

# **Australian Rehabilitation and Assistive Technology Association (ARATA)**

## **Submission to the Legislative Affairs Committee**

### ***National Disability Insurance Scheme Amendment (Integrity and Safeguarding) Bill 2025***

**6 February 2026**

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***ARATA would like to acknowledge and thank the many ARATA members who  
contributed their knowledge and expertise to inform this submission.***

## Executive Summary

The Australian Rehabilitation and Assistive Technology Association (ARATA) welcomes the opportunity to provide a submission to the Senate Community Affairs Legislation Committee inquiry into the *National Disability Insurance Scheme Amendment (Integrity and Safeguarding) Bill 2025* (the Bill).

ARATA broadly supports the intent of the Bill to strengthen safeguards, improve integrity, and modernise aspects of NDIS administration. In particular, ARATA recognises the importance of protecting participants from harm, fraud, and poor-quality supports, while ensuring the Scheme remains sustainable and capable of delivering positive outcomes.

However, ARATA remains concerned that Schedule 2 does not sufficiently address foreseeable issues in implementing NDIS reform, including Support Needs Assessments, planning processes, and budget-setting mechanisms, and continues to lack sufficient legislative clarity and safeguards, particularly impacting optimal access to assistive technology (AT) and home modifications. These supports are often high-cost, complex, and critical to participant safety, independence, and participation, and require robust, transparent, and informed decision-making.

Drawing on ARATA's submissions to the Committee in May and June 2024 in relation to the *NDIS Amendment (Getting the NDIS Back on Track No. 1) Bill 2024*, this submission highlights ongoing risks that remain unresolved in Schedule 2 of the current Bill.

In particular, ARATA is concerned about:

- continued reliance on delegated legislation for core assessment, planning, and budget-setting processes;
- insufficient guarantees that assessments will take a whole-of-person approach necessary for effective AT and home modification outcomes;
- lack of explicit requirements that assessments be undertaken or informed by suitably qualified allied health professionals operating within scope of practice;
- limited transparency and reviewability of assessment outcomes that directly affect access to AT and home modifications; and
- risks associated with restrictive interpretations of what constitutes an NDIS support, including AT and environmental modifications.

Evidence highlights that access to AT for NDIS participants fell sharply, by approximately 10%<sup>1</sup>, impacting at least 70,000 participants, in the year to June 20<sup>th</sup> 2025 following the implementation of the NDIS Amendment Act. ARATA urges the Committee to recommend targeted amendments to ensure that the primary legislation provides adequate safeguards for participants who rely on assistive technology and home modifications, and to support an effective, evidence-based AT ecosystem within the NDIS.

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<sup>1</sup> [NDIS participants use of assistive technology - Personal and community support - Australian Institute of Health and Welfare](#)

## Recommendations

- 1. Embed core safeguards in primary legislation**  
Ensure that assessment, planning, and budget-setting processes affecting AT and home modifications are set out in primary legislation rather than delegated instruments, to provide certainty, transparency, and enforceable safeguards.
- 2. Mandate whole-of-person Support Needs funding**  
Require that assessments informing access to AT and home modifications adopt a holistic, functional approach that considers the participant's environment, goals, safety, and future needs, rather than a narrow impairment-based framework.
- 3. Require involvement of suitably qualified assistive technology prescribers**  
Specify that decisions relating to assistive technology and home modifications must be undertaken, or meaningfully informed, by appropriately qualified allied health professionals operating within scope of practice.
- 4. Guarantee review and appeal rights for AT and home modification decisions**  
Explicitly define decisions affecting access to AT and home modifications as reviewable, with appeal rights embedded in primary legislation rather than relying on Rules or internal NDIA processes.
- 5. Establish a clear right to replacement assessments**  
Provide participants with a legislative right to at least one replacement Support Needs Assessment where initial assessments fail to accurately capture complex or high-impact AT or home modification needs.
- 6. Protect payment flows for high-cost and staged supports**  
Limit claims information requirements to what is reasonable and proportionate, and safeguard against payment delays for AT and home modifications that have been delivered or are underway, particularly for staged or construction-based works
- 7. Increase transparency in budget-setting methodologies**  
Require clear legislative principles linking assessed need to funded AT and home modification supports, including transparency, proportionality, and alignment with evidence-based practice.
- 8. Prevent inappropriate exclusion of AT and home modifications from NDIS supports**  
Ensure that definitions of NDIS supports do not restrict or exclude assistive technology and home modifications on the basis of assumed availability of foundational or non-NDIS supports.

