



Evaluation report: Project to establish a Northern Region Cooperative

Carers SA Northern Region Care Cooperative Project

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I want to particularly thank the consumer Foundation Group members. The personal, nuanced, and sincere feedback from them as people with disability and carers of people with disability have given the evaluation depth and heart.

Acknowledgement of Lived Experience

We acknowledge the lived experience of people with disability and carers of people with disability. We acknowledge their generosity in sharing their personal stories, perspectives gained from lived experience and their hope for a better future. Their contribution adds depth and breadth to the NRC project and this report.

Acknowledgement of Country

We acknowledge the Kurna people on whose land this project was undertaken and pay respect to their spiritual relationship with their country. We acknowledge the Kurna people as the custodians of the Adelaide region and that their cultural and heritage beliefs are still as important to the living Kurna people today.

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Executive summary

The Northern Region Cooperative (NRC) project delivered an unexpected outcome in what was a dynamic and inclusive process. The key aim to investigate the viability of a sustainable service-delivery model jointly owned and managed by consumers and disability service providers was not achieved.

The NRC project was delivered during the challenges presented by the Covid-19 pandemic. The pandemic impacted most on the project's ability to fully realise a developmental and co-designed operational framework.

The co-design nature of the project resulted in a dynamic project, constantly responding to participant input and views. Therefore, the aims of the project were not static and were refined and provided clarity within the developmental, co-design framework. Embedding evaluation throughout the project enhanced this dynamism through continuous improvement.

The project evaluation reported against four outcome streams:

1. Connections and relationships
2. Individual capacity building
3. Information, linkages and referrals
4. Provider and sector capacity

The project succeeded to a high level in two of its aims: providing choice and control to people with disability and providing opportunities for economic and social contribution.

Areas of the project that were less successful and most negatively impacted by the Covid-19 pandemic restrictions were community consultations and sector stakeholder engagement.

The strength of the NRC project was the co-design approach carried throughout the project and engaged consumers from the beginning. The consumer voice was critical in directing the project. Consumer experiences, needs, requirements and desires shaped the project and the business model design.

Consumers were clear that a business model that delivered choice and control required:

- relevant, accessible and nuanced knowledge
- self-management
- improved and coordinated support coordination
- independent advocacy to underpin self-advocacy
- ethical practice by service providers.

Participation in the project helped consumers build confidence. This allowed consumers to contribute to the development of disability services in the northern region rather than act as passive recipients of services. Interacting with other people with disability was an important factor in confidence growth.

As the project progressed consumer and provider interests diverged. Providers were less engaged with co-design and found the lack of clarity and specificity about the proposed model did not allow them to understand their role and the benefits fully and comfortably.

Consumers did successfully move forward to establish the Strong & Capable Cooperative Ltd while providers have been engaged in Forums to identify a collaborative model more suited to their needs.

The approval of Strong & Capable as a registered Cooperative was not finalised until December 3, 2021. The project operations ended on December 17, 2021. This allowed no time to operationalise the Cooperative and therefore to evaluate the viability of the business model. Rather the assumptions of the business model were tested via a period of Trail Trading. Previous plans to test the marketability of the model through public consultations failed to attract sufficient numbers. The trial trading was offered from September to November 2021.

Evaluation of the trial trading provides valuable insight into effective promotion and marketing strategies and the suitability of the service model. It indicated that Facebook marketing was moderately successful, mass promotion via letter drops and radio announcements were least effective and relationship-based marketing through small and medium size providers offered an opportunity to connect with people with disability and carers and potential Cooperative members.

Interviews with users of the Trial Trading all reported high satisfaction levels, tangible outcomes and a willingness to join the Cooperative.

In conclusion, the establishment of the Strong & Capable Cooperative delivers a new service to people with disability and carers in northern Adelaide. Initial analysis suggests an organisation run by and for people with disability and carers offers innovation and new capabilities that the disability services sector could learn from. It can diversify services and, in the longer term, may impact on how services are delivered by more traditional providers.

To maximise this success, it is recommended that:

1. Strong & Capable Board incorporate the co-design elements into its operations and continue to protect and prioritise the voices of people with lived experience
2. monitoring and evaluation be undertaken as the Cooperative operationalises and that methods be used that reflect co-design, participatory and developmental principles
3. translation of the model through a 'How to...' manual be developed informed by the evaluation findings
4. trail trading be extended and prioritises and resources marketing and communications strategies that build on provider relationships, is co-designed with intermediaries, and includes recruitment to the Cooperative as an active objective
5. funding be sourced to continue the development of a provider entity in the north of Adelaide complimentary to the Strong & Capable Cooperative.

Introduction

Overview

The Northern Region Cooperative (NRC) project, led by Carers SA, aimed to develop a model for the collaborative delivery of disability services in Adelaide's northern suburbs. The project was co-designed, with consumers, families and carers, service providers and other interested stakeholders working as equal partners to address disability service problems in Adelaide's north and a devise of model of co-delivery of services – a Northern Region Cooperative. It was intended to be open to all interested parties.

The model was to be innovative and would address complex supply problems such as provider capacity, sustainability and workforce availability. It aimed to respond to the 'thin market' in the region, with consumers unable to access services and services unable to reach potential consumers.

Figure 1 Thin markets and the NDIS



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This Northern Region Cooperative project was funded from the Australian Government's Information, Linkages & Capacity Building (ILC) program, channelled through the SA Department of Human Services (DHS). The ILC program, initially managed by the National Disability Insurance Agency, was transferred to the Australian Department of Social Services in October 2020.

Project rationale

The project was undertaken in the NDIS Northern Adelaide area. This covers the local government areas of Playford, Salisbury, Tea Tree Gully and Port Adelaide-Enfield. The focus of the project was predominantly on the Playford and Salisbury council districts.

The northern region of Adelaide represents around one third of South Australia's NDIS participants and is growing at a slightly higher rate than other regions. Yet NDIS data indicates that in 2018-19 opportunities through NDIS were underutilised in the region, characterised by:²

- the lowest utilisation of NDIS plans in South Australia
- a lower dollar value of plans than elsewhere in metropolitan Adelaide

¹ Ernst & Young 2019. *NDIS Thin Markets Project: Discussion Paper for Inform Consultation*. April. Commissioned for Department of Social Services. Ernst & Young Australia: Canberra, ACT:2.

² National Disability Insurance Scheme 2022 (NDIS 2022). *Quarterly Reports*. Government of Australia. <https://www.ndis.gov.au/about-us/publications/quarterly-reports>.

- low uptake of NDIS plans by Aboriginal and Torres Strait Islander people and by those from culturally and linguistically diverse (CALD) backgrounds
- market issues, such as a reduced choice of service providers, concentration of NDIS spending with large providers, long waiting lists for services, and workforce challenges.

The project sought to address these issues through developing a cooperative model of service delivery designed, developed, owned and managed jointly by consumers and service providers. In such a model, the experience of people with disability and carers would inform improvement and growth of services in the northern suburbs.

According to BCCM, a cooperative is “an autonomous association of persons united voluntarily to meet their common economic, social and cultural needs and aspirations through a jointly owned and democratically controlled enterprise.” Cooperatives allow people to work together to achieve aims they are unlikely to achieve on their own.³

Project aims

The project aligned with three of the five ILC streams within in the ILC Outcomes Framework.⁴ The evaluation methodology identified an additional ‘stream’ or high-level outcome:

Table 1 Northern Region Cooperative outcome streams

1	Connections and relationships (ILC)
	People with disability actively contribute to leading, shaping and influencing their community
2	Individual capacity building (ILC)
	People with disability have the skills and confidence to participate and contribute to the community and protect their rights
3	Information, linkages and referrals (ILC)
	People with disability are connected and have the information they need to make decisions and choices
4	Provider and sector capacity (NRC)
	The disability sector innovates so that it is sustainable, responsive and capable

The plan established overarching aims at the outset. During implementation, these aims evolved in response to the views of stakeholders and to ensure continuous improvement on the basis of evaluation.

For the purposes of this evaluation, the following aims have been identified:

Table 2 Northern Region Cooperative project aims

1	Cooperative service model	Investigate the viability of a sustainable service-delivery model jointly owned and managed by consumers and disability service providers
2	Choice and control	Provide people with disability and carers with more choice and control, both through the project methodology and within a proposed service model

³ BCCM 2013. *What are Co-ops and Mutuals?* BCCM.

<https://bccm.coop/about-co-ops-mutuals/what-are-co-ops-and-mutuals/>.

⁴ National Disability Insurance Scheme (2016) (NDIS 2016). *Information, Linkages and Capacity Building (ILC) Outcomes Framework: Discussion Starter*. November. Government of Australia: Geelong, Vic..

3	Economic and social contribution	Provide opportunities for economic and social contribution for people with disability and carers
4	Awareness and referrals	Increase awareness of and referral to services
5	Provider capacity	Grow provider capacity, sustainability and workforce capacity
6	Translation	Act as a model for similar initiatives in other regions across South Australia

Principles

In keeping with the principles of cooperation and mutuality, the project adopted co-design principles:

- build relationships
- listen to all voices and ensure inclusion
- respect diversity
- empower through participation.

The co-design approach underpinned the overall ethos of the project – to help people with disability live ordinary lives, contributing to both the economic and social spheres and exercising choice and control in their lives.

Based around cooperation and co-design, the project was a dynamic one, responding to stakeholder views and needs. Flexibility, innovation and adaptation to new evidence and information were key and welcome traits of the project.

Oversight and partnerships

The NRC project was overseen and managed by Carers SA, with Dr Guy Turnbull, (previous Don Dunstan Foundation Thinker in Residence), providing expert advice on design and delivery. Independent evaluation was undertaken by Maria Eliadis of KDG Partnerships.

People with disability, carers and disability-service providers were integral to the project design and delivery.

The Foundation Group comprising consumer and provider members acted as advisers and drivers of the project. The project aimed for 50-50 representation of the two cohorts, which was roughly achieved over the term of the project. Consumers comprised a mixture of people with disability and carers, and NDIS recipients and non-NDIS recipients. All consumers were female. Members were selected through personal invitation on the basis of their activity within the sector. Providers ranged from large organisations to micro businesses, with around half located in northern Adelaide and half operating across Adelaide. Consumers in the community were engaged during the project.

External stakeholders and partners provided input through a range of engagement activities. Key stakeholders included the National Disability Insurance Agency, Feros Care (NDIS Local Area Coordination partner in northern Adelaide), local government (Playford, Salisbury and Tea Tree Gully councils), community groups, and peak bodies.

Implementation

The project was designed to run from January 2020 to July 2021. The advent of the Covid-19 pandemic extended the project to two years.

It was implemented in three main phases of activity over a two-year period from January 2020 to December 2021.

Table 3 Northern Region Cooperative project phases: January 2020 to December 2021

Phase 1 – Initiation and foundation	
Feb-Aug 2020	Determining participating parties, the Foundation Group, governance and legality
	Establishing mutuality and cooperation through workshops and engagement
Phase 2 – Business case and models	
Sep-Dec 2020	Defining the need, the problem and the possible solutions
	Engaging with stakeholders
	Exploring legal, financial and governance options, business and financial modelling, branding and marketing
Phase 3 – Registration and consultation	
Jan-Dec 2021	Registering the business
	Undertaking public consultation
	Testing the model through trial trading

Key project activities

Table 4 Summary of Project activities and timelines

Timeframe	Project activity
Feb to May 2020	Project set up
	Recruitment for and formation of the Foundation Group
	Scoping financial and legal advice
June to Aug 2020	Workshops identifying need and solutions to determine mutuality
Sept to Dec 2020	Establishing consumer-led Cooperative Strong & Capable
	Engaging with local providers
Dec 2020 – Jan 2021	Finalising Cooperative Rules, Business Plan, Financial Model and Branding
Jan – Dec 2021	Registration of Strong & Capable Ltd
June – Sept 2021	Public Consultations and Provider Forums
Oct – Dec 2021	Public Events
	Provider Working Group
	Trial Trading Initiative

About this report

This evaluation report meets the final requirement for Carers SA under its services agreement with DHS.

The aim of the report is to evaluate the project outcomes against the project's stated objectives and the aims of the ILC program. The report also seeks to:

- offer analysis and feedback to participants within the project
- support the sustainability of the new northern region care model
- offer insight into the processes, outcomes and lessons from the project to support replication of the model in other regions.

Through its evaluation framework, it evaluates the processes and the outcomes of the project.

About Carers SA

The Carers Association of South Australia Inc (Carers SA) is a member-based community organisation established in 1990 by a grassroots movement of family carers to represent their interests and needs and to be the voice of family carers in South Australia. Carers SA acts as both a representative organisation and a service provider, offering a range of services to caring families in metropolitan, rural and remote locations. It has a key role in leading change and empowering family carers to participate within the community.

Carers SA works in a partnership with South Australian government and the health and community sectors for the provision of better services, to improve the conditions under which family carers operate and to increase the recognition of the contribution of family carers to the South Australian community.

