordinators and SDA providers. In other words, the level offered was less than what is useful for the participant. For example:

> We have people who are classified at High Physical Support, and they have SIL packages—support packages for High Physical Support—but they're being approved at Improved Liveability for SDA. So, there's a significant disconnect there. The rationale for the decision-making is not clear […] And that's the biggest issue for me, as both a manager of SDA properties and a developer of SDA properties, is that no one can tell me with any certainty how someone will be classified within the scheme. (Panel, CHP)

The panel described this outcome as 'non-usable' funding. Panellists explained that the NDIA data does not differentiate between funding that is 'usable' and 'non-usable'. As a result, the demand data can be misinterpreted by SDA providers.

As the situation currently stands, CHPs have reported putting projects on hold until they can more accurately understand the demand needs in the area and, as a result, properties have either been left vacant or leased at a lower rent. Panellists argued that the NDIA still had significant work to do to assist all those involved in the sector to understand the approved demand. An approach, similar to tax rulings, was proposed as a potential policy solution, where a given circumstance generates a predictable and transparent outcome.

Vacancies

The risk posed by vacant SDA housing stock was reported in Beer, Flanagan et al. (2019) in terms of the financial responsibility carried by providers. In this research, panellists from CHPs expanded on the impact of vacancies on the community housing sector. It was reported that vacancies in the sector are usually higher than in the private housing market, and that vacancies for their SDA stock can be higher again. These vacancies are driven by the challenge of matching participants to existing enrolled SDA dwellings (expanded upon in subsection 3.4.2), a lack of granular demand data coupled with inconsistent participant funding outcomes and subsequent appeals, as well as participant turnover.

Despite the limitations to the data provided by the NDIA noted earlier, SDA funding approvals constitute a key indicator of the type of SDA stock needed, and in which location. However, delineating whether funding is 'usable' or 'non-usable' for a participant is challenging and has led to vacancies, particularly where SDA providers have delivered dwelling categories for which participants have not been funded, as described by a specialist support coordinator:

> It depends on how people interpret the data. And in my opinion, the [SDA providers] I've dealt with, they've incorrectly interpreted the data, and now they're experiencing the vacancy. (Interview, specialist support coordinator)

The inconsistency of participant funding outcomes leads to vacancies. For example, an SDA provider may have built a property according to a NDIS participant's anticipated level of SDA funding prior to receiving the final outcome. If the anticipated level of funding is not realised, the NDIS participant can appeal the outcome. However, this can be a long process, during which time the property remains vacant, as this panellist explained:

> Because the NDIA is not approving what people under choice and control are asking for … So, people who want to live in a one-bedroom [dwelling] are getting approved to live in a shared apartment. So, what they're doing is going back and appealing that with the NIDA and that extends the time [the SDA remains vacant]. So, you know, it's really the NDIA's responsibility there [to get the decision right in the first instance]. (Panel, CHP)

In such scenarios, providers' options are to:

- wait for the outcome of an appeal

- provide the dwelling at a discounted rate—that is, only receive SDA payments for the level of approved funding

- search for another participant with a level of funding matching the SDA design category and build type.

It was also reported that the sheer number of appeals currently being reviewed is further adding to delays in filling vacancies by CHPs.

Complications also arise in relation to participant turnover, with many panellists pointing out the difficulty filling vacancies when SDA dwelling features are often highly specific to a previous NDIS participant's needs in terms of design category, dwelling size, type and location. As the following panellist describes, these dwellings must be modified for the next tenant, during which time they remain vacant and generate a financial risk to the CHP:

> If you've got a High Physical Support [dwelling] that becomes vacant, then how do you manage through that process and retrofit the modifications for someone who the property wasn't designed for? (Panel, CHP)

As a result of the financial risks associated with the vacancies, some CHPs reported filling their SDA dwellings with non-eligible tenants from the social housing waitlist. CHPs work with lower-income households, as well as people with disability. As a result, they are aware of who is on the waitlist for social housing. So where an enrolled SDA property remains vacant in the long term, the need to derive an income from the dwelling prompts the relinquishing of SDA funding in favour of rental income.

> We have let maybe 15 per cent of our stock to non-eligible people. Because the vacancy was just too long in the end […] So when the vacancy had been longer than a year, we then take people from the social or affordable housing sector to move in. (Panel, CHP)

High vacancies present a range of issues for CHPs, one of which relates to securing financing for future SDA and non-SDA developments. Vacancies within the SDA stock were generally reported to have a flow-on effect to CHPs. The development of a significant number of apartments, coupled with challenges around approvals, has resulted in a high vacancy rate among some private investors. This has made mainstream lenders increasingly wary of financing SDA projects, and not necessarily cognisant of motivations for CHPs developing in this space compared to those of a private investor:

> Having those properties sitting empty has made it more difficult for us to either get funding for projects or to actually move into the project because no one wants to invest in a project that's going to be sitting empty. We, as a CHP, have limited funding available to us. We certainly don't want to park it into a property where it's not going to be used, and the property's going to be sitting vacant for a long time. And that's the big issue that we have. If we use our money to build an SDA house at twice the cost of a normal house, that's a huge waste of money if we don't have someone in there from day one … It's a massive waste, massive waste, morally as well as financially. (Panel, CHP)

Uncertainty and complexity of the policy environment

Policy uncertainty constitutes a longstanding issue among SDA stakeholders. Previous research found 'concerns about the long-term funding viability of SDA' including the longevity of the program (Beer, Flanagan et al. 2019: 35). While this research found that views were positive toward the SDA program overall, a changing policy and regulatory environment and a series of program reviews has created uncertainty among CHPs—and subsequent risk. This uncertainty has affected project viability, including future cashflows, which is impacting upon provider confidence to deliver new SDA.

The most notable change to the policy environment was the 2018 NDIA decision to severely limit the number of SDA funding approvals for sole-occupancy dwellings (NDIA 2018). Subsequently, some CHPs have put new SDA development on hold due to uncertainty around allocations and accurate information around forecasting and approvals, as the following panellist notes:

> We're doing a High Physical [Support dwelling] at the moment, and we've put it on hold. We are just not sure if we want to continue with it. Because we can't really get a fair or clear picture on who needs it in that area. And then we noticed that in one of our properties that is established, where we've got one vacancy, we haven't been able to fill it. It's for a single person with High Physical Support needs, but the only allocations coming through are for shared, because there seems to be some change in funding at the moment where the [NDIA] is really pushing for shared. Well, the property wasn't built for shared accommodation. It's really put things on hold for us, our board has just said 'Hold on, we better not go down this path until we can sort of get a very clear picture.' (Panel, CHP)

Policy uncertainty has had a constraining effect on SDA supply. Recent research suggests that if improvements were made to regulatory settings, it would take two years to see a significant increase in SDA completions, given the time required to finalise an investment decision and construct SDA (Madhavan, Mulherin et al. 2021).

The service system component of SDA was reported by all stakeholders involved in this research as being difficult and complicated to navigate. A state government representative provided some insight into how they viewed the program, including their perspective on the NDIA's understanding of SDA. They explained that 'at a policy level, SDA is so incredibly complex that the Agency themselves don't understand it and therefore don't apply it' (Interview, state government representative). This gives some insight into the lack of consistency in approvals, which is a significant risk for both CHPs and participants.

Another risk associated with a highly complex policy environment is that not all delegates—providers or participants—fully understand how to contribute to the end goal:

> [State government] still don't really understand the SDA rules and working with providers, and SIL providers, and the need to get clients in—they don't really understand it yet fully. (Panel, CHP)

Administrative and financial risks

CHPs spoke about the administrative risk associated with navigating the SDA program and interacting with the NDIS system. The current configuration of the SDA program, including the website and avenues for contacting individuals, was described as being arduous and not focussed on participant outcomes. Increased administrative burdens require stakeholders to invest additional resources to navigate complex systems, which has financial and staffing implications. The following account from an SDA provider is quoted at length to illustrate the scope of the administrative burden created by complicated SDA systems, policies and protocols.

> Navigating through the NDIA can be incredibly frustrating. So, to give you a classic case in point, we had a client who was given SDA approval. We didn't know what category it was. So, we went back to the Agency via the Support Coordinator and said, 'Please tell us what category it is.' And they then referred us back to the [NDIS] website […] And so the mechanisms of dealing with people [at the NDIA] are just wrong. And I know this from inside, information coming out of the organisation, it's something like Robodebt all over again, it's just not customer-focussed. (Panel, CHP)

Registered CHPs are required to meet national compliance processes. Despite the rigorous processes associated with this registration, panellists found the processes associated with the SDA program to be very demanding. These additional compliance requirements place an unfunded administrative burden on the organisation. In response, CHPs are beginning to place a financial value on the time it takes to meet the compliance and reporting requirements by:

> *… building in a fee structure around compliance and management and compliance and reporting. This will become part of what we will charge for, because it is just amazing the difference of the expectation of the NDIA as what we are as an SDA provider, which is probably 3 per cent of our portfolio, is what we have to comply to compared to all of the other compliances that we have to report on as a social and affordable housing provider. (Panel, CHP)*

The significant financial implications of overdue SDA payments were frequently expressed during the panel discussions:

> *There was one organisation that I know of that had built the property, people were approved [and] had moved in, but SDA didn't pay any money for close to two years. And [the organisation] had to suffer and manage that process. So they're paying interest on debt without any income. (Panel, CHP)*

Securing the payment of SDA funds can be extremely challenging and a risk for CHPs, and has implications for managing debt finance, SDA portfolio growth, new entrants, and retaining current providers. Further, the implication of extended payment delays can be significant for SDA providers with limited financial capacity. There is an unevenness to this dynamic, where smaller SDA providers may be less likely to withstand prolonged periods without receiving SDA payments, as a representative from a larger CHP noted:

> *We were funding the NDIS for over a million dollars of slow payments … It's been a scandal really. And for a weaker organisation it must be pretty diabolical if they can't fund those levels of cashflow. Patching [for] the NDIA really is quite difficult for us in that regard. (Panel, CHP)*

Ad hoc communication channels with the NDIA exacerbates this risk. Organisations do not always have an assigned point of contact. This creates circular conversations that do not achieve a given goal. In the case of the following CHP representative, there were challenges in receiving payments and finding a contact to resolve the issue:

> *We had a lot to do with a couple of people in the NDIS, particularly in terms of sort of reclaiming, etc. And so that was a really vexed process because we'd speak to one person and then they'd say, 'No, I can tell you this, but I can't tell you this.' […] The only way we could get the issue resolved was I knew someone who used to work with me in government who worked in the NDIS. (Panel, CHP)*

3.4.2 Participant engagement

Matching SDA participants to appropriate dwellings is important for providing individuals with the choice and control they need to live independently and comfortably. To ensure that tenancies are sustainable, CHPs liaise with NDIS participants to understand their specific needs from a property, including AT or additional design features. Interviewees emphasised how resource-intensive the process of identifying NDIS participants for, and matching with, SDA projects was, as well as the need for tenancy managers to have a high level of expertise in this area. Unintended costs and financial risk associated with this process were also identified.

Participant dwelling matching

Matching NDIS participants with dwellings in the SDA program is time- and resource-intensive, and not always recognised as being important to the success of the program.

CHPs are not necessarily the first point of contact for participants looking for dwellings in the SDA program. Participants seeking housing can register themselves on websites such as Go Nest or Housing Hub, indicate what they are looking for in a home, and the CHPs are then able to contact them through the website. CHPs may advertise current and future properties on their own website as well on the SDA Finder tool.

As the details of participants seeking housing could not be released by the NDIA, due to privacy concerns, CHPs implement a broad strategy to find participants with SDA funding in their plans who are looking for housing. For example, CHPs might liaise with SIL providers, support and specialist support coordinators, and OTs who may refer participants to them. Participants may also be sourced internally, reviewing the need of existing social housing tenants who are eligible or potentially eligible for SDA funding.

In other instances, they may identify a support organisation, such as the Active Foundation or the Autism Association, to find out if any clients are applying for SDA funding and what dwellings would suit their needs. They may also work with state and territory housing providers, as the following panellist describes:

> *Quite often … people who are living in state community disability housing properties that are 20, 30, 40 years old, that have SDA in their package already, but they need a more suitable property. So, we will build a property for them and move them into that. [In these cases] they're moving into a new bespoke, purpose-built complex that's going to be built for their needs. (Panel, CHP)*

In these cases, CHPs work in partnership with a range of service providers. Panellists emphasised that the process of working with support organisations as part of this process was greater than finding a participant—it is about finding the right participant so that the tenancy can be sustained. Despite strong relationships with service providers and providers of housing for people with disability, matching participants with enrolled SDA remains challenging, and it was argued that this process should be better managed:

> *But in any event, we've got very strong relationships with providers and families … we still find [identifying participants for homes in the SDA program] difficult. We have to work for it. And that's sort of part of the reason [CHPs] exist [in this space] … [therefore] it should be made easier for us to sort of do that. (Panel, CHP)*

Despite these challenges, CHPs argue that they have the unique skills required to deliver sustainable tenancy outcomes:

> *So, under the NDIS, [participants] get a budget for 'hunting for housing' … and that's so many hours they get paid for to go and hunt for housing. My big gripe with the NDIA is that they should come to community housing, because we are actually the experts [at matching participants with dwellings]. So, people can come to [CHPs], and they would actually get someone who understands their housing needs, whether they're SDA or not. Forty per cent of our [tenants are] people on the DSP. So that means generally, they might have some NDIS as well. So, the whole pathway of people going into housing and housing solutions is wrong in the NDIA at the moment. Community housing [providers are] there, the people know what they're doing. It's far more logical and would save a heck of a lot of money. And those are the things that we could significantly improve in terms of outcomes for people. (Panel, CHP)*

Ensuring that participants are appropriately matched to properties within the supply pipeline is not only difficult but can have significant consequences on the feasibility of projects and delivery of SDA, as one panellist explained:

> *It's very, very difficult to get clients and homes matched up. I had a board of directors that [were motivated] to build these [SDA-funded] homes, but could not get it across the line because I couldn't economically go and say, 'These are the clients that we've got.' We did eventually get it off the ground, but it was a hard slog, and it was some internal channels that we needed to use. So, I think I'm definitely of the opinion that it is very hard to match, or to find participants and then build accordingly. (Panel, CHP)*

Expertise of tenancy management

Panellists and advocacy groups interviewed recognised the high level of training required by tenancy managers to undertake this role:

> *You actually need a very much more competent, highly trained person than you would [have] as a normal tenancy or manager in this particular game, because the skills needed and understanding of the various conditions of people is very, very different. (Panel, CHP)*

Advocacy groups, state, territory and federal government representatives noted the very unique skill set that CHPs have to undertake client management within the SDA program. It was argued in the panel that this should be recognised and supported both financially and structurally:

> *When it comes to the actual operational phase of the SDA management services, we found that it is a very high cost of service to provide. (Panel, CHP)*

Financial risk for CHPs

Costs associated with participant management were often unexpected by investors and are not budgeted for in the project feasibility. Subsequently, CHPs may not be remunerated for participant management services. CHPs are therefore absorbing a significant degree of risk in the early stage of the project and are not compensated until much later when they undertake the property management role. The CEO of a Tier 1 community housing organisation explains:

> *We're subsidising investors, because we're carrying all the front-end cost of the client management up till the time the house is actually built and ready to go. [Until that final] stage, we're not recovering [costs], [and as a result] we have started to charge per client [participant] … this risk period is for two years. We have a lot invested into this, but there's no compensation for trying to manage that process. The time taken to negotiate with support coordinators, OTs, everything else like that, get plans re-done up to the AAT and all these sorts of things. It's a lot of investment per client that you actually put in. (Panel, CHP)*

Subsequently, some CHPs have developed a fee-for-service to compensate for the time taken to match participants. This preconstruction cost is not currently reflected in the SDA price guide, which investors budget their project around. It was argued that the pricing for SDA property management needs to be more accurately reflected in the price guide. This will be discussed further in subsection 3.4.4.

