



Senate Select Committee on COVID-19
Answer to Question on Notice

Australian Government's response to the COVID-19 pandemic

Reference No: SQ20-000180

ASSESSMENTS

Hearing: 01 May 2020

Hansard Page: Written

Question:

Has the Agency been made aware of the challenges people face completing assessments as a result of Coronavirus and social distancing restrictions?

Answer:

The National Disability Insurance Agency (NDIA) is not aware of any specific challenges.

The volume of access requests received across the first four months of 2020 averages approximately 2,000 per week, and this rate has not declined in April. This would indicate there is not a significant challenge in completing assessments.



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ASSESSMENTS

Hearing: 01 May 2020

Hansard Page: Written

Question:

If so, what is being done to assist people in completing their applications and assessments in a timely way?

Answer:

On 27 April 2020, the National Disability Insurance Agency (NDIA) released the Access Request Forms (ARF) and Supporting Evidence Forms (SEF) to be downloaded directly from the National Disability Insurance Scheme (NDIS) website in accessible formats. This provides easier access to these forms for people wishing to apply for the NDIS and for treating health professionals to upload supporting documents.

Treating health professionals can complete SEFs or Part F of the ARF outlining the applicant's impairment and details related to their permanence and functional impacts. These can then be emailed to the NDIA.

From 27 April to 30 April 2020, over 3,000 ARFs were downloaded from the NDIS website.

Australian Government's response to the COVID-19 pandemic

Reference No: SQ20-000182

PSYCHOSOCIAL

Hearing: 01 May 2020

Hansard Page: Written

Question:

Has there been a decline in applications received and assessed for people with psychosocial disability throughout the Coronavirus period?

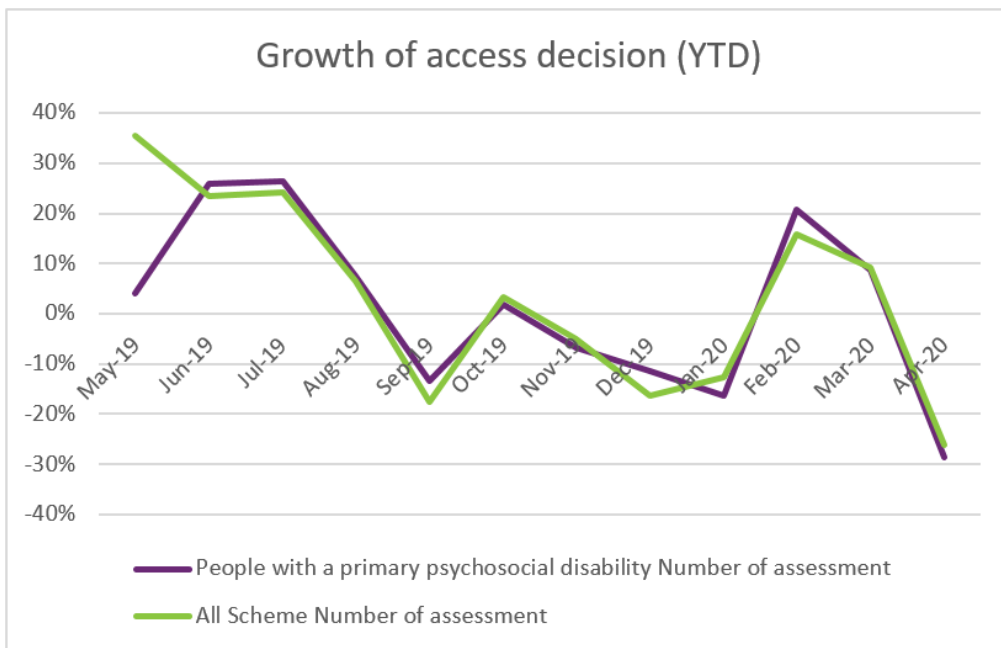
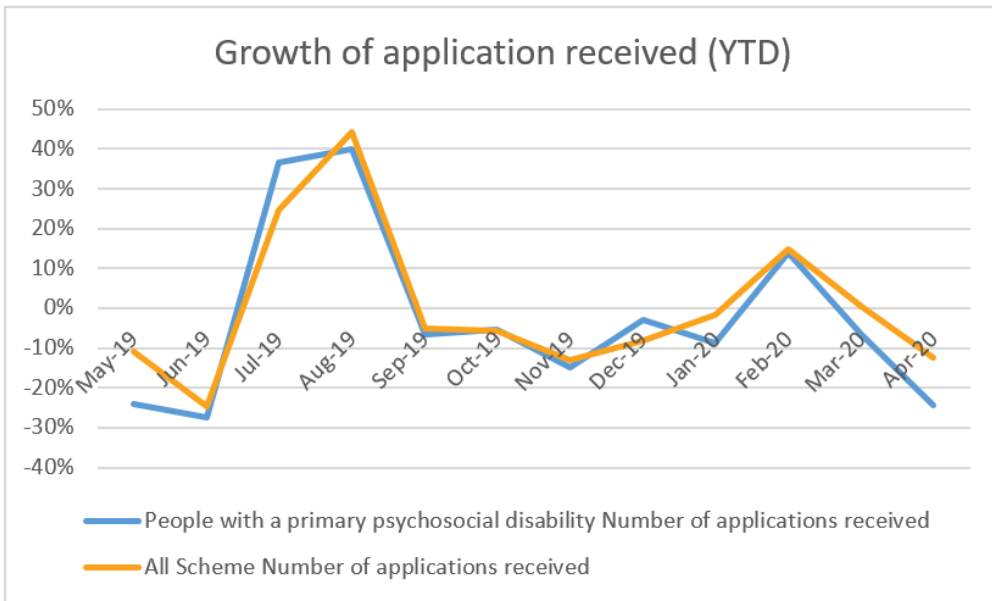
Answer:

The table below shows the number of access requests, and the number of access decisions made for people with a primary psychosocial disability compared to all Scheme participants, as at 30 April 2020.

There is a lot of volatility in the number of access requests and access decisions each month and hence the results should be treated with caution. While there was a drop in the number of access requests submitted by people with a primary psychosocial disability in March and April 2020, the number of access decisions made is comparable with all Scheme participants. The general trends observed for people with a primary psychosocial disability applying for the Scheme have been largely consistent with all Scheme participants throughout last year (including the Coronavirus period), as indicated by the table and charts below. It should also be noted, that some of the drop in access requests and access decisions is related to the higher number of public holidays in April.

Month	People with a primary psychosocial disability				All Scheme			
	Access requests	% change	Access Decisions	% change	Access requests	% change	Access Decisions	% change
Apr-19	1,670		1,076		10,878		6,348	
May-19	1,270	-24%	1,120	4%	9,689	-11%	8,600	35%
Jun-19	923	-27%	1,411	26%	7,304	-25%	10,606	23%
Jul-19	1,261	37%	1,782	26%	9,108	25%	13,181	24%
Aug-19	1,765	40%	1,915	7%	13,131	44%	14,052	7%
Sep-19	1,651	-6%	1,658	-13%	12,488	-5%	11,595	-17%
Oct-19	1,563	-5%	1,690	2%	11,784	-6%	11,969	3%
Nov-19	1,333	-15%	1,577	-7%	10,262	-13%	11,358	-5%
Dec-19	1,293	-3%	1,397	-11%	9,433	-8%	9,515	-16%
Jan-20	1,180	-9%	1,168	-16%	9,282	-2%	8,323	-13%
Feb-20	1,345	14%	1,411	21%	10,673	15%	9,649	16%
Mar-20	1,255	-7%	1,535	9%	10,724	0%	10,526	9%
Apr-20	951	-24%	1,097	-29%	9,386	-12%	7,773	-26%
Total	17,460	-2%	18,837	2%	134,142	0%	133,495	3%

Note: Decisions made in one month could relate to the applications made in previous months.





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Australian Government's response to the COVID-19 pandemic

Reference No: SQ20-000183

MENTAL HEALTH PSYCHOSOCIAL SECTOR

Hearing: 04 May 2020

Hansard Page: Written

Question:

4. Further to my questions at the committee hearing are you aware of reports that people aren't using telehealth sessions for very long and not to the same extent as they would face-to-face?
5. If so are you explaining the reasons? If so, what are they?
6. If so, is the agency working with providers to ensure people remain engaged with their providers and receive the care and support they require?

Answer:

4. Yes, the National Disability Insurance Agency (NDIA) is aware of such reports. This is being reported to us directly by service providers and by psychosocial disability stakeholders through our fortnightly Covid-19 teleconferences.
5. The reasons received through feedback are:
 - Some participants find it difficult to continue a phone or video-conference session for more than an hour and want to finish off the session at an earlier time than face-to-face sessions.
 - Due to physical distancing, participants do not want to move around in the community to do practical tasks, which were regularly planned for the session times.
 - Lack of confidence by participants in using teleconference platforms such as Zoom and Microsoft teams.
6. Yes. The NDIA is implementing strategies to encourage participants with psychosocial disabilities to remain engaged with service providers. There is a program of proactive telephone follow-ups with vulnerable participants, contacting them by phone on a regular basis.

Our responders discuss use of services and encourage participants to consider health advice and their support needs in making judgements about the level of face-to-face, telephone and video-conferencing contact they wish to have.

The NDIA, through its website, has provided a significant body of information and advice to service providers in relation to greater flexibility of plans, increased support for low cost assistive technologies and increased financial assistance to service providers.

In the week ending 1 May 2020, weekly payments for participants with a psychosocial disability were 13 per cent higher than the average weekly payments in March 2020 and 22 per cent higher than average weekly payments in February, suggesting services and support for these participants is continuing.