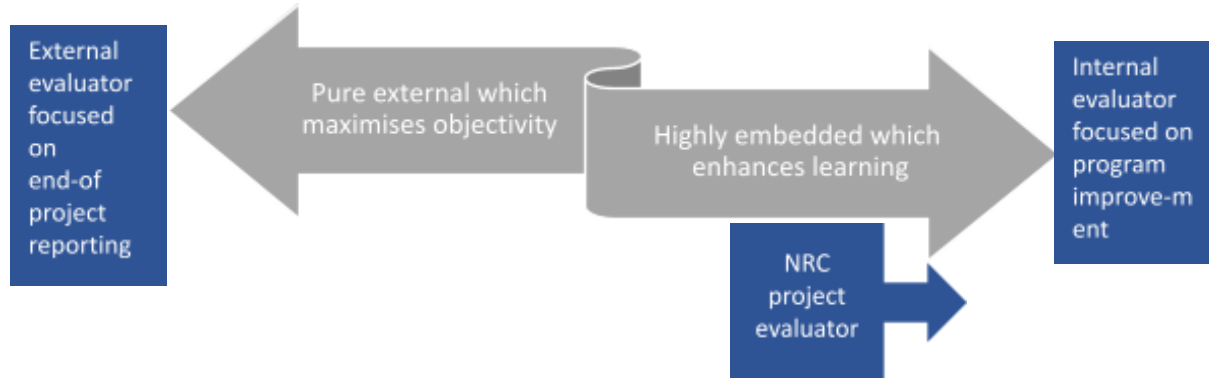
Evaluation methodology

Embedded evaluation

Evaluation was undertaken throughout the project, with an independent evaluator embedded within the project implementation team.

Figure 2 illustrates where the NRC evaluator was embedded on a continuum between external and internal evaluation.

Figure 2 External-internal evaluation continuum⁵



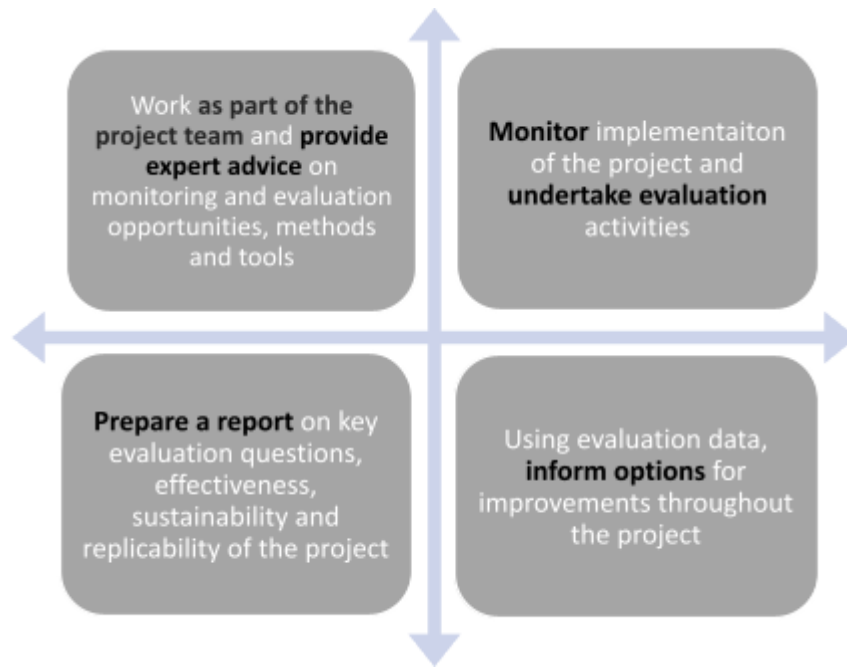
Positioning of the evaluator to the right of the continuum allowed for close communication, coordination and collaboration with the project implementation team and the Foundation Group members. As a part of the team, the evaluator monitored and reviewed the project throughout, contributing to its evolution and ultimate outcomes.

The role of an embedded evaluator, as applied in the NRC project, is summarised in Figure 3.

Figure 3 Embedded evaluation: role of evaluator⁶

⁵ Adapted from Salzburg Global Seminar. <https://www.salzburgglobal.org/>.

⁶ Adapted from Barry, D, Kimble LE, Nambiar B, et al 2018. 'A Framework for Learning about Improvement: Embedded Implementation and Evaluation Design to Optimise Learning'. *International Journal for Quality in Health Care*, 30 (supp 1): 10-14.



Traditional and developmental approaches

Embedding evaluation within a project presents challenges to independence. The evaluator mitigated these through employing a combination of traditional and complexity-based, developmental approaches. Traditional methods, such as a literature review, market analysis, participant interviews, and documentary review, were used throughout.

However, these methods were employed within a broader complexity-based, developmental approach. This approach mirrored the project processes and principles which sought to test a theory of change based on co-design, choice and control rather than adhere to strict program logic rules and processes. A complexity-based, developmental approach is characterised by ongoing feedback, development of new measures and monitoring mechanisms as goals emerge and evolve, collaboration in the change effort, and support for ongoing learning. In line with the processes and principles of community development and co-design, critical topics for evaluation include:

- application of fundamental values, commitments, and principle-based approaches
- participant engagement, relationships and communication
- the structure and operation of system dynamics
- responsiveness to emerging thinking, ideas and evidence.

These most clearly apply to the project design and delivery but, given the co-design principles underpinning the project, they also form a part of outcome evaluation.

Evaluation activities

The evaluation was developed in line with the three-phase structure of the NRC project, adding value and improvement through the project:

Table 5 Northern Region Cooperative project: evaluation methodology and timeframe

Phase 1 – Initiation and foundation	
Feb-Aug 2020	Articulation of the project’s concept – engagement with project team
	Development of baseline data through: . desktop research – cooperatives and mutuals in a care environment

	. market data analysis – NDIS Northern Region, thin market
	First-stage risk analysis and development of mitigation strategies
	Monitoring and observation of workshops and activity
Phase 2 – Premise testing, models and business case	
Sep-Dec 2020	Interviews with providers
	Review of workshop documentation and outcomes
	Mid-program interviews
Phase 3 – Registration and consultation	
Jan-Dec 2021	Consumer engagement
	Survey of Foundation Group consumer members
	Evaluation of attendance, relevance, outputs outcomes and communications
Feb 2022	Preparation of final evaluation report

The following evaluation activities were undertaken, with monitoring and documenting activities, important aspects of the embedded evaluation model:

*Table 6 Evaluation activities**

1	Literature review (prepared by student on placement), June 2020
2	Market data analysis report, July 2020
3	Review and reset workshop (Workshop 5), August 2020
4	Provider interviews on review and reset, September 2020
5	Mid-program interviews with consumers and project team, December 2020 to January 2021
6	Survey on choice and control and pre-post interviews with Consumers, June to July 2021
7	Consumers' personal stories of impact of involvement on Choice and Control
8	Evaluation of new Open Provider Forums, November 2020
9	Evaluation of public consultations with consumers, November 2020
10	Trial trading evaluation of engagement strategies and users experience, October and December 2020

* Comprehensive information on the evaluation process is provided in the appendices.

Evaluation reporting was provided throughout the project to the Foundation Group, the project team and was reported in quarterly Progress Reports.

Evaluation framework

A project-specific evaluation framework has been designed to allow a clear and clean evaluation of a range of funding, program and project objectives.

This report is informed by the nature of the project, its stated aims and the evaluation process undertaken throughout. Three documents have also been factored into the evaluation framework:

- the services agreement between Carers SA and DHS

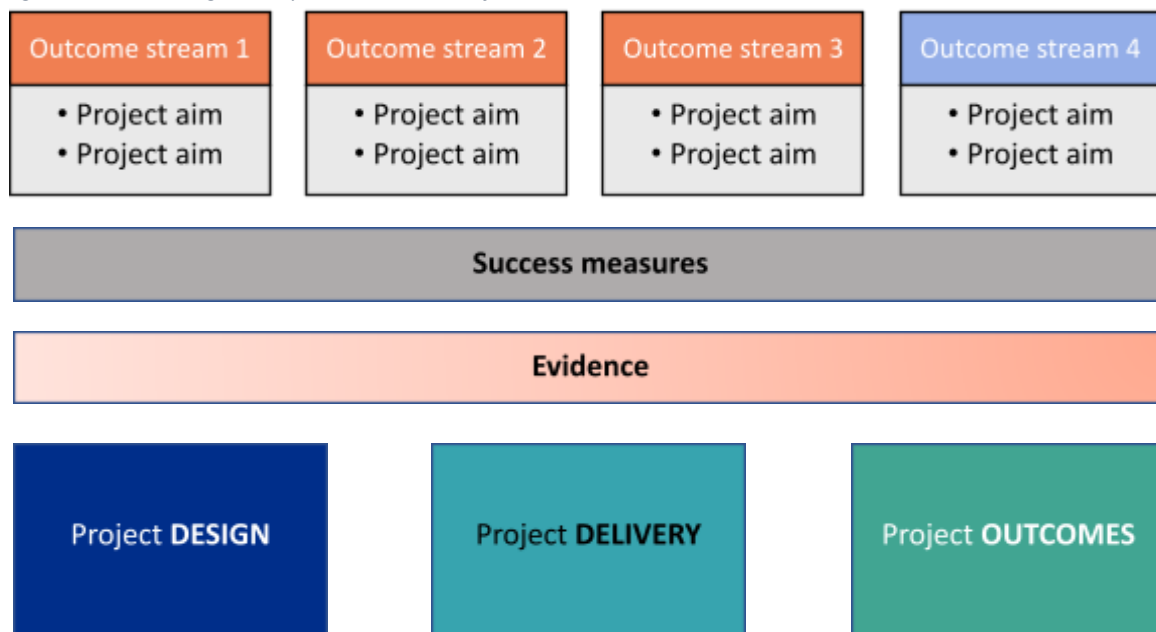
- the ILC Outcomes Framework, specifically the framework’s measurement and evaluation approaches⁷
- the Policy Framework for the ILC.⁸

The evaluation framework brings these disparate – sometimes overlapping and sometimes varying – elements together to deliver practical analysis of the Northern Region Cooperative and help other regional cooperatives to apply the lessons learned. The framework:

- is founded on outcomes streams
- aligns project aims under each stream
- identifies success measures
- gathers and analyses quantitative and qualitative evidence across three stages:
 - project design
 - project delivery
 - project outcomes.

Evaluation of the design and delivery of the project was determined to be a key part of evaluation due to the co-design approach to the project as well as the aim to increase the agency and control of people with disability. The project approach and outcome was characterised not by doing things for people with disability and carers to doing alongside or with.

Figure 4 Northern Region Cooperative evaluation framework



⁷ NDIS 2016: 8-9

⁸ Department of Social Services (2020) (DSS 2020). *Information, Linkages and Capacity Building Policy Framework*. Government of Australia.

(<https://www.dss.gov.au/disability-and-carers-programs-services-for-people-with-disability-information-linkage-s-and-capacity-building-ilc/information-linkages-and-capacity-building-policy-framework>).

Evaluation

Project evaluation is presented under the four outcome streams assessed across the six specific project aims:

Figure 5 Alignment of outcome streams and project aims

Outcome stream 1	Outcome stream 2	Outcome stream 3	Outcome stream 4
Connections and relationships (ILC)	Individual capacity building (ILC)	Information, linkages and referrals (ILC)	Provider and sector capacity (NRC)
Project aim 1 Cooperative service model	Project aim 2 Choice and control	Project aim 4 Awareness and referrals	Project aim 5 Provider capacity
	Project aim 3 Economic and social contribution		Project aim 6 Translation

This approach delivers a useful fusion of the ILC program and policy requirements with the specific aims of the NRC project.

Success measures are adapted from the ILC Outcomes Framework and project-specific deliverables. Measures are strongly aligned in the areas of consumer choice, control, capacity, and connection.

The analysis focus was on the potential of the Cooperative model to impact these areas and what elements of the model best enable a positive impact.

While this approach will assist with both reporting requirements and future planning, it is not without its challenges. Alignment inevitably leads to overlap. For example, increasing awareness is a component of all four streams. For the purpose of evaluation, project aims have been allocated to outcome streams where they are deemed to have the most impact.

In addition, the ILC streams – as articulated in the ILC Outcomes Framework – are at times repetitive and the link between streams and success measures is not always clear. The wording and emphasis of measures have therefore been amended for this evaluation.

Success measures can only be extrapolated to the participants of the project and in the context of their involvement with the project.

