

Appendix 1

Implementation status of recommendations

<p>Inquiry</p>	<p>Provision of services under the NDIS for people with psychosocial disabilities related to a mental health condition</p>
<p>Recommendation 1</p>	<p>The committee recommends that the NDIS Act is reviewed to assess the permanency provisions in Section 24 (1) (b) and the appropriateness of the reference to 'psychiatric condition' in 24 (1) (a).</p>
<p>Government response</p>	<p>Part A - Not supported</p> <p>The Productivity Commission Review of Scheme Costs position paper noted the NDIS Rules and operational guidelines accept that a permanent condition may be episodic in nature, requiring different amounts of support at different times. An impairment is considered permanent if there is no known, available, and appropriate evidence based treatment that will remedy it. An impairment for which the impact on personal psychosocial functioning fluctuates in intensity (episodic) may be considered permanent despite the variation. For people experiencing severe or persistent mental health issues, the impact in some cases will be short-term, while for others it may become a long-term experience, despite access to mental health treatment. In this context the permanency provisions in Section 24 remain appropriate, ensuring that only individuals with permanent psychosocial impairment enter the Scheme. The Australian Government is comfortable with the permanency criteria under the NDIS Act (2013) applying to people with psychosocial disability. Permanency is not incompatible with the goal of recovery. The investment approach of the NDIS and the recovery framework of mental health services are both about building capacity and the ability to recover. Relaxing the definition of permanency under the eligibility criteria, including for psychosocial disability, would be a significant change to the Scheme, and would have major implications for its sustainability and scope, recognising that the objective of recovery and episodic impairment is not inconsistent with the NDIS' current approach.</p> <p>Part B - Support in principle</p> <p>The Government accepts that it may be appropriate to update reference to psychiatric condition in Section 24(1) (a), and will</p>

	undertake consultations that will inform future amendments to the NDIS Act (2013).
Status	Not addressed. Acknowledging that this recommendation was not supported by the Australian Government, the committee notes that at full Scheme, it is estimated that 13.9 per cent of NDIS participants will be individuals with psychosocial disability as their primary disability, and that at 31 December 2018, only 8.2 per cent of NDIS participants were people with a primary psychosocial disability. ¹ The committee also notes that the rejection rate is higher for this cohort compared to any other primary disability. At 30 September 2018, of the total access requests from people with psychosocial disability as their primary disability, 36 percent were found ineligible. This compares with an overall rate of 14 percent of total request resulting in an ineligible decision. ² The committee is of the view that the NDIA should undertake a review to understand the reasons for a higher rejection rate compared to other disabilities.
Recommendation 2	The committee recommends that a review of the NDIS (Becoming a Participant) Rules 2016 should be considered to assess the appropriateness and effectiveness of: <ul style="list-style-type: none"> • including the principle of recovery-oriented practice for psychosocial disability, and • clarifying that Rule 5.4 which dictates that a condition is, or is likely to be, permanent does not apply to psychosocial disability, to reflect that people with mental conditions will receive ongoing treatments to aid recovery.
Government response	Not supported As noted in response to Recommendation 1, the Government views the permanency provisions in the NDIS legislation as consistent with the concept of recovery for people with psychosocial disability. However, the Government acknowledges greater clarity is needed to assist broader understanding of how the NDIS aligns to the principle of recovery-oriented practice for people living with psychosocial disability. To clarify, recovery may have several different meanings in different contexts. The NDIA defines recovery as

1 NDIA, *COAG Disability Reform Council Quarterly Report*, 31 December 2018, p. 14.

2 NDIA, *Response to question on notice SQ19-000008*, received 22 February 2019.

	<p>achieving an optimal state of personal, social and emotional wellbeing, as defined by each individual, whilst living with or recovering from a mental health condition. This is consistent with the concept of personal recovery that is about living a satisfying, hopeful, and contributing life within the limitations caused by the illness. By contrast, clinical recovery generally refers to the treatment of impairments and elimination or amelioration of symptoms of mental illness. Ongoing treatments to aid recovery are the responsibility of the mainstream mental health system, which is set out under the COAG Principles to Determine the Responsibilities of the NDIS and Other Service Systems.</p> <p>Guidance on how to apply the legislation in the context of a recovery-based approach is appropriately contained within the operational guidelines and practice guidance. Rather than changing the rules, it is the NDIA's role to train NDIA staff to understand the episodic nature of mental health issues which underlie psychosocial disability, and the concept of personal recovery as applied to the NDIS. Furthermore, the Government does not accept that Rule 5.4, which dictates that a condition is, or is likely to be, permanent should not apply to psychosocial disability. Ongoing treatment is not considered to be inconsistent with permanency. Rule 5.4 should be read in conjunction with Rule 5.6, which states that ongoing treatment may continue after permanency (of an impairment) has been established.</p>
Status	<p>Not addressed. Acknowledging that this recommendation was not supported by the Australian Government, evidence received to date by the committee indicates that the recovery based approach is not always reflected in the planning process and the plans awarded to participants.</p>
Recommendation 3	<p>The committee recommends that the Australian Government ensures young people with mental ill-health who are not participants of the Scheme have access to adequate early intervention services.</p>
Government response	<p>Support</p> <p>The Government is committed to maintaining a strong focus on prevention and early intervention efforts to reduce the prevalence and impact of mental health conditions in younger people. Prevention and early intervention for young people at risk of mental ill-health is a shared responsibility between all Australian governments. The COAG applied principles in relation to mental health provide that Early Intervention</p>

	<p>designed to impact on the progression of a mental illness or psychiatric condition is usually the responsibility of other service systems and not the NDIS. DSS funds the Family Mental Health Support Services (FMHSS) to provide early intervention support services for children and young people up to the age of 18, who are showing early signs of mental illness, or at risk of developing mental illness. The services are delivered to children and young people with the support of their family or carers. There are 52 providers delivering FMHSS in 100 sites across Australia. The Department of Health funds Primary Health Networks to deliver the headspace and Early Psychosis Youth Services (EPYS) programs, which target young people aged 12 to 25 years. As at October 2017, there are 100 headspace sites able to provide early intervention support to young people with, or at risk of, mild to moderate mental illness. There are also six EPYS sites which are funded to 30 June 2019, to provide integrated early intervention treatment and intensive support services for young people with, or at risk of, early psychosis. The Productivity Commission specifically considered early intervention and psychosocial disability and stated that the early intervention aspects of the NDIS should not include psychosocial disability. Further, the Productivity Commission modelling data specific to psychosocial disability did not include children or young people (0-18 years of age).</p>
<p>Status</p>	<p>In progress. The committee notes the current programs mentioned in the Response. The committee is of the view that, as part of a future audit on mental health programs, a review is undertaken to ensure that early intervention programs meet the needs of people who are not eligible for the NDIS.</p>
<p>Recommendation 4</p>	<p>The committee recommends the NDIA, in conjunction with the mental health sector, develops and adopts a validated fit-for-purpose assessment tool to assess the eligibility of people with psychosocial disability that focuses on their functional capacity for social and economic participation.</p>
<p>Government response</p>	<p>Support</p> <p>The Government agrees a standardised assessment tool could address concerns raised by mental health service providers that NDIS eligibility criteria are unclear and, at this time, inconsistently applied. The NDIA is progressing the selection of an existing appropriate functional assessment tool and the development of reference packages for people with psychosocial disability. This work has been supported by</p>

	expert advice from professionals with specialist mental health knowledge, including clinicians and researchers, as well as participants with experience in the NDIS to date. The agreed assessment tool is expected to be progressively introduced from early 2018, which will also incorporate ongoing review of quantitative and qualitative data to identify further improvements to the tool's application.
Status	Limited progress. The NDIA advised the committee that the Agency continues to trial functional assessment tools for people with psychosocial disabilities related to a mental health condition. The Independent Assessment Pilot commenced in mid-November 2018 and includes the Life Skills Profile assessment tool, which has been communicated to the mental health sector as a preferred assessment tool in evidence for access to the NDIS. ³ However, at the February 2019 roundtable, the committee received evidence from the mental health sector that there was still a need to implement a validated assessment tool. ⁴
Recommendation 5	The committee recommends the NDIA monitors eligibility rates for people with psychosocial disability to, a) understand the reasons for a higher rejection rate compared to other disabilities; and b) to build a clearer picture of the size and needs of the people who have been found ineligible for NDIS services.
Government response	Support Ineligibility rates are reported quarterly and the nature of the age distribution of those found ineligible is discussed at a high level at the National Mental Health Sector Reference Group. The NDIA will continue to monitor and capture data on access met and unmet for people with psychosocial disability. The NDIA, DSS, and Health, both separately and jointly at planned forums, continue to engage with stakeholders to improve understanding of the NDIS access requirements for people with psychosocial disability through a number of forums.
Status	Not progressed. Eligibility rates are not publically reported. However, the NDIA advised the committee that, as at 30 September 2018, of the total access requests to the Scheme,

3 NDIA, *Response to question on notice SQ19-000009*, received 22 February 2019.

4 Mental Health Australia, *Opening statement*, p. 5 (tabled 26 February 2019).

	from people with 'psychosocial disability' as their primary disability, 36 per cent were found ineligible. ⁵
Recommendation 6	The committee recommends clients currently receiving mental health services, including services under Commonwealth programs transitioning to the NDIS, namely Partners in Recovery (PIR), Personal Helpers and Mentors (PHaMs), Day to Day Living (D2DL, and Mental Health Respite: Carer Support (MHR:CS), should not have to apply for the NDIS to have guarantee of continuity of supports and access services.
Government response	<p>Not supported</p> <p>Existing clients of targeted Commonwealth mental health programs are expected to test eligibility for the NDIS because:</p> <ul style="list-style-type: none"> • funding for the PIR, D2DL, PHaMs and MHR:CS programs is transitioning to the NDIS on the basis of the close program alignment with the NDIS and the majority of clients are expected to be eligible; • the Government considers it is in the best interests of existing clients to have the opportunity to test their eligibility with the assistance of trusted support workers who are most familiar with their individual circumstances and needs; and • NDIS participation will provide guaranteed lifetime support and better outcomes for former program participants. <p>The timely testing of all PIR, D2DL, PHaMs and MHR:CS clients will help the Commonwealth to more accurately estimate resources needed for continuity of support. To support providers to transition their eligible clients to the NDIS the Government has:</p> <ul style="list-style-type: none"> • provided additional funding through the Sector Development Fund to support NDIS provider readiness. • undertaken targeted engagement (DSS, Health, NDIA and Flinders University) through the Transition Support Project: <ul style="list-style-type: none"> ○ this project prepares mental health and carer providers for the rollout of the NDIS, and provides information on the steps needed to transition existing clients to the NDIS through regular workshops across Australia, and

5 NDIA, *Response to question on notice SQ19-000008*, received 22 February 2019.

	<ul style="list-style-type: none"> ○ this project also allows providers to access the Transition Support Portal providing access to information, resources and peer support to assist with transition of providers' business and clients to the NDIS. • publicly released an access guide for providers, entitled "Assisting people with psychosocial disability to access the NDIS: a guide for Commonwealth- funded community mental health service providers". This guide equips providers with the tools they need to guide their clients through the NDIS access process. <p>Program clients who do not meet the age or residency requirements for access to the NDIS, do not need to test their eligibility in order to qualify for continuity of support. The Government is committed to continuity of support for all clients of Commonwealth community-based mental health programs who are not eligible for the NDIS. This means if an individual is already a client of a Commonwealth mental health service, they will be supported to achieve similar outcomes, even if the name of the program changes or the support is provided through a different arrangement.</p>
Status	<p>Not addressed. This recommendation was not supported by the Australian Government. However, the committee received evidence that participants in existing Commonwealth mental health programs continue to experience a high rejection rate. On 21 March 2019, the Minister for Families and Social Services, the Hon Paul Fletcher, announced a commitment to extend funding to providers to support the transition of people in Commonwealth funded programs to the NDIS for up to 12 months to 30 June 2020.⁶ The committee welcomes this announcement, but is of the view that a longer extension of funding for these programs will be required to ensure that all people can test their eligibility and have access to continuity of support. Furthermore, longer-term arrangements for existing program clients not eligible for the NDIS should be put in place before closure of existing programs.</p>
Recommendation 7	<p>The committee recommends the NDIA develops and proactively markets resources and training for primary health care professionals about the NDIS, especially in regards to access and planning processes.</p>

6 The Hon Paul Fletcher, Minister for Families and Social Services, *Morrison Government commits over \$165 million to extend support to people transitioning to the NDIS*, Media release, 21 March 2019, p. 1.