3.4.3 Information needs and policy processes

The analysis highlighted the need for more effective channels of information-sharing to empower NDIS participants to access appropriate SDA, and to encourage private sector engagement in SDA. The latter is particularly significant given the marketised nature of the SDA program.

Participant education

Participant management in the initial stages of individuals' SDA program journey may also include education about what the program can provide. CHP representatives, support coordinators and specialist support coordinators argue that there is still not enough education in the community showing SDA as a viable option for people with disability. Moreover, there is not enough education about SDA policy, which is described as very complex. This will be discussed further in Chapter 4, from the participants' perspective.

As part of matching participants with SDA dwellings, CHPs have a role in educating participants and their families about the program. Given the complexity of the program, this is a process that is quite time-consuming. Nevertheless, this role is absolutely necessary to ensure participants meet their Home and Living goals. In turn, panellists called for a better system to educate participants about their options, as well as more streamlined avenues through which participants can connect with one another or be connected with SDA providers. Some interviewees suggested a new process for linking participants to SDA, which involved pre-planning before the age of 18 years old, and a step up to level three specialist support coordination to enable neutral linking of participants to SDA providers.

Private investor education

The panel noted the lack of support for investors from the NDIA in regard to the complex development process for SDA-funded dwellings. In the absence of this support, some panellists explained that potential investors have walked away from the SDA program in frustration. Alternatively, the specialist knowledge of the CHPs is often relied upon to navigate the program.

The panel explained that CHPs delivered a significant degree of consultation and support to private investors, particularly during the planning, development and construction phases. While NDIS advocacy groups do exist to provide some of these services (which can incur a significant membership fee), the key issue raised was that the CHPs, through their interactions with the private sector, deliver an unfunded service to the SDA program by guiding investors through the development process.

This specialised knowledge is time-consuming to deliver. Panellists explained:

> We don't get compensated, we are pretty much relied upon, because we are non-profit, and we're in this space because of the goodness of our heart. (Panel, CHP)

For some CHPs, the absence of this information from other sources has resulted in a fee-for-service charge that adds to the expense of delivering SDA-funded dwellings:

> So, we've developed that up as a fee-for-service and in that preconstruction phase [...] it's a very important part of the tenancy sustainability—identify residents very early, ensuring they've got everything in place, because there's a lot of walking through the process [...] And if we're going to do that work, we need to be paid for that. But it's been difficult to educate and get investors and developers to understand the importance of that work. (Panel, CHP)

Similarly, CHPs have played a role in the education of financial institutions. Panellists noted that:

> If you were to value an SDA property under a traditional residential framework, you would absolutely not do it. The cost to deliver a Fully Accessible unit or a High Physical Support unit would far exceed the alternate use valuation that you'll be able to get under a residential context. So, in some respects, the property can only be valued under a commercial framework, which is where the revenue streams from NDIA come into it. So, there's a broad misunderstanding in the funding circles as to how these properties are to be managed and how they work from a commercial perspective over the life cycle. (Panel, CHP)

CHPs liaise with not-for-profit divisions associated with mainstream lenders to provide training on the SDA products and how the program operates. The panel explained that the knowledge and understanding of the program is improving and there is 'a general consensus within the funding market that this is a viable option' (Panel, CHP). While financial institutions are becoming more knowledgeable about the program, more education is required. This raises the question about which organisation(s) should be providing the training and if it should be reflected in the real cost of development.

3.4.4 Inaccurate and outdated SDA price guides

Most panellists perceive the current SDA price guide as inaccurate and outdated. Price constraints related to increasing land prices and construction costs in recent years (Buckland, Crowe et al. 2023) are severely impacting the delivery of 'New Build' dwellings. At the same time, the NDIS has been under pressure to reduce spending (Coorey and Read 2022; Dickinson and Petrie 2022). As noted in Chapter 2, a review of the SDA price guide was launched in August 2022 and published in July 2023. A peak body representative explained the significance of this review to the viability of the SDA:

> *If that Pricing Review doesn't work, the SDA good practice sector will be no more because the current pricing for SDA is not sufficient with the massive increases in build costs, the massive increases in cost of land, the unavailability of suitable lands at those prices, together with the market stewardship issues. So, you know, at the moment, the pipeline is almost dormant […] there's very, very, very little new [SDA] being built, and there won't be until the [revised] prices come out. And unless the prices that come out are sufficiently bumped up to meet that, then we could actually see an end to the industry. Yes, you know, sounds very dramatic, but it's just true. That's where we're at. (Interview, SDA advocacy group member)*

Similar sentiment was shared by SDA providers within the community housing sector:

> *The impact of the price guide, i.e., the payments that we get for SDA housing, were based on 2016–17 rates and have been indexed only by inflation. Now, everyone knows that land prices and construction costs bear no resemblance to CPI. They've gone way through the roof. So, the current price guide does not work for the construction of SDA, or it's marginal, depending on where you are [building]. (Panel, CHP)*

As implied in the previous quote, the panel also pointed to the uneven effect the current price guides and cost benchmarks have on SDA location:

> *The location factors that work on the price guide don't necessarily represent reality, because they were based off the Valuer General's pricing, so that has an impact, because there's a base price of one, and then it's varied across location factors in different areas. So that's another factor. So that's relatively on the delivery of housing in terms of how to get the economics to stack [up] in the first place. (Panel, CHP)*

As this discussion has underscored, further growth in SDA development is contingent on the outcome and implementation of the 2023 SDA Pricing Review.

3.4.5 Communication channels

The need for an open line of communication between the NDIA and SDA stakeholders was frequently cited as a key policy area requiring significant improvement to increase the efficacy of the SDA program.

As discussed earlier in section 3.3, communication between the NDIA and social housing providers was identified as being ad hoc in nature. For example, the panel overwhelmingly described having little-to-no contact with the NDIA in relation to SDA allocations and the SDA supply pipeline. Communication with the NDIA has occurred in regard to retrieving payments for already-placed SDA recipients (discussed in subsection 3.3.1). In such cases, NDIA relationship managers have been assigned to providers to deal with payment delays. However, these relationships were described as short-lived and unreliable:

Just through complete opportunistic events, [we connected with] a really effective NDIA relationship manager. We could contact them directly […] But in the last couple of months, I'm not quite sure whether she's left the NDIA, or whether she's sort of had her email cut off from providers. As we are now back to the [generic NDIA] inboxes and the more sort of soul-destroying efforts. (Panel, CHP)

It was expressed that peak bodies have a direct line of communication with the NDIA, through which matters could be raised and addressed. However, accessing these channels requires membership fees and incurs a cost premium to CHPs. Referring to interaction with industry peak bodies, one panellist described the positive role of the organisation for providing a communication pathway to the NDIA, albeit at a significant cost:

[The peak body has] been very effective in providing a voice for SDA providers into the NDIA. So that's been good. But we have to pay for that as well. We have to pay for the membership to those groups, but at least it consolidates the input and gives a single point of contact [to the NDIA]. So, I think it's definitely worthwhile. But again, in terms of cost of service, it adds to the resources that we have to apply to really achieve a level of communication [to the NDIA] that should already be in place. (Panel, CHP)

Dissolution of the SDA Reference Group

It is worth noting that the NDIA had previously established an SDA Reference Group (now dissolved) to provide feedback to the Agency on SDA-related matters. This included support to the development and implementation of SDA program, providing a strong participant voice to the NDIA. The most recent Reference Group members included CEOs of market providers of SDA, support coordination services, disability researchers and peak bodies within the disability sector, as well as industry participants from construction, housing and financing (NDIS 2022d). Other than Power Housing Australia, no CHPs were included in the last iteration of the Reference Group, which was dissolved in September 2020 (NDIS 2021a).

The role of the SDA Reference Group was well regarded by panellists, specifically in its infancy when SDA providers were contributors. Its dissolution is seen as a loss, as it removed CHPs from being able to communicate with the NDIA and influence changes required to improve program delivery.

3.4.6 Housing stock transfers and SDA compliance issues

As illustrated in Chapter 2, the majority (56%) of SDA across Australia constitutes pre-existing housing for people with disability, which does not meet best practice SDA design standards. Although this 'Basic' stock must 'substantially comply' with the requirements of a 'New Build' (NDIA 2022c: 438), the panel described this housing as low-quality, old, and often housing multiple tenants, resulting in severely compromised Home and Living outcomes for NDIS participants (see also Campanella and Young 2023). Much of this stock is state-owned and in the process of being transferred to non-government ownership. A substantial proportion of current SDA constitutes Legacy housing, particularly in Victoria and New South Wales. Where this stock is transferred via in-kind arrangements to the asset base of a CHP, they are tasked with ensuring it is SDA compliant.

Integrating this longstanding, state-owned housing for people with disability into the SDA program is challenging for CHPs given the reported low-quality nature of this stock:

These Legacy properties, none of them—whether they're SDA or not—are really fit for purpose. Some are, but most of them that we're stuck with are not fit for people [despite now being] five years, six years down the track with SDA. (Panel, CHP)

Renewal efforts to bring 'Basic' stock up to SDA standards require substantial financial investment, yet SDA funding is limited when state-owned properties are headleased to CHPs under in-kind arrangements. Subsequently, the cost of dwelling upgrades is not feasible under the current pricing framework, according to the panel.

An additional challenge associated with these upgrades is that CHPs must meet the requirements of the state or territory government and the NDIS, in a way that private investors of 'New Build' SDA do not:

> Most of us [CHPs] have some sort of state government involvement in our properties [but] it's up to us to turn these 'Basic' properties into better properties or build new ones … and we have to deal with the state governments for every single bit of that. So not only do you have the overlay of the NDIS and the complexity there, and then building a market and them changing the rules, [but] you have also got the overlay of state governments who are desperate to protect their interests at all costs. (Panel, CHP)

One panellist described the difficult position of CHPs when attempting to attain appropriate funding to upgrade 'Basic' properties:

> Housing New South Wales will say, 'We won't do modifications, it's a NDIS thing.' And then NDIS will say, 'We won't fund the modifications on a [social] housing property.' So, we often have that conflict that we're dealing with. (Interview, occupational therapist)

Another panellist provided an example of how state and territory governments have made policy changes to transfer the responsibility of housing improvements to CHPs:

> There used to be a modifications policy where the South Australian government would pay for modifications […] They released it again, under the name of a Disability Access and Inclusion Policy and said, 'We're no longer going to pay for modifications. And by the way, can you guys [CHPs] try to build more SDA?' And that's it. They basically transferred the cost to us. (Panel, CHP)

Panellists argued the need for greater government intervention and collaboration to improve the quality of 'Basic' stock. The Victorian government constitutes the only state making headwind in this regard (see subsection 3.2.1). Nonetheless, at the national scale, raising the standards of 'Basic' stock—either through renewal or reinvestment—is slow and not turning over at a viable rate, particularly as many state and territory governments seek to distance themselves from the SDA program.

This is concerning, as Legacy housing will exit the SDA program five to 10 years after enrolment unless there is substantial refurbishment. This means that a large proportion of 'Basic' stock will no longer receive funding after 2027. This presents an additional issue for those NDIS participants currently in these dwellings, with state government representatives expressing concern about where tenants will be relocated. Given that the average SDA payment to NDIS participants is $15,000 (NDIA 2022c), it is unlikely that those currently living in 'Basic' stock will have sufficient funding in their plan to move into a 'New Build' dwelling. Further, our research did not identify a policy strategy for the respective tenants of 'Basic' stock once the transitioning of these homes into the program is completed.

3.4.7 Collaboration between state and territory governments and CHPs

The role of CHPs is hindered by the complexity of state and territory government involvement in SDA. The varied roles of each state and territory government in the SDA space, coupled with state-specific policy settings, were observed as key barriers for CHPs.

Given these varying levels of state and territory government engagement in SDA, panellist perspectives were contingent on the jurisdictions in which they operate. For example, CHPs operating in Victoria largely welcomed the state government's proactive approach to SDA, which included funding commitments to raise the quality of older housing stock.

Meanwhile, those operating in other jurisdictions were less satisfied with the level of government involvement in the SDA program. Panellists were critical of the hands-off approach to SDA taken by some state governments, as illustrated in these excerpts relating to New South Wales:

> *The New South Wales government has politely sort of washed its hands of its SDA and participation in the sector. (Panel, CHP)*

> *They [NSW Government] really fundamentally believe, five years, six years down the track that they would not have one disability property that they would have to manage and look after. They believe that […] all the properties would have been built by the private market, and those group homes would have been sold off. But that's not where we are. (Panel, CHP)*

SDA-specific policy decisions by some state and territory governments were also identified as issues affecting the SDA program. For example, panellists from NSW spoke of a broken pathway from the social housing sector to the SDA program triggered by the state-specific eligibility policy discussed in subsection 3.3.2. Panellists highlighted a set of challenges stemming from the temporal underpinnings of this policy. For instance, issues can arise for successful SDA applicants in cases where no suitable SDA accommodation is available, or when the level of approved SDA funding is disputed. Additional challenges were raised for existing social housing tenants who could potentially be eligible for SDA, but choose not to apply for SDA because of the rigidity of state and territory policy rigidity regarding social housing. In such cases, it was suggested that social housing tenants do not want to risk losing their current place of residence while waiting for their SDA approval—particularly if they are denied SDA funding or if suitable SDA is not available.

Against this background, the general consensus among panellists is that much more is required of government at the state, territory and federal level in order to address policy settings that hinder access to SDA, as well as its delivery. In this regard, panellists acknowledged that regulatory change is required.

3.4.8 Inconsistent inclusion of AT

The integration of AT within the SDA program is contested. As discussed in Chapter 2, only the High Physical Support design category is required to be AT-ready with limited details regarding what this specifically entails. Implementing AT into the home is further complicated by the separation of AT and SDA funding streams, coupled with the exclusion of 'mainstream' technologies such as smart devices from NDIS funding. Consequently, SDA providers lack a direct funding mechanism through which to deliver digital AT throughout their SDA portfolios, and generally consider the provision of AT as beyond their scope.

At the same time, despite the lack of funding incentives, most CHP representatives on the panel explained that they equip all 'New Build' stock with the 'backbone infrastructure' to support a range of AT to be implemented as required:

> *The key is to actually have the infrastructure or the backbone of the house to enable technology. So, for instance, if you want to put automatic blinds in, the [participant] might not need them initially, but wire the house while you can, so that you can plug in and play to get that done as you go forward. […] it's all about that spine that makes everything else work. (Panel, CHP)*

> *We look to sort of provide the backbone without the actual technology itself, in our 'New Builds'. To work out what exactly that backbone looks like has been a bit of a challenge for us. (Panel, CHP)*

Although the up-front costs can be high, panellists emphasised the economic and time-saving efficiencies of including the 'backbone infrastructure' into the initial build, rather than retrofitting the dwelling at a later date. Further, panellists argued that the provision of this infrastructure not only delivers a better housing outcome for participants, but also boosts the attractiveness of the SDA dwelling and reduces vacancy risk:

> It stops any delays of people moving in because they need that technology. And occupancy is more important than spending that little bit extra on supplying the assistive tech from the beginning. And we have had success in retrospectively claiming it for the participants who need particular types of assistive technology. So absolutely, it should be built in as part of the infrastructure, all the wiring. (Panel, SDA Advocacy group member and SDA provider)

However, providing the 'backbone infrastructure' for AT is voluntary and was recognised as the exception among CHPs rather than an industry norm. Panellists implied that private market providers rarely include this AT infrastructure within their SDA builds, while also noting that the definition of 'backbone AT infrastructure' remains ambiguous and open to interpretation.