Outcome stream 1

Connections and relationships (ILC)

People with disability actively contribute to leading, shaping and influencing their community

Project aim 1: Cooperative service model

Investigate the viability of a sustainable service-delivery model jointly owned and managed by consumers and disability service providers

Success measure 1.1: People with disability influence and lead change in their community		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
First-stage risk assessment identified the needs of people with disability and their carers for support to participate, including building capability and capacity. The project undertook to consult and co-design with the Consumer Foundation Group members.	To mitigate this, consumers-only workshops were planned, consumers were offered personalised support to ensure inclusion, financial support to cover expenses, materials were provided in easy read versions and priority was given to fostering personal relationships Foundation Group members comprised 50% people with disability and carers	Consumers reported in the mid-program review interviews that they felt they were listened to and influencing the direction of the project. In the pre and post surveys they reported benefits from their involvement in the project as being that their voice and concerns were driving understanding and hence action. In general reflection sections two indicated stepping forward as people with disability rather than as carers for the first time and one reported feeling 'free' because she was not being shadowed by her support workers
Success measure 1.2: Increased connections and collaboration between stakeholders and with the community		
Project design	Project delivery	Project outcomes
Partly achieved	Partly achieved	Partly achieved

<p>First-stage risk assessment identified possible mismatch in preparedness between consumers and service providers. To mitigate this, the early stages focussed on building the relationships within the cohort groups. To bring Consumers up to speed one on one time was spent with them, the first workshop was a Consumer only workshop that included get to know you and team building activities.</p>	<p>Separate workshops were held with Consumers and Providers when identifying need Consumers and providers were brought together in two workshops to co-design solutions</p>	<p>At the August 13 Review and Reset workshop and in the mid-program review interviews Consumers reported being ready ‘to get on with it’ and comfortable to move forward without a formal venture with Providers While Consumers formed strong relationships with each other the Providers, while expressing interest, struggled to connect with each other as a group Workshops for both Consumers and Providers were generally poorly attended by Providers, as opposed to full attendance by Consumers</p>
<p>Based on sector discussions and meetings that informed the NRC Project the team believed there was extensive interest amongst stakeholders (and providers) in a response to the market fails in the Northern Adelaide region. A comprehensive stakeholder list was compiled.</p>	<p>The Project team liaised extensively with sector stakeholders including local government, disability organisations, and service-provider market players through face to face and online meetings, updates via email and by sharing Progress Reports. The Covid-19 pandemic hindered some face-to-face engagement and community activities. It also diverted people attention to the immediate needs of their organisations to manage during the pandemic.</p>	<p>Interviews with Project team highlighted how hesitant sector stakeholders were to connect and collaborate with the Project. They found non sector stakeholders more eager to collaborate with the Cooperative. Their experience of many stakeholders was they were diverted by the pandemic and hence not as responsive. This was supported by interviews with stakeholders who reported wanting to support the Project and the Cooperative but not having the time and extra resources to do so</p>

Success measure 1.3: Delivery of a viable cooperative business model owned and managed by consumers and service providers		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Partly achieved
Project concept explored and strengthened by project team.	The Foundation Group members met four times (twice together and twice separately)	Cooperative model developed with due diligence including financial, legal, risk and

<p>A series of workshops was designed to determine mutuality and commitment. Literature review of cooperatives and mutuals.</p> <p>Market data analysis completed on northern Adelaide disability sector and on thin markets and the implications for the final cooperative model</p>	<p>before a Review workshop led to the two cohorts moving forward separately. The Consumers agreed to establishing a Cooperative themselves and seeking a different relationship with Providers. The Project began working with Consumers to establish a Cooperative and with Providers to clarify how they wished to move forward. A series of meetings and capacity building workshops for Consumers set up the proposed model.</p> <p>Series of Forums for providers in the north to explore a solution to their issues with thin markets in the north of Adelaide.</p>	<p>market analysis – but without partnership between consumers and providers. The 10-month delay in the Cooperative’s registration (until December 3, 2021) meant its viability could not be evaluated. The viability of the Cooperative is placed at risk by the withdrawal of support funds with the end of the NRC Project. The viability of the service model was tested during the Trail Trading. It reinforced the difficulties to access people with disability and carers but of those that used the service their experience reinforced the viability of the service model.</p>
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Success measure 1.4: Establishment of a Northern Region Cooperative		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
Use community development and co-design principles Be advised by the Foundation Group	August 2020 decision to pursue a Consumer-led Cooperative Business name, rules, business and financial model, branding and promotional collateral including website, social media, fliers, give aways etc, registration established Registration was not approved until December 3, 2021 From Dec 2020 to December 2021 work with local providers on a Provider-led initiative	Strong & Capable Cooperative Ltd was registered as a member-based company owned and managed by consumers but not as a joint venture with service providers. ⁹ Membership is limited to people with disability, their nominee, or a person's main carer. It is overseen by a board chosen by members. Strong & Capable is not for profit company that offers NDIS support coordination, advice on NDIS plan management, knowledge and mentoring, advocacy, and stronger connections between consumers and service providers. ¹⁰

⁹ Strong & Capable Cooperative 2022 (S&C 2022a). *Fighting for Better*. Strong & Capable Cooperative Ltd. <https://strongandcapable.com.au/>.

¹⁰ Strong & Capable 2022 (S&C 2022b). Strong & Capable Cooperative Limited Rules. <https://strongandcapable.com.au/>.

Outcome stream 2

Individual capacity building (ILC)

People with disability have the skills and confidence to participate and contribute to the community and protect their rights

Project aim 2: Choice and control

Provide people with disability with more choice and control, both through the project methodology and within a proposed service model

Success measure 2.1: People with disability have increased skills and capacity		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
Incorporate knowledge exchange, skill development and capacity building into all activities including meetings and workshops Communications were designed to be interactive and reflective Individual members received personal support and mentoring as needed	The Consumers held regular (monthly) meetings attended by 5 of 6 members 99% of the time Consumers often shared their personal experiences which were then 'workshopped' Specialist training provided in governance, leadership and management	Consumer members reported having existing skills sets and experience with consumer and community groups. This facilitated their quick and effective engagement and ability to comment on unique characteristics and approaches of the Project In surveys and interviews they reported increased skills and capacity to maximise NDIS plans, refine individualised goals and negotiate flexible supports

Success measure 2.2: People with disability experience greater confidence to participate and contribute		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved

<p>Co-design principles and practices Mentoring Inclusive practices responsive to potential impacts of disability</p>	<p>Relationship based communications One on one mentoring as necessary Easy read versions of documents Interactive and reflective discussions Using workshops to develop thinking on important matters</p>	<p>Through surveys and interviews they reported feeling more confident and hopeful Contributing factors included, feeling connected through sharing experiences, time spent on relationship building, and the interactive and reflective approach to communication The surveys and interviews with consumer Foundation Group members and later interviews with users of the trial trading all reported increased confidence to participate and contribute. They highlighted feeling listened to, understood and seeing outcomes as giving them confidence, as well as accessing relevant and useful information that acknowledgement their challenges. Many reported that confidence is often higher when advocating for others/their children and more complex and fragile when self-advocating All but one of the original Consumer Foundation Group members accepted to take up new roles and responsibilities on the Cooperative board. Time issues noted</p>
<p>Success measure 2.3: People with disability can better determine their own choices and way of life</p>		
<p>Project design</p>	<p>Project delivery</p>	<p>Project outcomes</p>
<p>Achieved</p>	<p>Partly achieved</p>	<p>Partly achieved</p>
<p>Co-design principles and practices Mentoring Inclusive practices responsive to potential impacts of disability</p>	<p>Relationship based communications One on one mentoring as necessary Easy read versions of documents Interactive and reflective discussions</p>	<p>Surveys conducted with Consumer Foundation Group members indicated they felt involvement with the Project increased their ability to determine their own choices</p>

Establishing a Cooperative	Using workshops to develop thinking on important matters Public consultations to attract and engage people with disability	Public consultations failed to engage people with disability in the north Adelaide area Utilisation of the Trail Trading offer indicates increased consumer ability in this area Feedback highlighted the importance of ongoing support and advice. Several people mentioned often being overwhelmed, time poor, and struggling with emotions when having to make choices
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Success measure 2.4: Co-design principles are embedded throughout the project and in the project outcome		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
Co-design principles and practices	Interactive and reflective discussions Using workshops to develop thinking on important matters	Consumer-led Cooperative established Consumer Foundation Group members reported being listened to and involved in decisions about the Cooperatives design and development

Project aim 3: Economic and social contribution
Provide opportunities for economic and social contribution for people with disability

Success measure 3.1: People with disability contribute through employment and volunteering		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
People with disability volunteering for Foundation Group and the Strong & Capable Board	People with disability provided individualised support in their volunteering capacity.	All but one of the Consumer Foundation Group members volunteer for the inaugural Strong & Capable Cooperative Board

	NB Consumer Foundation Group members were already engaged in both volunteering and paid employment	
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Success measure 3.2: People with disability contribute their skills and views to the social life of the community		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
This is an objective of the Strong & Capable Cooperative	Consumer Foundation Group members were the core and key cohort of people with disability for the Project. As such their views drove all aspects of the Projects work on community participation and capacity building. The Cooperatives service model is based on their contributions and designed to foster this	The Project demonstrates people with disability contributing their skills and views to their community. This is true of the Consumer Foundation Group members but also people with disability and carers that connected with the Project through public consultations and meetings and contributed to the evaluation especially of the Trail Trading

Outcome stream 3

Information, linkages and referrals (ILC)

People with disability are connected and have the information they need to make decisions and choices

Project aim 4: Awareness and referrals

Increase awareness of and referral to services

Success measure 4.1: Information is accessible to people of a wide range of abilities and backgrounds		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved

<p>The Project attempted to test and model access and inclusion through diverse delivery mechanisms, adhering to accessibility standards and use of languages such as AUSLAN, visual aids and LOTE</p> <p>Drafts of materials were circulated to Consumer Foundation Group members as well as personal support circles to ensure appropriateness and accessibility</p>	<p>The Project made materials available in easy read versions and provided one on one support</p> <p>The website design is inclusion and accessibility friendly featuring language translation, audio and font size features</p>	<p>The measure here is that information exists that complies with accessibility standards</p> <p>Access and use of information was not measured as part of the evaluation</p>
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Success measure 4.2: Information is relevant and accurate		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
Co-design principles and practices Public consultations Trail Trading Offer	Workshops and meetings were interactive and inclusive Information was shared through personal stories Project explored what made information relevant and accurate	The new Cooperative aims to achieve this The trial trading demonstrated that for information to be relevant and accurate it needed to be nuanced and reflect personal circumstances What was reported was that information is more often provided that is relevant and accurate to the NDIA but not the NDIS participants plan and circumstance

Success measure 4.3: People with disability have better information and greater awareness of services		
Project design	Project delivery	Project outcomes
Achieved	Achieved	Achieved
Cooperative tested via a Trail Trading Offer	Trail trading offer between Sept 22 to Nov 22	The Consumer Foundation Group members all reported receiving better information and having a greater awareness of services as a result of being involved in the Project While the Cooperative was yet to provide services, feedback from trail trading users indicates better information and a greater awareness of services was an outcome of their consultation

Success measure 4.4: Effective referrals link people with disability to appropriate mainstream and disability services		
Project design	Project delivery	Project outcomes
Partly achieved	Partly achieved	Partly achieved

Cooperative tested via Trail Trading Offer	Trail trading offer between Sept 22 to Nov 22	<p>Trial trading users reported the support and information they received did assist them to identify appropriate referrals</p> <p>New cooperative aims to achieve this, but too early to assess its activities and beyond the scope of this evaluation</p>
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Outcome stream 4

Provider and sector capacity (NRC)

The disability sector innovates so that it is sustainable, responsive and capable

Project aim 5: Provider capacity

Grow provider capacity, sustainability and workforce capacity

Success measure 5.1: Providers are more responsive to the needs and views of people with disability		
Project design	Project delivery	Project outcomes
Partly achieved	Partly achieved	Partly achieved
Provider Forums in partnership with the Stretton Centre	Nine forums were held for local Providers through the late part of 2021, June 9, August 17, September 9, October 7 & 14, November 4 & 25 and December 2 & 12	93% of Providers that attended the first two Forums reported they were interested in working closely with the Cooperative This response together with the consistent involvement of Providers at increasing higher numbers at Provider Forums suggests they are interested

Success measure 5.2: Providers identify new approaches to build capability, capacity and sustainability		
Project design	Project delivery	Project outcomes
Partly achieved	Partly achieved	Not measured
Provider Forums in partnership with the Stretton Centre	Nine Forums were held at the time the NRC Project ended The partnership with the Stretton Centre is important to its continuing	Evaluation beyond the scope of this report As with success measure 5.1 the continued attendance at Forums suggests Provider interest

Project aim 6: Translation
Act as a model for similar initiatives in other regions across South Australia

Success measure 6.1: The business model is tested and evaluated		
Project design	Project delivery	Project outcomes
Partly achieved	Partly achieved	Partly achieved
Trail Trading Offer	Trial trading conducted to test the business assumptions, marketability and sustainability of a consumer-led cooperative – a publishable version of the evaluation is required	The Trail Trading offer and its evaluation provides some reflection on the model's concept Strong & Capable requires time trading before undertaking evaluation – monitoring and evaluation should be included in its business planning

Success measure 6.1: Project and business model information is systematically disseminated to inform other proposals		
Project design	Project delivery	Project outcomes
In progress	In progress	Not in scope of evaluation

<p>Develop a 'how to...' manual based on the Projects experience and learning</p>	<p>A 'how to...' manual is being prepared in collaboration with key stakeholders</p>	<p>A 'how to' manual is being prepared The manual will be informed by the Evaluation and Project reports. Cooperative Board members have contributed to the manual through the Evaluation and will contribute to its writing</p>
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Summary of findings

The Northern Region Cooperative (NRC) project sought to investigate the viability of a sustainable disability-services model jointly owned and managed by consumers and disability service providers. In keeping with this collaborative aim, the project undertook a co-design approach, bringing together people with disability, carers and providers to explore and potentially establish the model.

The design, delivery and desired outcomes of the NRC project aligned with three streams of the Australian Government's Information, Linkages & Capacity Building (ILC) Outcomes Framework. In addition, the project identified a fourth outcome stream (number 4):

5. Connections and relationships
6. Individual capacity building
7. Information, linkages and referrals
8. Provider and sector capacity

Co-design and project adaptability

The co-design nature of the project resulted in a dynamic project, constantly responding to participant input and views. Rather than a fixed process with a pre-determined outcome, the project was characterised by adaptability and re-direction. Embedding evaluation throughout the project enhanced this dynamism through continuous improvement.

