

Australian disability centre closures result in nearly a dozen deaths

By Max Newman
26 July 2019

The largest remaining state-run disability facility in the Australian state of New South Wales is being closed as part of the National Disability Insurance Scheme (NDIS). The Stockton Centre in Newcastle, which has approximately 350 residents with multiple and complex disabilities, is scheduled to cease operating completely next year.

According to staff at the centre, nearly a dozen former residents have died already since 2017 after being moved to typically under-funded “group homes,” often run by charity organisations. The details remain shrouded in mystery, supposedly because of government privacy regulations. However, two of the deaths, which occurred in May 2017, were suspected to be due to dehydration. A third victim was hospitalised after suffering pneumonia.

Under the NDIS, participants must “buy” services from private operators, with their funding set by care plans imposed by a cost-cutting government agency. This is a sweeping privatisation of services, creating a disability “market” in which operators must compete for contracts by gutting programs and cutting the wages and conditions of disability workers.

Stockton Centre is one of three facilities slated for closure in New South Wales (NSW), including Tomaree in the Port Stephens area and Kanangra in Morisset. This is part of the underlying premise of the NDIS: the government should no longer be responsible for the care of people with a disability.

Since the NDIS national rollout began in 2016 a number of Stockton Centre residents have been transferred to smaller privately-run group homes. In the likely event that these operators cannot cope with their clients’ complex needs, residents could end up in psychiatric hospitals or dying due to untreated complications.

The nursing staff at Stockton, who are expertly familiar with the residents’ health and other requirements, are deeply concerned for both the lives of the residents and their own jobs. In May, Family and Community Services (FACS), the state government agency overseeing the closures, announced that 284 of the 410 nursing staff members would be offered transfers to group homes, leaving 126 without jobs.

Another 350 positions would be gone by the end of the year, including doctors, nursing managers, clerks, disability support workers, support officers, day program staff, tradespeople, drivers, security staff and kitchen hands.

FACS said no voluntary redundancy packages would be offered. Nor would there be any option of remaining in the public sector. Employees would have to transfer to the non-government disability sector and would be guaranteed their wages for only two years.

Stockton and Kanangra also have onsite doctors who look after the residents, and specialists visit the centres once a month. In Stockton, they include a neurologist, geriatrician, gastroenterologist and ophthalmologist. Rehabilitation physicians and respiratory physicians visit when necessary.

None of these medical resources are on hand in the group homes. The residents must rely on the chronically under-funded public hospital system and, in some cases, are forced onto long waiting lists.

The doctors at Stockton, with years of experience supporting people with complex disabilities, have an uncertain future, with no plans for them to be transferred to the private sector.

The staff employed at the large disability centres are certified Registered Nurses, Enrolled Nurses or assistants-in-nursing. By contrast, the group homes operate with disability support workers who typically

require no formal qualification, although some services require basic vocational training in disability or community service.

In response to the growing hostility and concern of the nurses, the state Nurses and Midwives Association announced limited paperwork bans at Stockton in June. It also organised a delegation of nurses from Stockton and Kanangra to meet Disabilities Minister Gareth Ward and opposition Labor Party MPs.

No transcript of the meeting has been released, but the media reported that the staff told the minister of the near dozen deaths and their concerns over staffing. A union organiser claimed the meetings “went well,” with Ward “willing to hear” the concerns, and Labor MPs “very receptive.”

The whole operation was designed to head off resistance and prevent any unified strike action across the state. The meetings also covered over the role of the unions and the Labor Party in introducing the NDIS.

It was the Greens-backed federal Labor government of Julia Gillard that established the NDIS in 2012. Heralded as a “one in a lifetime” reform, the scheme was backed by the unions and the Liberal-National Coalition, which has continued to impose the NDIS.

From the outset, the WSWS warned that the NDIS was a pro-business blueprint designed to shut down state-run disability centres, shift people with a disability into a voucher-based disability market and strip away Disability Support Pension entitlements.

A NSW Ombudsman Report on Reviewable Deaths of people with a disability in residential care, released late last year, examined 494 deaths between 2014 and 2017, and found that 42 were preventable. A key issue was staff “recognising and responding to critical situations” and not consistently calling for emergency help as early as possible. Significant problems were also identified in staff administering first aid and waiting for after-hours doctors, rather than calling an ambulance.

As the mounting evidence about the NDIS demonstrates, the conditions of people with a disability, their families, carers and the staff employed to support them, are seriously deteriorating.

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