

24/03/2025

Disability Support Service  
Ministry of Social Development  
PO Box 1556  
Wellington 6140

## **Feedback on: Disability Support Services Discussion Document**

Tēnā koe

Age Concern New Zealand (ACNZ) welcomes the opportunity to provide feedback on the Ministry of Social Development's discussion document on Disability Support Services.

Age Concern New Zealand agrees with the Minister for Disability Issues that "a fair, transparent, sustainable and high quality disability support system is needed that delivers better outcomes for disabled people based on their needs."

We support the comments and perspectives of providers working directly in the disability sector, for example, Stroke Aotearoa NZ. Disability support providers have valuable knowledge, experience and stories about what works best for people living with disabilities.

The discussion document states on page 2 that Disability Support Services provide supports to about 50,000 disabled New Zealanders. It also states that approximately 100,000 New Zealanders are provided with equipment modification services. It would have been helpful to also provide a demographic breakdown so that age, ethnicity and gender comparisons could be made. It would also be useful to know the number of people receiving Disability Support Services who live in urban areas compared to those living rurally. Although this information may seem out of scope for the current review it would help us to make meaningful comment.

Aotearoa New Zealand has an increasing number of older people, with the number of people aged 65+ expected to increase to 1.2 million within the next decade <sup>1</sup>

We know that some older people have a lifelong disability while others develop a disability later in life. Typically, increasing age comes with growing rates of disability and health need in the over 65 age group. Forty-six percent have mobility problems, 28% agility problems,

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<sup>1</sup> <https://www.officeforseniors.govt.nz/better-later-life-strategy>

11% have sight issues and 10% have trouble remembering.<sup>2</sup> Among over 75-year-olds, 21% have ischemic heart disease, 11% have diabetes, 52% have arthritis and 15% have a mood or anxiety disorder. Most of the older people that receive home and community support services are over 75, with 50% of the over 85 group living at home receiving home and community support.

Age Concern New Zealand wants to see all people with disabilities, including those aged 65+, receiving the disability support services they need, so they can live independent, healthy and connected lives.

**Age Concern New Zealand considers flexible individualised funding linked to the person's plan, with oversight would work best for disability services support.** This enables disabled people to get on with their lives utilising support that best reflects their individual needs and changing condition.

## About Age Concern New Zealand

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Age Concern New Zealand is a trusted charity working in local communities throughout Aotearoa New Zealand to support older people, their friends and whānau. We have 29 local Age Concerns operating in 40 locations throughout the country and a national office based in Wellington.

Our strategic goal is:

*Every older person feels connected, has positive choices and can age well.*

Our values of Dignity. Wellbeing. Equity and Respect for older people are our guiding lights and underpin everything we do.

Our core services include advocacy and public awareness, social connection, health promotion, elder abuse and neglect prevention, and providing support through expert information, advice and referrals.

We are active and vocal on relevant issues and work to ensure older people stay connected with their family, friends and community. We inform government and other national bodies on issues of concern for older people.

Local Age Concerns are the first port of call for older people living in their community, providing a range of services and social activities to meet their needs.

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<sup>2</sup> [https://www.tewhaturora.govt.nz/assets/Publications/Health-status-reports/HNZ-TWO-Health-Status-Report\\_FULL.pdf](https://www.tewhaturora.govt.nz/assets/Publications/Health-status-reports/HNZ-TWO-Health-Status-Report_FULL.pdf)

## Our Comments

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We do not have responses to all of the questions in the submission form but have retained the numbering used in the template provided where we do have a comment to make.

### **1. What changes can you suggest that would ensure the assessment tool and process is fair, consistent and transparent?**

- We hear that the assessment tool and process are applied inconsistently across the country. This would inevitably result in inconsistent and variable disability support being provided, leading to inequitable outcomes. Ongoing staff training would be a useful strategy to address this, along with quality review processes to support good practice.
- People with disabilities, their whānau and carers, need an easy, transparent process that is clearly explained to them and straightforward to navigate. It is difficult to work your way through processes such as disability support services, especially when a change occurs suddenly to a person's health and wellbeing.
- The support options available to a person will influence their ability to live well with their disability, both initially and as their condition changes over time. Assessors play a key role in guiding people through this process and require excellent communication skills and the ability to build rapport with people of all ages and from diverse cultures.

### **3. Do you support the needs of carers being specifically assessed alongside those of the disabled person? Why /Why not?**

- Yes, we strongly support the needs of carers being specifically assessed alongside those of the disabled person. The carer may at times be an older person who suddenly finds they need to care for a partner, adult child or their own parent. This is a huge life change which can be physically, emotionally and financially demanding. It may lead to the carer becoming isolated from their social networks and support which would contribute to a sense of loneliness.
- We support the carer being specifically assessed and having the opportunity to speak freely and privately to the assessor about their support needs. They are likely to want to prioritise the disabled person they are caring for but will themselves also need support.

- We recommend that the carer assessment is not a one off situation but is carried out on a regular basis so that any changes to their needs over time can be factored into the disability support provided.

**4. What considerations in respect to carer’s situation should be taken into account in order to link them to, or provide, the support needed.**

- The impact of the carer’s own health and wellbeing on their ability to care for a disabled person. For example, the carer may have or develop a disability or health condition which would place them under considerable strain trying to provide care for a disabled person.
- The impact of their caring role on their social support networks and sense of emotional wellbeing.
- The impact of their caring role on the carer’s employment and income.

**9. Do you prefer Option 1 (link flexible funding to the person’s plan, with oversight of how it is used) or Option 2 (adjust current lists of what can and can’t be funded using flexible funding?) Why?**

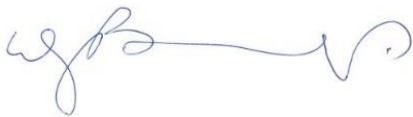
- We prefer Option 1: linking flexible funding to a person’s plan, with oversight of how it is used. This gives disabled people as much control as possible over their circumstances and choices. We believe disabled people and their whānau and carers are well able to manage the responsibilities of flexible funding. The more agency people have the more they can live with dignity, thrive and manage what is happening for them.
- Individualised flexible funding enables a disabled person to use the support for their actual needs and aspirations. ACC have operated this system successfully for many years giving people with disabilities and injuries more control and choice over their disability support. An individualised funding model has good evidence behind it.
- In contrast, lists of what can and can’t be funded may not cater for the specific and changing needs of a person with a disability. Generally the lists may make sense, but it is people’s lived experience and daily needs that must be catered for and respected.

## Closing comment

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Thank you again for the opportunity to provide feedback on the Disability Support Services Discussion Document. We look forward to hearing the outcome of the consultation process and working alongside the sector to ensure people with disabilities can live their best lives.

Nāku noa, nā,



Karen Billings-Jensen  
Chief Executive  
Age Concern New Zealand