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## 1. About the Australian Rehabilitation and Assistive Technology Association

The Australian Rehabilitation and Assistive Technology Association (ARATA) is the national non-profit peak body representing assistive technology stakeholders. ARATA works to advance access to rehabilitation and assistive technologies and promote practices that ensure positive outcomes from their use for people of all abilities. ARATA includes a membership of both National Disability Insurance Scheme (NDIS) participants and NDIS providers, as well as other assistive technology (AT) stakeholders across all experiences of individual AT use, the provision of AT advice (e.g. via health professionals), AT supply, product development, and AT research and education in Australia and internationally. ARATA is run by a voluntary Board of Management that includes both NDIS participants and NDIS providers. For details, including our constitution, see [www.arata.org.au/about-ARATA/mission/](http://www.arata.org.au/about-ARATA/mission/)

ARATA provides a national forum for information sharing and liaison between people who are involved with the use, selection, customisation, supply, research and ongoing support of rehabilitation and assistive technologies. Our Association promotes, develops, and supports the national rehabilitation and assistive technology community of practice as well as contributing as a founding organisation to the Global Alliance of Assistive Technology Organizations (GAATO)<sup>2</sup>. Through its membership, ARATA represents the interests and opinions of the full range of assistive technology stakeholders in Australia. ARATA maintains that roles for all AT stakeholders must be considered, centred around the goals and needs of people who use AT in their own lives, and their informal supporters – including family members – who may engage with the NDIS.

## 2. ARATA contributions to NDIS reform

As the national peak body for assistive technology (AT) stakeholders, ARATA has made various submissions on the new National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024 (introduced into Parliament in late 2024), and to the work by the Department of Social Services (DSS) on both NDIS Supports Transitional Rules, Support Lists and Replacement Supports processes. These include:

- an initial submission by ARATA to the Community Affairs Legislation Committee Inquiry into the Bill in May 2024;
- a second submission by ARATA made after review of the Bill amendments made in early June 2024; and

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<sup>2</sup> [History | GAATO](#)

- extensive feedback submitted by ARATA via the Engage DSS platform in late August 2024, specific to the draft list of NDIS Supports released by DSS as part of the Section 10 Rule framework.
- A submission to the DSS Consultation on NDIS Support Rules (Section 10) in July 2025.

ARATA has shared concerns and solutions to issues arising from NDIS Reform, for assistive technology users and NDIS participants broadly. Our members have provided extensive evidence from both NDIS participant and provider perspectives that reforms - and associated guidance - have significantly compromised reasonable access to assistive technology (AT) and home modifications for NDIS participants. In many instances, the uncertainty and confusion created by NDIS reform, including the Section 10 transitional framework has had multiple negative impacts, including:

- stifling AT innovation and the creative problem solving required to achieve good AT or home modifications outcomes;
- reducing or effectively eliminating access to AT or home modifications for significant numbers of NDIS participants
- restricting NDIS participant choice and control in the type and way AT or home modifications can be delivered to meet their individual goals and needs and to achieve optimal outcomes.

ARATA remains committed to working with government and broader stakeholder groups to ensure optimal AT and home modifications outcomes for NDIS participants.

### **3. Assistive technology and home modifications as high-impact support decisions**

Assistive technology and home modifications are foundational supports within the NDIS. They enable participants to live safely and independently, communicate, perform daily activities, and participate in education, employment, and community life. Decisions about access to these supports are often high-impact for NDIS participants. As such, legislative settings governing assessment, planning, funding, and review for AT and home modifications require strong procedural safeguards, transparency, and accountability.