Panellists also acknowledged the value of bespoke devices and smart home technologies from a participant's perspective, but expressed reluctance to invest in such AT due to the NDIA considering them 'mainstream' technologies—and therefore excluding them from a participant's SDA funding. The speed of technology redundancy further disincentivises such investments:

> If I would give any advice [to an SDA provider]: don't invest in bespoke technology. You can pay $60–70,000 but it will be redundant in two years' time. The phone technology with iPhones, iPads, everything else has completely changed that […] So the key for me has been to dial back the really high-end, bespoke stuff because it becomes redundant, and just get the backbone of the house to work as ready-made. (Panel, CHP)

Delineating between the entities responsible for providing and maintaining a variety of different AT is challenging for CHPs:

> From an SDA provider management point of view, it's really important to be able to maintain the assistive technology and to understand what infrastructure is and what is the resident's responsibility […] understanding what is actually the line between what is the SDA provider's responsibility and the resident's responsibility for the maintenance and repair of that assistive technology. (Panel, CHP)

This dynamic is further complicated when a CHP is providing the SDA compliance and tenancy management component on behalf of the owner of an SDA property. The lack of clear guidance on AT within the context of the SDA program was a recurring theme among panellists, highlighting challenges in interpretation and implementation:

> I actually don't think [AT is] that easy for everyone to follow if I'm being totally honest. There are too many varying levels of specification. It's a bit of a minefield at times. (Panel, CHP)

> There is [NDIA] guidance [regarding AT], but there seems to be different points of view around the interpretation of the guidance. And that's where the problems occur. (Panel, CHP)

The need for clearer guidance and requirements around AT was further emphasised by allied health professionals. A panellist with a clinical background described a typical challenge resulting from the lack of AT incorporated into all SDA design categories:

> *So, you could have a person with Fully Accessible [SDA] who doesn't have an automated door. They could be using a mobility frame, and they have to then go through the process of applying for assistive technology to have a door opener. So that's when the complexity comes in. (Panel, occupational therapist)*

The panel member continued, describing a general lack of knowledge and expertise among NDIA planners regarding AT, and the complex process required to attain adequate AT funding to meet a participant's needs:

> *Then you've got the complexity on the other side of the fence when the NDIA doesn't understand those [SDA] design standards and the NDIA try and get you as the OT [occupational therapist] to go through and apply for every piece of assistive technology that's already been approved […] So there's a […] lack of clarity around what we're talking about. (Panel, occupational therapist)*

Issues relating to the standardised application of AT to SDA were also raised:

> *Let's say [the standards include] a height adjustable bench top—great idea. But if you've got a height adjustable wheelchair, it's not needed. So again, it would be great if there was some element of co-design and consult with people advising those people who are putting in that expensive technology. But even having said that, the standards have to be met for them to even get their funding. (Panel, occupational therapist)*

3.5 Summary

This chapter has examined the interaction between social housing and the SDA program. It found that interactions between state and territory governments and CHPs are complex. There are multiple models of dwelling delivery within the social housing sector and interactions differ by jurisdiction, pre-existing state and territory government programs, and from project to project, depending on the developer or investor.

The varying roles of state and territory government housing departments within the SDA program have also been examined, showing how longstanding housing policies and programs for people with disability established prior to the NDIS have created additional complexity regarding their involvement in SDA. As state and territory governments navigate the transition of housing for people with high and complex needs from the state to the federal level, their respective interaction with the SDA program differs nationally from a hands-off approach to operating in a housing provider capacity. In this regard, the role of state and territory governments in the SDA needs to be further clarified.

The chapter has demonstrated the pivotal, yet under-recognised, role of CHPs in the SDA process. Not only regarding the delivery of SDA dwellings, but also as tenancy managers of state and territory government SDA and privately owned SDA. They also function as program educators to private market SDA providers, NDIS participants and their support networks. Financial recognition of these skills needs to be undertaken to reduce the risk and costs incurred by not-for-profit organisations.

The barriers and opportunities experienced by the sector regarding accommodation delivery for people with disability have also been identified. It was evident that the NDIA has a role in reducing risk for social housing providers through data delivery, simplified systems, and a dedicated communication channel to the NDIA. In particular, communication channels have implications for CHPs in terms of increased risk and reduced confidence in the SDA program, as well as for state and territory governments in terms of collaborating with the NDIA to strengthen the rollout of the SDA while planning and reforming state-level housing programs for people with disability who are ineligible for SDA.

The mismatch between the current price guide and the true cost of delivering SDA significantly impacts the sector. Future growth in 'New Build' SDA is contingent on the outcomes from the recent SDA Pricing Review. Lastly, there is a need to redefine the inclusion of AT across all SDA design categories and further define the AT requirements for dwellings enrolled within the High Physical Support design category. Such changes would result in improved housing outcomes for both SDA providers and NDIS participants.

4. Accessing housing through the SDA program

- Although the SDA program is highly regarded, it is complex to navigate and carries a significant administrative burden for people with disability and their informal support networks.

- Encounters with staff from multiple agencies during the application process can be stressful. A more streamlined approach would be beneficial to applicant wellbeing and achieving funding outcomes that more readily meet applicants' needs.

- Functional capacity assessments are central to the SDA funding application. There is a need for greater balance between a standardised approach to producing high quality FCAs to meet housing needs for people with disability, without compromising the critical process allied health professionals follow.

- The tension between choice and control and the funding criteria 'reasonable and necessary' challenges the ability for the SDA program to deliver housing that meets the needs of all NDIS participants applying for SDA.

This chapter focusses on the experience of accessing housing through the SDA program. It draws on interviews and panel discussions with service providers associated with the SDA program. Incorporating the lived experiences of people with disability is a central element of this research project. So this chapter has a specific focus on the outcomes from the Diverse Voices roundtables, where experiential experts offered valuable insight into the experience of accessing housing through the SDA program.

This chapter demonstrates that although the SDA program and the benefits delivered are viewed positively, there were also challenges around the complexity of the application process and the toll it can take on people with disability and their supporters, the decisions made by the NDIA, and the way in which AT intersects with the SDA program. Throughout, the empirical findings identify several potential areas of change that would make a significant difference to those seeking to access SDA.

The SDA program has been designed to enhance the lives of people with disability with extreme functional impairment or very high support needs by providing a safe home environment to increase independence and improve quality of life. Feedback from the Diverse Voices roundtables revealed a consensus that the SDA program is crucial and can have a significant positive impact on participants' lives once the process of applying is successfully completed.

As research participants in this chapter reveal, the decision to move from the family home, or to support a loved one to live independently, is not neutral. Those working with families accessing housing through the SDA program were very much aware of what an emotionally draining experience this decision is for many families. The following interviewee, who has been through the experience themselves, describes the emotion felt when a child with disability leaves home but also the support for them to be able to live independently:

> We actually go through a massive emotional roller coaster, just coming to that decision for our child to move out of home. That's massive. And it takes such a toll. And you go through this massive guilt trip, and all of that. (Interview, specialist support coordinator)

As becomes evident in this chapter, the administrative process of applying (and qualifying) for SDA through the NDIS can be lengthy and at times challenging. Panellists shared their experiences observing the process, stating that more often than not, initial participant assessments came back with incorrect funding levels, categories or other errors, requiring reviews or appeals to correct them. As noted in Chapter 3, the lack of information for NDIS participants and their families was raised as an opportunity for improvement.

4.1 Navigating the SDA program

4.1.1 A complex policy environment

Service providers, NDIS participants and their supporters regard the process of accessing SDA as being complex, and one that can potentially be quite protracted. Roundtable participants reflected on their experience and highlighted the substantial administrative processes required to be undertaken, using words such as 'tedious', 'difficult', 'long' and 'tiring' to describe the process of assessment and the search for housing:

> The procedure is very tedious, and actually it's very, very tedious and difficult. (Diverse Voices roundtable participant)

> It was not easy; it was a long process. (Diverse Voices roundtable participant)

> The whole process of assessment … looking into … how capable you are, the full capacity evaluation … I mean, the process for me at the time was kind of paperwork, assessment and stuff like that. Sometimes you get tired. (Diverse Voices roundtable participant)

One of the aspects that makes the process difficult is the volume of administrative tasks involved in the application process—for example, the volume of documents required to be read and completed. Applying for SDA was regarded as being demanding:

> I think [the application] was pretty much a straightforward thing, at the same time it was bulky. Sometimes you get tired, you know, because it was bulky. The whole assessment process makes you feel tired. (Diverse Voices roundtable participant)

In this regard, roundtable participants argued that policy makers may not have taken into account the cognitive load that the program design, including documentation to be completed, creates for people with disability when accessing housing through the SDA program:

I think mental energy plays a very vital role, you know, compared to physical energy because everything you're doing, you're thinking, you're trying to connect the dots, you're trying to put things straight. And I believe, I feel that if you're not mentally OK or maybe if you're mentally distracted, I feel that your level of physical activity, you know, it's going to slow down. (Diverse Voices roundtable participant)

They should be able to just hasten up and do things that avoid time-wasting for [people with] disability. Try to curtail time-wasting when dealing with people with disability. That's going to go a long way to help us. (Diverse Voices roundtable participant)

As these quotes reveal, the cognitive demands of the SDA application process impact on the physical and emotional wellbeing of people with disability. This was particularly related to the protracted nature of the process.

Panel participants described their observations of families who may not have previously engaged with social services but were now seeking suitable accommodation for their family members with disability. Despite potentially having the financial means to deliver housing for their family member with disability, these families often struggle to navigate the SDA program and may not be aware of the options available:

Families who were looking for a property for a sibling or for a child who had not engaged with the social services sector before in a meaningful way. … But they wanted [their family member with a disability] to be independent, and … just didn't know how to navigate the system for [their family member]. (Panel, CHP)

Panel members and interviewees echoed the sentiments of the roundtable participants. In frustration, it was noted that not only do NDIS participants need to understand the SDA program and what it can offer them, but also undertake a lengthy assessment process and then potentially appeal the NDIA decision before the search for, or access to, accommodation can be realised. For people with a permanent and significant disability, or those supporting them, the complexity of the scenario was not regarded as being appropriate:

You may have people who have deep complexity … and then you say, 'We can help you, but only as long as you navigate this dizzying array of different mechanisms that you need to understand to do that.' So, people who are in a position of their life where they're least able to navigate those things are asked to do that, in order to get the support they need to navigate it. (Panel, CHP)

4.1.2 Informal support networks

Informal networks were often noted as an important supportive resource for those accessing housing through the SDA program. Roundtable participants explained the importance of familial support in particular, but in some cases, friends also provided assistance. A strong view emerged from the roundtable discussions that people with disability often require assistance to navigate the SDA program and everyone involved in this study was being supported on their journey with the SDA program by family, friends or carers:

When you are in this kind of situation and you don't have someone around you, helping you out, it will not be very easy for you. (Diverse Voices roundtable participant)

I thank God for my siblings, who are always there for me. Life is not friendly here with me. (Diverse Voices roundtable participant)

[I] get in touch with my family, you know, 'OK, this is the issue I'm having,' and they kind of work with me, sending help for me. (Diverse Voices roundtable participant)

I was kind of like, giving up. But as time goes [by], a friend of mine came to me, gave me advice. […] My friend really helped me; they gave me a lot of motivation. (Diverse Voices roundtable participant)

My experience with SDA is very OK because I have someone that is helping me. Someone in my family. (Diverse Voices roundtable participant)

The role of informal networks extends beyond moral support. Rather, they are assisting NDIS participants to interpret and navigate the SDA program, including the assessment and search processes required to negotiate appropriate housing outcomes. Notably, this is being undertaken by people who do not work within the SDA program. When asked if there was a professional within the NDIS or a support agency assisting them, roundtable participants pointed to their informal support networks:

I had someone assisting me. So, the thing was going well. (Diverse Voices roundtable participant)

He's a friend. He's a friend that's assisting me. (Diverse Voices roundtable participant)

A lack of accessible information and education about the SDA program and the associated processes compounds the complexity of the program. CHPs, support coordinators, OTs and the other professionals involved describe the SDA program as being complex. The absence of streamlined information and education about the SDA program mechanics makes it difficult for those not involved on a day-to-day basis to navigate and facilitate desirable Home and Living outcomes:

From the perspective of the participant, the education and the lack of information for participants around SDA is so complex from a policy perspective, and expecting anyone to understand it is hard enough. (Panel, CHP)

Therefore, it is not surprising that participants identified their initial encounters with the SDA program as challenging. It was explained that the process of navigating the SDA program was most difficult at the start. As the NDIS participants and their informal supporters become more familiar with the SDA program, the navigation became gradually easier over time.

4.1.3 Specialist support coordinators

Throughout the interviews and panels, we found that specialist support coordinators play an important role in helping participants navigate the SDA program. Specialist support coordinators can assist families make informed choices and connect with appropriate SDA providers. However, specialist support coordinators are not the default arrangement in the NDIS.

A unique service offered by one specialist support coordinator organisation is housemate matching. The service is designed to ensure that participants are placed in living situations with compatible housemates. In Chapter 3, the complexity of searching for SDA housing was emphasised, as was the importance of matching individuals with the right accommodation. In the case of this specialist support coordinator service, where one or more NDIS participants are sharing a home, the housing-matching process is strategically designed to prevent the placement of incompatible housemates in shared living arrangements:

So as part of the work we do [as specialist support coordinators], we do really thorough housemate matching, which has not been done before in the sector. It's another story altogether. So back in the day, you know, group homes, there would be five, six, seven people in a house with challenging behaviours. (Interview, specialist support coordinator)

4.1.4 Functional capacity assessment

All NDIS participants undertake a Functional Capacity Assessment (FCA) to determine the level of NDIS support for which they qualify. This process is not streamlined, and currently contributes heavily to more than 4,000 cases at the Administrative Appeals Tribunal (AAT) related to the NDIS (NDIA 2022c). The FCA attempts to define the functional capacity of a person with disability to help determine their support needs, including the need for SDA. The NDIA definition of functional capacity is based on the World Health Organization's (WHO) definition of functional capacity as part of the International Classification of Functioning, Disability and Health. The WHO states that:

> Functional capacity refers to an individual's ability to be involved in life situations and to execute tasks or actions, with and without assistance (assistive devices and/or personal assistance). (WHO 2013: online)

As part of the definition, it is also noted that functional capacity should take into account impairment(s), as well as the extent to which environmental factors impact upon an individual's functional capacity (WHO 2013).

In relation to the SDA program, it is the responsibility of a person with disability to organise an FCA, and then to provide that evidence to the NDIS as part of their application for SDA (NDIA 2020). FCAs are undertaken by OTs and the outcomes are drafted into a report that include an individual's Home and Living support needs as well as Home and Living goals (NDIS 2022f). A specialist support coordinator interviewed for this research highlighted the importance of the quality of the FCA report. The report needs to describe requested supports as being 'reasonable and necessary', which means that they should be 'related to a participants' disability, not include day-to-day living costs, deliver value for money and are anticipated to be effective for the NDIS participant' (NDIS 2019) If the FCA report is not fit for purpose, the application will not be approved, or may not be approved at the required level for the NDIS participant, as the following interviewee explains:

> It still comes down to the quality of the report, so you know if it misses one part of 'reasonable and necessary', the legislation says the planner can't approve it. So, it's rejected, [and] you then go back, get more assessments, more reports, wait longer and submit them again. (Interview, local area coordinator)

The FCA report is therefore central to accessing SDA that meets the Home and Living goals of a NDIS participant and the time taken to do so.