The aims of the project therefore were not static and were refined and provided clarity within the consultative, co-design framework. A refined list of project aims was used as the basis of final evaluation:

1. investigate the viability of a sustainable service-delivery model jointly owned and managed by consumers and disability service providers
2. provide people with disability with more choice and control, both through the project methodology and within a proposed service model
3. provide opportunities for economic and social contribution for people with disability
4. increase awareness of and referral to services
5. grow provider capacity, sustainability and workforce capacity
6. act as a model for similar initiatives in other regions across South Australia.

Additionally, the NRC project was conducted during the first two years of the COVID-19 pandemic. This created significant challenges for meetings, engagement, events and in particular public consultation. It also had some impact on relationship-building. Planned activities were constantly revised, including to online platforms, to respond to the pandemic.

Project outcomes

The project succeeded to a high level in two of its aims: providing choice and control to people with disability and providing opportunities for economic and social contribution.

The strength of the NRC project was the co-design approach was carried throughout the project and engaged consumers from the beginning. The consumer voice was critical in directing the project. Consumer experiences, needs, requirements and desires shaped the project and the business model design. Consumers were clear that a business model that delivered choice and control required:

- relevant, accessible and nuanced knowledge

- self-management
- improved and coordinated support coordination
- independent advocacy to underpin self-advocacy
- ethical practice by service providers.

Figure 6 What enables choice and control and maximised NDIS plans



Participation in the project helped consumers build confidence. Consumers reported growing confidence in seeking the services they wanted but also in contributing to the development of new services. Interacting with other people with disability was an important factor in confidence growth. Increase in skills was not directly measured, however observation of consumer participation in the Foundation Group indicated that consumers were increasingly able to express views, think strategically, plan and negotiate.

Participation in the NRC Project allowed consumers and carers to contribute to the development of disability services in the northern region rather than act as passive recipients of services. Participation in the Foundation Group demanded a long-term commitment of time and engagement on behalf of the northern Adelaide community.

The project was partially successful in establishing links between people with disability, service providers and broader community. Joint and roughly equal consumer and provider membership of the Foundation Group was key to building new relationships. Engagement more broadly with local governments and community organisations were limited in building joint understandings but were nevertheless useful elements of the project.

Importantly, as the project progressed inherent tensions between consumers and providers emerged. This tension arose from a number of factors. Consumer and provider interests diverged in terms of responses to needs, business outlooks, areas of market failure, ethos and service expectations. The difficulty in providing clarity and specificity about the proposed model did not allow providers to fully and comfortably understand their role and the benefits for them. The co-design process, moreover, prioritised the consumer voice.

As a result of this tension, the project diverged from its original aim to develop a joint venture between consumers and providers. Instead, consumers commenced planning for a consumer-owned and -managed cooperative to deliver services to other consumers in the northern region. This consumer cooperative model would deliver choice and control to members.

The Strong & Capable Cooperative Ltd was established during the term of the project.¹¹ Membership is limited to people with disability, their nominee, or a person's main carer. It is overseen by a board chosen by members. Strong & Capable is a not-for-profit company that offers NDIS support coordination, advice on NDIS plan management, knowledge and mentoring, advocacy, and stronger connections between consumers and service providers.¹²

Trial trading was conducted to test the assumptions of the cooperative's business plan. Previous plans to test the marketability of the model failed to attract sufficient numbers. The trial trading commenced in September 2021. Evaluation of the trial trading was not finalised at the time of writing this report.

The recent establishment of the cooperative does not allow for evaluation against the project aims – and is, in any case, beyond the scope of this evaluation. However, its stated purpose and approach are in keeping with the overall aims of the NRC project to offer people with disability choice, control and the opportunity to contribute to the local economy and community. As a member-managed organisation, it offers business and work opportunities to members in roles such as management, board governance, advocacy and communication. Should the cooperative be successful, it will contribute to the NRC project aims of increasing awareness and referrals to appropriate services.

NRC project aims to grow provider capacity and to translate the process and model to other regions are hopeful but not supported in this evaluation. Further work is required for these aims to be realised.

The establishment of the Strong & Capable Cooperative delivers a new service to people with disability in northern Adelaide. Initial analysis suggests an organisation run by and for people with disability offers innovation and new capabilities that the disability services sector could learn from. It can diversify services and, in the longer term, may impact on how services are delivered by more traditional providers.

Translation will require a comprehensive strategy of communication and dissemination. A 'How To' manual can be prepared informed by project documentation such as the NRC project report and this evaluation report acting as foundation pieces of any strategy. They will help inform project activities and co-design processes, as well as provide important insights on the nature of cooperatives. It is considered too early for translation of a final business model – consumer-led rather than the originally planned consumer-provider joint venture. The effectiveness of the model is not yet known and not formally evaluated.

¹¹ S&C 2022a.

¹² S&C 2022b.

Recommendations

In order to maximise the successes of the NRC project and to further explore its aims, it is recommended that:

1. Strong & Capable Board incorporate the co-design elements into its operation and continue to protect and prioritise the voices of people with lived experience
2. monitoring and evaluation be undertaken as the Cooperative operationalises and that methods be used that reflect co-design, participatory and developmental principles
3. translation of the model through a 'How to...' manual be developed informed by the evaluation findings
4. trail trading be extended as the Cooperative rolls out but uses marketing and communications strategies that builds on provider relationships, is co-designed with intermediaries, and includes recruitment to the Cooperative as an active objective
5. funding be sourced to continue the development of a provider entity in the north of Adelaide complimentary to the Strong & Capable Cooperative.

Appendices

Appendix 1 Project conceptualisation and mental model development

Undertaken to develop a shared understanding of core concepts, objectives, and processes

Undertaken with the Project team

Undertaken on early February 2020

Undertaken as an interview and open discussion

Existing examples of the program/similar project working well

Team had no knowledge of the existence of a joint venture cooperative between consumers and providers of care services. It was assumed that no similar project existed. Cooperatives, however, were well established and several examples existed of cooperatives in the care sector around the world. Decision was made to undertake a scoping/literature review.

Discussion on why a cooperative model would address the current issues of the thin market concluded that cooperatives were a mechanism for people with a common need to work together to address this need and would achieve benefits that were recognised by everyone as important and agreed as being best achieved together.

For the Project to succeed the consumers and providers could agree on mutual benefit(s) and on a shared solution to realise these benefits.

Risks identified as consumers and providers not agreeing on mutual benefits and their realisation, power imbalance where providers would dominate consumers and running out of time.

How the project would make life better

What was negatively impacting people lives was the result of market fails therefore addressing these fails was assumed to 'make life better'.

A cooperative would bring the two cohorts together to develop a solution that suited both.

Life would be better for participants/members because the market would work better. consumers would be more empowered to navigate the NDIS and therefore practice choice and control, and providers would reduce the cost and risk of doing business by accessing information about the nature and cost of doing business that enables choice and control.

How the Project would impact positively

By bringing together a group of like-minded people saying how to do 'things' differently.

Consumers would have more choice of services, more providers to choose from and better control of the nature of services available to them, the market would be more transparent, consumers would feel safer and that they belong.

Providers could develop more agility, improve their responsiveness, better understand their market, have more direct access to their market, and feel increased trust of market intelligence.

Program Design

The uniqueness of the project is 'doing this' with people with disability involved as equal partners. Preparing consumers to represent themselves was the 'pilot/innovation' element of the project, the rest has been done before and success factors and steps are proven.

Consumers’ confidence would be developed through both self-advocacy and systemic advocacy. Advocacy would be underpinned by:

- Access to knowledge about how the market works
- Increased competence to negotiate with providers
- Building confidence through practice and achievement

The cooperative needs to trial how to build strategies that achieve these into the ‘setting up’ a joint venture model

Central to the project’s success, hence design, is establishing mutuality.

Table 7 Establishing mutuality design matrix

Creating Mutuality	Tools	Testing
Engage foundation group as a think tank to understand why it’s important and what it looks like.	Inform prospectus, business and implementation plans	Doing this with providers and consumers as partners
Clearly define and enshrine principles	Embed in prospectus and business and implementation plans	Embed enablers and disability friendly practices for consumers.
Train people in what it means to them, looks like for them - benefits	Engage ‘partners’ through a series of workshops	Understanding of need and solution and if there is mutuality.
Incorporate into member relations, structures and induction	Embed in implementation plan Include a membership person in structure	Resourcing/training PWD need to drive this for themselves and ‘educate’ providers

Who are the key stakeholders?

While the joint venture would be between consumers and providers it was acknowledged that the NDIS/A and Partners in the Community were very important stakeholders. They are ‘designed’ into the market. The NDIS sets pricing, access (for both consumers and providers) and quality regulations. Partners in the Community impact on a participant’s experience accessing, activating and utilising their NDIS plans and funds as well as their access to mainstream community and social services. To what degree do they contribute to market fails?

The market is also impacted by the National Disability Strategy 2010-2020¹³ which directs all levels of government and publicly funded entities. Other stakeholders include existing brokerage services, advocacy organisations, disability representative and peak bodies, and mainstream services such as Health and Education.

Targets and/or measures

It was agreed there should be 50/50 representation of providers and consumers.

Consideration would be given to support representation from gap and growth areas such as:

- Gap – psychosocial disabilities services,
- Growth in need/new markets – autism, age group 7 – 14
- Stagnant market – cognitive/intellectual disability

¹³ The National Disability Strategy 2021-2031 was released December 3, 2021

Appendix 2 First-stage risk assessment and mitigation strategies

Undertaken to develop a shared understanding of core concepts, objectives, and processes

Undertaken with the Project team

Undertaken on early February 2020

Undertaken as an interview and open discussion

Early discussions identified the following as possible risks to and/or tensions in the Project:

- it was felt providers were 12-18 months ahead of consumers due to having been involved in various forums, discussion groups and meetings since 2018. The risk was identified as providers losing interest while the project worked on generating consumer interest.
- The project objective to establish a cooperative was an imposed solution hence creating tension with the intent to use co-design and developmental principles and practices.
- The initial 12-month life span of the project was considered a significant risk to sustainability and translation. Even if a cooperative was established in the time frame and budget parameters it would lack support to operationalise. It was not expected that in the life of the project a cooperative would become financially viable. Of course, this was later complicated by the Covid-19 pandemic. In response to Covid -19 the Project was granted a 12-month extension and adapted their engagement strategy.
- People with disability and carers need support (accessibility and inclusion) and capacity building to do this work.

Table 8 Risk factors and mitigation strategies

RISK FACTOR	MITIGATION STRATEGY
Providers being ahead of consumers by 12-18 months,	Invest time building relationships with the Consumer cohort Plan workshops/sessions only for them and specially designed to 'bring them up to speed'. Ensure there was one on one contact time allocated to each person to address questions and concerns
This was a project with an imposed solution,	Care was given to keep a Cooperative as an option not a fait accompli.
The 'need' was not clear, and it was not clear that it would be shared,	Workshops were designed to expressly look at these questions – inclusive and interactive activities were designed to capture this data.
People with disability and their carers need support (accessibility and inclusion) and capacity building to do this work	People with disability and carers were consulted as a group and individually about supports to assist their involvement. This resulted in financial assistance, personal assistance, and training.

Appendix 3 Summary of literature review

Undertaken to seek examples of the proposed joint venture cooperative and identify possible exemplars

Undertaken by a final year community services and criminology student

Undertaken over March – May 2020

Literature Review is available as a standalone report

The Literature Review focused on three types of information:

1. Examples of Cooperatives operating in the care environment from European countries, the USA, Canada and New Zealand
2. NDIS review reports about market fails and improving outcomes
3. Other reports relating to participants and family's experiences with the NDIS

The Literature Review:

- found no examples of joint venture models of cooperatives
- found examples that demonstrated where consumers and providers of care services work closely together this did result in improved services outcomes for consumers¹⁴
- identified that NDIS reviews consistently identify issues relating to market fails and offer recommendations that encourage developments and/or innovations that suit a cooperative model
- Was able to highlight that recent reporting on the experiences of people with disability, especially those identified as most vulnerable, benefited from access to independent advice and advocacy support
- Identified that independent advice and advocacy support also enhance the ability of participants to exercise choice in developing their goals and control over the supports and services that will help them realise their goals

Full report is available from Strong & Capable website

¹⁴ An example was the Fondazione del Monet de Bologna e Ravenna, (Restakis, J 2010). This three-year initiative provided care funds directly to consumers and found the quality of senior care improved, prices for care dropped and providers were successful if they targeted quality, innovation and flexibility.

Appendix 4 Summary of market data analysis

Undertaken to provide updated baseline data to inform the project

Undertaken as desk top research by the Evaluator

Undertaken from March to June 2020

This report is available as a standalone document

The notion of thin markets was predicated on data sets from the northern region of Adelaide that indicated low levels of plan utilisation, concentration of fund spending with large providers and long waiting lists for participants attempting to utilise their plan funding and difficulty maximising plans outcomes¹⁵. The data that informed the initial discussions about thin markets was at the time the project already two years old.

A revisit and review of the relevant market data used to define the problem of thin markets and expand understanding of other data sets would provide the Project with baseline reference data to inform business and financial modelling for the proposed Cooperative.

NDIS market data is available from NDIA data bases and quarterly reports as well as participant satisfaction data and market enablement reports. The sources of data include: the NDIS Quarterly reports to COAG; data available through the Data and Insights web page and provider market data available at the NDIS Demand Map data

What the market data highlighted was:

- The northern region of Adelaide represented around one third of all SA NDIS participants and was growing at a slightly higher rate than other regions.
- Plan utilisation across SA had improved since 2018. However, improvement in the north was still marginal sitting at 60% to March 2020.
- While overall plan utilisation was increasing the March 2020 quarterly report reported that there is still 38% of all SA plans that utilise 50% or less of their plans.
- The value of plans in the Northern Adelaide service regions was noticeably lower than the other Adelaide metro areas with only marginal increases since full roll out.