Government response	<p>Support</p> <p>The Government considers clarifying the access process for people with psychosocial disability with primary health care professionals will improve the quality of the access and planning process, specifically around NDIS access requirements and the roles of health care professionals in the process. The Government has recently introduced a number of practical measures to assist mental health providers help their clients navigate the NDIS. This includes a new access guide to support clients work through eligibility requirements as announced by Assistant Minister Prentice on 12 October 2017, workshops where providers can meet peers to discuss issues and solutions, and a dedicated web portal for mental providers with tools and resources. The NDIA has developed a range of publications that specifically target GP and other health professionals, including:</p> <ul style="list-style-type: none"> • Factsheet: A GPs guide to the NDIS (includes guidance on GP's role in providing evidence to support an NDIS access request); • Factsheet: Psychosocial disability, recovery and the NDIS; and • Completing the access process for the NDIS. <p>The NDIA has collaborated with the Royal Australasian College of Physicians to provide guidance for clinical mental health services on NDIA access and planning processes, hosted information booths at GP Conferences, advertised in the Australian Medical Association's General Practice Year Planner to continue to raise NDIS awareness with the primary health care sector, and distributed information through Primary Health Networks.</p> <p>State and Territory Governments also share responsibility for educating their funded and provided government services and the medical and health professionals who work in these services. Further information resources will be developed as part of the NDIA's work on designing a tailored pathway for people with psychosocial disability.</p>
Status	<p>Completed. The NDIA has published a range of publications to clarify access and planning processes, including for GPs and Allied Health Professionals.⁷</p>

7 NDIS list of booklets and factsheets: <https://www.ndis.gov.au/about-us/publications/booklets-and-factsheets#for-providers> (accessed 15 February 2019).

Recommendation 8	<p>The committee recommends the Department of Social Services and the NDIA collaboratively develop a plan outlining how advocacy and assertive outreach services will be delivered beyond the transition arrangements to ensure people with a psychosocial disability and those who are hard-to-reach can effectively engage with the NDIS and/or other support programs.</p>
Government response	<p>Support</p> <p>DSS, Health, and the NDIA continue to work with providers who have clients that may require more support to engage with the NDIS. Mental health providers will continue to promote their services in the NDIS competitive market place, including focusing on an intake role for those consumers who typically do not respond to advertising, using a mix of customer focus and clinical judgment, and in employing peer support workers with lived experience of mental illness that may assist in engaging vulnerable clients. Work is underway by the NDIA to develop tailored pathways for people with psychosocial disability, and people with more complex needs to engage with the NDIS. The NDIA is also currently developing and implementing a range of practice improvement initiatives (factsheets, practice guidance, and training) for staff and the mental health sector, which will enable a well-coordinated approach for individuals accessing both NDIS funded supports and mainstream services. The Commonwealth has invested over \$109 million in state and territory initiatives to support market, sector and workforce transition, through the Sector Development Fund (SDF). Among numerous projects to build the evidence base and the capacity of providers, projects are occurring in states and territories to build the capacity of vulnerable people with disability, such as those who are at risk of falling through the gaps because their needs are complex, challenging, and they themselves may be resistant to support. An analysis of findings of these projects, including those that may have national learnings on assertive outreach, will be undertaken as the projects are completed.</p>
Status	<p>In progress. Recent initiatives to engage with hard-to-reach cohorts include the complex support needs pathway approach,</p>

	now available in parts of Victoria and NSW. Rollout in new locations will be confirmed later in 2019. ⁸ According to the NDIA, training of NDIS workforce to better understand severe and persistent mental health conditions will take place in 2019. ⁹
Recommendation 9	The committee recommends the NDIA, in conjunction with the mental health sector, create a specialised team of NDIS planners trained and experienced in working with people who have a mental health condition as their primary disability.
Government response	Support The Government wants to ensure that people with psychosocial disability receive the support they need to have a quality experience throughout the NDIS pathway. The new NDIA participant and provider pathway approach aims to incorporate knowledge from existing services, including transitioning programs, to engage people with psychosocial disability, and provide flexibility in the plan in anticipation of episodic challenges or changes to participant circumstances. The NDIA has also developed draft practice guidance for staff on planning for people with psychosocial disability and a training module for all staff. This material has been recently reviewed by consumer, carer, and provider representatives on the National Mental Health Sector Reference Group, and will be amended to reflect the feedback from this group.
Status	In progress. The NDIA has announced that training of NDIS workforce to better understand severe and persistent mental health conditions is scheduled to take place in 2019. ¹⁰ On 10 October 2018, the Minister for Families and Social Services announced a new 'psychosocial disability stream', which will be implemented progressively and includes: a) the employment of specialised planners and LACs; b) better linkages between mental health services and NDIS staff and

8 NDIS, *Complex support needs pathway*, <https://www.ndis.gov.au/about-us/ndis-pathway-reform/pathway-reform-whats-happening-2019#hearing-service-stream> (accessed 15 February 2019).

9 NDIS, *Psychosocial disability service streams*, <https://www.ndis.gov.au/about-us/ndis-pathway-reform/pathway-reform-whats-happening-2019#hearing-service-stream> (accessed 15 February 2019).

10 NDIS, *Psychosocial disability service streams*, <https://www.ndis.gov.au/about-us/ndis-pathway-reform/pathway-reform-whats-happening-2019#hearing-service-stream> (accessed 15 February 2019).

	<p>partners; and c) a focus on recovery-based planning and episodic needs.¹¹ The psychosocial disability stream was introduced in specific locations in Tasmania and SA in November 2018, followed by Victoria and NSW in conjunction with the implementation of the complex support needs pathway.¹² An expert mental health consultant has been engaged by the NDIA to develop a Psychosocial Disability Capability Framework, with anticipated completion by April 2019. This framework will inform the recruitment of staff and requirements to work in specialist roles within the NDIA.¹³</p>
Recommendation 10	<p>The committee recommends the NDIA develop an approach to build flexibility in plans to respond to the fluctuating needs of participants with a psychosocial disability, including allowing minor adjustments to be made without the need for a full plan review.</p>
Government response	<p>Support</p> <p>The NDIS has been designed to give participants choice and control over their participant plan, and flexibility in how they use their support funding. A plan review or re-assessment may be requested at any time (e.g. when the participant's circumstances change). System design requirements that allow for minor amendments are being scoped. NDIS internal guidance for planners outlines the likelihood of changes in support needs due to the episodic nature of mental health conditions and the need for flexibility in plans. It assists planners to seek information about how a participant's support needs may vary over time so that the variation can be built into the plan. The guidance also notes that participants with psychosocial disability often require considerable assistance to navigate the mainstream and community health services. Skilled support coordination is an important support in this context.</p>
Status	<p>Not progressed. In September 2018, the NDIA updated and distributed internal guidance on planning for people with psychosocial disability which provides specific advice on how to build flexibility into plans in order to respond to fluctuating</p>

11 NDIS, *Government announces improved NDIS mental health support*, 10 October 2018, <https://www.ndis.gov.au/news/400-government-announces-improved-ndis-mental-health-support> (accessed 15 February 2019).

12 NDIA, *COAG Disability Reform Council Quarterly Report*, 31 December 2018, p. 26.

13 NDIA, *Response to question on notice SQ19-000010*, received 22 February 2019.

	needs, and how to effectively communicate this flexibility to participants and their supporters. ¹⁴ However, feedback from stakeholders during the committee's 26 February 2019 roundtable indicated there is still inadequate flexibility in plans for participants with psychosocial disability. The committee notes that any change to a plan, even minor changes, is triggering a full plan review.
Recommendation 11	The committee recommends the NDIA report on the level of engagement of carers in the planning process.
Government response	<p>Support</p> <p>The views and experiences of families and carers are important in the planning process for the NDIS because they have a unique understanding of the person they care for. If the person requests it, a carer will play a vital role when the person they care for enters the Scheme, helping with decision-making about ongoing support needs, goal setting, assessment and the planning process. The NDIS Outcomes Framework captures the extent to which the NDIS has assisted carers across a number of domains. Select indicators are included in quarterly reports, and outcomes reporting will be expanded with the collection of data over time.</p>
Status	Not progressed. The NDIA does not publicly report on the level of engagement of carers in the planning process.
Recommendation 12	The committee recommends the NDIA publishes the results of its participants and providers pathways review, particularly in the areas related to mental health, and strategies in place to achieve improved outcomes, as well as updates on progress against targets in its Quarterly Reports.
Government response	<p>Support</p> <p>The NDIA released details of the new targeted participant and provider pathway on 18 October 2017 (outlined in its media release). The design of the new NDIS pathways incorporates the experiences of several hundred participants and providers. The new pathway delivers an outcomes-focused approach which is underpinned by principles of reliability and trust, vibrant and connected, consistent and straightforward. The new NDIS pathways will be progressively piloted and tested</p>

14 NDIA, *Response to question on notice SQ19-000011*, received 22 February 2019.

	<p>over the coming months before being rolled out nationally. The NDIA continues to engage with stakeholders on testing and implementing the new pathways. Work is also underway to develop pathways that are tailored to the specific needs of groups of participants who need additional support, including those with psychosocial disability. A report summarising the pathway review process and findings will be made available in early 2018. Participant outcomes and satisfaction are included in the quarterly reports. Further, additional metrics on participant and provider satisfaction are being developed.</p>
Status	<p>Completed. In February 2018, the NDIA published the findings of its pathway review.¹⁵</p>
Recommendation 13	<p>The committee recommends the Australian, state, and territory governments clarify and make public how they will provide services for people with a psychosocial disability who are not participants in the NDIS.</p>
Government response	<p>Support</p> <p>Mental health support services outside the NDIS are primarily the responsibility of state and territory governments. The Commonwealth is working with states and territories to better clarify how such supports outside the NDIS will work. In May 2017, the Australian Government announced \$80 million in funding over four years as a Commonwealth contribution to new psychosocial support services for people who are not eligible for the NDIS. The additional Commonwealth investment will be delivered once agreements have been reached with appropriate commitments from each state and territory. The bilateral agreements will take into account existing funding being allocated for this purpose by states and territories. This measure does not include existing program clients not eligible for the NDIS who will supported through continuity of support arrangements:</p> <ul style="list-style-type: none"> • where existing Commonwealth program funding is rolling into the NDIS, program clients who are not eligible for the NDIS will continue to receive supports. During the NDIS transition period, this will be provided through existing program structures and services. • longer-term arrangements beyond transition will be finalised based on lessons learned in the trial and

15 NDIS, *NDIS pathway reform*, <https://www.ndis.gov.au/about-us/ndis-pathway-reform> (accessed 15 February 2019).

	<p>transition phases. Options to deliver continuity of support services for Commonwealth clients not eligible for the NDIS through the new psychosocial support services measure will be considered as a way to ensure efficient and seamless services.</p>
Status	<p>Limited progress. Feedback from submitters during the committee's roundtable on 26 February 2019 indicated continuity of supports arrangements remained unclear to stakeholders.</p>
Recommendation 14	<p>The committee recommends COAG conduct an audit of all Australian, state, and territory services, programs and associated funding available for mental health.</p>
Government response	<p>Support</p> <p>The COAG Health Council is the vehicle for Commonwealth and state and territory governments to work together on all matters related to coordinated action for health matters. The Fifth National Mental Health and Suicide Prevention Plan was recently agreed by the COAG Health Council at its August 2017 meeting. This is the primary means to take forward coordinated work between the Commonwealth, states and territories, including joint regional planning, with the aim of improving the coordination of services and the effectiveness of investment in mental health and suicide prevention. Given the number of reforms currently underway around mental health and disability, a stocktake of Government priorities and action, at all levels, is expected to be undertaken at a later date to inform future priorities for investment.</p>
Status	<p>Not progressed.</p>
Recommendation 15	<p>The committee recommends the National Mental Health Commission be appointed in an oversight role to monitor and report on all Australian, state, and territory mental health programs and associated funding, including those delivered through the primary healthcare sector.</p>
Government response	<p>Support</p> <p>The National Mental Health Commission has a significant role in the national monitoring and reporting on mental health and suicide prevention in Australia. Under the Fifth National Mental Health and Suicide Prevention Plan, the Commission will be tasked with delivering an annual report, for presentation to Health Ministers, on the implementation of the Fifth Plan and performance against identified indicators. This</p>