For people with disability, the sheer number of people involved in an FCA and the application process in general can be a source of stress. There are difficulties associated with coordinating multiple advisors and medical professionals, and sometimes participants must repeat the same story to many different people involved in the application and assessment process. As one participant explains, this can lead to exhaustion and frustration:

> And always I'm tired. I don't like people coming around me a lot, so I feel that we should always have ... They should always have, like, maybe one professional person, you know, and maybe one of the staff, you know, the professional person there is to explain the whole thing. Then the staff there is maybe for administrative purposes and stuff like that, so that it kind of makes it easy for the person [with disability] to be able to communicate with [them] open minded. You know, unlike having a lot of other professionals around him just because of [the] application and stuff like that. (Diverse Voices roundtable participant)

For roundtable participants, having one dedicated person responsible for liaising with each SDA applicant, rather than requiring them to interface with a whole group, would make the process less exhausting and repetitive.

Another issue with the application process is the quality of FCA reports, which have been found to vary greatly depending on the experience and expertise of the OT. For example, a specialist support coordinator explained the approach of an OT who may be inexperienced in undertaking FCAs, highlighting the impact on the NDIS participant in terms of the adequacy of the support received and the timely provision of such support:

> We have people just going, 'Okay, you're probably eligible for SDA funding, let's go and apply.' They'll link in with any old OT who will do an SDA assessment, and they'll submit their recommendations. More often than not, [the SDA approval] comes back at the wrong level, wrong category, wrong, whatever. And then you've got to go through the … NDIS process of a review … or go to the AAT, depending on the steps to get that funding reviewed, and submit more evidence. All of this takes months … (Interview, specialist support coordinator)

The NDIS has also observed the variability in quality of FCA reports, as noted by an OT, which results in distrust among NDIS-funding approvers:

> We've had very frank conversations [with the NDIA] where they've said to us: 'We're not talking about you, but generally speaking, the quality and standard [of] reports that come in are very variable—as people are doing this work out of their scope of practice as occupational therapists— and we can't trust that the therapists who are doing this work understand all the models that are available, understand the environment, understand what SDA is and what it could be.' So, there is this distrust. (Interview, occupational therapist)

An interviewee based at an organisation that specialises in providing FCAs for people who may qualify for SDA describes the steps her organisation has taken to improve their assessments. This relates to the specialist knowledge required to undertake the assessments and deliver a report that is fit for purpose and supports a NDIS applicant to meet their Home and Living goals:

> I've actually just written a course. And over the last 18 months, we've just released it. And it's focussing less on a template and going back to a process that's called occupational therapy work. Which is basically really understanding the person, using the multidisciplinary team, assessing, you know, just normal, doing your assistive technology recommendations, like equipment. And then once you've done all that, it becomes much easier to make those recommendations around housing. (Interview, occupational therapist)

An underlying tension among panel participants revolved around the need to strike a balance between adopting a more standardised approach to generate high quality FCAs and preserving the meticulous process followed by allied health professionals. Interviewees also delved into the broader context of the disability service sector, noting a consensus on the need for increased proactivity. Specifically addressing the SDA program, concerns were raised about the existing reactive approach, argued to result in suboptimal housing outcomes for individuals applying for SDA funding:

> So, the disability sector is so reactive. There's not a lot of pre-planning in the disability sector. And that ends up costing a lot of money, and the worst part about it is it puts some participants in unsuitable homes and situations where their behaviours increase then they're not happy, they're not well supported. It's really, really sad. So there needs to be a lot of education and pre-planning in and around that space, especially in housing. (Interview, specialist support coordinator)

SDA program advocacy groups, researchers and peak bodies have persistently called for action from the federal government to address these disparities, improve oversight and accountability, and ensure that the SDA program aligns with their fundamental principles of choice and control (Aimers, Rathbone et al. 2022; Aimers, Wellecke et al. 2021; Beer, Flanagan et al. 2019; Skipsey, Winkler et al. 2022; Summer Foundation 2022).

4.1.5 Virtual pathways

Diverse Voices roundtable participants welcomed the expanded availability of online services, acknowledging their positive impact for many individuals with disabilities. Being able to access materials and attend meetings virtually instead of face to face reduces anxiety and mobility difficulties for people with disability, who often encounter transport challenges:

> *When you are working with people with disability, I think the best way and the preferred way is online, when you can join at your comfort. (Diverse Voices roundtable participant)*

> *I save a lot of time going online. The stress [is] reduced for me. (Diverse Voices roundtable participant)*

Roundtable participants advocated for increasing the opportunity for online engagement. This might be through greater opportunity for virtual building-site tours and a live chat function on the NDIS website. It was anticipated that expanding virtual pathways would improve knowledge of the SDA program and the associated processes for NDIS participants applying for SDA funding and those supporting them to do so.

4.2 Challenges to accessing SDA

Once NDIS participants have undertaken an FCA and applied to have SDA funding included in their plans, the NDIS Homes and Living panel then make a determination on the nature of this funding. There are views within the SDA sector that the terms 'reasonable and necessary' are complicated and subjective. For example, to create a plan, NDIS planners and the Home and Living panel are required to balance the individualised outcomes that both assist the NDIS participant to pursue their goals as well as the NDIA's 'value for money' criteria (Summer Foundation 2022). Panellists shared their experiences observing this process, recounting that it is not at all unusual for initial determinations to include funding levels that did not align with that requested in the report, or with categories that did not meet the needs of the NDIS participant.

This research found that the SDA program often falls short in delivering the desired housing outcomes for NDIS participants, specifically relating to the desire to live alone. For example, interviewees reported that participant preferences are not always reflected in SDA funding determinations, often in favour of cost-saving measures: *'Often their preferences are not always listened to by the NDIA purely for cost reasons'* (Interview, local area coordinator). These outcomes contradict the central NDIS pillar of choice and control. As a result, many participants find themselves undergoing a review process with the NDIA for the correct funding determination. If this process is unsuccessful, participants may then be forced to apply to the AAT or, as a last resort, relinquish the SDA application entirely. While the SDA program aims to provide people with disability greater choice and control over their living arrangements, the current decisions around funding for SDA do not consistently allow NDIS participants to meet this goal.

4.2.1 Limits on the choice to live alone

A significant issue limiting choice and control for NDIS participants is the NDIA's preference for funding shared accommodation arrangements (NDIA 2018). In applying for SDA funding on their plans, NDIS participants may elect as part of their Home and Living goals to live alone. This might be, for example, in a one-bedroom, one-bathroom apartment. The research found that in practice this request is not always granted through the SDA funding determination. This preference for shared living arrangements runs contrary to the general principles for the NDIS, which emphasise the rights to exercise choice, control, privacy and dignity (Wiesel 2020: 219).

The interview materials also highlight the shortage of available SDA options, particularly for participants seeking sole-occupancy dwellings or Robust housing. It also extends to NDIS participants unable to be discharged from hospital despite being capable of residing at home. An interviewee shared their experience as a local area coordinator regarding the latter scenario:

> *I've had many calls over the last year around a participant who's been stuck in hospital, because they need Robust housing, and they cannot live with another person. And it's just such limited stock. (Interview, local area coordinator)*

In addition to the limited stock, SDA determinations are often informed by the participants' required level of care, despite SIL and SDA funding determinations being separate (NDIA 2021). This further complicates the NDIA decision-making process and can lead to inappropriate living arrangements for participants. Being forced to share accommodation is also an issue regarding SIL, where typically only one SIL provider will deliver supports for an entire SDA household, necessitating collective agreement on the choice of SIL provider. This poses difficulties when a household member wishes to select a different SIL provider, requiring unanimous agreement within the entire SDA household.

Choice and control remains a contested issue among SDA recipients. The absence of choice was recognised as an issue prior to the NDIS (2022a). Hence, this is one core driver of the NDIS creation. Nonetheless, informants cited the NDIA's SDA funding decisions as they relate to dwelling type, location, shared occupancy and the lack of separation between SIL and SDA, and how they actually undermine this core pillar of the scheme.

4.2.2 Misallocated funding

Interviewees highlighted the issue of inconsistencies between the SDA funding packages NDIS participants applied for, and the amount of funding for which they were approved. There are concerns that a substantial number of NDIS participants who have applied for SDA funding have received a misallocation of SDA support. Interviewees discussed this misallocation by describing a disconnect between NDIS plans and the SDA funding approvals, as one panel member explains:

> *So, there's a lady … who has High Physical Support requirements and is in a wheelchair 24/7 but has not even been approved for a Fully Accessible dwelling. Which technically means she can have steps in her dwelling as a wheelchair user. Which is ridiculous. I think we can all accept that that's a ridiculous position to be in. So, there are people being approved at the wrong level. (Panel, CHP)*

This quote underscores the inconsistency between an individual's support needs and the level of SDA funding received, which can create obstacles when searching for suitable housing. It also demonstrates the potential consequences of inconsistent funding decisions, which may leave individuals without access to the accommodation they need. The NDIA recently reported that the rate of misallocations was 60 per cent (NDIA 2023b: 73), a statistic that is not a surprise to those in the sector:

> *I would say that the misallocation or miscategorisation is well over 50 per cent, if not higher and, you know, it really comes down to: has that person written that report well enough? That's a highly skilled [undertaking] … and [requires] quoting the legislation. (Panel, CHP)*

These findings demonstrate that the issue of inconsistent SDA funding is widespread, affecting a significant portion of applicants. It also raises the question of whether the quality of clinical evidence (reports and assessments) submitted during the application process contributes to the misallocation of funding. Arguably, there are a number of professionals involved in the process, and therefore a misallocation could be a result of the quality of FCA reports, or the technical skills and qualifications of those assessing the complex reports rooted in clinical evidence.

Professionals who work in the sector propose a more streamlined approval process to reduce the number of misallocated funds and improve the rate of appropriate initial SDA determinations:

There's an extra step that can be put in place … And that's actually sitting down with participants, their care team, a specialist support coordinator like myself, sitting down with the Home and Living team at the NDIA, and really talking about, 'Okay, what is the best housing and support situation for this person? What does that look like in reality?' And just nut it out in a care-team meeting, and then apply, and then approve the SDA funding that's needed to achieve that goal. (Interview, specialist support coordinator)

I feel that there should be someone within the Home and Living team that liaises with the support coordinator to really discuss what the approval is or why they weren't made eligible. So I think that they really should have an open line of communication and someone within that team, instead of sort of the planner … The planners provide information, but they don't really share what other information could have helped get a different outcome. (Interview, local area coordinator)

This proposed solution involves all relevant stakeholders in a care-team meeting, which can help facilitate better communication and understanding of the participant's unique needs and circumstances. By taking this collaborative approach, the likelihood of reaching a consensus on the most suitable housing and support options for the individual is increased. This process allows for a more accurate assessment of the appropriate SDA funding level required, and minimises the risk of misallocation. This process could foster a more person-centred approach, ensuring that the specific needs and preferences of each participant are considered and addressed during the decision-making process. However, it is not an approach that fits with the current design of the NDIS, which focusses in most cases on the development of NDIS plans with the planner, the person with disability and their advocate only.

4.2.3 Appealing an SDA allocation decision

Where a misallocation of SDA funding does occur, NDIS participants have the right to appeal the decision, addressing issues such as the allocation of incorrect funding levels, design category misclassification, or a decision to not permit a sole-occupancy home. The mechanics of this process were described in Chapter 2. However, the experience of appealing an SDA determination is lengthy and arduous. If the initial review is unsuccessful, the matter can be escalated to the AAT, causing further delays and challenges for the individual seeking to realise their Home and Living goals. As highlighted earlier in this chapter, the decision to support a person with disability to live independently is already fraught with emotion. The role that families play in advocating for children and siblings to achieve their Home and Living goals is evident but made more difficult by SDA funding decisions that do not meet these needs. One interviewee with lived experience explained their journey:

It's so disheartening and frustrating for families and for parents … you're getting beat over the head from the NDIA going, 'No, you can't have the funding to do it,' and you've got to fight for it. So, you've got to fight for something that you don't really want to do but, you know, you have to do. [It's] a massive challenge. (Interview, specialist support coordinator)

4.2.4 Effective communication strategies

As illustrated, NDIS participants routinely liaise with a number of professionals during the SDA application and FCA process. The nature of these interactions was found to shape the experience of those who have accessed SDA. Key to these interactions was the level of patience and respect that service providers across the SDA sector afforded NDIS participants. One participant reflected on what contributed positively to their experience of accessing SDA:

I think the first thing is: looking out for staff who have good qualities. You know, people who are able to tolerate and understand our personality. […] You know, rather than having people who are not ready to have patience with us, who feel they don't need to be explaining themselves over and over many times. (Diverse Voices roundtable participant)

This call for patience was echoed by other roundtable participants. It was argued that staff across the SDA sector, including the NDIA, need to pay attention to how people with disability are feeling and be patient when providing assistance:

People that are working [within the SDA sector] should have communication skills. A communication pattern, where talking to a patient or any other people that you have a smiling face, that will have an impact. (Diverse Voices roundtable participant)

[While help is appreciated], we need to consider the kind of person that is coming to render the help. [Are they] going to cope, [do they] have the qualities you're looking for? (Diverse Voices roundtable participant)

When the person interpreting the document or when you're trying to make some calls, or when you're trying to put yourself in the position where you need someone to interpret a certain kind of document for you, or any kind of reading. If that person doesn't have this level of patience and level of, you know, being tolerant. I think it sometimes makes us feel as if we don't get the kind of care we're looking for or they don't value us just because we are with people with disability. (Diverse Voices roundtable participant)

Roundtable participants emphasised that people with disability should be treated as equals and not patronised or talked down to. Cases need to be looked at individually, with respect and consideration for the applicant as a unique person:

The kind of thing that I'm trying to say is that, you know, in life, we [change] stage by stage. And also, it's tenant by tenant. [This is] the kind of thing that is needed to be improved for the upcoming people, because they might be people that will also be like that. So when they come there will be more suffering. So [professional involved in the application process] should try to, you know, improve their communication and also take everyone alone [as individuals] and avoid discrimination. (Diverse Voices roundtable participant)

Those involved in the application process need to listen and trust. People with disability are capable of identifying and articulating their own housing needs. Roundtable participants spoke of not being heard or listened to. Professionals involved in all aspects of the SDA application process should attentively listen to those needs and trust the NDIS participant, and adopt a person-centred approach to SDA determinations:

Other people [may] feel that [the assistance] is not necessary. But we are living a life day-to-day, we understand what necessity means to us, you know, as a person. Especially when you don't have the kind of asset you're looking for or the kind of support you're looking for, technologically and otherwise (diverse voices roundtable participant).. (Diverse Voices roundtable participant)

Roundtable participants offered clear recommendations regarding further training that professionals involved in the SDA process could receive, concerning ways to engage with, and speak to, people with disability as they work through the application process. These skills are largely associated with communication, including ways to listen to, speak with and observe how an applicant might be feeling or responding to the information presented:

There are things you need to consider. You know, you have to consider the gestures, the emotions, how do they react? Because sometimes they [people with disability] find it hard to express themselves. So as a person, you know, I believe that anyone that has to work with people with disability should have a kind of training. So [they'll] be able to understand the signs, you know, sometimes they [clients] might not speak, but from their gestures you might get to understand they are stressed out. (Diverse Voices roundtable participant)

They should just pause. They could pause and come back, you know, try not to rush them, you know, give them that space for them to feel that they are protected. Because anybody with disability, once you feel you're not protected, I think you start getting nervous. And they may feel [sic] very uncomfortable at that time being attention to things. So especially when it comes to documents, I think most of us have that. (Diverse Voices roundtable participant)

4.3 Summary

Accessing housing through the SDA program can be an emotionally challenging and frustrating experience for NDIS participants and their families. There is a significant barrier to knowledge—and the lack of accessible information about the SDA program exacerbates this issue. Specialist support coordinators play a pivotal role in guiding families through this complex process, ensuring that participants find suitable and supportive accommodation that meets their unique needs. It is crucial that both NDIS and SDA staff recognise that the process of accessing SDA is complex, and the added challenges for people with disability can mean that this is an exhausting experience. The FCA process, in particular, is problematic, as it depends on the variable knowledge of individual OTs and their familiarity with NDIS processes and protocols. The variability of SDA funding approvals is also dependent on the interpretation of the FCA report by a NDIA planner—which results in inconsistent funding outcomes. Respect and patience were highlighted as very important aspects of communication that, when neglected, can greatly impact self-esteem and life outcomes for people with disability. There is a need to place the individual wellbeing of NDIS participants at the centre of practice. The tension between choice and control and the 'reasonable and necessary' criteria emerged throughout the analysis. Such tension undermines the rights of NDIS participants, with broader implications for the effectiveness of the SDA program.

