

Assistive Technology

Reference No: SQ18-000364

**NDIA ANALYSIS ON THE PROVISION OF AT - IMPACT ON FAMILIES /
CARERS**

Hearing: 22 November 2018

Hansard Page: N/A

Question:

Has the NDIA analysed the provision of timely and functionally appropriate Assistive Technology (AT) to NDIS participants, and the impact that has on their families and/or carers-support workers in reducing physical injury and the need to accessing respite funding or other assistance?

- (i) If yes, what are the results of this analysis?
- (ii) What is happening to reduce these burdens for participants and their families and/or carers-support workers?

Answer:

The National Disability Insurance Agency (NDIA) has not undertaken this analysis due to limitations in the current data.

The NDIA has a number of projects underway to improve the identification and timely provision of Assistive Technology (AT) supports that will provide better outcomes for participants and those who provide their personal care.

The NDIA has implemented dedicated AT inboxes to better manage participant escalations and requests (www.ndis.gov.au/about-us/contact-us/at-offices.html).

Assistive Technology

Reference No: SQ18-000365

NDIA ANALYSIS ON UNDERSPENDS - IMPACT ON CHILDREN

Hearing: 22 November 2018

Hansard Page: N/A

Question:

Has the NDIA done analysis on how underspends of participant funding allocations could impact on the development of children participants as their AT needs rapidly change, and on adults, especially those with degenerative conditions?

- (i) If yes, what the results of this analysis?
- (ii) What risks does delay in meeting changing AT needs pose to future NDIS funding outlays?

Answer:

The National Disability Insurance Agency has not undertaken this specific analysis.



Parliamentary Joint Standing Committee on the National Disability Insurance Scheme
Answer to Question on Notice

Assistive Technology

Reference No: SQ18-000366

EXTENDED PLAN FUNDING PERIODS

Hearing: 22 November 2018

Question:

Has the NDIA considered replacing Annualised Plans with flexible - say 3-5 year bloc (Plan) allocations - to assist with the provision of AT for developmental or degenerative conditions, and other supports?

- (i) If yes, can you detail these considerations?
- (ii) Does a 12 month funding process provide sufficient stability for the system?

Answer:

The National Disability Insurance Agency (NDIA) already supports longer plan durations and has a number of activities underway to ensure participants are able to elect for longer plans where appropriate.

The length of a plan does not affect system stability.

Assistive Technology

Reference No: SQ18-000367

NDIA REJECTION OF AT RECOMMENDATIONS

Hearing: 22 November 2018

Question:

The NDIS has taken steps to ensure that Allied Health, and AT providers are suitably registered. Yet the NDIA's own trained planners query and/or overturn the AT recommendations that these professionals make.

- (i) Can the NDIA advise the number of instances that rejections and reviews relating to AT equipment have featured in Settlements and actual AAT Hearings, and related costs?
- (ii) Has the NDIA examined ways in which appropriate auditing and risk assessment of AT scripting, invoicing and related issues could streamline the planning process equipment acquisition and delivery, and participant satisfaction; and properly acknowledge the experience and qualifications of Professional groups?

Answer:

- (i) The National Disability Insurance Agency (NDIA) has had a total of 1,294 matters that proceeded to the Administrative Appeals Tribunal (AAT) since the commencement of the National Disability Insurance Scheme (NDIS). Of those cases, 752 matters related to planning or plan review decisions, of which 204 cases related to Assistive Technology (AT) equipment (0.074 per cent of total participants with approved plans). Out of the 204 cases related to AT equipment, 99 have been closed to date. Six of these closed cases featured in actual AAT hearings and the other 93 cases were settled prior to a hearing.

Given the very low numbers, representative indication of cost is unable to be provided.

- (ii) The NDIA has worked with state and territory AT programs to learn from their experiences of AT assessor capability. This identified some of the baseline requirements for AT assessment, such as professional qualifications (for example, occupational therapy, prosthetics or orthotics) as well as competency frameworks, as developed and operated by the Victorian Statewide Equipment Program (SWEP) and EnableNSW. Current quality assurance checks undertaken by these programs on assessments being submitted to the NDIA assist in managing such provider risk. The NDIA has also published guidance on expected competencies of assessors of more complex areas (such as for complex home modifications).

In many cases the cause of delay is not the capability or competence of the assessor, but submissions with incomplete information across the areas required by the NDIA to make a reasonable and necessary decision on the particular support. The NDIA expects to release revised assessment templates and guidance before the end of 2018 to reduce these gaps, and these will also include provision for the participant to consent to direct contact between the planner and the assessor to clarify any remaining issues swiftly.

The new approaches to prioritising AT requests that are being trialled are based on both managing risk, and assessment and other costs when funding the most appropriate reasonable and necessary AT supports for an individual participant.