	<p>will include up to 24 indicators that range from the health status of the population to measures of the process of mental health care. Not all of the indicators identified in the Fifth Plan are relevant or available for all service sectors. The Commission will also monitor and report on reform priorities arising from the Contributing Lives, Thriving Communities Review of Mental Health Programmes (Contributing Life), the National Disability Insurance Scheme (NDIS), and Primary Health Networks (PHNs). The Minister for Health, in liaison with his ministerial colleagues, will consider the Commission's capacity to conduct additional monitoring and reporting within its remit and within its available resources.</p>
Status	Not progressed.
Recommendation 16	The committee recommends the Department of Social Services and the NDIA develop an approach to ensure continuity of support is provided for carers of people with a psychosocial disability, both within and outside the NDIS.
Government response	<p>Support</p> <p>The Government has committed to provide continuity of support for carers of Commonwealth programs with funding transitioning to the NDIS who are not receiving NDIS supports. In addition, in the current system, and outside of the NDIS, DSS funds a range of programs that assist and support carers, including information and referral services, counselling, training to enhance carer skills and increase their competence and confidence, peer support groups, support to remain in education and unplanned, short-term and emergency respite. DSS is continuing to engage peak organisations, service providers and subject matter experts to develop an Integrated Carer Support Service to streamline and better coordinate carer support services.</p>
Status	Limited progress. As part of the 2018 Budget, the Department of Social Services announced that clients of Commonwealth funded disability programs who are ineligible

	for the NDIS will receive continuity of support from 1 July 2019. ¹⁶ It is unclear how continuity of support will be provided for carers of people with psychosocial disability, both within and outside the NDIS.
Recommendation 17	The committee recommends the NDIA, in collaboration with the Australian, state, and territory governments, develop a strategy to address the service gaps that exist for rural and remote communities.
Government response	<p>Support</p> <p>On 17 March 2017, Assistant Minister Prentice released the NDIA Rural and Remote Strategy, and the Aboriginal and Torres Strait Islander Engagement Strategy. The NDIA recognises the need to explore alternative approaches to deliver the NDIS in remote areas, and is working with local communities to develop place-based models for the delivery of the NDIS. The focus is delivery of the NDIS with each community. These projects aim to maximise opportunities the NDIS will bring to communities, in particular increasing economic and social participation and building market capacity and capability. The NDIA recognises that rural and remote areas may have particular issues and difficulties in establishing disability support markets and that service providers in more remote and smaller communities may experience challenges. The NDIA is committed to ensuring NDIS prices are fair, affordable for participants, and commercially sustainable – to this effect the NDIA has commissioned an Independent Pricing Review which has consulted widely with providers and is due to report to the NDIA Board in December 2017. All Australian governments and the NDIA will continue to work together to monitor the establishment of rural and remote markets with a view to meeting the objectives to support NDIS participants. The NDIA is also working with local organisations to leverage existing capability in thin markets to deliver NDIS services. The Government's \$33 million Boosting the Local Care Workforce Package, announced in the 2017 Federal Budget, will provide targeted assistance to meet expanding workforce requirements, helping employers increase the supply of care</p>

16 Department of Social Services, *Continuity of support for clients of Commonwealth disability programs*, 2018 Budget, https://www.dss.gov.au/sites/default/files/documents/05_2018/d18_13641_budget_2018-19_-_factsheet_-_continuity_of_support_for_clients_of_commonwealth_disability_programs_1.pdf (accessed 24 January 2019).

	workers in regions, to meet the needs of NDIS participants and the care sector more broadly. This package will boost local job opportunities in care work, particularly in rural, regional and outer suburban areas by identifying market gaps and areas of thinness, and providing support to providers to adapt their businesses and grow their workforce.
Status	<p>Not addressed. No strategy has been implemented. The NDIA claims it has established a Remote Support and Coordination Branch to develop and support the service delivery framework for remote participants. According to the NDIA, the five main goals of the Branch are to:</p> <ol style="list-style-type: none"> 1. provide easy access and contact with the NDIA; 2. make effective, appropriate supports available where people live; 3. customise approaches for individuals within their community; 4. use collaborative partnerships to achieve results; and 5. support and strengthen local capacity of rural and remote communities. <p>The NDIA advised the committee it is currently undertaking work through the Market Enablement Framework to support growth of the disability services market. A project is being finalised to pilot interventions for ineffective and under-developed markets, including thin markets and regional and remote communities.¹⁷</p>
Recommendation 18	The committee recommends the NDIA provide details on how it is ensuring a provider of last resort is available for all NDIS participants unable to find a suitable service provider, regardless of their location, circumstances and types of approved supports.
Government response	<p>Support</p> <p>The Government is committed to working collaboratively to address the issue of thin markets in some regions within an agreed COAG framework for building the market response to the NDIS. The NDIA, as one player in this area, is actively developing a Market Intervention Strategy, to govern the circumstances in which it will intervene in markets, and an Immediate Support Response policy and framework to develop</p>

17 NDIA, *Response to question on notice SQ19-000012*, received 22 February 2019.

	arrangements for 'crisis' circumstances in which participants are unable to receive supports. The NDIA's 'Maintaining Critical Supports Project' will see the development of a consistent set of policies and potential market intervention strategies to ensure key support types continue to be provided throughout the NDIS transition. The NDIA is currently consulting with state and territory governments and other key stakeholders as part of this work, and expects to release the strategy in early 2018.
Status	Not progressed. The NDIA indicated it is working with State and Territory governments on a new approach to Maintaining Critical Supports. ¹⁸
Recommendation 19	The committee recommends the NDIA monitor the psychosocial disability supports, activities, and services that are awarded funding through the ILC grant process to be able to identify and address any emerging service gaps as they may arise.
Government response	Partially support The Government and the NDIA will monitor against existing policy, agreements and the ILC Commissioning Framework and consider any required changes. However, the ILC policy is not currently designed to address existing or emerging gaps that might arise from the withdrawal of services by other programs.
Status	Not addressed. The ILC program to date has funded a total of eight projects that focus on supporting people with a psychosocial disability, with a combined value of \$7.06 million. The projects commenced on 1 July 2018 and will run for two years. The NDIA released the ILC Investment Strategy for 2019-20 to 2021-22 in December 2018 which adopts a more strategic approach. Through the Strategy, the Agency will specify, fund and deliver four programs to be progressively rolled out from July 2019. The approach is expected to allow for improved measurement of reach and impact of the ILC. ¹⁹
Recommendation 20	The committee recommends the NDIA undertakes a review of the effectiveness to date of the ILC program in

18 NDIA, *Response to question on notice SQ19-000013*, received 22 February 2019.

19 NDIA, *Response to question on notice SQ19-000014*, received 22 February 2019.

	improving outcomes for people with a psychosocial disability.
Government response	Support The ILC program outcomes will be assessed through the ILC evaluation framework.
Status	Not addressed.
Recommendation 21	The committee recommends NDIA consider allocating specific funding for the provision of mental health services through the ILC.
Government response	Not supported Outside the NDIS, mental health services are primarily the responsibility of state and territory governments. The ILC policy, as agreed by the Disability Reform Council, stipulates the activity areas to be funded under ILC, which are: <ol style="list-style-type: none"> 1. Information, linkages and referrals 2. Capacity building for mainstream services 3. Community awareness and capacity building 4. Individual capacity building, and 5. Local area co-ordination (LAC). <p>It is not the role of the ILC to fund the delivery of clinical or community mental health services. Organisations can apply for ILC grant funding to deliver activities consistent with the ILC policy for specific disability types, including psychosocial disability. The NDIA manages ILC investment to ensure all policy areas set by governments are addressed.</p>
Status	Not addressed.
Recommendation 22	The committee recommends the NDIA urgently clarifies what approved supports are available to NDIS participants in custody and how it monitors and ensures NDIS participants access the supports they are entitled to while in custody.
Government response	Support The Government is committed to ensuring vulnerable people with psychosocial disability who are incarcerated, or are within a forensic disability facility, do not miss out on NDIS supports they are entitled to. Participants' NDIS plans remain active while a participant is in custody. However, at plan review, a decision about reasonable and necessary supports

	<p>will be made (with regard to the sentence period) before the plan is approved. In most cases, the Justice System is responsible for providing disability related supports under reasonable adjustment (see COAG applied principles). For people in a custodial setting (including remand) the only supports funded by the NDIS are those required due to the impact of the person's impairment/s on their functional capacity and additional to reasonable adjustment, limited to:</p> <ul style="list-style-type: none"> • aids and equipment • allied health and other therapy directly related to a person's disability, including for people with disability who have complex challenging behaviours • disability-specific capacity and skills building supports which relate to a person's ability to live in the community post-release • supports to enable people to successfully re-enter the community, and • training for staff in custodial settings where this relates to an individual participant's needs. <p>There may be opportunities for participants to have their current plan extended to ensure they are able to continue to access funding within their plan.</p>
Status	In progress. NDIS has provided some clarification about NDIS supports available for NDIS participants in custody. ²⁰
Recommendation 23	The committee recommends the NDIA establish an NDIA unit specialising in the interaction of the Scheme with the criminal justice system.
Government response	<p>Support</p> <p>The NDIA has already established a Technical Advisory Team that provides guidance and support to its service delivery network on access, planning and interaction with other government systems, including the criminal justice system. In addition, the NDIA Mental Health Team provides specific policy and practice advice for participants with psychosocial disability and complex needs.</p>
Status	Limited progress. Feedback from stakeholders during the committee's roundtable on 26 February 2019 indicated there had been some engagement with the sector. However, there is

20 NDIS, *Justice*, <https://www.ndis.gov.au/understanding/ndis-and-other-government-services/justice> (accessed 15 February 2019).

	no dedicated team in place.
Recommendation 24	The committee recommends the NDIA develop a specific strategy to deliver culturally appropriate services for Aboriginal and Torres Strait Islander people with disabilities who are in the criminal justice system.
Government response	<p>Support in principle</p> <p>The NDIA released the Aboriginal and Torres Strait Islander Engagement Strategy on 17 March 2017. All NDIA staff are committed to providing culturally appropriate information and services for Aboriginal and Torres Strait Islander people with disability, including those who are in the criminal justice system. The NDIA and governments are also developing jurisdictional working arrangements for NDIS transition with Operational Working Groups formed to oversee the operational implementation of the NDIS within individual regions. These groups are cross-governmental and include state representatives from Community Justice, Health, Child Protection and Family Support. The NDIA and the justice systems are working closely together at a local level to plan and coordinate streamlined services for individuals requiring both justice and disability services, recognising that both inputs may be required at the same time or through a smooth transition from one to the other. Jurisdictional factsheets are being developed for rules of people with disability involved in the justice system to support implementation of the interface between the NDIA and mainstream services during transition. They provide instructions on the provision of data to the NDIA on existing clients that are involved with child protection or justice system at the time of data being transferred to the NDIA. Work is also underway to improve the experience people with psychosocial disability, people from Aboriginal and Torres Strait Islander communities, those from Culturally and Linguistically Diverse backgrounds, and people with more complex needs have with the NDIS, with tailored pathways for these cohorts being developed and piloted.</p>
Status	Not addressed.

Inquiry	Transitional arrangements for the NDIS
Recommendation 1	The committee recommends the COAG Health Council in collaboration with the COAG Disability Reform Council urgently undertake work to address current boundary and

	interface issues between health and NDIS services.
Government response	<p>Supported</p> <p>Considerable work is already underway to prioritise and resolve boundary and interface issues between the health and NDIS services. Health and disability government officials are working together, and a joint meeting of senior officials will be held in mid-2018. In 2017, the DRC agreed that work to address the mainstream interface between the NDIS and the broader health systems would be progressed as a priority, advanced through the DRC's Senior Officials Working Group (SOWG), with progress reported to DRC at mid-year and at the end of 2018. The SOWG Health Sub-Working Group was established in late 2017 to drive this work and includes representatives nominated by each jurisdiction, the DSS, the Department of Health and the NDIA. State and territory representation includes officials from the relevant line agencies with health subject matter expertise and/or responsibility for health programs. The Health Sub-Working Group is implementing a work plan to prioritise and resolve boundary issues, including consistency of application of the Principles to determine the responsibilities of the NDIS and other service systems, which are underpinned by the Applied principles and tables of supports.</p>
Status	<p>In progress. The committee acknowledges the establishment of the Health Sub-Working Group to resolve boundary issues. However, work is progressing very slowly. On 9 January 2019, the Minister for Social Services announced interim arrangements for dysphagia and mainstream health supports until a final decision on roles and responsibilities of the NDIA and health systems is made by Governments in early 2019.²¹</p>
Recommendation 2	<p>The committee recommends the NDIA establish an NDIA unit specialising in dealing with Participants who are hospitalised to ensure smooth transition from hospital and avoid delays in hospital discharge and to avoid discharge to nursing homes.</p>
Government response	<p>Partially supported</p> <p>Mainstream health systems are responsible for discharge planning from hospital settings; however, the NDIA will</p>

21 NDIS, Health, <https://www.ndis.gov.au/understanding/ndis-and-other-government-services/health> (accessed 15 February 2019).