5. Opportunities for improvement: policy and practice

- **Policy and practice opportunities have the potential to improve the efficacy of the SDA program, while delivering significant wellbeing and quality-of-life benefits to people with disability across Australia.**

- **Identified policy opportunities offer solutions to strengthen the SDA program, which is regarded as an important and necessary funding stream under the NDIS.**

- **Changes to practice include low-cost solutions to easily resolvable barriers to the program's functionality, which will have a significant impact for all stakeholders.**

- **Many of the opportunities presented, if implemented, will simultaneously improve both the delivery of SDA and, importantly, participant housing outcomes.**

This chapter draws on the findings from interviews, panel discussions and the Diverse Voices roundtables to understand the policy and practice opportunities that exist to improve both the delivery of, and client access to, SDA. This includes the opportunity to ensure that SDA tenants can access the AT that meets their Home and Living goals. The policy and practice opportunities presented range from those that are prescriptive in nature to those that may require further research and development before they can be implemented.

The social housing sector is pivotal in providing appropriate accommodation for people with disability, including through the SDA program. Four in 10 households within the sector include at least one person with a disability, yet the majority of housing provided is not fit for purpose (according to LHA design standards) (Aimers, Rathbone et al. 2022; Flanagan, Levin et al. 2020). This research has highlighted the critical role of CHPs in the facilitation of the SDA program in terms of:

- delivering 'New Build' SDA

- providing the compliance and tenancy management to state and territory government and private market-owned SDA.

The role of CHPs in the process of creating sustainable tenancies and delivering participant education was identified as pivotal, yet was perceived by participants to be under-recognised by the NDIA.

This research has illuminated numerous challenges affecting SDA outcomes for participants. For instance, the complexity of the process to access SDA funding represents a significant barrier for NDIS participants. This barrier is in part due to a lack of information or education on how best to navigate the process of applying for, finding and securing appropriate SDA.

Navigating the SDA process is further complicated by the inconsistent and opaque SDA funding determinations made by the NDIA in relation to participants' applications, which have been well documented. This research has demonstrated how inappropriate SDA determinations continue to be made in contradiction of a participant's Home and Living goals, as well as the clinical evidence provided with their application. As a result, participants often endure a lengthy, costly and complex appeals process—which is not simply an inconvenience, but has real health and wellbeing repercussions for people with disability. This arduous process has led to many walking away from the SDA funding process or conceding to accept inappropriate SDA outcomes. As described in Chapter 3 and Chapter 4, 'conceding' can include being forced to live in shared accommodation settings, or being forced to live in inappropriate SDA design categories or building types.

A summary of the key policy and practice opportunities developed from this research is presented in Table 10. The table also demonstrates which SDA stakeholders—participants, CHPs or state and territory governments—each of the opportunities would directly benefit once implemented. The opportunities in the table are expanded upon in the remainder of this chapter.

Table 10: Key policy and practice opportunities by relevant SDA stakeholders

	NDIS participants and their support networks	Community housing providers	State/territory government
Policy opportunities			
Empower NDIS participants with true choice and control to meet their Home and Living goals	●	●	●
Provide more flexible options for high-cost, high-needs NDIS participants	●	●	●
Review SDA pricing arrangements to reflect the true cost of delivering SDA		●	
Create a funding mechanism to improve the quality of 'Basic' SDA	●	●	●
Establish clear guidance for state and territory government involvement with the SDA program	●	●	●
Recognise and define the role of CHPs in the delivery of SDA		●	●
Define the inclusion of AT in the NDIS in line with universal design principles	●		
Increase AT infrastructure within all SDA design categories	●	●	
Practice opportunities			
Develop more accessible information and education pathways about the SDA program	●	●	
Improve the quality and transparency of SDA funding decisions	●	●	
Establish robust communication channels between the NDIA and all SDA stakeholders	●	●	●
Improve the quality and clarity of SDA demand data		●	●
Ensure accurate and timely SDA payments are made to providers		●	

Source: Authors.

5.1 Policy opportunities

5.1.1 (Further) Empowering NDIS participants

Policy change is required to facilitate greater choice and control for participants so they can meet their Home and Living goals. One clear step towards this is the right to sole-occupancy housing outcomes. The requests of participants who wish to live alone, or have family members live with them, in concert with the recommendations provided by clinicians, should be more carefully considered by the NDIS when making SDA determinations. One factor contributing to shared accommodation outcomes is the NDIA policy preference for participants to share supports (NDIA 2021). The effects of this policy were observed throughout the qualitative research, where sole-occupancy placements were rejected because of higher building and land costs, but also because one-on-one SIL support is perceived as lack of 'value for money'.

In cases of shared SDA outcomes, an opportunity exists for a more person-centred approach during the SDA determination process, ensuring that the specific needs and preferences of each participant are considered and addressed. For example, if participants are required under the allocated funding to live together, participants should have a greater say regarding with whom they live. State government representatives are of the view that the NDIA has the regulatory capacity to ensure SDA providers facilitate this option. This could include empowering participants, for instance, by notifying providers about the type of people with whom they would like to live, and then being given the opportunity to meet and interview prospective new tenants.

The right to sole occupancy may also be compromised where SDA is owned by the same organisation that delivers the supports or has an arrangement with a SIL provider. In these cases, providers may require participants to live in shared accommodation to fill vacancies or to create economies of scale in service delivery.

As noted in previous research, it is clear that the separation model remains compromised in practice and not in line with NDIA policy (Aimers, Rathbone et al. 2022; Aimers, Wellecke et al. 2021). This issue was observed during interviews with state government representatives who described the ongoing transfer of state-owned housing for people with disability into the SDA portfolio of SIL providers. Further monitoring of this process is required as the SDA market progresses.

5.1.2 The need for greater cross-government collaboration

Limited housing options are available to NDIS participants with high needs who are ineligible for SDA. For this cohort, housing must be secured via the public housing sector, housing organisations for people with disability or through the private market. This results in inappropriate and precarious housing outcomes, including participants living in hospitals, aged-care homes, and experiencing or being at risk of homelessness.

Currently, some state and territory governments are responding to this gap and providing accommodation at a considerable cost. For instance, the Western Australian and Tasmanian governments have delivered housing to SDA design standards to address this need, but funding is limited, given that housing designed for people with disability has been transferred from the state to federal level via the SDA program. Moreover, limited demand data creates challenges for state and territory governments to anticipate, fund and deliver required housing arrangements. Greater collaboration between states and territories and the federal government would support the delivery of more flexible housing options for people with a disability that fall outside the threshold for SDA.

5.1.3 Review SDA pricing arrangements

The mismatch between the current price guide and the true cost of delivering SDA is having a significant impact on the sector. Depending on the outcome and implementation of the 2023 SDA Pricing Review, further reform could be required.

5.1.4 Funding mechanism to improve 'Basic' stock

The majority of SDA is categorised as 'Basic' dwellings, either Existing or Legacy—much of which does not meet the current SDA design standards. SDA payments to Legacy dwellings will cease after 2027. For tenants to continue to receive SDA funding, the dwellings will need either major refurbishment or for providers to undergo asset recycling and invest in 'New Build' stock.

Thus there is an opportunity to create a funding mechanism supporting the improvement of 'Basic' stock. The creation of this this mechanism could in part resolve the pending issue of Legacy stock exiting the SDA program after 2027. As part of this solution, the pass-back policy needs to be either removed or substantially reformed to enable state and territory governments to work collaboratively with CHPs to ensure the standards of 'Basic' stock are significantly raised.

5.1.5 Clarification of state and territory government role

State and territory governments are responsible for people with disability who have housing needs, and are ineligible or not yet receiving SDA funding. However, the longstanding housing policies and programs for people with disability established prior to the NDIS have created additional complexity regarding state and territory government involvement in the SDA program. As state and territory governments navigate the transition of housing for people with high and complex needs from the state to the federal level, their respective interaction with the SDA program differs nationally from a hands-off approach to operating in a housing provider capacity. In this regard, the role of state and territory governments in the SDA needs to be further clarified.

Panellists and state government representatives involved in this research made the following broad suggestions:

- Each state and territory government should clarify a position on SDA. This includes deciding whether or not to become a registered SDA provider and, if not, providing a clear pathway regarding selling-off or headleasing SDA-eligible stock to registered SDA providers.

- State and territory governments should take a more direct role in the facilitation of the SDA program through intergovernmental collaboration. This could include working with the NDIA to facilitate a more streamlined and equitable pathway to identify and transition people with disability from social housing and other state-institutions (hospitals, residential aged-care facilities, etc) into the SDA program.

- Panellists emphasised the need for further state and territory government action to provide pathways to alternative forms of appropriate permanent housing options for potential SDA recipients, as well as for those ineligible for SDA who are currently residing in precarious settings.

More specifically, panellists emphasised the urgent need for the NSW government to reassess the rigid eligibility policy relating to social housing and the SDA program.

5.1.6 Recognise and define the role of CHPs

It was found that CHPs play an extended, yet unfunded, role in the support and education of investors and NDIS participants in regard to the SDA program. CHPs possess a very unique skill set, including the delivery of SDA, tenancy management within the SDA program as well as informing and educating NDIS participants and SDA investors. The specialist knowledge and service provided by CHPs should be recognised and supported both financially and structurally.

5.1.7 Assistive technology and the SDA program

While it is acknowledged that AT funding sits outside the SDA funding stream, the inclusion and integration of AT within the NDIS should be reformed to meet universal design practices. Namely, AT must be clearly defined in NDIA policy and processes and it should be made available to all NDIS participants through their Capital Support funding.

Clear and fair funding should be attributed to all NDIS participants in recognition of the wellbeing and cost-saving benefits of AT. This should include smart home technology and devices that are currently considered 'mainstream' by the NDIA, as they are not designed specifically for people with disability. This funding should include an initial cost for implementation in the home, when required, and regular funding to account for technology evolution and redundancy.

Despite the known benefits of AT, the only design category under the SDA which includes an AT component is the High Physical Support SDA. Despite this, some SDA providers have opted to equip 'New Build' SDA with AT infrastructure such as electric blinds, wiring for automation, and connective networks. It was considered to be more cost-effective to include the infrastructure up-front, even if the specific features were not used, rather than retrofitting a dwelling to meet the needs of a NDIS participant with funding for a different design category at a later date. This approach reduces vacancy risk and, most importantly, improves the participants' housing outcomes.

What constitutes AT infrastructure in the context of SDA should be more clearly defined by the NDIA, and the implementation of such systems and infrastructure should feature as a compulsory requirement for all SDA design categories. Adequate funding may be required to facilitate the inclusion of such systems and infrastructure. Moreover, a co-design process between the NDIS participant, their support networks and the SDA provider should be adopted to ensure the AT infrastructure meets the specific needs of the SDA tenant.

5.2 Practice opportunities

5.2.1 Develop more accessible information

This research highlighted the need for more accessible information and education pathways for NDIS participants regarding the SDA program. There is an opportunity for the federal government, through the NDIA, to further inform, educate and empower participants and their support networks (families, friends, carers) about what is possible under the SDA program, and establish a clearer pathway for participants to identify, apply for, and effectively secure appropriate SDA allocations. Ideally, this should reflect a person-centred approach and involve as few stakeholders as possible—participants stated that dealing with multiple stakeholders under the current structure complicates an already difficult and exhausting process for people with complex needs.

One approach could include the development of more streamlined avenues through which participants can connect or be connected with SDA providers. Some interviewees also suggested establishing a new process for linking participants to the SDA program, which involved pre-planning before participants are 18 years old to more effectively link them to SDA providers. CHPs currently provide educational services to assist participants and their support networks to navigate the SDA process, and to secure appropriate and supportive accommodation that meets their unique needs. Recognition and expansion of this existing information pathway could be further developed to support potential SDA participants.

5.2.2 Improve the quality of SDA funding decisions

The determination of SDA funding applications must better align with NDIS participants' needs and preferences and the demonstrated clinical evidence. Further clarity is required in regard to what assessors consider to be 'reasonable and necessary' and how these criteria are being applied across different cases. Moreover, greater consistency, clarity and transparency is required across SDA assessment and funding outcomes.

The NDIA should provide clear justification for funding decisions made. It should also produce a more robust and easy-to-follow set of criteria regarding various funding types and the evidence required to effectively assess applications. This would help prevent lengthy appeals and prolonged SDA vacancies.

The NDIA must also process SDA applications in a timelier manner. This research and existing studies illustrate how lengthy and delayed SDA determinations are detrimental to participant wellbeing, while constituting a primary contributor to vacancies for SDA providers (see Skipsey, Winkler et al. 2022; Winkler, McLeod et al. 2020). To this end, the speed at which funding decisions are made, including review and AAT decisions, must be improved, with specific arrangements made for assessing priority cohorts—such as participants in residential aged-care facilities, hospitals, and those experiencing or at risk of homelessness.

Furthermore, the extent to which assessors of SDA applications have the technical skills and qualifications to effectively review complex clinical reporting was repeatedly raised as a point of concern among all research participants. This is particularly in light of the substantial number of SDA applicants affected by misallocation of funding, as well as the inconsistency of funding outcomes for NDIS participants with similar housing needs and goals.

For the effective delivery of SDA, this research demonstrates the benefits of identifying eligible NDIS participants early on in the SDA development process. In addition to adding rigour to the decision-making process, a proposed solution could involve streamlining the process by involving all relevant stakeholders in a care-team meeting to determine the best housing and support situation for each person, taking a person-centred approach to ensure appropriate SDA funding is approved to meet their specific needs.

5.2.3 Establish robust communication channels

SDA stakeholders—including participants, providers, state and territory governments, and support services— should have a direct point of contact within the NDIA for SDA-related enquiries. For example, SDA providers should be able to contact an officer in the NDIA about NDIS participants applying for SDA. Provided the privacy of the participant is maintained, this linkage would:

- enable better co-design outcomes

- resolve issues as they emerge

- streamline the process of delivering SDA and matching participants with housing that meets their needs and preferences.

For SDA providers, this would 'level the playing field', particularly for smaller entities that lack the membership to peak bodies required in order to have a line of communication with the NDIA, albeit indirect, and have their voice heard. One way to do this could be resurrecting and strengthening the SDA Reference Group, and ensuring that CHP representatives are included. The next iteration of the SDA Reference Group must create opportunity for constructive discussion and collaboration to support the further development of the SDA program, with a central focus on improved tenant outcomes and experiences.