This submission focuses on whether the Bill adequately protects participant access to these supports and whether additional legislative amendments are required to prevent unintended restrictions, funding instability, or loss of access to essential equipment and environmental modifications. We propose amendments to the NDIS Amendment (Integrity and Safeguarding) Bill that will intersect directly with how AT and home modifications are safely assessed, approved, funded, varied, and reviewed.

Unlike many short-term or flexible supports, AT and home modifications often involve:

- significant upfront costs
- extended assessment and approval timeframes
- reliance on specialist assessment and design
- permanent or semi-permanent changes to a participant's environment

- safety risks if incorrectly prescribed, delayed, reduced, or withdrawn

Once a decision is made to decline, reduce, or vary funding for AT or home modifications, participants may face immediate risks to safety, independence, and wellbeing. Errors or delays can result in hospitalisation, increased reliance on informal supports, or loss of functional capacity. These characteristics often mean AT and home modifications require stronger safeguards than many other categories of NDIS supports.

## 4. Schedule 1 – Regulatory and safeguarding powers

Strengthened regulatory powers under Schedule 1 have the potential to improve safety and integrity in the provision of AT and home modifications. Clearer compliance mechanisms can deter unsafe practices, inappropriate product substitution, misleading promotion, or poor-quality modification work that places participants at risk.

However, the exercise of regulatory mechanisms, and expanded information-gathering and penalty enforcement powers must be proportionate and carefully targeted. To avoid discouraging qualified allied health professionals and suppliers from operating within the NDIS market, regulatory action should be supported by clear guidance on expectations, graduated enforcement responses, and transparency around compliance thresholds. This is particularly important in regional and specialist markets where loss of providers can directly limit participant access to essential equipment and modifications.

## 5. Schedule 2 – Broader changes to the primary legislation underpinning the NDIS

### 5.1 Claims information requirements and payment delays (Section 45)

The proposed amendments relating to claims and supporting information have particular implications for AT and home modifications, where invoices are often high-value and linked to staged delivery, installation, or construction milestones.

Requiring all requested information to be provided before payment is made creates a risk that payments for completed or partially completed work may be delayed indefinitely due to disputes about documentation rather than service delivery. In the context of home modifications, delayed payments can halt building works mid-project, leaving participants in unsafe or unusable environments. For AT, delayed payment can disrupt supply chains, discourage suppliers from accepting NDIS clients, or delay essential access to assistive technology prescription and implementation.

Legislative settings should clearly limit the scope of information that can be required, ensure timeframes for information requests are reasonable, and protect against payment delays where goods or works have already been delivered in good faith.

## **5.2 Plan variations and reassessments – impact on AT and home modifications (Section 47)**

### **5.2.1 Funding reductions through plan variation**

Plan variations that increase or decrease funding without a full reassessment pose particular risks for AT and home modifications, and must only be completed with participant informed consent. These supports are often planned over extended periods and are not easily adjusted once works have commenced or equipment has been prescribed.

Explicit recognition that plan variations may reduce funding heightens the risk that AT or home modification budgets could be cut without current assessment, updated evidence, or participant agreement. Reductions may occur even where equipment has already been ordered, modifications have been designed, or safety risks have been identified but not yet addressed. It is ARATA's view that unused funding should be carried over to a new plan, where there are legitimate reasons for the assistive technology and home modifications have been delayed.

Decisions of this nature should be subject to clear procedural fairness protections, including written reasons, access to the evidence relied upon, and effective rights of review.

### **5.2.2 Reviewability and appeal rights**

Where a plan variation affects funding for AT or home modifications, that decision should be clearly defined as reviewable. Given the material impact of these supports on daily functioning and safety, reliance on delegated legislation or internal processes is insufficient.

Embedding review and appeal rights directly in primary legislation would ensure participants have meaningful access to challenge decisions that restrict or withdraw AT or home modification funding, particularly where those decisions are based on automated tools, internal benchmarks, or incomplete assessments.