Market competitiveness was also explored to ascertain indications of a thin market. Something the Project Team were keen to understand was the impact of nearly 25% of the spend in the northern region being 'Core In-kind'. This was later clarified by the NDIA as representing block funding provided directly to service providers to address market fails. It was reported that this arrangement, which obviously skewed the market had ceased and funds had been 'redistributed'. It has never been clear how these funds have been redistributed.

Another aspect of market competitiveness explored in more detail was the percentage of plan expenditure going to the top ten providers. While the percentage of plan expenditure to the top ten providers was lower in the north the amount being spent with the top ten providers appeared to be larger.

Satisfaction Surveys released in mid-2020 provided insight into the level of Choice and Control of different participant groups. For example, 75%-79% of adults on the NDIS want

¹⁵ Plan utilisation refers to the amount of the plan budget that a participant uses; plan maximisation refers to the ability to access the supports and services that best respond to participant achieving their goals and market concentration is calculated by the ratio between payments to the top 10 providers over a reporting period and the total payments to all providers over the same period.

more choice and control and responses to questions about satisfaction with community inclusion register are consistently at less than 50%.

Analysis of the data showed that plan utilisation and market rigour are quite nuanced and while trends in utilisation and satisfaction are trending up that experience is not universal. There are areas for market development and diversification that could offer participants increased choice and control as well as influence over quality and innovation of supports and services in the NDIS market. The importance of effective Support Coordination to plan utilisation and maximisation and ultimately to overcoming market fails, was highlighted in the NDIA Support Coordination Consultation paper, August 2020.

The NDIS Community Engagement Team were consulted about the data and asked about how they interpreted some important findings.

Because this data was to be used to inform business and financial models for a potential enterprise the NDIS/A were presented with these findings and asked about financial modelling options such as commission payments or 'clipping'.

Other reports released over 2020/21 provided data which further supported the premise of the NRC Project and reinforced the NRC Project understanding of the consumers and providers experience of the thin market characteristics of the market.

These reports included:

- The 2019 review of the NDIS Act (2020) known as the Tune Review
- The June 2020 NDIS quarterly COAG report and the data on client satisfaction
- Safeguarding Task Force Report July 31, 2020 (the SA governments enquiry into the death of Ann-Marie Smith)
- NDIA Support Coordination Consultation August 2020
- A report commissioned by the City of Playford and prepared by The South Australian Centre for Economic Studies University of Adelaide Profiling Aboriginal and Torres Strait Islander, and CALD communities with disability, and community supports in Northern Adelaide, September 2019

Main data bases utilised:

<https://blcw.dss.gov.au/ndis-demand-map/>

<https://www.ndis.gov.au/about-us/data-and-insights>

<https://www.ndis.gov.au/about-us/publications/quarterly-reports>

Full report is available from Strong & Capable website

Appendix 5 Workshop series

Overview

A series of eight workshops were planned for the Foundation Group members. These workshops followed the usual process to set up a cooperative. Covid-19 restriction impacted the start time and other aspects of the delivery of these workshops.

Considerations in planning the workshops included:

- Provide support to consumer participants to ensure equal participation and empowerment
- Plan consumer and provider only sessions to facilitate the above
- Step groups through the process of setting up a cooperative

Table 9 Outline of workshop series

	Workshop Topics	Audience	Dates
1	Disability and Enterprise; Coops as an option Consumer perspective Challenges and the NDIS Workshop plan	Consumers only	18/6/2020
2	Project update Provider [perspectives Challenges and the NDIS Workshop plan	Providers only	2/7/2020
3/4	What problems are we addressing? How will we address them?	Both	18/7/2020
	Extra session to induct new providers	New providers	7/8/2020
5a	Review and reset session GROUP SPLITS Providers are interviewed by the evaluator, Consumers move forward with workshops and set up of Coop	Both	13/8/2020
5b	Provider meeting Agenda – share feedback on evaluation and determine steps forward	Providers only	21/10/2020
6, 7, 8	Who owns the Coop? Who can become a member? Who controls the Coop? Enterprise and business finance explained Benefits of membership Business planning Branding	Consumers only Run more as meetings with chairing rotating amongst the FG consumers	10/10/2020 24/10/2020 26/11/2020 12/12/2020

The Review and Reset Workshop on August 13 split the Foundation Group with the consumers deciding to move forward without the Providers and set up a cooperative.

Results of the brainstorms/discussions

The series of workshops focused on determining mutuality. Synthesis of the workshop outputs determined:

- What the two consumers and providers agreed
- What the top 3 priorities were, and
- What didn't match but was important for the cooperative to consider

Table 10 Summary of workshop results

What is Good? – results	
Matched shared <ul style="list-style-type: none"> • Goal Focussed • Personalised Funding • Breadth of Support • Person-Centred • Offers Choice • Offers Control 	Other/considered important <ul style="list-style-type: none"> • It Exists! • When it's right it works really well • Not Means Tested
What is Bad? – results	
Matched <ul style="list-style-type: none"> • Not Flexible • Not Understood – Confusing/Scary • Not Accessible • No support for case management • Lack of independent advocacy • Role of LACs • Problem around QA/Questionable Providers • Audit Costs • Long Wait Lists 	Other/considered important <ul style="list-style-type: none"> • Inconsistency of operation or rules • Audit Costs/Entry Bar • Training and continuance of NDIS staff in roles – lots [of] changes • Mis-matched funding • Service providers seen as enemies by NDIS, • Too much bureaucracy • Poorly trained planners, lack of understanding of a person's disability and needs
What would make the NDIS better? – results	
Matched <ul style="list-style-type: none"> • Advocacy (build in funding for advocacy; more effective advocacy; advocacy and support coordination) • Better/earlier/more intensive support planning • Less bureaucracy • More accessible information • Embrace social model of disability • LACS 'know their role and place' 	Other/considered important <ul style="list-style-type: none"> • Understanding expertise and knowledge providers bring to the system – good providers want the best for clients. Providers seen as the enemy • Facilitate groups for people in similar situations. • Collaboration between service providers to help smaller providers become sustainable. • Better use of technology to realise Choice and Control

This list was mutually agreed as the problems that needed to be solved:

- 'Doing' Choice & Control
- Quality assurance not being assured
- Building diverse stock of quality, agile providers to meet consumer need
- Accessible information
- Power imbalances
- Education of consumers

Both consumers and providers reported being 'hopeful' about the NDIS and both cite interfacing with the NDIA as their biggest challenge.

Workshop 1: with Consumers only

Overview

Date: June 18, 2020

Topic: Introduction to Cooperatives and Understanding What Makes a Successful Enterprise

Audience: Consumer Foundation Group members only

Attendance: Seven of the nine consumer Foundation Group members attended. Two had dropped out of the Project citing a conflict of interest with their advocacy roles with another organisation. The Project Manager, Expert Consultant Cooperatives, and Evaluator.

Observations and discussion points

The workshop gathered feedback on personal expectations and feelings, introduced the concept of cooperatives and what made them unique as well as workshopping the consumer perspective.

The consumer perspective was:

- they currently felt they had no influence,
- they were motivated to do something to increase their influence,
- they were attracted to the cooperative ethos of equality and 'reinvesting' profits.
- 'we need to help each other not just think about ourselves.'

The meeting agreed on a purpose '...we [cooperative] can educate people and support them to get the best out of their plans', posed the question: '...how are we going to cooperate with providers?' and discussed who should be a member, who will 'own' the Cooperative and who will 'control it'.

The session was interactive and the mood enthusiastic, open, and friendly.

Group reflections included:

- Recognition that collective voice is stronger and heard more
- Need to ensure co-production and co-design principles applied
- Involve people with lived experience
- One person reflected '...why now and not ten years ago...' insinuating the cooperative will give her a voice
- Two people disclosed this was the first time they were stepping forward as people living with disability (as opposed to carers).
 - General reflections: prevent 'Anne-Marie Smith' situations, no-one organisation should be working with vulnerable people, how do people know where to look, this is an important service, take up of services for psycho-social services very slow, need to keep things simple (not just accessible)

Workshop 2 with Providers only

Overview

Date: July 2, 2020

Topic: Provider Perspective: Challenges and the NDIS

Audience: Provider Foundation Group members

Attendance: All providers attended including one 'new' one and an apology from another new one.

Observations and discussion points

Providers showed a lot of interest in the Market Data Analysis report. They were open to sharing their issues, needs and expectations. They also expressed an impatience to have questions answered about the nature of a 'solution'. While they were in principle supportive of a cooperative as a business trading model itself, they needed more information about how what would be involved for them and how their businesses might be affected/benefit. Some questions were around time commitment, quality standards, access to 'market'. Some Foundation Group members were not service providers and those that were, struggled to envisage how this would integrate with their current business operations/services.

Workshop 3 & 4 Combined workshop to determine mutuality

Overview

Date: July 18, 2020

Topic: Joint session - What problems are we addressing and how will we solve the problems?

Audience: all Foundation Group members

Attendance: three of the nine service provider members, six of the seven consumer members, one new service provider attended and joined the group and one new consumer attended but did not join the Foundation Group.

Observations and discussion points

Workshop three was the first workshop to involve both cohorts. This workshop processed the input and feedback from workshops 1 and 2.

Provider attendance was low particularly among the larger providers. Provider attendance appeared to be affected by it being held on Saturday afternoon (non-working day). A couple apologised stating other commitments others were clear about not attending outside of work hours.

The workshop successfully engaged consumers and providers in possible solutions. Highlights included were one consumer sharing her personal story and the reporting of the findings from the Literature Review and Market Data Analysis.

Extra Workshop for new Provider prospects

Overview

Date: August 7, 2020

Topic: Introduction to the Norther Region Cooperative Project – recruitment of Providers

Audience: four service providers or stakeholders

Attendance: One of the Provider members hosted the meeting, two service providers and two sector stakeholders, Project Manager, Expert Consultant, Evaluator and student on placement

Observations and discussion points

The meeting discussed the lack of independent advocacy for people with disability and carers, conflicts of interest for providers, how consumers could/would be protected, the role of the NDIS and how it would 'judge' the cooperative, interest in defining quality as a characteristic of a NDIS provider and the lack of data on guaranteed income potential for providers.

The meeting spotlighted some of the difficulties of introducing new players into the Project. The meeting did not result in recruitment of new Provider members for the Foundation Group.

It resulted in a 'stock-take' of where the project was at and highlighted the need to face the tensions expressed by providers, especially the need to 'reconcile' the journey of the consumers and that of the providers. It was decided to undertake a review at the next workshop which was to be held with both cohorts and clarify how members wished to move forward.

Workshop 5 – Joint meeting to do a review and reset

Overview

Date: August 13, 2020

Topic: Moving Forward - project review and reset

Audience: All Foundation Group members

Attendance: Four consumers attended and two providers as well as the Project Manager, Expert Consultant, and the Evaluator.

NB: this workshop was originally planned as one of the series building mutuality workshops. Based on observations and feedback from some Foundation Group members it was recommended to undertake a review and reflection with Foundation Group members.

Observations and discussion points

The workshop represented the first significant evaluative learning and opportunity for reflection on one of the NRC Projects key challenges – *'establishing a joint venture between consumers and providers that contributes to addressing the NDIS market fails in the North of Adelaide'*.

The discussion offered the Foundation Group members present an opportunity to be very clear about what they considered important and possible and where they wanted to focus their efforts.

The feedback from the workshop discussions highlighted the 'tensions' in forming a joint venture and a clear decision was made to forge ahead with a consumer-led cooperative.

It was clear from the input that there was significant appetite from the Consumer Foundation Group members to develop a consumer-led and owned cooperative that would deliver advocacy, information, training and 'support planning/coordination' from a lived

experience perspective. The mood was reflected in the comment: "...let's start to put meat on the bones of a consumer cooperative!"

Regardless of the decision to move ahead with the consumer-led cooperative, engagement with providers continued to be an important element of the project. There were only two Provider Foundation Group members at this workshop, and it was agreed to interview the provider members as to what direction they wish to take now that a joint venture enterprise was not being pursued.

The Consumer members present quickly identified four primary activities that the cooperative could undertake.

1. Delivery of advocacy, information and 'support planning/coordination' from a lived experience perspective
2. Connections to providers
3. Delivering peer-led support to NDIS participants and others with a lived experience of disability
4. Collective buying power that improves choice and control when engaging with providers

The workshop also asked for feedback about working on the Project and with the Project team. The feedback from the consumers was very positive and validated the teams developmental and co-design approach. The comments below reflect some of the feedback.

"never presented a solution but wanted to hear from us what we thought"

"agile and flexible"

"teaching us to have a voice and how to advocate"

"we are learning to see what's possible and to be braver"

Some of the things FG members with disability said were missing or problematic

"we need more consumers in the group especially men" (there are none at present)

"some consumer representation is missing – hearing and sight impaired and more people coping with trauma"

"we don't need to meet as a whole FG (people with disability and providers) – we have different needs and outcomes".

The consumer Foundation Group members decision to move forward and set up a consumer-led cooperative meant the 'workshops' evolved into meetings. The meetings were focused on a key area of decision making required to establish the cooperative, consumer Foundation Group members chaired the meetings, all meetings were held in Saturdays to ensure maximum attendance, meeting agendas and minutes of meetings were instituted.