Assistive Technology

Reference No: SQ18-000369

COST OF ASSISTIVE TECHNOLOGY COMPARED WITH OTHER NDIS SUPPORTS

Hearing: 22 November 2018

Hansard Page: 63

Question:

Ms HUSAR: Great. I understand it better. You might have to take this on notice. When it comes to AT, I'm not saying for a second that it's a set-and-forget part of people's plans, but it's certainly something that will last for a long time. We're not talking about consumables and we're certainly not talking about dips or troughs in providing speech or OT or physio to somebody who may need a lot at one time and then that might shrink. We're talking about things that last people for a long time. Obviously, once you've done a home modification once, it would be very reasonable to expect that we're not going to need to replace the ramp—providing it's built right the first time—a handrail or a bathroom modification. So it might be a big spend initially but, over the course of the lifetime of the person that we're talking about, it's going to be pretty low in comparison to what the other spends are. Can you provide some insight into the cost, comparable to other parts of the NDIS? I am happy for you to take it away on notice. I would expect that there would be a big bulk and then, once we've got people set up—like the young man we heard about before with his communication devices. I know that all that's going to be required—or reasonably anticipated—presumably, is that that's going to need an upgrade every two years. The app is going to need to be funded to continue to provide the Proloquo2Go. There might be version 3, 4 or 5, and that will continue to grow. But, once that's in place, we would reasonably expect that there wouldn't be a huge volume. I'm trying to understand why there are so many delays in the other parts.

Mr McNaughton: We can certainly take that on notice, because I know that our scheme is doing a lot of modelling around that. When we get to full scheme and it's \$22 billion, what proportion of that is assistive technology and home modifications?

I think, at 30 June this year, we'd put in around \$616 million in people's plans for assistive technology, AT, and home mods.

Ms HUSAR: How much?

Mr McNaughton: \$616 million at 30 June this year. We expect that that will grow. But then—you are right, Ms Husar—it will plateau off. There will always be ongoing repairs and maintenance—

Ms HUSAR: Of course.

Mr McNaughton: and always ongoing upgrades, and new people might come in with quite expensive home mods and things, and you might have to do some repairs, but there still will always be a demand within the scheme because of degenerative conditions and others that Dr Walker talked about. I'll pass over in a moment, but we'll come back around on notice because I know the actuary's modelling that out.

Ms HUSAR: Thank you.

Answer:

The annual cost of Assistive Technology (AT) is estimated to range between \$0.7 billion and \$1.3 billion at full Scheme in 2019-20.

AT supports have been broadly defined to include a range of technological solutions, including assistive equipment, home modifications (excluding Specialist Disability Accommodation), continence aids and daily adaptive equipment supports.

Assistive Technology

Reference No: SQ18-000370

SERCO - HANDLING OF PARTICIPANT INFORMATION

Hearing: 22 November 2018

Hansard Page: 64

Question:

Ms HUSAR: Just back on Serco, I asked this question this morning, and I don't know if I'm asking it of the right people, so I'm okay if you say, 'It's not anything to do with us.' I'm aware, because it's my job, That Serco received the contract but, as the parent of a participant in the scheme, I'm not aware that Serco has my or my son's personal information. So I'm not sure if you guys need to answer that or if we need to have that addressed when we next meet the NDIA.

Ms Neville: I'm not sure we've got good information on that in our briefing packs, but it is the case that, as part of the general participant consent process, we specify that there may be third parties with whom personal information is shared, so long as it's consistent with a purpose within the legislation. So that's part of the general consent process, so it's built into that. We would probably need to come back to you with further detail around the participant-facing communications that were provided that should go along with that to really build people's awareness of the change.

Ms HUSAR: As a participant's parent, I would assume that those third parties who would have necessity to see that child's information would not be a third-party provider like Serco. That's just some feedback for you to take on board when we're giving out people's personal information. We're just going through this now with the My Health Record, and that's a storm in itself. The information that the agency holds on people in relation to their disability is quite significant, and it will be in the hands of a very, very external person that is far removed from either the government or someone that necessarily needs to provide immediate support. I'm quite aggrieved, actually, that this is not being communicated to the participants. There are plenty of them behind you who, I'm sure, are unaware about their information and personal details, and we're talking about people who have significant and sometimes complex disabilities.

Ms Neville: I think we will need to take that on notice. I wouldn't be prepared to say that we haven't done participant-facing communications about that, so I think we should circle back on that.

Answer:

The National Disability Insurance Agency (NDIA) relies on contracted service providers, such as Serco, to undertake certain roles on behalf of the Agency. These third parties have access to NDIA records and may use those records in order to facilitate access to the National Disability Insurance Scheme (NDIS) or to implement NDIS plans.

When the NDIA uses third parties to perform certain functions, the third parties are contractually required to work in accordance with the *Privacy Act 1988* and the *National Disability Insurance Scheme Act 2013*, and to access and store all personal information using NDIA IT systems, not their own.

The contractor is also required to treat personal information they may see or handle with care and confidentiality. Because the NDIA retains control over all personal information, the use of that personal information by contracted service providers, as required by their role, is considered a lawful use by the NDIA and does not require consent.

Serco is authorised to access participant information on the basis that it is providing a service on behalf of the NDIA as the NDIA's agent and is therefore, under its agreement with the NDIA, bound by strict confidentiality conditions.



Parliamentary Joint Standing Committee on the National Disability Insurance Scheme
Written Question on Notice

Inquiry into Assistive Technology

Reference No: SQ18-000371

SHORTAGE OF AT ASSESSORS

Hearing: 22 November 2018

Hansard Page: N/A

Question:

What is the average length of time for the AT assessment process?

Answer:

The average length of time to complete a National Disability Insurance Scheme plan for the period 1 October 2017 to 30 September 2018 was 70.5 days. This includes plans that have Assistive Technology.