

ECEI INTERIM PLANS

Hearing: 06 August 2020

Hansard Page: Written

Question:

1. On 26 June 2019 the Government announced an Early Childhood Early Intervention (ECEI) remediation plan following feedback from the Autism Advisory Group (AAG), to address delays backlogs for children with disability in accessing supports, including 6 month 'interim plans' for children waiting longer than 50 days for an NDIS access decision. Interim plans were guaranteed to be replaced by a full NDIS plan no later than six months after being issued.

- a. Have all of these interim plans now been replaced by full NDIS plans? Have any of the interim plans been rolled over? [If yes] could data be provided?
- b. Where is backlog for ECEI currently? Has it increased in the past 12 or six months?
- c. Did the NDIA track choice and control against these 'cookie cutter' style plans? Could any available data on choice and control for interim plans be provided?
- d. How many ECEI participants' plans increased from \$10,000 as part of their first full plan? How many ECEI participants' first full plans were under \$10,000?

Answer:

- a) There were 2,203 six month interim plans approved between 1 July 2019 and 31 December 2019, with no interim plans approved after 31 December 2019. Approximately 600 of these interim plans have been extended for an additional period of three, four, five or six months to allow families time to utilise the funding; these extensions were on an opt-in basis and families also had the option of a full plan review.
- b) As at 30 June 2020, 95 per cent of first plans for children aged 0-6 years are completed within 50 days of the access request decision.
- c) Interim plans were structured in the same way as other first plans. As some of the interim plans are still in progress (due to plan extension), the National Disability Insurance Agency does not have fulsome data to answer this question.
- d) Of the six month interim plans that have had a subsequent plan review:
 - 29 per cent of the interim plans had a subsequent annualised plan budget of less than \$10k.
 - 20 per cent of the interim plans had a subsequent annualised plan budget between \$10k and \$15k.
 - 15 per cent of the interim plans had a subsequent annualised plan budget between \$15k and \$20k.
 - 18 per cent of the interim plans had a subsequent annualised plan budget between \$20k and \$25k.
 - 18 per cent of the interim plans had a subsequent annualised plan budget of more than \$25k.

Inquiry into Autistic people in Australia and a national autism strategy

Reference No: SQ20-000231

OUTCOMES FOR PARTICIPANTS WITH AUTISM REPORT

Hearing: 06 August 2020

Hansard Page: Written

Question:

2. The NDIA report 'Outcomes for participants with ASD 30 June 2018' noted 29 per cent of NDIS participants with an approved plan had a primary disability of Autism Spectrum Disorder (ASD), making it the largest primary disability category for the NDIS, and that population and Scheme prevalence rates for ASD have been increasing over time.

- a. What current percentage of participants currently have ASD as their primary disability?
- b. Why is plan underutilisation higher for ASD participants? Is this trend still increasing?

Answer:

As at 30 June 2020, 31 per cent of active participants had Autism as their primary disability. This compares to 29 per cent as at 30 June 2018.

Utilisation rates for participants with Autism are consistent with the Scheme average. As at 30 June 2020, utilisation¹ for participants with Autism was 71 per cent, compared to 70 per cent for all Scheme participants.

¹ Based on payments and committed supports over a six month period, excluding the most recent three months of experience.

Inquiry into Autistic people in Australia and a national autism strategy

Reference No: SQ20-000232

OUTCOMES FOR PARTICIPANTS WITH AUTISM REPORT

Hearing: 6 August 2020

Hansard Page: Written

Question:

2. The NDIA report 'Outcomes for participants with ASD 30 June 2018' noted 29 per cent of NDIS participants with an approved plan had a primary disability of Autism Spectrum Disorder (ASD), making it the largest primary disability category for the NDIS, and that population and Scheme prevalence rates for ASD have been increasing over time.

c. Page 7 notes further research into the ECEI gateway would be undertaken. Could this research be produced to the committee?

Answer:

The National Disability Insurance Agency (NDIA) has not undertaken any specific research into the Early Childhood Early Intervention gateway subsequent to publication of the report 'Outcomes for participants with Autism Spectrum Disorder 30 June 2018.' The NDIA has recently commenced work on improving the capability of the data systems and the underpinning methodologies to capture accurate and consistent data for children who receive support from the National Disability Insurance Scheme (NDIS) outside of an individual budget and plan. This work will continue through 2020. The NDIA will provide any resulting analysis when it becomes available.

In the interim, the Report to the COAG Disability Report Council for Q4 of Y7 Full report can be accessed here: <https://www.ndis.gov.au/about-us/publications/quarterly-reports>. The report provides a high level overview of the engagement of children supported by NDIS partners on page 25.

Inquiry into Autistic people in Australia and a national autism strategy

Reference No: SQ20-000233

OUTCOMES FOR PARTICIPANTS WITH AUTISM REPORT

Hearing: 06 August 2020

Hansard Page: Written

Question:

2. The NDIA report 'Outcomes for participants with ASD 30 June 2018' noted 29 per cent of NDIS participants with an approved plan had a primary disability of Autism Spectrum Disorder (ASD), making it the largest primary disability category for the NDIS, and that population and Scheme prevalence rates for ASD have been increasing over time.

d. The report states on page 22 that Autism has a higher percentage of males (76%) than any other disability type. Could updated data on the number of female vs male participants be provided?

Answer:

The percentage of participants with Autism as a primary disability has increased from 29 per cent as at 30 June 2018 to 31 per cent as at 30 June 2020.

Over the same period the percentage of participants with a plan with Autism as a primary disability who are male has fallen slightly, from 77 per cent as at 30 June 2018 to 74 per cent as at 30 June 2020. The percentage of participants with a plan with Autism as a primary disability who are female increased from 22 per cent to 24 per cent over the same period.