## **6. The New Framework Planning, Support Needs Assessments and access to AT and home modifications**

ARATA acknowledges amendments made in 2024 that laid the groundwork for New Framework planning. However, significant concerns remain regarding the legislative framework governing Support Needs Assessments and their application to AT and home modifications.

Assistive technology and home modifications require holistic, functional, and contextual assessment. Outcomes depend on understanding a participant's physical environment,

goals, functional capacity, co-occurring disabilities, and future needs. A narrow impairment-based assessment framework risks producing plans that are unsafe, inadequate, or inefficient, particularly for participants with multiple or progressive conditions.

ARATA remains concerned that:

- assessments are limited to needs arising only from impairments that meet access criteria, rather than all disability-related support needs;
- assessment processes are deferred to legislative instruments without sufficient safeguards; and
- there is no legislative requirement that assessments informing AT and home modification decisions be conducted or informed by appropriately qualified allied health professionals, such as occupational therapists, physiotherapists, rehabilitation engineers, speech pathologists and other AT assessors operating within scope of practice.

The primary legislation should clarify that Support Needs Assessments must assess the participant's disability support needs at a whole-of-person level, and that assessments informing AT and home modification decisions must be undertaken, or meaningfully informed, by suitably qualified and experienced allied health professionals.

## 7. Budget Setting, and AT and Home Modifications

ARATA acknowledges improvements made in the 2024 amendments allowing payments above plan allocations in certain circumstances, including where information such as quotes for high-cost AT or home modifications becomes available after plan approval.

However, ARATA remains concerned that the method for translating assessment outcomes into funding decisions is largely delegated to future legislative instruments. Given the high cost and long-term nature of many AT and home modification supports, lack of transparency in budget-setting creates risks of:

- delayed or denied access to essential supports;
- under-specification or inappropriate AT solutions;
- increased long-term Scheme costs due to short-term underfunding; and
- reduced participant safety and independence.

ARATA also notes that powers allowing the NDIA to impose conditions on how participants obtain supports or restrict flexible funding remain broadly framed, with limited legislative guidance on their use.

The Act should include minimum principles governing budget-setting, including transparency, proportionality, consistency, and alignment with evidence-based AT and home modification practice, with clear links between assessed need and funded supports.

## 8. Review, Appeal, and Replacement Assessments

ARATA welcomed amendments that acknowledged the possibility of replacement needs assessments where participants disagree with assessment outcomes. However, ARATA remains concerned that:

- there is no explicit right to at least one replacement assessment;
- decisions about ordering a replacement assessment are not themselves reviewable; and
- participants may be left without effective remedies where assessments fail to capture complex AT or environmental needs.

Given that AT and home modifications often require reassessment as needs change, equipment wears, or environments evolve, effective review mechanisms are essential to avoid entrenching unsafe or unsuitable solutions.

Participants should have a clear legislative right to a replacement Support Needs Assessment where an assessment does not accurately reflect their needs, particularly where AT or home modification decisions are affected.

## 9. Definition of NDIS Supports and Reliance on Foundational Supports

ARATA notes that while the definition of “NDIS supports” has been deferred to Rules, ongoing reliance on foundational or non-NDIS supports as alternatives remains problematic. This is particularly concerning given long-standing underinvestment in foundational supports, and the reality that many AT and home modifications solutions are often not available or funded outside the NDIS.

The development of Rules defining NDIS supports must ensure that assistive technology and home modifications are not inappropriately excluded or constrained, and that participants are not diverted to non-existent or insufficient external supports.

## 10. Conclusion

ARATA appreciates the opportunity to contribute to this inquiry and acknowledges efforts made to improve the Bill since 2024. However, significant issues remain that directly affect safe access to assistive technology and home modifications. These supports are foundational to safety, independence, and participation for many NDIS participants.



ARATA urges the Committee to recommend amendments that strengthen legislative safeguards for assessments, planning, budget-setting, and review processes, and to ensure that these reforms are co-designed with people with disability and professional peak bodies. ARATA would welcome further engagement with the Committee, including providing additional information or attending hearings to discuss the issues raised in this submission.