5.2.4 Improve quality and clarity of SDA demand data

The quality and clarity of SDA demand information provided by the NDIA needs further improvement. Previous research by Beer, Flanagan et al. (2019) raised the same issue. However, despite changes since that time, more granularity is required around forecasting and approvals, as well as the mechanisms used to convey these data to SDA stakeholders.

Improvements to demand data could include:

- the number of people with disability currently without appropriate accommodation

- the number of NDIS participants in the process of applying for SDA funding

- the number of NDIS participants with approved SDA funding in their NDIS plan, delineating between those with usable funding and non-usable funding to enable SDA providers to clearly identify specific housing needs and understand the viability of an SDA development.

To this end, more detailed information should be included, such as participants' preferred design category, building type, household composition, AT needs, as well as accurate locational preferences—not solely listing where the NDIS participant was residing at the time of applying for SDA funding.

Participants in this research put forward the suggestion of establishing a dataset that emulates the social housing waitlist to inform providers of where participants are located, where they would like to live and the dwelling characteristics that would meet their needs—both their expressed housing need and their approved housing need to clearly differentiate between usable and non-usable SDA funding. Such reform would improve provider confidence and reduce vacancies.

5.2.5 Ensure accurate and timely payments to providers

The process of paying SDA providers must be improved to ensure providers are paid the correct amount and in a timely manner. This would free up cashflows currently stalled in overdue payments, reduce the financial risks for SDA providers, and improve confidence within the program itself. Extended wait times to secure overdue SDA payments have implications for managing debt finance, SDA portfolio growth, new entrants and retaining current providers. It is well within the scope of the NDIA to ensure SDA payments to providers are made on time.

5.3 Summary

Drawing on our key qualitative findings, this chapter has identified a suite of policy and practice opportunities. As shown in Table 10, many of the identified policy and practice opportunities will benefit more than one stakeholder within the SDA ecosystem and therefore have the potential for wide-ranging benefits.

6. Policy development options

This research responds to a stated need for policy makers to better understand the interactions between social housing providers, the NDIS and the SDA program. The SDA program is the funding stream within the NDIS through which housing is delivered to eligible NDIS participants. The SDA program has created a demand-driven market and also represents a significant shift in the supply of disability-supported accommodation delivered under previous state, territory or federal programs. Understanding the interactions between social housing providers has highlighted opportunities for improvement. Central to the SDA program are the NDIS participants, for whom the policy advocates choice and control about where and with whom they live, as well as the type of dwelling in which they reside (NDIS 2020). An additional component of this research has been the experience of accessing SDA through the program. Linked to both of these research areas is the access that participants with SDA funding have to AT.

6.1 Key questions answered by this research

6.1.1 What is the interaction between the social housing sector and the SDA program?

The complex interactions between the social housing sector and the SDA program point to a changing, perhaps maturing, sector compared to research undertaken in the infancy of the program.

More clarity from the NDIA is required regarding the role of state and territory governments in the delivery of SDA. Currently, approaches to SDA vary nationally and are often contingent on variations in the historical delivery of disability-supported accommodation. The 'Basic' design category recognises the dwellings that have transitioned from historical delivery programs into SDA. These present opportunities for CHPs to expand their profile of SDA stock through transfers from the state or territories—but also create risk, as the dwellings often do not meet the standards required under the SDA program.

Initially a core developer of SDA, CHPs responded to the uncertainty in the sector by pausing some delivery of SDA. However, this finding has been coupled with an expansion or greater recognition of the unique and important role that CHPs play in the success of the SDA program as compliance and tenancy managers and program educators. Their extensive knowledge of the program—as well as the skill to produce good housing outcomes for tenants with high and complex needs—was noted by SDA advocates, peak bodies and support coordinators. CHPs argued that this role is not recognised and that they are shouldering the financial risk associated with SDA delivery until late in the development stage—with a potentially negative impact on smaller providers.

6.1.2 What is the experience of accessing SDA?

Although the SDA program is largely viewed as a positive advancement in disability accommodation, this research has illustrated how the complexity of the SDA process and policy represents a significant barrier for NDIS participants. The protracted and repetitive nature of the application process is not simply an inconvenience but has real health and wellbeing repercussions for people with disability. Moreover, difficult experiences with professionals during the application process often leads to people with disability feeling negatively about the SDA program. Such experiences have resulted in some participants giving up on their SDA journey.

The lack of consistency and transparency regarding SDA funding decisions constitutes a key issue for NDIS participants. Inappropriate SDA determinations are routinely made by the NDIA in contradiction of a participant's Home and Living goals as well as the clinical evidence provided within their application. Consequently, participants often endure a lengthy, costly and complex appeals process which only further complicates the process of accessing suitable accommodation. Difficulties during the SDA application process, coupled with the difficulty of securing an appropriate SDA placement, were found to compromise choice and control within the SDA process and undermine the rights of people with disability. Such outcomes have consequently created broader implications for the effectiveness of the SDA program and the NDIS more broadly.

6.1.3 What are the barriers and opportunities to greater inclusion of AT in SDA?

AT is not well integrated into the SDA program, despite well-recognised benefits for people with disability. Participants have access to AT funding through a separate NDIS-funding stream. This report has highlighted two key limitations regarding the scope of AT funding under the NDIS.

First, the lack of comprehensive AT inclusion across all design categories poses challenges for both SDA providers and recipients. Although some CHPs voluntarily integrate AT infrastructure into 'New Build' stock, this practice is not mandated in SDA policy. Retrofitting AT infrastructure post-build incurs substantial cost and complicates the issue further.

Second, a misalignment between the NDIA's vision of AT (NDIA 2015) and the practical categorisation and funding of AT (NDIS 2022a; 2022b) largely excludes NDIS participants from accessing AT designed for universal use, which the NDIA considers 'mainstream'.

Taken together, this research found that the process of obtaining funding for a range of AT is complicated, requires specialist knowledge, and often involves repeated applications. Knowledge variations among OTs, support coordinators and carers regarding new AT opportunities, emphasise the need for more AT-related education to provide contemporary advice to SDA stakeholders and NDIS participants more broadly about what supports are available. As AT is progressing quickly, the SDA program must keep pace, providing participants access to the best AT available to support them to achieve their Home and Living goals. Widening awareness of the cost-cutting implications of AT, streamlining the application process, and critically assessing the NDIA's distinction between AT designed for universal use and exclusively for people with disabilities are all crucial for enhancing the SDA program's effectiveness.

6.1.4 What policies and practice opportunities were identified?

A range of policy and practice opportunities derived from the panels, interviews and Diverse Voices roundtable discussions has been devised (Table 10). These opportunities range from those that are prescriptive in nature to those that may require further research and development before they can be implemented. Ultimately, there is a need to facilitate greater choice and control for participants to successfully meet their Home and Living goals. For participants, navigating the SDA process in its current configuration is fraught in nature, specifically as it directly relates to people's homes and livelihoods.

Numerous policy and practice opportunities have been presented, involving strengthening the right to sole-occupancy housing outcomes, and promoting greater separation between housing and support services. The opportunity for establishing more flexible housing options for high-cost, high-need NDIS participants ineligible for SDA has been outlined. The need to improve the transparency of SDA funding determinations, and developing more accessible information and education pathways to support NDIS participants navigating the SDA program and access appropriate AT has been established.

Many of the participant-facing policy and practice opportunities (if implemented) will directly benefit the delivery of SDA, and also improve the efficacy of the SDA program more broadly. SDA provider-specific policy opportunities presented include:

- ensuring pricing arrangements reflect the true cost of delivering SDA
- creating a funding mechanism to improve the quality of 'Basic' stock
- recognising the specialised role of CHPs as expert knowledge holders in the SDA process
- expanding AT possibilities to all SDA design categories in line with industry best practice were identified.

In addition, the opportunity exists to establish robust communication channels between the NDIA and all stakeholders, improve the quality and granularity of SDA demand data, and ensure SDA payments are accurate and paid on time.

6.2 Final remarks

Participants in this research overwhelmingly conveyed strong support for the SDA program and the tenants through which it aims to deliver housing to people with disability. The interactions between the social housing sector and the SDA program are complex. The role of state and territory governments in the program is ambiguous, while CHPs not only deliver SDA, but also offer an education and compliance function for private investors and specialised tenancy management, as well as a support role for NDIS participants.

The process of accessing SDA is equally complicated, requiring specialist knowledge on the part of the NDIS participant applying for SDA funding as well as on the allied health team undertaking the assessment and assisting with the application for SDA.

The specialist skills and knowledge of the SDA program by CHPs and support workers are not always recognised or universally accessible, despite their importance in shaping access to SDA. Practice elements identified in this research offer low-cost solutions to easily resolvable barriers to the program's functionality that will have a significant impact for all SDA stakeholders.

More clear, direct market stewardship from the NDIA is required—particularly for state and territory governments. Greater transparency in decision-making, more granular data and more educational resources by the NDIS will strengthen what is regarded as an important and necessary funding stream. Home and living decisions need to be able to better integrate assistive technology with all SDA design categories.

This project identified several lines of inquiry that would benefit from further research, including:

- housing options for NDIS participants ineligible for SDA, but with high and complex needs
- housing outcomes for NDIS participants living in 'Basic' design categories, which are due to exit the program in 2027
- the extent of choice and control exercised by NDIS participants residing in SIL-provided SDA; and,
- the stewardship role of the NDIA regarding the SDA market.

A greater understanding of these themes will strengthen the delivery of specialist housing solutions that meet the choices of those tenants who call SDA 'home'.

References

ABS—*see* Australian Bureau of Statistics

ACCC—*see* Australian Competition and Consumer Commission

ACT Government (2018) *ACT Housing Strategy, Homes and Housing*, viewed 13 June 2022, https://www.act.gov.au/homes-housing/act-housing-strategy.

AIHW—*see* Australian Institute of Health and Welfare

Aimers, N., Rathbone, A., Winkler, D., Wellecke, C. and Mulherin, P. (2022) *CHPs and disability housing: an exploration of SDA*, Housing Hub and Summer Foundation, Melbourne, Australia, https://apo.org.au/node/317170.

Aimers, N., Wellecke, C., Winkler, D., Rathbone, A. and Mulherin, P. (2021) *Specialist disability accommodation supply in Australia*, Housing Hub and Summer Foundation, Melbourne, Australia, https://www.summerfoundation.org.au/resources/specialist-disability-accommodation-supply-in-australia-november-2021/.

Anglicare (2023) *Rental affordability snapshot: national report, 2023*, 14th ed., viewed 14 July 2023, https://www.anglicare.asn.au/publications/2023-rental-affordability-snapshot/.

Australian Building Codes Board (2022) New livable housing design requirements, National Construction Code, accessed 20 April 2023, https://ncc.abcb.gov.au/news/2022/new-livable-housing-design-requirements.

Australian Bureau of Statistics (2016) *Australian Statistical Geography Standard (ASHS) Volume 1: Main structure of Greater Capital City Statistical Areas*, July 2016. https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/1270.0.55.001~July%202016~Main%20Features~Statistical%20Area%20Level%203%20(SA3)~10015#:~:text=SA3s%20create%20a%20standard%20framework,Australia%20without%20gaps%20or%20overlaps.

Australian Competition and Consumer Commission (2022) *Exclusive dealings notification guidelines, December 2022*, Commonwealth Government, viewed 2 March 2023, https://www.accc.gov.au/system/files/Exclusive%20dealing%20guidelines.pdf.

Australian Institute of Health and Welfare (2000) *Disability Support Services Provided under the Commonwealth/State Disability Agreement: National data 1999*, Australian Institute for Health and Welfare, Canberra.

Australian Institute of Health and Welfare (2022) *People with a disability in Australia 2022*, Australian Government, Canberra, viewed 2 November 2022, https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia/contents/about-this-report.

Beer, A., Flanagan, K., Verdouw, J., Lowies, B., Hemphill, L. and Zappia, G. (2019) *Understanding specialist disability accommodation funding*, AHURI Final Report 310, Australian Housing and Urban Research Institute Limited, Melbourne, http://www.ahuri.edu.au/research/final-reports/310, doi:10.18408/ahuri-3219701.

Beer, A., Faulkner, D., Paris, C. and Clower, T. (2011) *Housing Transitions through the Life Course: Aspirations, Needs and Policy*, Bristol University Press, doi:10.46692/9781847429360.

Bostock, L., Gleeson, B., McPherson, A. and Pang, L. (2001) *Deinstitutionalisation and housing futures*, AHURI Final Report No. 2, Australian Housing and Urban Research Institute Limited, Melbourne, https://www.ahuri.edu.au/research/final-reports/2.

Buckland, A., Crowe, A., Duncan, A., Rowley, S. and Breity, R. (2023) *Housing affordability in Western Australia: building for the future*, Bankwest Curtin Economics Centre, Series, No. 17, viewed 19 May 2023, https://bcec.edu.au/publications/housing-affordability-in-western-australia-2023-building-for-the-future/.

Callaway, L., Tregloan, K., Moore, L. and Bould, E. (2020) 'Audit of advertised housing and support vacancies for people with disabilities in Australia', *Australian Journal of Social Issues*, vol. 56, no. 1: 94–113, https://doi.org/10.1002/ajs4.114.

Callaway, L., Tregloan, K., Williams, G. and Clark, R. (2016) 'Evaluating access and mobility within a new model of supported housing for people with neurotrauma: a pilot study', *Brain Impairment*, vol. 17, no. 1: 64–76, doi:10.1017/BrImp.2016.7.

Campanella, N. and Young, E. (2023) 'The biggest takeaway from the disability royal commission after four years of hearings', *ABC News*, 13 May, accessed 16 May 2023, https://www.abc.net.au/news/2023-05-13/disability-royal-commission-biggest-stories/102326830.

Carey, G., Malbon, E., Olney, S. and Reeders, D. (2018) 'The personalisation agenda: the case of the Australian National Disability Insurance Scheme', *International Review of Sociology*, vol. 28, no. 1: 20–34, doi:10.1080/03906701.2018.1425084.

Carey, G., Weier, M., Malbon, E., Duff, G. and Dickinson, H. (2020) *How is the disability sector faring? A report from National Disability Services Annual Market Survey*, Centre for Social Impact, Sydney, https://www.csi.edu.au/research/how-is-the-disability-sector-faring/.

COAG—*see* Council of Australian Governments

Commonwealth of Australia (2007) *Funding and operation of the Commonwealth State/Territory Disability Agreement, Standing Committee on Community Affairs*, Canberra, viewed 4 April 2022, https://www.aph.gov.au/parliamentary_business/committees/senate/community_affairs/completed_inquiries/2004-07/cstda/report/index.

Commonwealth of Australia (2021) *Senate Community Affairs Legislation Committee: answers to questions on notice*, Social Services Portfolio, NDIA SQ21-000118, viewed 4 April 2022, https://www.aph.gov.au/api/qon/downloadattachment?attachmentId=be23f5a1-fbba-41f9-a389-e3cb9737563a.

Coorey, P. and Read, M. (2022) 'NDIS under review as it blows out to $50b', *Australian Financial Review*, 18 October, accessed 11 January 2023, https://www.afr.com/politics/federal/ndis-review-ordered-amid-8-8b-blowout-20221018-p5bqlj.

Corallo, F., Bonanno, L., Lo Buono, V., De Salvo, S., Rifici, C., Pollicino, P., Allone, C., Palmeri, R., Todaro, A., Alagna, A., Bramanti, A., Bramanti, P. and Marino, S. (2017) 'Augmentative and alternative communication effects on quality of life in patients with locked-in syndrome and their caregivers', *Journal of Stroke and Cerebrovascular Diseases*', vol. 26, no. 9: 1929–1933, https://doi.org/10.1016/j.jstrokecerebrovasdis.2017.06.026.