Gender	30-Jun-20		30-Jun-19		30-Jun-18	
	N	%	N	%	N	%
Active participants	391,999	100%	286,015	100%	172,333	100%
Autism is the primary disability	122,830	31%	85,184	30%	50,308	29%
- Male	91,478	74%	64,533	76%	38,490	77%
- Female	29,561	24%	19,240	23%	10,861	22%
- Unknown	1,791	1%	1,411	2%	957	2%

Inquiry into Autistic people in Australia and a national autism strategy

Reference No: SQ20-000234

OUTCOMES FOR PARTICIPANTS WITH AUTISM REPORT

Hearing: 6 August 2020

Hansard Page: Written

Question:

2. e. Autism Awareness Australia has highlighted that the true incidence of autism in girls and women may be 2:1 (2 boys for every girl) and that there is a growing body of work indicating autism just presents differently in girls. AAA's website states "Parents with daughters on the spectrum will often share frustrating tales of how difficult it was to get a proper diagnosis for their daughters, while many autistic women did not receive diagnoses until adulthood".

Is the NDIA doing any specific work to rollout the NDIS to females with autism, particularly in the ECEI group? Would this be a consideration of an Autism Strategy?

Answer:

The National Disability Insurance Agency (NDIA) is currently working collaboratively with a broad range of Autism representatives and stakeholders across the sector to ensure the National Disability Insurance Scheme (NDIS) is responsive and appropriate for all people with Autism across all age groups, including children and females with Autism.

The NDIA is aware that the *National Guideline for the Assessment and Diagnosis of Autism Spectrum Disorder in Australia* notes that additional clinical attention is needed on the early detection and identification of Autism in girls and women through appropriate diagnosis and assessment tools.

The Guideline identified that greater attention and care is required for females, older age groups and people from rural and remote locations. This includes the observation that diagnostic tools may be more sensitive to the male phenotype and that clinicians should ensure that they apply these methodologies appropriately for females where the representation can be different.

With regards to the NDIS, it is important to remember that a diagnosis is not a pre-requisite for children aged 0-6 years with developmental delay or disability receiving supports from an NDIS Early Childhood (EC) Partner in their area. EC Partner organisations have appropriately qualified and experienced staff who work with families to gather information and provide supports. EC Partners also work with families to help them identify what supports will be most beneficial for their child.

If necessary, EC Partners complete assessments to support decisions about the most suitable pathway of supports to meet a child's needs. NDIA Access Assessors work closely with EC Partners during the assessment process to request any evidence required to make an access decision.

Inquiry into Autistic people in Australia and a national autism strategy

Reference No: SQ20-000235

HELPING CHILDREN WITH AUTISM AND THE NDIS

Hearing: 06 August 2020

Hansard Page: Written

Question:

3. On 25 January 2019 the NDIA published a media statement “to reassure people with disability, their families and carers that any autistic person eligible for the National Disability Insurance Scheme (NDIS) will continue to receive the reasonable and necessary supports they need”.

The statement compares supports under the Helping Children with Autism (HCWA) program and explicitly states “claims of the NDIA clawing back support outlays for developmental / autism conditions, particularly in children, are not correct.”

Some stakeholders in Victoria have made comparisons between the HCWA and the NDIS, in particular pointing to plans that are underfunded by the NDIA and don’t provide adequately for therapies required by children with Autism. They also seem to believe that equipment was better funded under the HCWA. Additional shortfalls and problems have been experienced in moving therapy consultations online due to the pandemic, which has necessitated the purchase of additional equipment within current plans, and thereby reducing access to other supports.

a. Have these concerns been raised with the Agency? How do these reports fit with the NDIA’s stated claim that ‘any autistic person eligible for the National Disability Insurance Scheme (NDIS) will continue to receive the reasonable and necessary supports they need’?

b. Is the NDIA aware of any discrepancies in funding between the HCWA and NDIS? If so, can you provide the Committee with the number plans this applies to, and the variation in funding each recipient received when moving from HCWA to NDIS?

Answer:

a. The National Disability Insurance Agency (NDIA) has been made aware of the concerns raised by the sector and stakeholders. Under the National Disability Insurance Scheme (NDIS), participants are funded for ‘reasonable and necessary’ supports that are individually tailored to their needs and help them meet their goals. This is unlike the Helping Children with Autism (HCWA) program which provided funding of \$12,000 over two years (max of \$6,000 per year) for early intervention services, resources and other supports which could be used until the funds were expended or the child turned seven years of age. NDIS funding is not capped at \$12,000 over two years nor does it cease when a child turns seven years of age, provided the child remains eligible for NDIS supports.

To help participants continue to receive their NDIS funded supports and services during the COVID-19 pandemic, the NDIA has temporarily broadened the flexible approach to purchasing low cost assistive technology items. Additionally, if due to COVID-19, a child’s disability support needs change, including where there is a need for additional hours of

support, or there is not enough NDIS funding in the child's plan to pay for changed supports, the NDIA is able to make changes through a plan review. Participants and their families/carers are encouraged to contact the NDIA if they required additional supports. Special teams of planners in the NDIA are available to help further explain plan flexibility, make changes or discuss plan review options during the pandemic.

- b. Data held by the Agency indicates that children with Autism receive more funding for therapies with the NDIS than they received through the HCWA program.
- Up to 30 June 2020, 17,578 children under seven years diagnosed with Autism have transitioned from the HCWA program to the NDIS.
 - The average annual NDIS plan funding for these children is \$23,358.
 - Of the 17,578 children, fewer than 3 per cent had plans with an annualised value less than \$6,000.