	<p>continue to work with the health sector to ensure that participants experience a seamless service response between health systems and the NDIS, and to reduce the risk of entry into unsuitable environments. The service delivery network will work with local hospitals and health providers to ensure that there is a better understanding of the NDIS and planning pathways. Through the SOWG Health Sub-Working Group, the NDIA is working with state and territory health departments to improve and streamline the discharge process for all participants. This includes ensuring nationally consistent approaches for prioritisation, escalation and resolution of urgent issues, including discharge delays. The NDIA is also working with the Summer Foundation on the Hospital Discharge Project, with a focus on improving the pathway out of hospital and back into the community for people with newly acquired disabilities. The work with the Health Sub-Working Group and the Summer Foundation may consider training specialised planners for participants with complex disability support needs, with the goal of assisting and facilitating a more seamless and timely discharge experience for participants transitioning to the NDIS. The NDIA has established a unit to respond to complex cases including those involving health interfaces.</p>
Status	<p>Not progressed. Recent media reports and evidence received by the committee indicate there are still unreasonable delays for participants seeking to transition from hospitals.²²</p>
Recommendation 3	<p>The committee recommends the COAG Disability Reform Council conduct immediately a national audit of all Australian, state, and territory disability support services transitioning to the NDIS, to identify and address emerging service gaps.</p>
Government response	<p>Supported in-principle</p> <p>Transitioning state and territory disability programs are documented in operational guidelines to enable streamlined access to the NDIS for existing state and territory clients. All governments committed to provide continuity of support for existing clients not eligible for the NDIS so that they are able to achieve similar outcomes. Continuity of Support (CoS)</p>

22 For example: Sophie Meixner and Tara Cassidy, 'Parents of quadriplegic man say NDIS delay extended hospital stay by six months at '\$1,500 per day', *ABC News*, 3 March 2019, <https://www.ndis.gov.au/understanding/ndis-and-other-government-services/health> (accessed 6 March 2019).

	arrangements for existing Commonwealth clients who are ineligible for the NDIS are being finalised.
Status	Not addressed.
Recommendation 4	The committee recommends the Department of Health in collaboration with the Department of Social Services undertake a review of current supports and funding available for people with disability over 65 years of age, with the view to developing a strategy to address current funding and support shortfalls.
Government response	<p>Partially supported</p> <p>DoH has responsibility for the care and support of Australians aged 65 years and over and Aboriginal and Torres Strait Islander people aged 50 years and over, including those with disability. The Commonwealth CoS program, administered by DoH, will provide ongoing support for people aged 65 and over (and Aboriginal and Torres Strait Islander people aged 50 years and over) who are currently in receipt of state-based disability services. The establishment of this program has already involved the clarification of services and funding for this cohort. However, there are several areas where further work is underway, including in the areas of specialist disability accommodation, aids and equipment, managing deinstitutionalisation, and support for changing circumstances. The interface between CoS and the aged care system, for example for those moving from their homes to residential aged care due to changing circumstances, is also being considered.</p>
Status	Not addressed.
Recommendation 5	The committee recommends the Australian, state and territory governments clarify and agree on the scope and process to deliver Personal Care in Schools (PCIS) under the NDIS.
Government response	<p>Supported</p> <p>The Applied Principles relating to school education, agreed by the Council of Australian Governments (COAG), state that further work must be undertaken on how a student's personal care needs will be assessed, quantified, funded and administered. In light of this requirement, and to support this recommendation, the Australian, and state and territory governments are working with the NDIS to determine the scope and approach for delivering PCIS systems in the long term.</p>

	<p>Currently, most state and territory governments claim the cost of delivering PCIS 'in-kind' as a funding deduction from their NDIS contribution. DRC has previously agreed further work is required to clarify service scope and responsibilities for PCIS. A PCIS Working Group, consisting of senior officials led by the Victorian Government, has prepared a comprehensive report on PCIS under the NDIS, which identifies several options for resolving scope and delivery. The PCIS Working Group will examine these options, including how the assessment and delivery process would work. DRC will consider options for the future scope and process for delivering PCIS in the second half of 2018.</p>
Status	<p>In progress. Interim arrangements have been put in place. In December 2018, the DRC agreed that, as an interim solution, states and territories will continue to deliver services for PCIS until 31 December 2023, while development work is undertaken.²³</p>
Recommendation 6	<p>The committee recommends the NDIA develop guidance on best practices for provision of therapies in school settings, based on lessons learnt during NDIS trials and rollout to date.</p>
Government response	<p>Supported in-principle</p> <p>The Australian Government acknowledges the importance of providers of support being able to work collaboratively with the family and education systems to support children with developmental delay or disability holistically. The NDIA will discuss the development of guidance for the provision of therapies in school settings with state and territory governments.</p>
Status	<p>Not addressed.</p>
Recommendation 7	<p>The committee recommends the NDIA review its operational and funding guidelines for transport supports to ensure NDIS Participants' needs are met.</p>
Government response	<p>Supported</p> <p>The NDIS may fund reasonable and necessary transport supports related to a person's disability. On Friday</p>

23 COAG Disability Reform Council, *Communique*, 10 December 2018, https://www.dss.gov.au/sites/default/files/documents/12_2018/drc-communique-final-drc-10-december-2018-meeting.pdf (accessed 22 March 2019).

	<p>2 March 2018, the NDIA released its response to the Independent Pricing Review (IPR), which was undertaken by McKinsey and Company. Some of the recommendations in the IPR relate to transport pricing, and include:</p> <ul style="list-style-type: none"> • allowing providers to charge up to 45 minutes of travel time in rural areas; and • removing the annual \$1000 travel cap for therapy supports and aligning the travel policy with the attendant care travel policy. <p>The NDIA has agreed to these transport-related recommendations in the IPR, and is continuing to work with state and territory governments on transport issues through the Transport Working Group. The NDIA is also currently reviewing its operational guideline for transport supports.</p> <p>During transition to the NDIS, specialist school transport for NDIS participants is provided by state and territory governments as an in-kind support, with states and territories offsetting the cost against their NDIS funding contributions. To determine how specialist school transport will be delivered at full scheme NDIS, DRC's SOWG is undertaking broad national consultation on a potential model for specialist school transport at full scheme. The consultation will test with stakeholders (including participants, families, schools and transport providers) a potential model for specialist school transport in the NDIS, under which participants would purchase transport directly from the open market, or via an NDIS-funded intermediary who would assist participants with travel planning, and manage service bookings and invoicing. Advice on the proposed model and how school transport should be delivered will be provided to Ministers for decision at DRC, once the consultation process is complete.</p>
Status	<p>In progress. Interim arrangements have been put in place. In December 2018, the DRC agreed that, as an interim solution, states and territories will continue to deliver services for specialist school transport until 31 December 2023, while development work is undertaken.²⁴</p>
Recommendation 8	<p>The committee recommends the COAG Disability Reform Council consider the provision of housing stock and</p>

24 COAG Disability Reform Council, *Communique*, 10 December 2018, https://www.dss.gov.au/sites/default/files/documents/12_2018/drc-communique-final-drc-10-december-2018-meeting.pdf (accessed 22 March 2019).

	infrastructure for people with disability.
Government response	<p>Supported in-principle</p> <p>The Applied Principles relating to housing and community infrastructure, which were agreed by COAG in 2013, and updated in 2015, articulate that state and territory governments are responsible for social housing and homelessness services. Under the Applied Principles, state and territory governments are also responsible for providing accessible accommodation for people in need of housing assistance, including people with disability.</p> <p>While the provision of housing stock and infrastructure is a matter for states and territories, the NDIS includes supports for Specialist Disability Accommodation (SDA), which is available for the highest-needs NDIS participants, and DRC is actively engaged in ensuring SDA provisions are appropriate to meet the needs of NDIS participants. The SDA market is yet to fully mature; however, SDA is expected to be provided to around 28,000 participants at full scheme, making up around 6 per cent of all participants.</p> <p>Appropriate housing for the majority of NDIS participants is critical and will not be provided by the NDIS. State and territory governments, with responsibility for mainstream housing, will need to work with the Australian Government, where possible, to ensure that housing supply is sufficient to ensure NDIS participants who do not receive SDA funding are appropriately housed.</p>
Status	<p>Limited progress. Following a review into SDA by the DRC that was completed in December 2018, SDA reforms were announced in February 2019. For the first time SDA will be included in participants plans up front. The Government is working towards removing restrictions by July 2019 in the SDA Rules that currently prevent some families from living together.²⁵</p>
Recommendation 9	<p>The committee recommends that the Australian, state and territory governments and the NDIA work together urgently to include crisis accommodation and Provider of Last Resort arrangements for housing in their respective</p>

25 NDIS, *Governments take action to increase SDA*, <https://www.ndis.gov.au/news/1448-governments-take-action-increase-specialist-disability-accommodation> (accessed 15 February 2019).

	bilateral agreements and operational plans.
Government response	<p>Supported in-principle</p> <p>As part of its market stewardship role, the NDIA is developing a Maintaining Critical Supports framework to govern urgent interventions to maintain continuity of support for participants that fail to secure, or lose access to, the supports they need. The NDIA has been consulting with the Australian, and state and territory governments on the Maintaining Critical Supports operational framework, which encompasses Provider of Last Resort arrangements, and provided an update to DRC in April 2018. Arrangements and roles of all parties, including those relating to crisis accommodation, will be agreed through the operational framework and reported to DRC.</p>
Status	<p>Limited progress. According to the NDIA, the DRC agreed on the approach to Maintaining Critical Supports and the Agency is working on a number of actions, including:</p> <ul style="list-style-type: none"> • After-hours Crisis support arrangements – the NDIA has been piloting after-hours crisis response arrangements in three states to determine the best way to meet the needs of participants. Providers have been sourced to provide varying levels of support, depending on the level of escalation required; and • Critical Service Issues Response – the NDIA has worked with each State and Territory Government to establish clear mechanisms for escalation and resolution of individual and thematic issues that affect participants.²⁶
Recommendation 10	The committee recommends the NDIA ensure that across all jurisdictions people with disability can access pre-planning supports.
Government response	<p>Supported</p> <p>The Australian Government supports pre-planning for all participants in the NDIS, and is committed to improving the pre-planning experience for participants. The NDIA is currently piloting the first phase of a new participant pathway, which focuses on a range of improvements to the pre-planning, plan development and plan implementation stages of the pathway. Central to the design of the new participant</p>

26 NDIA, *Response to question on notice SQ19-000013*, received 22 February 2019.

	<p>experience is:</p> <ul style="list-style-type: none"> • a commitment to face-to-face engagement for all participant plan development; • a stronger focus on the broader system of supports for people with disability outside of the NDIS; and • a strong and clear focus on supporting participants to achieve their desired outcomes and goals. <p>Two pilots of this first phase were launched in Victoria in January 2018.</p> <p>Future pilots will focus on the early stages of the pathway, including learning about the NDIS and how to access the scheme, as well as improvements to the annual plan review process. During the pre-planning stages of the new pathway, participants will meet their Local Area Coordinator (LAC), typically face-to-face, to prepare for planning. They will learn what to expect from the planning process, provide information about their current circumstances, and discuss the outcomes they want to achieve. Following this conversation, and prior to the joint planning conversation with an NDIS planner, the LAC will brief the planner to ensure that they are well prepared and to avoid the participant having to retell their story. The LAC will also work with the participant and their family and carers to help develop a plan. The NDIA has also developed a new pre-planning resource, which is currently being trialled in this pilot phase. This new resource will support participants in their pre-planning preparation.</p> <p>The evaluation of the initial pilot, as well as recommendations for further rollout, are anticipated to be finalised by June 2018. These evaluations will help inform the national rollout of the new NDIS participant pathway. In addition, tailored pathways are being developed and refined for people with psychosocial disability, children, people from Aboriginal and Torres Strait Islander communities, those from culturally and linguistically diverse (CALD) backgrounds, people living in remote and very remote communities, and people with more complex support needs.</p>
Status	In progress through the implementation of the new participant pathway.
Recommendation 11	The committee recommends the NDIA urgently finalise and start piloting the tailored pathways it has been developing for people with psychosocial disability; children; people from Aboriginal and Torres Strait Islander communities; those from culturally and linguistically diverse

	backgrounds and Participants with more complex needs.
Government response	<p>Supported in-principle</p> <p>The NDIA is currently developing a number of tailored participant pathways to meet the needs of specific population groups, including children and people with psychosocial disability. Through a series of 36 workshops conducted nationally, the NDIA is engaging with participants and stakeholders and listening to their feedback.</p> <p>Using this feedback, high-level designs for tailored pathways, including the Early Childhood Early Intervention approach, are being developed for the consideration of the NDIA Board. The NDIA is working closely with several jurisdictions who have expressed an interest in participating in future pilots of the tailored pathway. The locations will be finalised and announced by the end of 2017-18. It is important that these tailored pathways reflect the feedback from participants, carers, providers, industry experts and other stakeholders. They will then be tested and piloted in appropriate locations and refined before being rolled out nationally. Potential locations for pilot sites are currently under active consideration.</p>
Status	<p>In progress. The complex needs pathway is being piloted in some areas in VIC and NSW. Rollout in new locations will be confirmed at a later date.²⁷ There is no information readily available about the status or timing of the development and roll out of the other tailored pathways. A new psychosocial disability stream is being established. Enhancement of the ECEI pathway is planned for 2019.</p>
Recommendation 12	<p>The committee recommends the NDIA publish data and analysis on the following in its Quarterly Reports:</p> <ul style="list-style-type: none"> • number of plan reviews; • waiting times Participants face for reviews; • outcomes of plan reviews in terms of whether the overall package has been increased or decreased; • satisfaction rating of Participants following a plan review.