Council of Australian Governments (2021) *National Disability Agreement 2021–2025*, Australian Government, viewed 4 April 2022, https://federalfinancialrelations.gov.au/sites/federalfinancialrelations.gov.au/files/2021-05/national-disability-agreement.pdf.

Dawson, S. and Tinley, T. (2020) 'State Disability Accommodation boost on International Day of People with Disability', *Government of Western Australia*, 3 December, accessed 13 June 2022, https://www.wa.gov.au/government/media-statements/McGowan-Labor-Government/State-Disability-Accommodation-boost-on-International-Day-of-People-with-Disability-20201203.

Department of Communities (2020a) *State Disability Strategy 2020–2030*, Government of Western Australia, viewed 13 June 2022, https://www.wa.gov.au/government/document-collections/state-disability-strategy-2020-2030.

Department of Communities (2020b) *WA Housing Strategy 2020–2030*, Government of Western Australia, viewed 13 June 2022, https://www.wa.gov.au/government/document-collections/wa-housing-strategy-2020-2030.

Department of Communities (2021) *Community Disability Housing Program*, Government of Western Australia, viewed 13 June 2022, https://www.housing.wa.gov.au/HousingDocuments/Housing_options_for_people_with_disability.pdf.

Department of Communities and Justice (2020) *Safeguarding Task Force report*, Government of South Australia, July 2020, accessed 1 February 2023, https://dhs.sa.gov.au/__data/assets/word_doc/0011/94439/Safeguarding-Task-Force-Report-September-2020.doc

Department of Communities and Justice (2022) *Social housing eligibility and allocations policy supplement*, New South Wales Government, 3 May, accessed 13 June 2022, https://www.facs.nsw.gov.au/housing/policies/social-housing-eligibility-allocations-policy-supplement.

Department of Communities, Housing and Digital Economy (2017) *The Queensland Housing Strategy 2017–2027*, Queensland Government, viewed 13 June 2022, https://www.chde.qld.gov.au/about/strategy/housing/about.

Department of Communities, Housing and Digital Economy (2021) *Housing and Homelessness Action Plan 2021–2025*, Queensland Government, viewed 13 June 2022, https://www.chde.qld.gov.au/about/strategy/housing/housing-and-homelessness-action-plan-2021-2025.

Department of Communities, Housing and Digital Economy (2022) *Disability Service Plan 2022–25*, Queensland Government, viewed 13 June 2022, https://www.chde.qld.gov.au/__data/assets/pdf_file/0019/33328/disability-service-plan-2022-25.pdf.

Department of Community Services (forthcoming) *ACT Disability Strategy 2022–2023*, ACT Government, viewed 13 June 2022, https://www.communityservices.act.gov.au/disability_act/act-disability-strategy.

Department of Education (2021) *Disability Inclusion Action Plan 2021–2025*, Government of New South Wales, viewed 13 June 2022, https://education.nsw.gov.au/about-us/strategies-and-reports/our-disability-inclusion-action-plan-2021-2025.

Department of Environment, Planning and Sustainable Development (2018) *ACT Housing Strategy, October 2018*, ACT Government, viewed 13 June 2022, https://www.act.gov.au/__data/assets/pdf_file/0004/1265638/ACT-Housing-Strategy-2018.pdf.

Department of Families, Fairness and Housing (2017) *Homes for Victorians: affordability, access and choice, Government of Victoria*, viewed 13 June 2022, https://www.vic.gov.au/sites/default/files/2019-08/Homes-for-Victorians.pdf.

Department of Families, Fairness and Housing (2022) Department of Families, Fairness and Housing Annual Report 2022–23, Government of Victoria, viewed 29 January 2023, https://www.dffh.vic.gov.au/dffh-annual-report-2022-23-word.

Department of Human Services (2019) *Inclusive SA: State Disability Inclusion Plan 2019–2023*, Government of South Australia, viewed 13 June 2022, https://dhs.sa.gov.au/services/disability/inclusive-sa3.

Department of Human Services (2020) 'State Government Safeguarding Task Force', media release, Government of South Australia, accessed 13 June 2022, https://dhs.sa.gov.au/latest-news/safeguarding-taskforce/safeguarding-task-force-report-july-2020/state-government.

Department of Local Government, Housing and Community Development (2020) *A Home for all Territorians: Northern Territory Housing Strategy 2020–2025*, Government of Northern Territory, viewed 13 June 2022, https://tfhc.nt.gov.au/__data/assets/pdf_file/0010/765433/nt-housing-strategy-2020-2025.pdf.

Department of Mines, Industry Regulation and Safety (2023) 'Implementation of NCC 2022 in Western Australia', Government of Western Australia, accessed 19 October 2023, https://newsletters.commerce.wa.gov.au/t/ViewEmail/r/1B44BB3E74FF9F722540EF23F30FEDED/659AC6FCB20BFA6DA7F290B8E8FDC6A0?alternativeLink=False.

Department of Planning, Industry and Environment (2021) *Housing 2041: NSW Housing Strategy*, Government of New South Wales, viewed 13 June 2022, https://www.planning.nsw.gov.au/sites/default/files/2023-03/housing-2041-nsw-housing-strategy.pdf.

Department of Premier and Cabinet (2018) *Accessible Island: Tasmania's Disability Framework for Action 2018–2021*, Tasmanian Government, viewed 13 June 2022, https://www.stategrowth.tas.gov.au/__data/assets/pdf_file/0018/171171/Accessible_Island_-_Disability_Framework_for_Action_2018-2021.pdf.

Department of Social Services (2012) *National Disability Strategy 2010–2020*, viewed 10 April 2022, https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/national-disability-strategy-2010-2020.

Department of Social Services (2020) *Specialist disability accommodation pricing and payments framework*, June, Commonwealth Government, Canberra, viewed 12 April 2022, https://www.dss.gov.au/sites/default/files/documents/06_2020/sda-pricing-and-payments-framework.pdf.

Department of Territory Families, Housing and Communities (2022) *The Northern Territory Disability Strategy 2022–2032*, Northern Territory Government, viewed 13 June 2022, https://tfhc.nt.gov.au/__data/assets/pdf_file/0020/1124183/disability-strategy.pdf.

DMIRS—*see* Department of Mines, Industry Regulation and Safety

DSS—*see* Department of Social Services

Dickinson, H. and Petrie, D. (2022) 'The budget sounded warnings of a NDIS "blow out"—but also set aside funds to curb costs and boost productivity', *The Conversation*, 28 October, accessed 13 February 2023, https://theconversation.com/the-budget-sounded-warnings-of-an-ndis-blow-out-but-also-set-aside-funds-to-curb-costs-and-boost-productivity-193315.

Douglas, J., Winkler, D., Oliver, S., Liddicoat, S. and D'Cruz, K. (2023) 'Moving into new housing designed for people with disability: preliminary evaluation of outcomes', *Disability and Rehabilitation*, vol. 45, no. 8: 1370–1378, doi:10.1080/09638288.2022.2060343.

Ellis, K. (2019) *Disability and Digital Television Cultures: Representation, Access and Reception*, Routledge, New York.

Ellis, K. and Kent, M. (2011) *Disability and New Media*, Routledge, New York and London.

Flanagan, K., Levin, I., Tually, S., Varadharajan, M., Verdouw, J., Faulkner, D., Meltzer, A. and Vreugdenhil, A. (2020) *Understanding the experience of social housing pathways*, AHURI Final Report No. 324, Australian Housing and Urban Research Institute, Melbourne, http://www.ahuri.edu.au/research/final-reports/324, doi:10.18408/ahuri-4118301.

Hwang, C.-S., Weng, H.-H., Wang, L.-F., Tsai, C.-H. and Chang, H.-T. (2014) 'An eye-tracking assistive device improves the quality of life for ALS patients and reduces the caregivers' burden', *Journal of Motor Behavior*, vol. 46, no. 4: 233–238. doi:10.1080/00222895.2014.891970.

Homes Tasmania (2023) *Tasmanian Housing Strategy: 2023–2043 Delivering More Homes for a Growing Tasmania And Ending Homelessness*, Tasmanian Government, viewed 29 January 2024, https://tashousingstrategy.homestasmania.com.au/.

Iovino, B. (2022) 'Stranded hospitalised NDIS participants to reside in former aged care facility', *Disability Support Guide*, accessed 11 January 2023, https://www.disabilitysupportguide.com.au/talking-disability/stranded-hospitalised-ndis-participants-to-reside-in-former-aged-care-facility.

Ismaeel, A. G. (2020) 'Home automation system support for persons with different types of disabilities using IoT', Pervasive Health: *Pervasive Computing Technologies for Healthcare*, vol. 2, no. 1: 18–27, doi:10.4108/eai.28-6-2020.2298216.

Jamwal, R., Callaway, L., Ackerl, J., Farnworth, L. and Winkler, D. (2017) 'Electronic assistive technology used by people with acquired brain injury in shared supported accommodation: implications for occupational therapy', *British Journal of Occupational Therapy*, vol. 80, no. 2: 89–98, doi:10.1177/0308022616678634.

Jamwal, R., Callaway, L., Farnworth, L. and Winkler, D. (2018) 'Electronic assistive technology use in Australian shared supported accommodation: rates and user characteristics', *Disability and Rehabilitation: Assistive Technology*, vol. 13, no. 7: 634–640, doi:10.1080/17483107.2017.1360948.

Jamwal, R., Jarman, H., Roseingrave, E., Douglas, J. and Winkler, D. (2022) 'Smart home and communication technology for people with disability: a scoping review', *Disability and Rehabilitation: Assistive Technology*, vol. 17, no. 6: 624–644, doi:10.1080/17483107.2020.1818138.

Jenkins, H. (2006) *Convergence Culture: Where Old and New Media Collide*, New York University Press, New York.

Livable Housing Australia (2017) *Livable Housing Design Guidelines*, fourth edition, accessed 1 April 2023, http://www.livablehousingaustralia.org.au/.

Lopes, N.V. (2020) 'Internet of Things, feasibility for disabled people', *Transactions on Emerging Telecommunications Technologies*, vol. 31, no. 12: 1–25, doi:10.1002/ett.3906.

Madhavan, D., Mulherin, P. and Winkler, D. (2021) *Specialist Disability Accommodation (SDA) investor think tank: findings and recommendations*, Summer Foundation, accessed 11 January 2023, https://apo.org.au/node/313679.

Magassa, L., Young, M. and Friedman, B. (2017) *Diverse voices: a how to guide for facilitating inclusiveness in tech policy*, Tech Policy Lab, University of Washington, https://techpolicylab.uw.edu/news/diverse-voices-guide/.

Young, M., Magassa, L. and Friedman, B. (2019) 'Toward inclusive tech policy design: a method for underrepresented voices to strengthen tech policy documents', *Ethics and Information Technology*, vol. 21, no. 1: 89–103, https://doi.org/10.1007/s10676-019-09497-z.

MS Australia (2018) 'Submission to the Joint Standing Committee on the NDIS inquiry into the provision of assistive technology', September 2018, accessed 26 October 2022, https://www.msaustralia.org.au/wp-content/uploads/2021/10/provision-of-assistive-technology-ms-australia.pdf.

Naick, M. (2017) 'Innovative approaches of using assistive technology to support carers to care for people with night-time incontinence issues', *World Federation of Occupational Therapists Bulletin*, vol. 73, no. 2: 128–130, https://doi.org/10.1080/14473828.2017.1302156.

National Disability Insurance Agency (2015) *Assistive technology strategy*, Australian Government, Canberra, viewed 4 April 2022, https://www.ndis.gov.au/about-us/strategies/assistive-technology-strategy.

National Disability Insurance Agency (2018) *Specialist disability accommodation: provider and investor brief, April 2018*, Australian Government, viewed 4 April 2022, https://www.ndis.gov.au/media/1137/download.

National Disability Insurance Agency (2021) *Specialist disability accommodation market information statement, August 2021*, Australian Government, viewed 4 April 2022, https://www.ndis.gov.au/media/3489/download.

National Disability Insurance Agency (2022a) 'Specialist Disability Accommodation', Australian Government, viewed 4 April 2022, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/home-and-living-supports/specialist-disability-accommodation.

National Disability Insurance Agency (2022b) *NDIS quarterly report to disability ministers for Q1 of Y10 Full Report*, 31 September 2022, Australian Government, viewed 24 January 2023, https://www.ndis.gov.au/about-us/publications/quarterly-reports/archived-quarterly-reports-2022-23.

National Disability Insurance Agency (2022c) *NDIS quarterly report to disability ministers for Q2 of Y10*, 31 December 2022, Australian Government, viewed 16 April 2023, https://www.ndis.gov.au/about-us/publications/quarterly-reports/archived-quarterly-reports-2022-23.

National Disability Insurance Agency (2022d) *NDIA annual report 2021–22*, 4 November 2022, Australian Government, viewed 1 April 2023, https://www.ndis.gov.au/about-us/publications/annual-report#annual-report-2021-22.

National Disability Insurance Agency (2023a) *Pricing arrangements and price limits 2022–23*, May 2023, Australian Government, https://www.ndis.gov.au/providers/pricing-arrangements.

National Disability Insurance Agency (2023b) *NDIS quarterly report to disability ministers for Q3 of Y10*, 31 March 2023, Australian Government, viewed 2 June 2023, https://www.ndis.gov.au/about-us/publications/quarterly-reports.

National Disability Insurance Scheme (2016a) *Specialist disability accommodation: position paper of draft pricing and payments*, Australian Government, viewed 12 April 2022, https://www.ndis.gov.au/media/1037/download?attachment.

National Disability Insurance Scheme (2019) *Reasonable and necessary supports*, Australian Government, viewed 11 December 2023, https://www.ndis.gov.au/understanding/supports-funded-ndis/reasonable-and-necessary-supports.

National Disability Insurance Scheme (2020) *Specialist disability accommodation rules 2020*, Australian Government, viewed 12 April 2022, https://www.legislation.gov.au/Details/F2020L00769.

National Disability Insurance Scheme (2021a) 'SDA meeting: Wednesday 23 September 2020', Australian Government, accessed 9 January 2023, https://www.ndis.gov.au/news/8236-september-2020-sda-reference-group.

National Disability Insurance Scheme (2021b) *Guide to the NDIS market dashboards*, Australian Government, accessed 9 May 2023, https://data.ndis.gov.au/reports-and-analyses/market-monitoring#the-ndis-market-as-at-31-december-2021.

National Disability Insurance Scheme (2022a) *Assistive technology (equipment, technology and devices): operational guidelines*, Australian Government, accessed 9 January 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology.

National Disability Insurance Scheme (2022b) 'How can you get assistive technology in your plan?', Australian Government, accessed 9 January 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology/how-can-you-get-assistive-technology-your-plan.

National Disability Insurance Scheme (2022c) 'Smart devices: tablets', Australian Government, accessed 9 January 2023, https://ourguidelines.ndis.gov.au/would-we-fund-it/assistive-technologies/smart-devices-tablets.

National Disability Insurance Scheme (2022d) 'SDA Reference Group', Australian Government, 26 October, accessed 20 April 2023, https://www.ndis.gov.au/about-us/reference-group-updates/sda-reference-group.

National Disability Insurance Scheme (2022e) 'SDA pricing review terms of reference', Australian Government, accessed 1 June 2023, https://www.ndis.gov.au/providers/housing-and-living-supports-and-services/specialist-disability-accommodation/sda-pricing-and-payments/sda-pricing-review#sda-pricing-review-terms-of-reference.

National Disability Insurance Scheme (2022f) 'Are you eligible for specialist disability accommodation', Australian Government, accessed 11 December 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/home-and-living-supports/specialist-disability-accommodation/are-you-eligible-specialist-disability-accommodation.

