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Senator Lucy Gichuhi
Chair
Senate Community Affairs Legislation Committee
Parliament House
CANBERRA ACT 2600

Dear Senator Gichuhi

Correction of evidence given at 2018-19 Supplementary Budget Estimates hearing on 25 October 2018

I am writing to correct evidence and clarify an answer provided to the Committee during its examination of the National Disability Insurance Agency in relation to Outcome 3.

I refer to the below extract from **page 27** of the transcript:

Senator STEELE-JOHN: Yes. They've submitted two quotes and are now six months in the waiting period for delivery of that piece of equipment. And I think other sign-off processes from the agency are impeding the delivery of the equipment. So I'd like to ask you: what is the average wait time for approval of AT and is the agency taking any proactive steps to deal with what seems to be a systemic problem?

Mr De Luca: I think there are a number of elements to the AT process for participants that need to be improved—firstly, the pace at which we can get the right funding within packages for participants. Then there is the second part which is between the participants' use of support coordinators to find providers that deliver the product. In terms of the planning process, the first step that we've taken is to remove the need for quotes for tier 1—so simple products up to \$1,500. That reflects about 50 per cent of the request of participants. We introduced that in Q4 of last financial year, and the feedback's been positive on that one. We're now doing some work to develop the right tools so that we can actually eliminate the need to go out and get multiple quotes—so that we can have a tool to work out what's reasonable and necessary because we recognise how challenging it is for some participants in certain locations to find providers to find the quotes so. We expect that tool to be in place by the end of this calendar year and being tested. Thirdly, we're also removing the need for quotes for replacements and repairs, so that we can have automatic funding in the plans. The final piece is that we've centralised our planning process to look at AT requests where there are quotes now, because we recognise the time taken.

Your point is that there is slowness in the process and we need to address that. In terms of your question of the average times, where it's not automatically put into plans and there is a requirement to go out get quotes, ***last financial year it took on average of 76 days from when the participant identified they wanted AT.***

I wish to make the following clarification and correction:

- The average length of time to complete an NDIS plan for the 12 month period ending 30 September 2018 was 70.5 days. This includes plans that have Assistive Technology.
- The 76 days cited above refers to the average timeframe for receiving Assistive Technology and Support Coordination for the 12 month period ending 30 September 2018.

Yours sincerely

Robert De Luca
Chief Executive Officer
National Disability Insurance Agency

30 November 2018