27 NDIS, *Complex support needs pathway*, <https://www.ndis.gov.au/about-us/ndis-pathway-reform/pathway-reform-whats-happening-2019#hearing-service-stream> (accessed 15 February 2019).

Government response	<p>Partially supported</p> <p>The number of plan reviews is currently being reported in the NDIA's Quarterly Reports to DRC. Participant satisfaction following a plan review will be included in the Quarterly Reports in the 2018-19 financial year. The NDIA is considering the recommendation to report the waiting times participants face for plan reviews and the outcomes of those reviews in the Quarterly Report, noting that the quarterly change in committed support is already included.</p>
Status	<p>Partially addressed. The Quarterly reports only provide information on number of plan reviews and unscheduled plan reviews.</p>
Recommendation 13	<p>The committee recommends the NDIA focus all necessary resources and efforts on reducing waiting times at all points of the Scheme, specifically for plan approval, activation and review.</p>
Government response	<p>Supported</p> <p>The timing surrounding when a person can become a participant of the NDIS and receive a plan of support during the scheme transition period (1 July 2016 to 30 June 2019) is governed by phasing schedules contained in the bilateral agreements between the Australian Government and each state and territory. The NDIA is improving communications to explain that, while a person can seek access to the NDIS at any time within the six months prior to NDIS rollout in their region, the timeframes for their plan development are governed by the bilateral agreements. The NDIA is committed to improving the ease with which a potential participant interacts with the NDIS at all points of the pathway. This is being driven by the comprehensive pathway review work as mentioned in the response to Recommendation 10. The new participant pathway matches a participant with a LAC, who will become the participant's consistent point of contact throughout their NDIS journey. The LAC will help inform the participants of their plan's progress and the next steps, including when their next appointment will be and how they can get support, if required. The new participant pathway will also see a much stronger focus on plan implementation and activation. After their NDIS plan is approved, a participant and their LAC will meet to discuss plan implementation arrangements. This will include how to access the NDIS portal, how to find and connect to providers, and how to use their funded supports flexibly to</p>

	achieve the participant's stated goals and aspirations. Evaluation of the pilot will provide a clearer understanding of the success of plan approvals through this process, and whether the new participant pathway aids participants in implementing their plan.
Status	Limited progress. The NDIA is rolling out the new participant pathway, which should contribute to address delays experienced by participants. However, feedback from participants indicates that delays are still an issue at all points of the Scheme.
Recommendation 14	The committee recommends state and territory Governments put strategies in place to facilitate and support the registration of providers during the transition period.
Government response	Supported The NDIS quality and safeguards transitional arrangements will be supported by Transitional Rules. The Rules have been developed based on the principle that there will be no unnecessary administrative requirement on providers during transition. Providers who are currently registered with the NDIA will be deemed to be registered with the NDIS Quality and Safeguards Commission. DSS has engaged with all jurisdictions on the transitional arrangements for NDIA registered providers to the NDIS Commission. The transitional arrangements are being overseen and agreed by SOWG and its Quality and Safeguards Sub-Working Group comprised of Australian and state and territory government officials. The transitional registration arrangements for providers in NSW and SA in 2018 have been agreed and finalised in consultation with those jurisdictions.
Status	Limited progress. Feedback from submitters during the committee's 26 February 2019 roundtables indicated that there is duplication of requirements for some professions.
Recommendation 15	The committee recommends the Australian Government increase funding for ILC to the full Scheme amount of \$131 million for each year during the transition.
Government response	Partially supported DSS is working with the NDIA to help transform ILC from a patchwork of state-based grants to a national program designed to identify and fill service gaps, and to build evidence to inform

	future investment for ILC. The Australian Government considers this approach is likely to achieve greater long-term return on investment. The budget for ILC increases to \$114 million in 2018-19, and to \$131 million in 2019-20.
Status	Not addressed.
Recommendation 16	The committee recommends the NDIA monitor the effectiveness of the current ILC grant funding model, with the view of introducing other types of funding, including block funding if required, to ensure appropriate and quality services are delivered across all jurisdictions.
Government response	Supported in-principle The NDIA is currently undertaking work to develop an ILC Investment Strategy for full scheme. This will guide national investment to increase inclusion for people with disability. The ILC Investment Strategy is likely to include a strategic and mixed investment portfolio, a programmatic approach, and is likely to involve consultation with stakeholders.
Status	Started. In December 2018, the NDIA released its ILC national strategy towards 2022, which outlines changes to the ILC program to strengthen its effectiveness, which will be progressively rolled out during 2019-2020. ²⁸
Recommendation 17	The committee recommends the NDIA develop and publically release a strategy to address thin markets.
Government response	Supported The NDIA published its NDIS Market Approach (Statement of Opportunity and Intent) in November 2016, which outlines the NDIA's stewardship approach in more detail. The NDIA's market stewardship approach is characterised by: <ul style="list-style-type: none"> • monitoring disability support markets and assessing if they are achieving appropriate outcomes; and • taking actions where necessary to improve the functioning of the NDIS markets, such as price controls. The NDIA plans to use local area market monitoring and surveillance to identify thin markets at a local level, and will work locally to respond on a priority basis, as recommended by the Independent Pricing Review. This will also be supported by

28 NDIS, *ILC Strategy towards 2022*, <https://www.ndis.gov.au/community/strengthening-ilc-national-strategy-towards-2022> (accessed 15 February 2019).

	enhancements to the NDIS Provider Finder Tool, which will enable participants to more easily connect with suitable providers and exercise greater choice and control in sourcing providers. The NDIA is also developing a Market Intervention Framework to set out how the NDIA will monitor the marketplace. It will provide the NDIA with available options to intervene under particular market scenarios, such as provider exit or situations where thin markets exist or may emerge. The NDIA's actions to address market issues will be coordinated with other government initiatives.
Status	Started. On 26 November 2018, the NDIA released the NDIS Market Enablement Framework. ²⁹ The new framework guides how the NDIA will monitor the market and determine what, if any, strategies should be adopted to encourage market growth or correction.
Recommendation 18	The committee recommends the NDIA publically release its Provider of Last Resort policy as a matter of urgency.
Government response	Supported As market steward, the NDIA is responsible for development of strategies and procedures to provide supports to those participants who cannot receive them through the open market. The NDIA is committed to publishing the agreed outcomes of its Maintaining Critical Supports project, including policies and processes, following DRC endorsement in the first half of 2018.
Status	Not progressed. Although, the committee notes that the NDIA is working on a number of actions, including piloting after-hours crisis response arrangements, and working with state and territory governments to establish clear mechanisms for escalation and resolution of individual and thematic issues that affect participants. ³⁰
Recommendation 19	The committee recommends the COAG Disability Reform Council work with the Department of Social Services to address the expected funding shortfalls for advocacy services beyond transition.

29 NDIS, *New Framework to ensure NDIS Provider Markets are available to participants*, 23 November 2018, <https://www.ndis.gov.au/news/996-new-framework-ensure-ndis-provider-markets-are-available-participants> (accessed 22 March 2019).

30 NDIA, *Response to question on notice SQ19-000013*, received 22 February 2019.

Government response	<p>Supported</p> <p>The Australian Government is committed to supporting individual and systemic disability advocacy, and in August 2017, the Australian Government announced funding of over \$60 million for the National Disability Advocacy Program, the NDIS Appeals Supports program, and for Disability Representative Organisations. Additional funding of \$2.4 million per year for the National Disability Advocacy Program in NSW and Queensland was announced in April 2018. The additional funding will ensure that each state receives equitable funding for advocacy from the Australian Government according to population. All jurisdictions apart from SA, TAS, the ACT and the NT have committed to funding individual advocacy. NSW has committed to funding disability advocacy as an interim measure until July 2020. All levels of government have a responsibility to support advocacy for people with disability to ensure they can exercise their rights. A national system of disability advocacy support requires ongoing investment from states and territories to ensure their citizens can resolve issues with state-run services, and advocates can participate effectively in state-based planning. DSS, through SOWG, is reviewing advocacy projects, policies and priorities. The final project plan and timelines will be provided to SOWG when they are finalised, with a subsequent progress update to be provided to DRC.</p>
Status	<p>In progress. Interim arrangements are in place; however, long-term funding arrangements remain unclear.</p>
Recommendation 20	<p>The committee recommends the Department of Social Services and the NDIA develop and publically release a plan outlining how assertive outreach services will be delivered beyond transition to ensure people with disability who are hard-to reach can effectively engage with the NDIS and / or other support programs.</p>
Government response	<p>Supported</p> <p>The Australian Government recognises that there are people with disability who are currently disconnected from state-based services and supports, are harder to reach and engage with than others, and may be in need of assistance. The NDIA is currently developing a Hard to Reach Strategy, due for finalisation and publication in 2018. The strategy will be aligned with the tailored pathway for participants with more complex needs.</p>

	A number of current Sector Development Fund (SDF) projects, focused on engaging with hard-to-reach cohorts, will inform the NDIA's assertive outreach plan. The Australian Government also acknowledges that states and territories, through their commitment to the National Disability Strategy, share a responsibility for maintaining disability advocacy services to protect the rights of people with disability, including those who may be hard-to-reach, to access mainstream services. This includes NDIS participants as well as those who are not eligible, who represent the vast majority.
Status	Not progressed. However, the committee has been advised that the NDIA's Hard to Reach Strategy is expected to be finalised in mid-2019. ³¹
Recommendation 21	The committee recommends the NDIA ensure support coordination is adequately funded in Plans to meet Participants' needs and not limited to a fixed period.
Government response	Supported The coordination of NDIS supports can be provided on three different levels depending on a participant's capacity and support needs. Coordination of supports may be funded as a reasonable and necessary support in a participant's plan, or provided by an NDIS partner in the community. The level of support provided is based on a participant's goals, pre-existing supports (consisting informal, mainstream and community supports) and what is determined to be reasonable and necessary for the plan period, regardless of any previous funding of this support. It is anticipated that the level of support may reduce over time as participants develop the capacity to implement the supports in their plan. However, it is noted for some participants that the level of support may remain constant or increase as their needs change.
Status	Not progressed. At 31 December 2018, 40 per cent of NDIS participants had support coordination in their plans. ³² Stakeholders during the committee's roundtables in February 2019 told the committee that support coordination is commonly not being provided or adequately funded in plans.
Recommendation 22	The committee recommends the NDIA ensure its Customer

31 NDIA, *Response to question on notice SQ19-000027*, received 22 February 2019.

32 NDIA, *COAG Disability Reform Council Quarterly Report*, 31 December 2018, p. 69.

	Relationship Management (CRM) system is modified to enable collection of data about participation rate of people from CALD backgrounds.
Government response	<p>Supported</p> <p>It is currently mandatory within the NDIS CRM system that data is captured on whether a prospective participant is from a CALD background. This data is recorded during the access request process to ensure the most appropriate service is provided to assist the participant through their NDIS journey. The measurement of NDIS outcomes and participation is captured through the Outcomes Framework Questionnaire responses for all participants. The completion of this questionnaire is mandatory in the CRM for each plan, and is supplemented by other key data, such as plan funds committed to service providers and plan expenditure. The NDIA is currently developing business requirements to enhance the CRM's ability to collect data during plan reviews about participant goal attainment. This will enable the NDIA to better measure NDIS participation and outcomes for all participants, including those from CALD backgrounds.</p>
Status	Completed. In the Quarterly reports, the NDIA reports on CALD status of active participants with an approved plan.
Recommendation 23	The committee recommends the NDIA urgently publically release its NDIS CALD Strategy.
Government response	<p>Supported</p> <p>The NDIA's CALD Strategy will be publicly released in the first half of 2018.</p>
Status	Completed. On 14 May 2018, the NDIA announced the release of its CALD strategy (the Strategy). However, the Strategy is not publicly available on the website. ³³
Recommendation 24	The committee recommends the NDIA ensure culturally appropriate pre-rollout and NDIS engagement activities are in place in Aboriginal and Torres Strait Islander communities at least six months before rollout date.