National Disability Insurance Scheme (2022g) 'Home and living', Australian Government, accessed 11 December 2023, https://www.ndis.gov.au/print/pdf/node/5717.

National Disability Insurance Scheme (2023a) 'Flexible low cost AT for support continuity', Australian Government, accessed 1 June 2023, https://www.ndis.gov.au/participants/assistive-technology-explained/flexible-low-cost-support-continuity.

National Disability Insurance Scheme (2023b) 'How to register', Australian Government, accessed 9 May 2023, https://www.ndis.gov.au/providers/becoming-ndis-provider/how-register.

National Disability Insurance Scheme (2023c) 'What do we mean by advice or an assessment?' Australian Government, accessed 9 May 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology/what-do-you-need-do-you-buy-your-assistive-technology/what-do-we-mean-advice-or-assessment.

National Disability Insurance Scheme (2023d) 'What if you need to rent assistive technology items?' Australian Government, accessed 10 May 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology/what-other-assistive-technology-costs-do-we-fund/what-if-you-need-rent-assistive-technology-items.

National Disability Insurance Scheme (2023e) 'What other assistive technology costs do we fund?', Australian Government, accessed 14 May 2023, https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology/what-other-assistive-technology-costs-do-we-fund.

National Housing Finance and Investment Corporation (2022) 'NHFIC teams with For Purpose Investment Partners and BlueCHP to fund NSW disability housing project', media release, Australian Government, 5 December, accessed 18 April 2023, https://www.nhfic.gov.au/media/nhfic-teams-purpose-investment-partners-and-bluechp-fund-nsw-disability-housing-project.

NDIA—*see* National Disability Insurance Agency

NDIS—*see* National Disability Insurance Scheme

NHFIC—*see* National Housing Finance and Investment Corporation

Padgett, D.K., Henwood, B.F. and Tsemberis, S.J. (2016) *Housing First: Ending Homelessness, Transforming Systems and Changing Lives*, Oxford University Press.

Parliament of Australia (2007) *Funding and operation of the Commonwealth State/Territory Disability Agreement*, Australian Government, accessed 19 May 2022, https://www.aph.gov.au/parliamentary_business/committees/senate/community_affairs/completed_inquiries/2004-07/cstda/report/index.

Pawson, H., Milligan, V. and Yates, J. (2020) *Housing Policy in Australia: A Case for System Reform*, Palgrave Macmillan, Basingstoke.

Paz, Z. (c. 2021) 'Smart home technology: a game-changer for disability support and care', *LD Resources Foundation Action*, accessed 2 June 2023, https://www.ldrfa.org/smart-home-technology-people-disabilities/.

Priest, P. and Bruno, C. (1990) 'From nursing home to group homes: a partial downscaling exercise', paper prepared for Intellectual Disability Services Council, South Australia.

PwC Australia (2019) *The benefit of designing for everyone*, Centre for Inclusive Design, May, viewed 15 April, 2022, http://centreforinclusivedesign.org/media/1186/inclusive-design-report-digital-160519.pdf

Queensland Government (2023) *Social housing waitlist data*, accessed 13 June 2022, https://www.data.qld.gov.au/dataset/queensland-housing-data-for-inclusion-in-the-2020-report-on-government-services-rogs/resource/c1f203ea-96a6-44c6-8e04-862630c34dd3.

Ramsten, C., Martin, L., Dag, M. and Hammar, L. M. (2019) 'A balance of social inclusion and risks: staff perceptions of information and communication technology in the daily life of young adults with mild to moderate intellectual disability in a social care context', *Journal of Policy and Practice in Intellectual Disabilities*, vol. 16, no. 3: 171–179, https://doi.org/10.1111/jppi.12278.

SA Housing Authority—*see* South Australia Housing Authority

Sarkodee, K. and Martel, A. (2018) 'Creating a market for disability specific housing on Indigenous Land: a case study from Yarrabah, Australia', *Buildings*, vol. 8, no. 160: 1–18, doi:10.3390/buildings8110160.

Silvera, D., Packer, K., Higgins, L., Walker, J., Niven, P., Li, J., Byrnes, J., Khanna, S., Liu, D. and Freyne, J. (2022) *Framework for artificial intelligence-enabled assistive technology as supports under the National Disability Insurance Scheme: final report*, Commonwealth Scientific and Industrial Research Organisation, Canberra, https://ndis.gov.au/about-us/research-and-evaluation/market-stewardship-and-employment/framework-artificial-intelligence-enabled-assistive-technologies.

Skipsey, M., Winkler, D., Cohen, M., Mulherin, P., Rathbone, A. and Efstathiou, M. (2022) *Housing delayed and denied: NDIA decision-making on Specialist Disability Accommodation*, Public Interest Advocacy Centre and Housing Hub, https://apo.org.au/node/317588.

Social Ventures Australia and Summer Foundation (2020) *Specialist disability accommodation supply in Australia*, March 2020, https://www.socialventures.com.au/assets/Specialist-Disability-Accommodation-Supply-in-Australia-March-2020-webres.pdf.

South Australia Housing Authority (2020) *Our Housing Future 2020–2030*, Government of South Australia, viewed 13 January 2023, https://www.housing.sa.gov.au/our-housing-future.

Summer Foundation (2018) *Summary of the NDIA's Specialist Disability Accommodation (SDA) provider brief and investor brief, May 2018*, viewed 13 January 2023, https://assets.summerfoundation.org.au/pdf_offload/2021/05/Summary-SDA-Provider-and-Investor-Brief-1.pdf.

Summer Foundation (2020) *About Specialist Disability Accommodation*, Summer Foundation, Melbourne, Australia, viewed 4 April 2022, https://www.summerfoundation.org.au/wp-content/uploads/2020/07/About-Specialist-Disability-Accommodation.pdf.

Summer Foundation (2022) *Home and living decision-making: policy position statement by the Summer Foundation, October 2022*, viewed 4 April 2022, https://www.summerfoundation.org.au/resources/home-and-living-decision-making-policy-position-statement-by-the-summer-foundation/.

United Nations (2006) *Convention on the Rights of Persons with Disabilities (CRPD)*, https://social.desa.un.org/issues/disability/crpd/convention-on-the-rights-of-persons-with-disabilities-crpd.

Van Walsem, M.R., Howe, E., Frich, J.C. and Andelic, N. (2016) 'Assistive technology for cognition and health-related quality of life in Huntington's disease', *Journal of Huntington's Disease*, vol. 5, no. 1: 261–270, doi:10.3233/JHD-160210.

Waller, S., Bradley, M., Hosking, I. and Clarkson, P.J. (2015) 'Making the case for inclusive design', *Applied Ergonomics*, vol. 46, part B: 297–303, doi:10.1016/j.apergo.2013.03.012.

Wellecke, C., Robertson, J., Mulherin, P., Winkler, D. and Rathbone, A. (2022) *Specialist Disability Accommodation provider experience survey: June 2022*, Housing Hub and Summer Foundation, https://apo.org.au/node/318315.

WHO—*see* World Health Organization

Wiesel, I. (2020) *Living with disability in inaccessible housing: social, health and economic impacts, final report*, The University of Melbourne, viewed 2 June 2022, https://disability.unimelb.edu.au/__data/assets/pdf_file/0010/3969109/Accessible-Housing-Research-Report-22-October-2020.pdf.

Winkler, D., Aimers, N., Rathbone, A., Douglas, J., Wellecke, C., Goodwin, I. and Mulherin, P. (2021) *Specialist Disability Accommodation provider experience survey: September 2021*, Housing Hub and Summer Foundation, Melbourne, Australia, https://apo.org.au/node/316937.

Winkler, D., McLeod, J., Mulherin, P., Rathbone, A. and Ryan, M. (2020) *Specialist Disability Accommodation (SDA) explainer for investors*, Summer Foundation and JBWere, https://www.summerfoundation.org.au/wp-content/uploads/2021/02/2020_Winkler_SDA-Explainer-for-investors.pdf.

Wong, D., Sinclair, K., Seabrook, E., McKay, A. and Ponsford, J. (2017) 'Smartphones as assistive technology following traumatic brain injury: a preliminary study of what helps and what hinders', *Disability and Rehabilitation*, vol. 39, no. 23: 2387–2394, doi:10.1080/09638288.2016.1226434.

World Health Organization (2013) *International Classification of Functioning, Disability and Health*, https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health.

World Health Organization (2022) 'Assistive technology', *Health topics*, accessed 1 June 2023, https://www.who.int/europe/health-topics/assistive-technology#tab=tab_1.

World Health Organization (2023) *'Assistive technology: fact sheet'*, 15 May, accessed 1 June 2023, https://www.who.int/en/news-room/fact-sheets/detail/assistive-technology.

Yusif, S. (2021) 'Assistive technology in or out of context? An evolving challenge to increasing utility and adoption', in Senjam, S.S. (ed), *An Introduction to Assistive Technology*, Nova Science Publishers, New York: 193–217.

Appendix 1: Additional tables and figures

Table A1: Annual SDA allocations, by provider type

Provider type	Dec 2018	Sep 2019	Nov 2020	Aug 2021
CHPs	891	502	227	299
Not-for-profit housing provider	90	404	305	380
Private housing provider	217	555	1064	1368
Not-for-profit disability service provider	234	247	167	229
Private disability service provider	33	54	21	12
Government	0	0	15	78
Other	0	0	8	0
Unknown	53	4	10	0
Total	**1518**	**1766**	**1817**	**2366**

Source: Adapted from Aimers, Wellecke et al. (2021).

Table A2: Reviewed state and territory government housing and disability strategy and policy

State/territory	Housing and disability strategies and policies
Queensland (Department of Communities, Housing and Digital Economy)	Queensland Housing Strategy 2017–2027 Queensland Housing and Homelessness Action Plan 2021–2025 Disability Service Plan 2022–2025
Western Australia (Department of Communities)	WA Housing Strategy 2020–2030 A WA for Everyone: State Disability Strategy 2020–2030 Community Disability Housing Program
South Australia (SA Housing Authority; Department of Human Services)	Our Housing Future 2020–2030 Inclusive SA: State Disability Inclusion Plan 2019–2023
Victoria (Department of Families, Fairness and Housing)	Homes for Victorians: Affordability, Access and Choice 2017 Inclusive Victoria: State Disability Plan 2022–2026
New South Wales (Department of Planning, Industry and Environment; Department of Education)	Housing 2041: NSW Housing Strategy Disability Inclusion Action Plan 2021–2025
Tasmania (Homes Tasmania; Department of Premier and Cabinet)	Tasmanian Housing Strategy 2023–2043 delivering More Homes for a Growing Tasmania and Ending Homelessness Accessible Island: Tasmania's Disability Framework for Action 2018–2021
ACT (Department of Environment, Planning and Sustainable Development; Department of Community Services)	ACT Housing Strategy, Homes and Housing 2018 ACT Disability Strategy 2022–2032 (under development)
Northern Territory (Department of Local Government, Housing and Community Development; Department of Territory Families, Housing and Communities)	A home for all Territorians: Northern Territory Housing Strategy 2020–2025 The Northern Territory Disability Strategy 2022–2032

Source: Authors.

**Figure A1: Diverse Voices recruitment flyer**

Source: Authors.

Table A3: Selective features of SDA design categories

	Improved Liveability	Fully Accessible	Robust	High Physical Support
Meets Housing Australia's 'Silver' Standard	✓		✓	
Meets Housing Australia's 'Platinum' Standard		✓		✓
No steps at external doors and external outdoor private areas		✓		✓
Bathroom vanity/handbasin accessible in seated or standing position		✓		✓
Power supply to doors and windows (blinds), for retrofit of automation as necessary		✓		✓
Consideration given to making the kitchen sink, cooktop, meal preparation bench area and key appliances accessible in seated or standing position		✓		✓
Structural provision for ceiling hoists				✓
Assistive-technology ready				✓
Heating/cooling and household communication technology (e.g., video or intercom systems) appropriate for the needs of residents				✓
Emergency power to cater for a minimum of 2-hour outage where the welfare of residents is at risk				✓
Minimum 950mm clear opening width doors to all habitable rooms				✓
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 soundproofing to minimise the amount of noise passing from one area to another			✓	
Laminated glass			✓	
Areas of egress and retreat for staff and other residents to avoid harm if required			✓	

Source: Adapted from Summer Foundation (2020: 22).

Figure A2: Rate of increase by SDA category, between 2019 and 2022
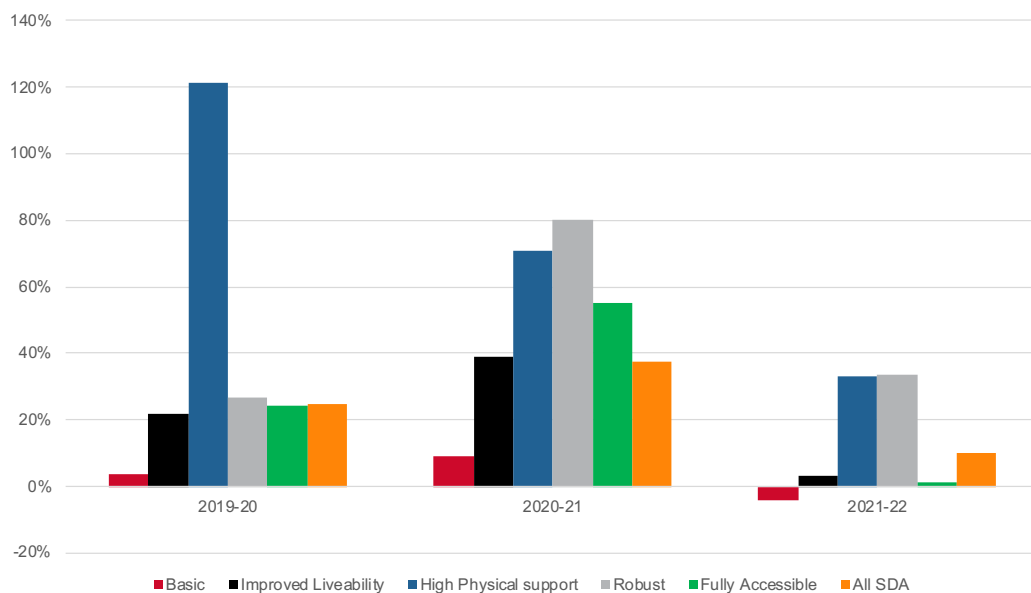
Source: NDIA (2022c).

Table A4: SDA need by design category by state and territory, December 2022

Design category State/territory	Not defined*	Improved Liveability	Fully Accessible	Robust	High Physical Support	Total no. participants seeking SDA
New South Wales	201	617	305	80	419	1,622
Victoria	225	543	195	96	316	1,375
Queensland	103	230	218	76	315	942
South Australia	30	48	51	9	73	211
Western Australia	56	126	98	26	107	413
Tasmania	16	21	16	1	19	73
Northern Territory	2	9	8	1	18	38
ACT	3	13	15	3	12	46
Total	**636**	**1,607**	**906**	**292**	**1,279**	**4,720**

*Note: * indicates participants eligible for SDA, but the type of SDA is not recorded.*
Source: NDIA (2022b).

Table A5: Enrolled SDA dwellings by state and territory, 31 December 2022

State/territory	Existing	Legacy	'New build'	'New build' (refurbished)	Total
NSW	1329	56	1057	18	2460
VIC	1155	122	642	51	1970
QLD	367	27	933	15	1342
WA	10	1	146	0	157
SA	941	6	319	3	1269
TAS	24	3	19	1	47
NT	17	2	10	2	31
ACT	114	0	61	0	175
Australia	**3957**	**217**	**3187**	**90**	**7451**

Source: NDIA (2022c).