These meetings were run from September through to December 2020 and focused on developing the Rule and Business Plan for the cooperative. Meetings continued throughout 2021 ending in December 2021. These meetings focused on maximising lived experience to inform the cooperative, refining the service model, guiding the project team and training for members.

Appendix 6 Provider interviews

At the August 13, 2020, review and reset workshop where consumers decided to not pursue a joint venture cooperative with providers it was decided to follow up the Provider members to ascertain their views for moving forward.

The Providers were still very engaged and excited about the Project so it was intended that the interviews would contribute to better understand their motivation, how to support them, how they saw their future involvement and what would best engage Providers as a cohort. Interviews with providers were undertaken one on one, from September 8-22, 2020.

Findings

PART ONE – profile data		
Date: Between Sept 8 and 22	Location/Mode: Face to face – 6 and Zoom/Phone - 3	
Provider Type: (multiples possible) Mainstream: 2 Disability: 8 Other: aged care, employment, sector development, peak body, employment, accommodation	Supports/Services You Provide: Core Supports x 3 Capacity Building x 4 Sector development x 1 Accommodation x 1 Community Development and Connection x 1 Employment/ADE Employment support x 2	NDIS Registration YES - 5 NO - 3 One registered but not yet operational in SA
Size (self-definition, why?) Employees, turnover, number of clients 3 large (one not yet operational), 3 small medium and 2 sole traders M = Peak Body		
Service Area 2 indicated operating mainly in the North – both large providers (1 not yet operational) Generally, all offered their services to participants/consumers from across metro Adelaide. Most Providers reported their ‘reach’ as including the Adelaide surrounds of Clare, Barossa, Adelaide Hills, and Fleurieu Peninsula Only one Provider worked across regional SA as well as metro, a couple offered remote services to regions and interstate 2 Providers reported providing services interstate 1 Provider is an interstate provider looking to establish a presence in SA, in the North		
NRC Participation		
Zoom meeting (20 May)	6 providers attended (all those initially recruited)	
Provider only workshop (2 July)	7 providers attended (all from 20 May and 1 new recruit)	
First joint workshop (18 July)	4 providers attended (2 original, 1 from 2/7 mtg and 1 new)	
Second joint workshop (13Aug)	2 providers attended (2 original who didn’t attend 18/07)	

PART TWO – reflections on involvement with NRC so far

Question 1 - *When asked about their expectations/reflections on hearing about the possibility of a Joint Venture between Consumers and Providers in the north Adelaide region:*

They were attracted to working together with consumers and more markedly with working with other providers - ‘...wow, what an amazing concept!...to include the consumers ... and be part of the innovation’. They all supported the focus being the north.

Having a voice as a provider, giving a voice to provider needs was mentioned by all. They liked the idea of working together for a common good to become a known proven product, trusted to deliver quality, like RAA.

However, there was some reticence expressed about how it would work, ‘this is huge! Timeframes short. ‘Crazy’ no way we could get the eclectic group to do it!’. A couple needed to understand more and then decide about involvement. One reflected on the impatience of Providers and their unwillingness to look beyond themselves.

Question 2 - *When asked about their expectations/reflections on being invited on FG; what excited you? and/or what concerned you?*

Feedback was split between being excited and being concerned.

Those that expressed being excited said they were excited about connecting with and collaborating with other providers/businesses as well as the ‘community’ in the North.

Those that expressed concern reported not being clear about the vision, the purpose overall and what that meant for them as individual providers. They wanted to know ‘...what they were signing up for...’ and lastly some questioned the viability of the idea.

Question 3 - *When asked to reflect on the meetings/workshops (What worked for you? What didn't work for you and why?) their feedback included.*

NB: point of note that after the first Provider only meeting (July 2, 2020) very few providers attended workshops, and no-one attended all the workshops.

Reflections focused on workshops and were both positive and negative; ‘...[the] meetings were run brilliantly, ‘prospective’ problems [with consumers] didn’t manifest – standards and ethics is important – all good...’ but they needed to be more focussed, with a clearer agenda, shorter in length, and more opportunity to discuss outcomes and share feedback. Providers did express working together with consumers could be ‘hard’. Things they mentioned as being of value included: hearing from consumers, learning about shared needs from each other’s perspectives and the presentations on market data analysis.

Question 4 - *When asked what they specifically, were/are you hoping to get out of it and/or be able to contribute, their responses included.*

Provider’s motivations centred on better outcomes for people with disability in the north through fostering providers that are better connected with each other, better prepared/trained/informed and more linked into the local community.

They all wanted to participate in a robust network of providers to foster continuous improvement, engage with different perspectives, gather feedback, and come up with and test new ideas and innovate. Again, some needed more clarity and direction.

Question 5 - *How are you/your business experiencing the ‘Thin’ Market in the north Adelaide area? E.G: finding clients; sustainability/profitability.*

Comments reflected the experience that the NDIS itself was the biggest barrier to plan utilisation and biggest challenge to dealing with the ‘thinness’ in the market.

When asked about how they accessed clients' providers shared that they usually got clients through word of mouth. One shared they felt the lack of 'case management' created a 'thin market' while another shared that Providers were exercising choice to not 'choose' 'too hard' clients with complex needs or low value plan budgets, those from ATSI or CaLD communities etc. They wanted to respond to this 'thin market' characteristic which was not talked about enough. Advocacy for people with disability and their carers was important to all Providers.

PART THREE – Moving Forward

Question 6 - *When asked if they were interested in being part of a 'reconstituted' provider group they responded as follows.*

All expressed support to move forward with the idea of a cooperative (or something similar) for providers in the north of Adelaide.

However, everyone reported that before they could commit, they needed more clarity, increased ability to contribute to design and development processes especially around who would be invited to participate and the nature of the final structure, whatever that might be. Their biggest motivators were economies of scale, growing the market, collaboration opportunities, and fostering innovation.

One provider was interested in supporting the Project to explore 'models' for working with other parts of the sector ie community centres

Question 7 - *When asked what they thought Providers were looking for/needed.*

Themes included: a collective voice, a strong network of 'good' ethical, trusted, known providers to work with, refer to, support with developing effective business operations models (micro-providers), share investment liability and benefits, safe spaces to identify issues and problem solve, and cost-effective models to apply innovation cycle practices, and work collaboratively with each other. Opportunity to work with the consumer-led cooperative on market challenges and opportunities. Lobby, advocate, undertake community development in the North with state and local governments, local mainstream, and community organisations

Question 8 - *When asked about their view on what type of providers would be most interested in a Coop or something similar, they responded.*

They all referred to there being value in having a strong, well organised and resourced provider's support organisation and that such an organisation should bring together providers of 'quality'. There was no consistent theme or position on the nature of a Provider support organisation.

PART FOUR – Other comments/suggestions etc

Ques 9 - *When given an opportunity to share other thoughts and make other comments the Providers had a lot to say.*

These comments are a mixture of ideas, statements of intent, and glimpses of the vision they had for a prospective Provider support organisation. Statements of intent included, 'lift our game', 'walk the walk/talk the talk', 'don't need to be big'. Focus of comments were on a degree of self-regulation to ensure quality, integrity, best practice, and trust could be maintained.

Appendix 7 Mid-project review

Overview

The NRC Project's central mandate was to use a developmental community engagement and co-design model to explore if a joint venture between consumers and providers in the form of a cooperative could provide a response to the market fails characterised by low levels of plan utilisation and low overall spend of plan budgets in the northern suburbs of Adelaide.

At the time of undertaking this evaluation activity the Foundation Group had decided to form a Consumer only led cooperative called Stronger and Capable.

This marked an important milestone for the project and an opportunity to capture the reflections and aspirations of the remaining Foundation Group members.

Interviews were undertaken with consumer Foundation Group members and the Project team. Providers were engaged on these questions in September 2020.

Purpose of the Evaluation

This is the fifth discrete piece of evaluation the Project has undertaken, the others being: 1) a Literature Review, 2) the Approach to Market Data and Analysis Report, 3) the Foundation Group review session (August 2020) and the debrief interviews of 4) interviews with provider Foundation Group members.

This phase of the evaluation was designed to discuss 'what we expected, what we experienced and what we learnt to move forward'.

The NRC Project is funded as an NDIS Information, Linkages and Capacity Building project and therefore is expected to impact positively on the capacity of people with disability to exercise choice and control. To this end the Project team was mindful to ensure decisions, design and delivery protected, promoted, and enhanced choice and control for people with disability involved in the project. While a sub-theme of these interviews this was explored more comprehensively through case studies/personal stories. Understanding such factors informs final recommendations around scaling up and translation of the 'model' of consumer-led cooperatives in the disability support market.

Overview of methodology

One on one interviews were undertaken with all consumer Foundation Group members. The Project team members were also interviewed, and their contributions is reported separately.

- All seven consumer members of the Foundation Group participated in the interviews.
- Interviews were conducted between 21 Dec and Jan 26.
- Six were undertaken face to face and one over the phone.

The interview was semi structured around discussion points and were conversational. The domains of the enquiry explored through the interviews where; the proposition of a joint venture between consumers and providers idea; the process of agreeing on mutuality, a fundamental principle of cooperatives; the 'solution' being a cooperative; followed by a broader discussion on personal reflections and aspirations.

By documenting people’s personal journey and sharing what they learnt the focus stayed on capturing lived experience of this journey and to use this to advise translation to other cooperative ventures for people with disability.

The very personal nature of these interviews and the very small and easily identifiable members of the Foundation Group raised issues of privacy, confidentiality, and data ownership. Issue raised included breaching privacy of children with disability by their parent/carer, public ‘outing’ of people’s disability, documenting issues made people feel vulnerable (all over again). Individual stories belonged to the individual until they were comfortable to share it. No names and as much as possible no identifying characteristics were used. People were also given the right to request all their contributions be removed from the evaluation.

Participants were briefed on the interviews at the August 13 review and rest workshop and received a detailed email explaining the activity.

They were reminded of the evaluation questions and a provided with a summary of what the Project had learnt to date was shared.

Table 11 Summary of project learning to December 2020

Question/Issue	What we’ve learnt so far
The two groups (consumers and providers) might have different expectations	<p>The two groups had similar expectations and understanding of the Problem but differed on clarity about the Solution.</p> <p>Providers all agreed that they would benefit from the establishment of a Cooperative of people with disability and carers</p>
We would have trouble accessing participants with lived experience to be involved	The current group are a stable and committed. Efforts to grow the group have been unsuccessful. There is a diversity of experience amongst the group but not of gender and age.
How would the ‘joint venture model’ specifically and management models in general, work?	Legal advice warned that it would be ‘complicated’ to set up a Cooperative with owners that are service providers and service consumers. The Projects ‘lived experience’ of trying to do it highlighted that while the cohorts shared a vision and wanted the same outcome, the road to get there would be different for each.
How would the different ‘power’ positions of consumers and providers be handled and how would the project balance the different skill sets and make sure the voice of consumers was heard?	Everyone was very aware of this and very careful to make sure all voices were being heard. While all cohorts worked hard to strike a balance, it can be said that providers more than consumers struggled to ‘find their voice’.
Could consumers differentiate between the issues they face as NDIS participants and the ‘solution’ to thin markets being proposed, a Cooperative?	This did not prove to be a problem. Peoples personal experienced proved to be the testing ground for ideas and approaches – using lived experience not the drivers.

Summary of Findings

A Joint Venture - between consumers and providers

All consumers reported that they believed the idea of the two groups working together was a good one and that the intent to continue to pursue a joint venture albeit not a cooperative between consumers and providers in northern Adelaide was worthwhile.

Agreeing on Mutuality – the process and result

All consumers agreed that the need to determine mutuality was especially important and that the process (the workshops) was particularly useful in achieving that. Speaking more to the design and process comments included that the voice of the consumers ‘drove’ the process; passion and commitment was reflected in a comment that the cooperative had the potential to ‘break the camel’s back’ on the issues people face navigating the NDIS.

The Solution – starting a Cooperative

All consumers interviewed reported confidence and excitement about setting up a cooperative.

Comments indicative of these sentiments included ‘...nothing is going to stop it...’, ‘...it is going to be successful...’, ‘...can’t wait to see us get going...to change people’s lives...’, ‘...we will make this work – we work well together...’.

During discussions, the consumers shared their vision for what impact the co-operative would have:

- to be a change maker,
- provide a balance to NGO’s, be the pinnacle of good practice,
- act like a collective of other people’s brains working for you,
- will give people permission to ask “...can I...?” and will act as a sounding board, and
- it will change the community, change community-based stigma.

Surprises and Impacts

Many of the surprises were personal and gave rise to stories about the impact of the Project on them as individuals. The impacts they described demonstrate how powerful the experience has been in positively influencing some consumers choice and control over their NDIS experience. Below is a summary of comments people shared about their experiences, thoughts, and feelings:

- People shared feeling empowered and more confident, respected, and safe, (were given a safe place to be disabled)
- Two consumers reported improved utilisation of their plans while another two reported increased confidence to ‘negotiate/ask’ for a better plan
- They spoke about how strong and clear their collective voices were about what needed to be done and how they felt validated and supported by that realisation.
- Two articulated how they saw the cooperative as a vehicle for the change they personally wanted to help create in the disability market. They were confident and felt empowered to make this happen, however one person was very concerned to protect being led by lived experience and maintain high standards in co-design.
- One person expressed surprise at the statistics in the North being as bad as they were

Stakeholder interviews – Project team and Carers SA CEO

The Project team were interviewed in December 2020 as key stakeholders. Both the Project Manager and the Expert Consultant were interviewed via zoom. The context of these interviews was that there was a line drawn in the sand so to speak from the August 13 Review and Rest workshop and the work from September through to December 2020 was focused on setting up the Cooperative with the Rules of the Cooperative and Business Plan ready to submit for approval in early 2021.