33 NDIS, *Embracing cultural and linguistic diversity*, 17 May 2018, <https://www.ndis.gov.au/news/532-embracing-cultural-and-linguistic-diversity> (accessed 25 March 2019).

Government response	<p>Supported</p> <p>The NDIA's Rural and Remote Strategy and Aboriginal and Torres Strait Islander Engagement Strategy were released in March 2017. The NDIA has worked with jurisdictions to ensure respectful engagement with Aboriginal and Torres Strait Islander communities, and is exploring the contracting of community connectors from locally-controlled Aboriginal organisations in more remote areas. The NDIA is also developing a tailored pathway for Aboriginal and Torres Strait Islander people in close collaboration with other stakeholders. As part of the pathway reform, the NDIA consulted with participants, families and carers and other stakeholders over a series of nine workshops since October 2017, focusing on Aboriginal and Torres Strait Islander and/or remote or very remote communities. The findings from these consultations indicate three broad themes for consideration:</p> <ul style="list-style-type: none"> • trust, ownership and cultural safety; • simple access pathways and NDIS plans which align to culture; and • knowing and using the right language and communication formats/mediums. <p>The NDIA will continue to work with participants and other stakeholders through the design and testing of the tailoring of the pathway for individuals from Aboriginal and Torres Strait Islander and remote or very remote communities. In addition, the NDIA has established a Participant Reference Group that is providing important input into the pathway review work and the development of associated resources including communications products and staff training materials. The group is structured to reflect the diverse needs of people with disability, as well as the diversity of the Australian population, including Aboriginal and Torres Strait Islander peoples. The NDIA is collaborating with the Department of the Prime Minister and Cabinet, Indigenous Businesses Australia and DSS to deliver projects that maximise the opportunities that the NDIS will bring to a number of communities, including:</p> <ul style="list-style-type: none"> • East Arnhem, NT; • Anangu Pitjantjatjara Yankunytjatjara Lands, SA; • Ceduna, SA; • Mornington Island and Doomadgee, Queensland; and • Western Sydney, NSW.
Status	<p>Partially progressed. The committee notes the initiatives taken by the NDIA. However, the committee continues to</p>

	receive feedback that engagement with Aboriginal and Torres Strait Islander communities is not systematically occurring, resulting in Aboriginal and Torres Strait Islander people with disability not fully engaging with the Scheme.
Recommendation 25	The committee recommends the Minister for Social Services appoint an Aboriginal and Torres Strait Islander representative on the NDIS Independent Advisory Council (IAC).
Government response	Supported in-principle The Minister for Social Services appoints the members of the Independent Advisory Council under the legislative requirements in section 147 of the <i>National Disability Insurance Scheme Act 2013</i> . The majority of Council members are people with disability. Pursuant to the NDIS Act, members of the Council are appointed by the Minister, and the Minister must seek the support of all the states and territories before any appointment is made. While there is no specific legislative requirement for an Aboriginal and Torres Strait Islander representative to be appointed, to reflect the diversity of people with disability, the Council currently has one member who is of Aboriginal and Torres Strait Islander descent. The Committee's recommendation will be considered as part of future Council appointment processes.
Status	Limited progress. The committee notes the response and strongly encourages that future Council appointment processes be reviewed to ensure that an Aboriginal and Torres Strait Islander representative is appointed.
Recommendation 26	The committee recommends the NDIA develop, in collaboration with Aboriginal and Torres Strait Islander organisations and the Aboriginal community controlled health, an Aboriginal and Torres Strait Islander Workforce Strategy.
Government response	Supported in-principle The Australian Government understands that the NDIS needs a strong, culturally appropriate disability services workforce. The Australian Government is committed to working with Aboriginal and Torres Strait organisations and the Aboriginal Community controlled health sector to implement existing measures and develop further strategies to support the development of the workforce. The NDIA is collaborating with PM&C and other government agencies to identify opportunities

to build Aboriginal and Torres Strait Islander employment through the NDIS. This includes:

- a Cross Portfolio Working Group that works to ensure government programs and infrastructure align with and promote social and economic participation for Aboriginal and Torres Strait Islander people through the NDIS;
- the Maximising Indigenous Employment and Economic Opportunities project, which is operating in 10 remote locations to maximise the employment outcomes for Aboriginal and Torres Strait Islander people through specific place-based work; and
- the establishment of a Guiding Coalition, which is specifically focussed on improving the viability of the NDIS Aboriginal Services Sector and supports the work of the Cross Portfolio Working Group. Members include senior representatives from DSS, the NDIA, PM&C, the National Aboriginal Community Controlled Health Organisation, Indigenous Health (DoH) and PwC's Indigenous Consulting.

The NDIA is also committed to increasing the representation of Aboriginal and Torres Strait Islander people in its workforce. To achieve this, the NDIA has developed an Aboriginal People and Torres Strait Islander Employment Strategy 2018-2020, which aims to provide Aboriginal and Torres Strait Islander employers with the tools, resources and capabilities to retain and develop employees, and to ensure that managers and peers are culturally capable. This will give the NDIA access to talented people, diversity at work, and employees who can help the NDIA deliver culturally appropriate products and services. Further, the Australian Government is providing \$33 million over the next three years to implement the Boosting the Local Care Workforce Program (the Workforce Program). The Workforce Program will provide targeted assistance to meet expanding workforce requirements, helping employers increase the supply of care workers in regional areas to meet the needs of NDIS participants and the care sector more broadly. EY has been chosen to lead a consortium, which includes the First Peoples Disability Network, to implement and manage the Workforce Program. One of the Workforce Program's aims is to encourage Indigenous organisations who employ Aboriginal and Torres Strait Islander workers to become NDIS providers. The Australian Government has also provided over \$109 million through the SDF to prepare providers and participants for the transition to the NDIS. One of the areas in which it

	provides assistance is the expansion and diversification of the workforce to meet increased demand. There have been a number of SDF projects that have focussed on Aboriginal and Torres Strait Islander people specifically, encouraging them to join the allied health workforce in remote areas.
Status	Not addressed. There have been discreet initiatives but no overall strategy has been developed in collaboration with the sector.

Inquiry	Provision of services under the NDIS ECEI Approach
Recommendation 1	The committee recommends that the NDIA clarify and publish current ECEI access points, and outline the future model for access arrangements.
Government response	Agree and underway Although the process to access an ECEI Partner is currently available on the NDIS website, it is clear from our recent pathway work that families are finding the transition from the state based systems to the national scheme confusing. This has been complicated by the complexity of the transitional arrangements that have had to be accommodated. In particular, families are unclear as to the extent of the responsibilities that remain in mainstream services and the linkages from those services to the NDIS early childhood partners. Material to further clarify the boundaries, roles and responsibilities of the NDIA and mainstream services will be developed. The interpretation of access requirements for children will be undertaken as part of the ECEI tailored review of the pathway. Details for contacting the ECEI Partners will be further clarified on the website. Timetable - June 2018
Status	In progress. The NDIS website contains a dedicated ECEI page that directs prospective participants to Early Childhood Partners for assessment and access to the Scheme. On the Access Request Form page, it advises that you can still call the NDIS directly for an access form. In February 2019, the Agency confirmed that some families of children with more profound disabilities, along with the support of their health professional, may choose to contact the NDIA in the first instance to make an access request. In these cases, the National Contact Centre will immediately begin the access process, as

	well as provide families with details of the Early Childhood Partner/NDIS office in their area to ensure appropriate linkages to community and other government services are made and to ensure planning can commence as soon as possible. ³⁴
Recommendation 2	The committee recommends that a nationally consistent process for the engagement of Partners be developed by the NDIA.
Government response	Agree The NDIA is required to transition children from a range of disparate state and commonwealth programs across Australia into the NDIS. This process requires flexibility in the identification, development and recruitment of partners through the transition phase and early NDIS consistent with existing jurisdictional arrangements. The longer-term aim will be to have a consistent flexible response to ensure ECEI partners are recruited through a standardised process using contemporary best practice approaches for contracting the early childhood and allied health expertise required for the role.
Status	Not progressed. The NDIA confirmed that it has engaged 18 partners to provide Early Childhood Early Intervention services in 63 service areas across Australia. The Agency is currently reviewing the forward strategy, including the length of time partners will be engaged for in the future. This review will include consultation with state governments, peak bodies, and existing partners. The long term partner strategy is due to be completed by the end of 2019. ³⁵
Recommendation 3	The committee recommends that the NDIA publish clear and comprehensive guidance around the eligibility criteria for children with developmental delay on its website.
Government response	Agree in principle The definition and interpretation of developmental delay eligibility criteria is available on the NDIS website in the Access Operational Guideline. This will be developed into a Frequently Asked Question (FAQ) on Developmental Delay on the NDIA ECEI specific page. Material to further clarify the boundaries, roles and responsibilities, the type of supports that a person can expect from the ECEI partner and the

34 NDIA, *Response to question on notice SQ-000016*, received 22 February 2019.

35 NDIA, *Response to question on notice SQ-000017*, received 22 February 2019.

	interpretation of access requirements, specifically for those children with developmental delay, will be undertaken as part of the ECEI pathway review.
Status	Not progressed. There is no information on the ECEI webpage which provides clarity on what level of severity children with developmental delay must demonstrate or whether two or more areas of delay are required for access to the Scheme.
Recommendation 4	The committee recommends that the NDIA publish information on its website about how List D is determined and how new conditions are incorporated.
Government response	Agree List D are the conditions that were identified as permanent impairments following research by several disability experts in the early stages of the development of the NDIS. This list was designed to provide confidence to those families who have a child with disability which will always meet the disability definition of the Act. Work to formalise consultation on these lists will be undertaken as part of wider analysis of the sustainability of the NDIS, patterns observed on access and those found not eligible in the second half of 2018.
Status	Not progressed. There is no information on the NDIS website regarding how List D was determined, or how new conditions are incorporated.
Recommendation 5	The committee recommends that the NDIA publish information on all of its functional assessment tools currently in use.
Government response	Agree The NDIS use of Pedi-CAT as a standardised screening tool is publicly known. NDIA uses this screening tool under license. A broad range of information is publicly available on the Pedi-CAT website: www.pedicat.com . NDIA acknowledges that further clarification of the use of assessment and screening tools in ECEI is required and the ECEI national team will lead work in this area. Early Childhood Partners are encouraged to utilise information from a range of individually appropriate functional assessment or screening tools to obtain an understanding of the nature and severity of functional impairment. This may be provided by the family or another professional, such as:

	<ul style="list-style-type: none"> • Parents' Evaluation of Developmental Status • Ages and Stages Questionnaires® • Brigance Early Childhood • The Child Development Inventory <p>Additionally, available reports from allied health and educational professionals involved with the child will be utilized to support the information attained by the partner in assessing the child's support needs. The Early Childhood Partner will apply other routine based assessments such as those listed above if additional information is required.</p>
Status	<p>Completed. There is some information on the NDIS website about the various types of functional assessment tools in use. On the <i>Types of disability evidence</i> webpage, a range of functional assessments tools are listed as being acceptable evidence of disability when the results are provided from certain treating professionals. The page also lists the order of preference for these results and includes PEDI-CAT and Vineland II.³⁶</p>
Recommendation 6	<p>The committee recommends the NDIA clarify how it uses assessment tools, and specifically, how results are used to determine eligibility and level of funding of children with disability or developmental delay.</p>
Government response	<p>Agree and underway</p> <p>The NDIA has recently developed PEDI-CAT FAQs which are publically available and which explain how this is used as a standardised measure of functional impairment for all children. The NDIA draws on a range of information to understand the support needs of participants. Functional screening assessment tools serve as one information source to inform this understanding. This is not, however, the determinant of access to the NDIS, as there is no single measure or score that is used to determine access. Rather, information is gathered by the Early Childhood Partner from a range of sources, including treating specialists, the family, the PEDI-CAT and other functional (and behavioural) screening assessments, which together provides critical information to understand the impact</p>

36 NDIS, *Types of disability evidence*, <https://www.ndis.gov.au/applying-access-ndis/how-apply/information-support-your-request/types-disability-evidence> (accessed 25 March 2019).