Similar to the interview schedule designed for the consumer Foundation Group members these interviews were reflective and focused on expectations versus experience.

NB: at the time of these interviews, it was expected that the approval of the Cooperative would happen early in 2021. In fact, the approval for the registration of the Cooperative would not be received until December 3, 2021.

Both Project Team members had a history with the project. The Expert Consultant was the one that conceived the idea of a joint venture as a possible solution to the thin market problems in the North and the Project Manager was working with Carers SA for several years as a disability sector and NDIS specialist. The CEO of Carers SA had championed the idea of the project from the early discussions. He was interviewed in December 2021.

Reflections on the Project

All viewed the project as a 'pilot project/test case'. While the project's objective was to set up a cooperative in the north the Project team were committed to a process based on community development principles and co-design practices. The success of this approach was of particular interest to the Carers SA CEO.

While a joint venture cooperative was not the result all felt that a consumer-led cooperative was a positive outcome and that the documentation of the project was a great asset, especially to inform upscaling and translation.

Reflections on Engagement

All expressed surprise that the Providers struggled to engage with the solution and about the relatively passive and inconsistent support from key stakeholders. However, this did keep them open to opportunities and they did manage to connect to diverse 'friends' of the Project. The choice was made to seek engagement with motivated and proactive stakeholders.

The cohort of sector stakeholders engaged through the forums and meetings that led to the Project's inception proved challenging to engage. While they were kept informed and engaged through one-on-one meetings, received regular updates and requests to participate in the development of the venture their participation was sporadic, inward looking, and uncommitted. While some wanted to 'be in it' they did not want to fully commit until 'what's in it for me' was clearer. The developmental approach taken by the Project required more active commitment, input and risk-taking.

The Project team did assume provider and stakeholder interest would be higher and more active and cited the Covid-19 pandemic as the unforeseen factor that affected providers and stakeholders' ability to invest in development and risk of a new idea/venture.

The stakeholders considered as most important were the NDIA, Partners in the Community and Local Government. While the NDIA were enthusiastic ultimately, they couldn't assist the project. They appeared stymied by NDIS policies, protocols and positions which meant they

struggled to engage with the vision and scope to innovate. Ultimately, the ILC funding program was community engagement not innovation in service development, so the Community Engagement team struggled to support the project. The NDIS created the market but do not know how to engage with innovation in the market¹⁶.

There was a general feeling that there was not enough diversity in the provider representatives on the Foundation Group. The provider members didn't reflect the northern Adelaide experience.

Other sector stakeholders seem to be evolving their 'place' in the market and there is no blanket strategy for engaging with them. For example, to involving and working with peak organisations. Many stakeholders are working out where and how they fit in the disability market.

They were all equally surprised by how quickly the Consumer cohort 'grabbed the ball and ran with it.'

Reflections on the process

The approach followed had two facets one being the acknowledged blueprint for setting up a Cooperative and the second a commitment to community development and co-design principles. The model of facilitating the Foundation Group members through workshops worked well. Although the process proved to be a long one the Project benefited from not rushing proceedings. It was mentioned that time to build relationships with Foundation Group members and learn about peoples lived experiences was a strength.

Reflections on sustainability and translation

Sustainability and translation into other areas were key objectives of the project.

The use of a developmental co-design approach was seen as a success factor as was the workshop series that was used to identify mutual agreement on problems and solutions. Another success factor was that a genuine appetite exists among consumers (and providers) to fix the problem. Ability to generate this was considered a key success factor for translation.

The biggest challenge faced was the development of a viable and sustainable business and finance model in a market where definition of service and pricing as well as access to the market users is heavily influenced (and at times restricted) by the NDIA and Partners in the Community. This manifested as: firstly, the market users being a vulnerable group with limited flexibility in the way they can spend their funds, 2) the very service they need, advocacy, not being funded.

While there are other potential sources of income for a cooperative such as room hire, membership fees, training what users most needed to make a positive difference in their experience of the market was not able to be paid for from their NDIS plans.

Scaling up versus replaceability was also discussed. Determining the 'right scale' in the north was important. This was important to inform what metrics should be considered in scaling up into other service areas or setting up new independent Cooperatives in these services areas. One of the metrics mentioned was degree of potential duplication and waste of back-office structures and resources. It made sense to share these if possible.

¹⁶ Caveat to this is that during the life of the project the NDIS did undertake reviews, studies and consultations on the very issues being raised by the project but on a local level these did not contribute to a solution.

The experience of the NRC Project where people with disability and carers moved more quickly and confidently towards a solution raised the possibility of people with disability and carers tiring of the 'siloed' way providers and other stakeholders in the sector often approach development and innovation. This was viewed as unnecessary bureaucracy and complications.

Reflections on the Solution: The Strong and Capable Cooperative and beyond

The main reflections focused on the clear need for the Cooperative, the still evolving best balance for income streams and the impact on the disability market.

General reflections

Many providers struggled to commit to a level of engagement necessary to make the vision happen. This raised questions about how providers and the services sector innovate and engage with consumers around innovation.

Diversity in the Foundation Group membership was acknowledged as an issue but not one that impacted the progress and performance of the Foundation Group in the long run. Growing consumer membership was difficult. Regardless, six of the seven consumers did have strong voices; the spread of disability was good, type of people was good – visionary, open and confident to speak up; feel really proud to be part of the group, they are ready to take charge. An exchange with one Consumer member that '...we will be there to help her...' when discussing issues being faced by another member was thought to articulate a core value of the cooperative.

The decision to 'go slow' with the project was a good one but it was also important to listen to the Foundation Group members and adjust pace and process as directed by their learning, growth and readiness.

Moving forward

At the time of the interviews the Project team was looking forward to securing relationships with new stakeholders and partners such as Beyond Bank and the Stretton Centre and keeping the focus on innovation by making connections, being open minded to doing things differently, taking risks, not being precious, and exploring all opportunities as they arise. Carers SA CEO was particularly looking forward to auspicing Strong & Capable through its next phase.

Appendix 8 Surveys choice and control

Overview

A key ILC funding objective is to enhance choice and control.

In June 2021 the evaluation undertook a survey followed by semi-structured interviews to better understand any impact on the ability of the Consumer Foundation Group members as people with disability and carers to exercise choice and control over key aspects of their lives and to effectively exercise self-advocacy in the pursuit to maximise their NDIS goals.

The results of the survey and pre/post interviews provide a high level of confidence that the Strong & Capable Cooperative model will impact positively on the core areas in people's lives that indicate people are able to maximise the value of their plans and ultimately that the NDIS plans transform their lives. If this is not the case people will better understand the gaps and shortfalls.

Profiles

Six of the original seven consumer Foundation Group members were surveyed and interviewed. These six had by this time committed themselves to forming the governance group of the Strong & Capable Cooperative. The seventh had dropped out of the project in December 2020 due to time restrictions and a decision to not join the eventual cooperative Board.

The profiles of the remaining six Foundation Group members are: six females, aged between 45 – 62, two are participants of the NDIS, one is a carer of an NDIS participant, one is a carer of and participant themselves of the NDIS, two are carers of NDIS participants and applying for access for themselves.

All were involved in activities related to the NDIS, the disability sector and/or community groups prior to joining the NRC Project.

Choice and Control Survey – impact on confidence

The survey was adapted from the Personal Growth Initiative Scale 11 (PGIS) by Christine Robitschek (2008)¹⁷. The questions measured confidence in various key participant outcomes for the NDIS.

The results of the survey show that:

- all respondents but one reported increase in confidence in most of the categories. The one that didn't report an increase expressed a high level of confidence already in these areas,
- all but two respondents were carers of people with disability and their responses reflected their confidence for their children or their role as carers.
- all but one reported an increase in confidence to choose their supports and services, to change things in their NDIS plans and an increase in confidence in themselves 'sense of who I am'.

¹⁷ Robitschek, Christine Personal Growth Initiative Scale – II 2008

- The starkest split in responses was for the question ‘...confidence I am in control of my life...’ where 3 reported no change in confidence reporting they already had a high level of control and 3 reported much higher level of confidence. This was based on three factors –permission to exercise their human rights, actual examples of how others have done this and opportunity to share their situation and receive feedback, suggestions etc.
- All respondents shared nuanced experiences that their disabilities or those of their children made the ‘work’ of self-advocacy harder saying it was easier to advocate for some-one else rather than for themselves or their child.
- An unexpected factor to impact positively on confidence was what they learnt from each other, how they could relate to each other’s experiences and the experience of interacting with people with disability with whom they had little previous experience.

Pre/Post Involvement Interviews – value of the experience

Semi structured interviews were undertaken with the Consumer Foundation Group members to explore the impact of involvement with the NRC Project and if it differed from members involvement in other peer/advocacy/consumer groups and if so how.

The data shows that regardless of how involved members were in other groups the NRC Project Foundation Group experience offered them something different. It appears to have had a more positive direct, and tangible impact on their self-esteem and, their sense of their rights as a person with disability or carer of a person with disability. While other groups provided them with information and a forum for peer sharing it seems the Foundation Group experience elevated conversations and relationships to a level where personal context was shared more safely than in other environments, where the nuances of people’s experiences were welcomed and informed workshopped discussions, where the quality of the information was either better or more nuanced/relevant and therefore more usable.

Overwhelmingly, members reported that being among other consumers/carers where the ‘agenda’ was grounded in shared understanding of the consumer experience and issues they faced was different to what they experienced in other groups. This ‘agenda’ invited open conversations, robust exchanges of personal experiences trying to maximise plans and problem solve short falls.

Both the survey results and interviews indicate positive impacts on their ability to maximise their NDIS experience from better goal setting, increased confidence to access evidence reports to be able to ask for supports and services that will make a difference and they feel they are not alone.

While they reported feeling more confident to advocate for themselves, they were still not ‘where they’d like to be’ in relation to being able to access the services and support that best suit their needs, that are flexible, relevant, and financially worthwhile. This last point led to reflections back on how important it was to be able to ‘influence’ the provider market.

Appendix 9 Consumer members personal reflections

The NRC Project, from the start and especially considering the impact of the Covid-19 pandemic, considered it unlikely that a cooperative would be established in a timeframe that would allow for its evaluation as a going concern. However, it was still important that the Project capture the experiences of people with disability and carers involved in the project.

The consumer Foundation Group members agreed to have their reflections and journey's documented as NDIS participants, people with disability and carers of people with disability.

Personal stories were collected from May to September 2021. The activity was conceived to contribute data to extrapolate advice to the NRC Project and the future Strong & Capable Cooperative about what the unique value proposition might be for future members and critical design elements of a service model to enable and support these factors.

About the consumers

Table 12 Profiles of consumer Foundation Group members

Female	Carer of NDIS participant NDIS participant	Involved in parents' groups and online communities with a focus on autism. Strong & Capable board member
Female	Carer of NDIS participant NDIS applicant	Involvement in carer online groups and a micro provider Strong & Capable board member
Female	Carer of NDIS participant	Yanuwa woman from NT. Involved with the aboriginal community in north of Adelaide. Withdrew from the project in December 2020.
Female	NDIS participant	Involved with African community organisations in the north and across Adelaide Strong & Capable board member
Female	Carer of NDIS participant	Involved in mental health and psychosocial disability organisations Strong & Capable board member
Female	NDIS participant	Involvement in peer support and advocacy groups for people with intellectual disability Strong & Capable board member
Female	Carer of NDIS participant NDIS applicant	Involved in mental health and psychosocial disability organisations and peer groups Strong & Capable board member

All the consumers were very active in various disability or community organisations. While some were more experienced than others all had experience with advocacy and community organisations.

All were motivated by changing the sector (the disability market). Benefits to themselves was a bonus.

Reflections on joining the NRC Project

Five of the seven original members shared they had issues or needs when they joined the NRC project. Most reflected they needed more and better information about getting the plan that best meet their needs and maximising the funds in their NDIS plans (either for themselves or their children).

Two shared that they needed advocacy support, that it was easier to advocate for others than for themselves.

As people who were relatively active and empowered, they shared that, yes, involvement with the NRC project did help them. However, there was usually a ‘but’. Themes that reflect this are shared below.

Confidence was raised through increased understanding of there being, ‘...so much more available out there than I thought...’	...but still need support to realise the opportunities
Yes, it was great to have a bigger picture context within which to understand and position their experiences,	...but the support they needed still didn’t exist
Yes, they were more confident to advocate for themselves with providers to have flexible and more individualised supports and services	...but they still lacked a network of quality providers to be able to ‘go to’
Yes, it was exciting to be able to reimagine the nature of goals and ask for supports and services that were more individualised, more relevant, and ultimately more effective	...but there was also fear they would not successfully advocate for themselves or their children with the NDIA/LAC’s
Yes, mixing with providers was a highlight	...but it reinforced that lived experience needed to define the nature of gaps in the market and co-design solutions. Service and support standards should be reimaged through a lived experience lens
Yes, the relationship and co-design ethos of the way the Group operated was great	...but the delays in registration of the cooperative and handover to the Board members left the Group in limbo and started to affect the relationships and quality of co-design
Yes, the discussions and problem solving shared through the workshops was different to anything they had experienced before	...but maintaining the respect of disability and lived experience that made them special was challenged by the need to ‘get things done’

The experiences and journeys of the consumer Foundation Group members reflects the challenges that will face the Cooperative. How to stay relationship and co-design focused valuing and being driven by lived experience? How do you ‘protect’ the empowerment of people with disability, whose experience of disability will never be static, once operational?

Appendix 10 Provider forums

Overview

Two Provider Forums were held on June 9 and August 17, 2021. They were held in collaboration with the Stretton Centre¹⁸ and the Boosting Local Care Workforce¹⁹ (BLCW) Project. The theme was 'Connectedness and strengthening the market'.

The evaluation analysed attendance records and data from feedback forms. Analysis focused on attendance numbers and profile of attendees, synergy of expectations and marketing.

The first attracted 34 attendees and the second 13. Many more registered for than attended both sessions. Most attendees were micro to small providers and located in the north of Adelaide.

Findings

Both forums received positive feedback indicating perceived value of attending the forums.

To inform future planning and gauge interest attendees were asked what they were interested in from future forums. These categories put to the attendees were identified by the original provider Foundation Group members as important areas to strengthen for a robust NDIS market.

Table 13 Provider Forum attendees' interests

Becoming a NDIS Provider	48.84%
How to operate a successful business in the NDIS environment	81.40%
What does it take to become an excellent provider	81.40%
How to work with the Strong and Capable Co-operative	93.02%
Other	11.63%

The responses indicated high level of interest in follow up activities. The area of most interest to providers was to work with the Strong & Capable Cooperative. This feedback supported the notion that providers are motivated to be better providers and see value in being connected to a consumer-led organisation.

Subsequent forums for providers to follow up these areas of interest initially struggled to attract attendees. However, this improved with closer collaboration with the Stretton Centre, and changes to scheduling of events. Review of attendees also indicated that the forums began to develop a following and sense of belonging.

Analysis of marketing data indicates a strong correlation between personal marketing approaches and providers attending forums. Connection to existing provider networks and/or recommendations from colleagues was the main reason people attended.

¹⁸ The Stretton Centre is an enterprise centre in the Playford local council area. It is part of the Playford City Council and provides a services hub where micro and small business access business services.

¹⁹ The BLCW Program aims to develop the capacity of disability and aged care service providers to operate effectively and expand their workforce.

Appendix 11 Public consultations

Overview

Public consultations were organised in the northern Adelaide area. Marketing focused on the Playford and Salisbury communities. The objectives of the consultations were:

- Raise awareness of Strong & Capable Cooperative
- Secure potential members
- Build mailing list
- Build the movement

Three consultations were planned over June/July 2021 at the Grenville Hub in Elizabeth. They were planned for different days of the week and times of the day to accommodate as many people as possible.

The evaluation focused on:

- Attendance numbers and profile
- Engagement with the concept of a Consumer-led Cooperative
- Promotional and marketing strategies

The target cohort for the consultations were people with disability, their families and carers (and circles of support) with an NDIS Plan, or with the potential to secure an NDIS plan living in the north of Adelaide.

At the time the consultations were planned new Covid-19 restrictions were imposed, the Strong & Capable's registration as a cooperative had not been approved. This raised concerns around 'what can we offer them?', 'how do we explain membership? It was decided the consultations would 'test' the concept underpinning the Cooperative and generate a register of interest.

Findings – attendance and engagement

The first event attracted two attendees both with disability and with NDIS plans. Neither lived in the north of Adelaide.

Both supported the concept of a Consumer-led Cooperative mentioning having a voice and doing advocacy as two characteristics that appealed to them. One was very interested in becoming involved the other was more reticent. They heard about the event from a post by one of the Consumer Foundation Group members on disability specific social media site.

They were each provided a 'show bag' of promotional materials and a flier about the Strong & Capable. At this stage there was no capacity to sign up members of the Cooperative.

Reflecting on this experience and that there was no-one registered to attend the other two sessions the remaining two sessions were cancelled.

Feedback on the lack of success of the Community Consultations included.

- Lead time was too short for intermediaries to disseminate information
- Marketing collateral didn't suit the main intermediaries and their cohorts
- More nuanced and personal contact with the cohort was missing

- Intermediaries had people with disability wanting to attend but didn't know who to contact and then found events were cancelled.

The marketing of the Community Consultations included: posts and paid Facebook advertising; Radio ads on Fresh FM; emails through intermediary organisations such as the two local councils, Feros Care and Kudos, government and peak organisations and community programs.

The lack of response indicated failure of all marketing channels. This reinforced the experiences of many organisations and projects to engage people with disability in the north.

- Facebook posts and ads received a significant volume of views it is not clear who viewed them, and they did not translate into attendance numbers or enquiries,
- Fresh FM was identified as having a sizable audience of people with disability the ads did not result in attendance numbers or enquiries,
- Promotion through intermediary who were asked to forward an e-flier through their communications channels was not consistently executed and hence it is not clear if and to whom the e-flier was circulated.

Intermediaries were considered an important communications channel. In November 2021 they were followed up through personal contact and asked the following questions:

- what they did or did not do with the flier
- how effective they thought the materials and messaging were, and
- did they have any suggestions for similar requests more successful in the future

Feedback from intermediaries included:

- not passing on information due to a perceived conflict of interest or that it wasn't relevant to their target client groups
- dissemination was difficult because the marketing collateral was not the most effective format for their 'usual' communications channels. One mentioned a paper flier that could be placed in libraries and at meeting spots would have been more useful. One felt the e-flier was too wordie – '...the middle bit could have been left out and a clearer direction to the web page would have been good'
- others reported that e-fliers were less effective for their clients who preferred personal contact such as attending peer meetings, supported by hard copies of the flier
- One person reported sending it through their organisation communications channels but couldn't say if it had been published
- The Facebook page itself received positive feedback in particular messaging on the page and the video
- Some commented on messaging saying the purpose of the consultations was not clear, and they weren't sure who they could approach to ask questions.

Appendix 12 Trial trading

Following the poor response to the community consultations it was decided to undertake a Trial Trading period to achieve the objectives of testing the concept and generating a register of interest.

The Trial Trading model was thought to address the issues experienced by the public consultations. It offered a free ‘taster’ service in a more personal and private interface.

The model was a time-limited ‘skeleton’ service offer supported by a comprehensive marketing campaign including Facebook ads, local leaflet drop, and radio announcements. Printed fliers were also distributed at community meetings and events, and through existing disability and community groups. Stakeholders previously identified as intermediaries were also asked to circulate the flier.

The service offer was for one free 45-minute consultation. The consultation would focus on providing people advice and assistance with their NDIS plans or applications to join the NDIS. Experienced Support Coordinators acted as consultants.

The Trial Trading was offered from September 20 through to November 23, 2021.

The evaluation was undertaken in two parts:

1. The first was undertaken halfway through the Trial Trading period as a Snapshot analysis of progress to date, and what trends were emerging,
2. The second at the conclusion of the Trial Trading period through interviews with users of the service and the Consultants.

Trial Trading - Snapshot Analysis

The Snapshot data was activity from September 20 through to October 25, 2021.

The data examined was marketing and communications data. What was measured was number of responses to the marketing and communications campaign, source of responses, translation of responses into consultation bookings and eventually successful consultations.

Table 14 Trial trading snapshot data

Total responses to marketing	2 6		
Responses but no bookings	1 5	58% respondents did not book a consultation	
Responses and booking made	1 1	42% respondents made contact to book a consult	
Booking cancelled/not proceeded	5	45% of the 42% cancelled their consult	
Actual consults held	6	55% of the 42% attended their consult appointment	
Responses x marketing type			
Facebook messenger	2 1	4 booked one attended	High 'HIT' rate low conversion rate

Fresh FM	1	1 booked and attended	Not clear what the ad's call to action was
Phone call	2	2 booked and attended	Personal contact/through FG provider member
Expos	1	1 booked and attended	Personal contact/through FG provider member
Through personal referral from a provider	1	1 booked and attended	Personal contact/through FG provider member

Analysis of the Snapshot data showed six successful consultations were conducted.

Projected response numbers were not set for the Trial Trading hence no benchmark was set to measure effectiveness of the strategy. Feedback from the Consultants and Project Team indicated these numbers were disappointing.

At this midway point it was clear that Facebook was the most effective method to reach potential service users. Leaflet drops and radio seemed to generate little results for the investment incurred.

An unexpected source of referrals and bookings was a provider. Providers were not actively marketed to, but some provider Foundation Group members were still connected to the NRC through the Provider Forums. This one provider referred three people.

At the conclusion of the Trial Trading in late November 2021 the number of successful consults was 12. Indicating a consistent response to the marketing and communications campaigns.

Another measure of the marketing and communications was in terms of return on investment of the cost of the activity. The activity was budgeted to cost \$22,753 and at the time of the Snapshot analysis all marketing and promotions activities were executed. The result of this investment was a total of 12 consultations. Four of the consultations were not the result of the primary marketing approaches undertaken. Hence the marketing resulted in eight successful consultations.

Other outcomes such as membership of the Strong & Capable Cooperative were assessed through the User interviews.

Trial Trading – User's experience and reflecting on Proof of Concept

Overview

Over the Trail Trading period 12 people utilised the free consultations.

Six of the 12 participants were interviewed for the evaluation.

The interviews focused on three questions designed to contribute data to test the premise of the Cooperatives service model.

1. did the 'consult' help and if so, how did it improve their situation
2. where they still connected to Strong and Capable or

3. would they use the service again in the future and/or recommend the service to a friend?

Profile of Trail Trading Users

Of the 12 people 10 were already NDIS participants and 2 were seeking to access the Scheme.

10 were women and 2 were men

7 were carers, one of the seven was also a participant, two were applying for the NDIS and three were participants

The six interviewed were one male who needed help to apply for the NDIS, five females all are carers, and one is also a participant

Reasons for requesting support – data from all consultations

All approached the service looking to maximise their NDIS plans because they were struggling with 1) understanding their plan, 2) having the correct and relevant information to make decisions about utilisation of budgeted funds. Other reasons included dissatisfaction with information and advice they were receiving to date and/or finding themselves having to navigate a change in circumstance or pending plan meeting and not feeling adequately aware, informed, or generally unprepared for the meeting. They were specifically interested in knowing about setting goals, understanding what supports can be included, and the types and nature of reports they required to verify their claims.

Experiences, Reactions and Impacts to the Trail Trading support – data from the interviews

All approached the service because they were not satisfied with their current support coordination service and/or were not receiving any discernible assistance that was improving their situation.

When asked about their experience of the Trail Trading consultations they shared they felt they were talking to people who knew a lot about the NDIS, people who were able to answer their questions and advise on their personal situation and assist in progressing their situation in a satisfactory way.

The interviewees responses were overwhelmingly positive, with all reporting that they had their issues addressed, that the consultation had improved their situation.

3 of the 6 were currently still connected to the service (ie receiving Support Coordination and mentoring from one of the consultants); a fourth person had lost touch and wanted to reconnect with a view to using the service²⁰.

All four said they would use the service in the future and/or continue to use the service and would refer friends to the service.

Four of the six said they would join Strong & Capable and that the \$50 membership was not a barrier to them joining. The other two spoke of it favourably but one said they didn't need to join because they had the support they needed now, and the other didn't answer the question although they did say they would continue to use the service. Two respondents

²⁰ The evaluator facilitated contact between this person and the Support Coordinator. They have since connected.

said they would refer friends and one sent a referral through after the interview to the evaluator.

They all applauded the depth and breadth of knowledge of the Support Coordinators, they highlighted that the information/advice was relevant and appropriate to understanding about navigating the NDIS and maximising their plans. They reported the information and advice as being better than they had received to date from other services.

It was clear they all felt comfortable to get back in touch with the service.

One person who sought advice to apply for the NDIS was able to report their application had been accepted.

Trail Trading Consultants

Two Support Coordinators provided the Trail Trading free consultations. One was a consumer Foundation Group member and member of the Strong & Capable inaugural Board. The other was a participant of the Provider Forums.

The consultations were 45minute free sessions. The sessions were planned to happen face to face at the Stretton Centre in Munno Para. Some though occurred over the phone or Internet via Zoom. The Support Coordinators were paid for their time by the NRC Project.

Their feedback was collected via a focus group type format to give them an opportunity to share their experiences with each other and 'bounce' off each other/act as reference point for each other. Unstructured questions were used to guide discussion of their experience, in particular things that worked and things that didn't, what could be improved, what most impacted the effectiveness of the sessions, and any recommendations moving forward.

Both quickly shared they were surprised the offer wasn't taken up by more people.

They shared comments on the rollout of the Trail Trading:

- 45minutes was not enough. Consults went over 45mins.
- More than one person attended the consults, ie family members or advocates
- Users presented with complex relationships and complex situations, which required time to get the background information
- Consultants were not provided with background information which would have helped maximise time. There was an expectation that they would.
- They both struggled with what next conversation. What they could offer users. The offer most in their control was to provide paid Support Coordination.

When asked if they could discern any trends, they commented they noticed people are not getting connected to the right supports nor getting guidance about supports at the start of their plans. They are not assisted to understand 1) their plans and how they work; 2) about assistive technology; 3) how to connect to services.

They observed people were still struggling to get onto the NDIS, especially having issues with collecting effective evidence. Other people who used large NGO's that represent their disability (ie a peak) were being 'short changed', not informed of the full scope of what they could choose. Most were plan managed and some self-managed. Most consults were about reviews of plans and new goals and options to utilisation of funds.

Endnotes