	<p>of any impairment on daily life. Early Childhood Partners may also apply other routine based assessments, if required. The Pedi-CAT or other functional screening assessments are not the sole determinant of the child's level of function. As noted above, information gleaned from the Pedi-CAT is used in combination with a range of other sources of information, including parent report. The funding within an individual's plan is not standardised and does not directly relate to the functional assessments undertaken but rather the family/carer's goals for their child. Funding will address the reasonable and necessary needs that are identified through this assessment taking into account evidence of the value of intervention and the role of families, informal supports and the responsibilities of mainstream services. Each plan is unique and not all goals require funded supports. This is explained to families by the Partners and materials addressing feedback to be obtained from the current consultations on the ECEI pathway will be developed to explain this individualised approach further. Timetable - June 2018. Over time as data is built by the NDIS and evidence of the effectiveness of the nature of interventions for particular functional impairments is built up, further information will be able to be developed as part of reference packages for children. Timetable - June 2020</p>
Status	<p>Limited progress. There is no information on the NDIS website about the various types of functional assessment tools in use by ECEI Partners, or how results are used (or not used) to determine eligibility and level of funding of children with disability or developmental delay. On the <i>Types of disability evidence</i> webpage, a range of tools are listed as being acceptable evidence of disability when the results are provided from certain treating professionals. The page also lists the order of preference for these results and includes PEDI-CAT and Vineland II. However, there is no specific information for prospective participants on how this information is used (or not) to inform eligibility or determine level of funding.³⁷</p>
Recommendation 7	<p>The committee recommends the NDIA liaise with the sector to co-design and develop a purpose-built assessment tool for children with ASD in Australia.</p>
Government	<p>Agree</p>

37 NDIS, *Types of disability evidence*, <https://www.ndis.gov.au/applying-access-ndis/how-apply/information-support-your-request/types-disability-evidence> (accessed 25 March 2019).

response	Work is underway with the Autism Cooperative Research Centre to develop a national guideline for consistent diagnosis of ASD that focuses on the functional impairment and effective intervention for the types of impairment that may be associated with this diagnosis. Overwhelming feedback from many stakeholders has indicated that while diagnosis has a role to play in understanding the impact of the condition, what should determine access is the functional impact of the ASD. The NDIA will continue to work with experts and key stakeholders to develop a far more robust approach to the assessment of the functional impact of ASD. Timetable - September 2018 for improved tool.
Status	In progress. On 16 October 2018, it was announced that Autism CRC, through funding provided by the NDIA, will undertake a trial of the PEDI-CAT ASD. The research is expected to be completed by the end of June 2019. ³⁸
Recommendation 8	The committee recommends that the NDIA provide ongoing and targeted training to Planners creating ECEI Plans for children to ensure they are equipped with the most up to date knowledge, expertise and resources in their decision making.
Government response	Agree The NDIA will continue to commission partners with strong clinical, early childhood intervention expertise. This includes strengths in family-based approaches and engagement with community. The ECEI national team specialised practice training is currently addressing this concern. Timetable – ongoing
Status	In progress. In November 2018, the NDIA ECEI national team was rebranded the NDIA Early Childhood Services Branch and made responsible for supporting and improving the ECEI approach by analysing ECEI Partner activity, training Partners and staff in the approach, providing clinical advice and expertise, resolving systemic issues, and identifying and mitigating risks. ³⁹ According to the NDIA, ECEI Practice Officers will be placed across the country to strengthen delivery of ECEI practice through Partners and NDIA staff, and information booklets released to improve stakeholders'

38 NDIA, *Response to question on notice SQ-000018*, received 22 February 2019.

39 NDIA, *Response to question on notice SQ-000019*, received 22 February 2019.

	understanding about the roles of the Scheme, partners, and families in addressing the needs of children by March 2019. ⁴⁰
Recommendation 9	The committee recommends the NDIA clearly communicate to families, Planners and ECEI Partners that assessment reports are not needed unless requested by the NDIA.
Government response	Agree No further comment.
Status	Not progressed. Recent feedback from submitters indicated that prospective participants are still being asked to source expensive diagnostic reports to support their applications. The information provided on the NDIS website does not clearly communicate to families that assessment reports are not needed unless requested by the NDIA.
Recommendation 10	The committee recommends the NDIA ensures provision of funding for assessments in Plans is based on the Participant's needs and is not arbitrarily restricted to a yearly assessment.
Government response	Agree in principle Assessments to inform clinical recommendations for Assistive Technology and equipment are currently built into the funded supports as deemed reasonable and necessary and there is no expectation that assessments are performed only annually. Indeed, assessment to inform the direction of the intervention is funded through the capacity building hours in the plan. This can occur throughout the plan period as determined by the Early Intervention service provider.
Status	Not progressed. While the NDIA advises that assessments to inform direction of intervention is funded through a plan's capacity building hours, the committee heard repeatedly that capacity building funds in plans are insufficient.
Recommendation 11	The committee recommends the NDIA urgently address the issues of scope and level of funding in Plans for children with autism with a view to ensuring that recommended evidence-based supports and therapies are fully funded.
Government	Noted

40 NDIA, *Response to question on notice SQ-000022*, received 22 February 2019.

response	The NDIA acknowledges that this is an area in which further guidance to Partners and enhanced communication and expectation management for families is required. The work underway with the Autism Cooperative Research Centre involves developing a consistent approach to diagnosis and to better understand and define functional impairment. This will enable the development of evidence-based guidance that ensures appropriate individualised support.
Status	Not progressed. Feedback from the February 2019 roundtable indicated that plans for children with autism continue to be underfunded. ⁴¹
Recommendation 12	<p>The committee recommends the NDIA implement the Provision of Hearing Services under the National Disability Insurance Scheme recommendation 5 in relation to early intervention packages which says:</p> <p>The committee recommends NDIA ensures that the early intervention packages take a holistic approach to the needs of Participants and include:</p> <ul style="list-style-type: none"> • scaled funding, depending on need; • funding provision for additional services beyond core supports, depending on need; and • retrospective payment of the costs borne by approved service providers for the provision of necessary and reasonable supports between time of diagnosis and Plan enactment.
Government response	<p>Partly Agree</p> <p>The NDIA established an Early Intervention Hearing Expert Reference Group in response to concerns raised regarding timely access and disruption to referral pathways for early intervention and outcomes for young children with significant or profound hearing loss under the NDIS. As a result of that work, the NDIA is now implementing:</p> <ul style="list-style-type: none"> • Revised access guidance, which enables streamlined access to the NDIS for people with profound bilateral hearing impairment and for children and young Australians requiring early intervention for hearing impairment.

41 Ms Fiona Sharkie, Chief Executive Officer, Amaze, *Committee Hansard*, 26 February 2019, pp. 2425.

	<ul style="list-style-type: none"> • A trial of the developed framework for considering 'Reasonable and Necessary' Supports for hearing impairment. Hearing Impairment Planning Questionnaire. • The NDIS is responsible for providing or funding reasonable and necessary supports for participants from the date their first NDIS plan is approved. The NDIA will not consider providing or funding supports that have been purchased or funded by other parties prior to this date. <p>Retrospective payments for services prior to this date remain either the responsibility of previous Governments or programs. If exceptional circumstances in any jurisdiction warrant a response, the NDIA will explore options with the Department of Social Services.</p>
Status	<p>In progress. Feedback from the hearing sector during the February roundtable was positive, and provided early indication that the interim arrangements are helping to produce more adequate plans for children with hearing impairment.</p>
Recommendation 13	<p>The committee recommends the NDIA reviews and clarifies its Operational Guidelines on funding for assistive technology with the view of ensuring that Participants can access the most appropriate equipment to meet their needs.</p>
Government response	<p>Agree and underway</p> <p>This will be addressed in the ECEI tailored review of the pathway. Equipment and assistive technology will be considered as per the therapist's clinical evidence recommendations, the practical implications, and what is reasonable and necessary. The NDIA acknowledges the need to ensure a more streamlined arrangement for these assessments is desirable. Work is underway to ensure improved practices can be implemented when transitional arrangements with state based equipment providers are no longer required. In addition, the NDIA is scheduled to introduce changes by the end of March 2018 that will ensure those who require low value and low risk items in their plans can access them more directly.</p>
Status	<p>Limited progress. While low value and low risk items are now able to be purchased without the need for NDIA approval, tablets are still considered 'mainstream technology' and still unrecognised as valid NDIS supports. Concerns that cost/outcome ratios are failing to be considered in AT applications remain, although, further enhancements to the</p>

	ECEI pathway are expected in 2019.
Recommendation 14	The committee recommends funding be made available in Plans for interpreters, including funding an interpreter to communicate with the Participant's parents or carers.
Government response	Noted The NDIA has in place a funding arrangement that enables participants to access Translation and Interpreting Services from providers when required. This is not funded in a plan unless the support is related to a disability.
Status	Completed.
Recommendation 15	The committee recommends the NDIA consider allocating specific funding for the development and provision of tailored support programs for parents, carers and siblings of children with disability through the ILC.
Government response	Agree in principle The ECEI approach recognises the fundamental importance of ensuring the sustainability of family and other informal supports. Appropriate supports such as those that enable a family to build an understanding of the child's individual disability or developmental support needs, assistance with self-care activities to minimise the impact on family life, group based community, social and recreational activities - disability specific programs or training either separate or as part of capacity building, can be funded in a child's plan. Partners are skilled in ensuring appropriate connection to community and mainstream supports that, for example, assist siblings and parents to learn about and adjust to the child's disability and support needs. The NDIA recognises the potential for ILC funding to contribute to strengthening this across the community and is working to ensure that the implementation of ILC is effective in supporting families and siblings of those with disability to build strong, supported, inclusive lives within their community.
Status	Completed. Four jurisdictional based programs were funded in 2017–18 (in NSW and ACT) that related to support for families of people with disability. In February 2019, the NDIA advised that the Agency funded nine ILC projects with a combined

	value of \$2.64 million which focus on providing supports to families, carers and siblings. ⁴²
Recommendation 16	The committee recommends the NDIA develop a strategy to foster greater use of technology to deliver services in regional, rural and remote areas.
Government response	Agree This is a key focus of the market stewardship and market intervention work. The potential for the use of technology in rural and remote areas to improve service quality and availability, as well as potentially reducing costs of supports and encouraging innovation is well recognised. The NDIA welcomes engagement with key government and other service providers to develop a collaborative approach to build stronger and more robust access to technology in remote areas to, for example, provide training, supervision of staff and the direct provision of services. Timetable – ongoing
Status	Limited progress. The NDIA's Rural and Remote Strategy 2016–19 identified improved connectivity and use of technology as a focus area and specified that, within six months of the Scheme becoming available in each area, options for use of technology to assist in efficient delivery of supports to participants in their community had been investigated and were being trialled. ⁴³ However, the committee has not received evidence that the NDIA has developed initiatives aimed at increasing use of technology in rural and remote areas
Recommendation 17	The committee recommends that the NDIA consult and engage with key stakeholders to continually improve ECEI information on its website.
Government response	Agree and underway This is currently being addressed in the ECEI tailored review of the pathway. Engagement workshops are currently underway. The NDIA will continue to engage with a number of key stakeholders including Early Childhood Intervention Australia, Children and Young People with Disability Australia and the Early Childhood Partners to, in particular, make information on community based supports available for families more readily

42 NDIA, *Response to question on notice SQ-000020*, received 22 February 2019.

43 NDIS, *NDIS Rural and Remote Strategy 206-2019*, February 2016, p. 32.

	accessible through the NDIA and other websites.
Status	In progress. In January 2019, the NDIA website was refreshed to show simplified pathways into the Scheme and information was rewritten to improve consistency and clarity of the ECEI approach for stakeholders. ⁴⁴
Recommendation 18	The committee recommends that the NDIA allocate specific funding for information and support for vulnerable families to connect with ECEI Partners through the ILC.
Government response	Agree in principle The NDIA works closely with existing mainstream services for children in vulnerable home settings. The ECEI Partner and the NDIA staff receive and send referrals from and to these child and family services to ensure families of children with developmental delay of disability are linked to an Early Childhood Partner and/or other supports. Early Childhood Partners will ensure strong collaborative practice is established with the mainstream child and family services in their jurisdiction. The recommendation will be considered as part of the ongoing refinement of the priority areas for investment for the ILC.
Status	Not progressed. The Agency has not awarded an ILC grant specifically to assist with connecting vulnerable families to ECEI partners; however, it funded nine projects with a combined value of \$2.64 million that focus on providing supports to families, carers and siblings. ⁴⁵
Recommendation 19	The committee recommends that the NDIA collaborate with people with disability, Aboriginal and Torres Strait Islander, and CALD communities, to co-design and develop accessible information about the Scheme, the ECEI Approach, and how to use funds to access services.
Government response	Agree and underway This will be addressed in the range of tailored pathway review work that is currently underway and we will ensure there is a specific focus on the 0-6 age group within each of these pathways. ECEI consultations were held on:

44 NDIA, *Response to question on notice SQ-000022*, received 22 February 2019.

45 NDIA, *Response to question on notice SQ-000019*, received 22 February 2019.

	<ul style="list-style-type: none"> • 10/10/2017 in Penrith • 13/10/2017 in Geelong • 12/12/2017 in Melbourne • 19/01/2018 in Adelaide • 23/01/2018 in Brisbane • 16/02/2018 in Sydney. <p>Other related consultations with Aboriginal and Torres Strait Islander peoples and people who identify from a CALD background were held on:</p> <ul style="list-style-type: none"> • 18/10/2017 in Nhulunbuy • 19/10/2017 in Groote Eylandt • 25/01/2018 in Sydney (CALD) • 7/02/2018 in Melbourne (CALD) • 8/02/2018 in Melbourne • 13/02/2018 in Melbourne • 20/02/2018 in Bourke • 27/02/2018 in Sydney • 1/03/2018 in Alice Springs • 7/03/2018 in Cairns • 14/03/2018 in Kununurra • 28/03/2018 in Ceduna <p>NDIA needs to ensure effective processes for those from an Aboriginal and Torres Strait Islander or CALD background fit well with our commitments regarding the tailored pathways.</p>
Status	<p>In progress. The NDIA has advised the committee it is working to develop accessible communications following a collaborative process. The NDIA indicated it has developed targeted communications for Aboriginal and Torres Strait Islander peoples with a disability which were tested with stakeholders in October 2018. It is working with communities to tailor its communication products to local language groups. A resource known as <i>Our Way</i> is set to be trialled in Aurukun and Hope Vale. The NDIA has released Easy English and braille versions of the participant planning booklets in print and</p>

	online, and is expected translated versions to be available nationally from early 2019. ⁴⁶
Recommendation 20	The committee recommends that the NDIA develop a specific strategy to deliver culturally appropriate services for Aboriginal and Torres Strait Islander people under the ECEI Approach.
Government response	<p>Agree and underway</p> <p>This will be addressed in the ECEI tailored review of the pathway. Early Childhood Partners bring a diverse range of experiences in outreach and support for children and families from Aboriginal and Torres Strait Islander communities and the NDIA will look to develop a community of practice to share effective operational response across all Partners. The NDIA Rural and Remote Strategy 2016-2018 details the intention and goals of the NDIS working with people with a disability and their families and carers. In particular, it emphasises the importance of access to the NDIA, collaboration with local communities, creative approaches for individual communities and the complimentary use of technology in order to deliver services to people. The ECEI approach will be tailored to each area in order to provide the most relevant and effective delivery of ECEI to children and their families community by community.</p>
Status	Limited progress. The committee acknowledges the work undertaken by the NDIA to improve the ECEI pathway and its engagement with Aboriginal and Torres Strait Islander communities. However, there is no specific strategy to deliver culturally appropriate services for Aboriginal and Torres Strait Islander people under the ECEI Approach.

46 NDIA, *Response to question on notice SQ-000024*, received 22 February 2019.

Inquiry	General Issues Progress Report 2017
Recommendation 1	The committee recommends that the NDIA provide an opportunity for participants, and those who support them, to view, comment, and rectify any errors in their plan in advance of it being finalised and implemented.
Government response	<p>Agree</p> <p>In April 2017, the NDIA commenced a review of the participant pathways to improve the quality of the participant experience, including more face-to-face communication and the opportunity to review the contents of their plan prior to its approval. The NDIA is now working on new ways to enhance the planning conversation with participants, including the sharing of the plan with the participant as it is developed with them in person. This will provide the participant with an opportunity to ask questions of the planner as the plan is developed, and ensure the plan contains the details agreed to during the planning conversation.</p>
Status	Limited progress. The NDIA advised the committee that a working version of a participant's plan is discussed with participants before it is finalised. ⁴⁷
Recommendation 2	The committee recommends that the National Disability Insurance Agency publish the results of its participants and providers pathways review, specifically the areas identified for improvement, and the strategies in place to achieve improved outcomes.
Government response	<p>Agree</p> <p>On 18 October 2017, the NDIA released details of a new NDIS pathway designed to specifically improve the experience people and organisations have with the ground-breaking NDIS. The press release outlined the key areas identified for improvement and a strategy for trialling and delivering those improvements. The participant and pathway review process included a range of facilitated workshops with multiple stakeholders. Co-design sessions followed, where participants, providers and other key stakeholders actively participated to design the new pathway. A report summarising the review process and findings will be made available. The NDIA will continue working with people with disability, their families and</p>

47 NDIA, *Response to question on notice SQ19-000028*, received 22 February 2019.

	carers to resolve any issues during this unique period of transition and remains committed to getting the balance right between participant intake, plan quality, and the sustainability of the scheme.
Status	Completed. On 26 February 2018, the NDIA released its 'Improving the NDIS Participant and Provider Experience' report which outlines the results of its pathways review, areas identified for improvement, and work underway to implement improvements.
Recommendation 3	The committee recommends that the National Disability Insurance Agency include progress on issues identified in the participant and provider pathways review in future Quarterly Reports.
Government response	Agree-in-principle The review of the participant pathway is a priority in the NDIA corporate plan. Quarterly reporting will be modified in line with NDIA Board advice. Participant outcomes and satisfaction are included in the quarterly reports. Further, additional metrics on participant and provider satisfaction are being developed.
Status	Completed. Recent quarterly reports include a dedicated page with information on pathway improvements.
Recommendation 4	The committee recommends that the National Disability Insurance Agency review its quarterly reporting terminology and metrics to ensure consistency, and apply this to all future reports.
Government response	Agree The NDIA will review the 'Key Definitions' table and ensure alignment of terminology used in future quarterly reports. The metrics included in quarterly reporting have remained largely consistent over time, being predominantly based on the Integrated Performance Reporting Framework included at Schedule G in the Commonwealth and state/territory bilateral agreements.
Status	In progress. Based on a comparison of the two most recent quarterly reports, the Agency has achieved better consistency across the types of data being reported than was seen in earlier publications.
Recommendation 5	The committee recommends that the NDIA ensure that only criteria underpinned by terminology set out in the NDIS

	Act and associated Rules is used in the assessment of appropriate supports.
Government response	Agree NDIA staff are required to make decisions based on the <i>National Disability Insurance Scheme Act 2013</i> and the rules made under the Act. Operational guidelines provide practical guidance for decision makers on the interpretation of these requirements and the guidelines are available on the website for public information.
Status	Limited progress. The committee received feedback there is some confusion over the term 'ordinary life' and how it relates to reasonable and necessary supports. While it is true that NDIA staff are required to make decisions based on the <i>NDIS Act 2013</i> and the National Disability Insurance Scheme (Supports for Participants) Rules 2013, neither of these documents nor the Operational Guidelines define what an ordinary life is for the purposes of the NDIS. The NDIA should provide greater clarity on the term by publishing advice for its staff and the public on its website.

Inquiry	Provision of hearing services under the NDIS—Interim Report
Recommendation 1	The committee recommends the NDIA monitors eligibility rates for adults with hearing impairments to build a clearer picture of the number and needs of the people who have been found ineligible for NDIS services and reports on its finding in 12 months.
Government response	Partially support The NDIA actuarial monitoring collects data relating to NDIS access decisions. The NDIA collects data pertaining to primary disability type (both for access met as well as access not met participants) along with the reason for the access request decision. The NDIA notes data relating to secondary disability types is not mandatorily disclosed when access requests are made. The NDIA will conduct quarterly analysis on this data to assist to build a clearer picture of the number and needs of the people who have been found ineligible for NDIS supports. The NDIA notes that this analysis may not fully inform what supports are required for people with hearing impairment outside of the NDIS. Additionally, the NDIA is preparing to

	implement a number of initiatives to address outcomes from the NDIA's Participant Pathway review. Among these initiatives will be the development of additional information to better assist potential NDIS participants to access the NDIS.
Status	Limited progress. Insufficient information publicly available. However, the committee noted that in the December 2018 Quarterly Report, the NDIA provided some information on the eligibility rate for people with hearing impairment, advising that of the number of access decision in 2018-19 Q2, 88 percent of people with a hearing impairment met the access criteria compared to 75 percent overall. ⁴⁸
Recommendation 2	The committee recommends the NDIA reviews immediately the cases of people with hearing impairment who were previously found ineligible and tests their eligibility against the revised guidelines.
Government response	Partially support. The NDIA will identify and contact all Hearing Services Program (HSP) clients likely to meet the access criteria, including children and young Australians up to age 25 (inclusive) as part of the implementation of the transition of aspects of the HSP. The HSP and Australian Hearing will support the information sharing required to facilitate this process. An agreed process and timetable for implementation will be developed between NDIA and the HSP. People aged between 26-65 years and not currently eligible for the HSP who believe they may meet the NDIS access criteria may submit a new access request. Communication products relating to the revised access guidelines will include advice for current HSP clients and all prospective participants.
Status	Not progressed.
Recommendation 3	The committee recommends the Australian, state and territory governments clarify and make public how they will provide services for people who are deaf and hard of hearing who are not participants in the NDIS.
Government response	Support. Some Hearing Services Program clients, administered by the Department of Health, will transition to the NDIS from

48 NDIA, *COAG Disability Reform Council Quarterly Report*, 31 December 2018, p. 49.

	<p>1 July 2019. The HSP is a continuing disability support program. Anyone who remains eligible for the HSP but does not meet the access requirements for the NDIS will continue to receive services through the HSP. Further information on the HSP is available at www.health.gov.au. A very small number, less than 2.5 per cent, of existing National Auslan Interpreter Booking and Payment Service clients will be ineligible for the NDIS at full scheme. Similarly, one to two per cent of existing Better Start for Children with Disability clients are expected to be assessed as ineligible for the NDIS at full scheme. The Government is committed to providing continuity of support for these clients.</p>
Status	<p>In progress. The HSP will provide continuity of support for people eligible for the HSP but who do not meet the access requirements for the NDIS. However, there is a lack of clarity and information on the continuity of support arrangements for service clients of other Commonwealth programs transitioning to the NDIS.</p>
Recommendation 4	<p>The committee recommends Australian Hearing be formally appointed as the independent referral pathway for access to early intervention services under the NDIS and funded appropriately to take on this new role.</p>
Government response	<p>Partially support.</p> <p>Australian Hearing currently functions as the primary interface in the paediatric hearing impairment referral pathway between detection and diagnostic processes and early intervention. The NDIA acknowledges the expertise required to deliver hearing services to children (and adults with complex needs), and recognises the standing of Australian Hearing as the current sole provider of Specialist Hearing Services. During the NDIS trial and transition, Australian Hearing has remained the sole provider of Specialist Hearing Services for children aged zero to five years through an 'in kind' arrangement with the Hearing Services Program. Assessment results and expert opinion from Australian Hearing are a part of the NDIS access and planning process. As the NDIS moves towards full Scheme, the current 'in-kind' arrangements will cease by 30 June 2019. The NDIA will continue to work with Australian Hearing on the arrangements for Specialist Hearing Services, including the interface between the detection and diagnostic functions and early intervention post 30 June 2019.</p>
Status	<p>In progress. In June 2018, the former Minister for Social</p>

	<p>Services announced that Australian Hearing's in kind support to the NDIS would be extended until 30 June 2020. The new hearing stream was implemented nationally on 20 August 2018. However, the referral pathway delivered by Australian Hearing has an uncertain future as the in-kind arrangements with Australian Hearing are only secured until 30 June 2020.</p>
Recommendation 5	<p>The committee recommends NDIA ensures that the early intervention packages take a holistic approach to the needs of participants and include:</p> <ul style="list-style-type: none"> • scaled funding, depending on need; • funding provision for additional services beyond core supports, depending on need; and • retrospective payment of the costs borne by approved service providers for the provision of necessary and reasonable supports between time of diagnosis and plan enactment.
Government response	<p>Partially support.</p> <p>The revised planning guidance and baseline reference package approach will be evidence based, outcomes focused and include funding reflecting individual needs and goals. Reference packages are still in development and it is intended that they will reflect best practice. Payments for supports delivered before an individual becomes a participant are not the responsibility of the NDIS. Revised access guidance and streamlined access processes along with revised planning guidance are intended to reduce the interval between diagnosis and commencement of early intervention.</p>
Status	<p>In progress. Feedback from stakeholders during the committee's 26 February 2019 hearing indicated that the new hearing stream is resulting in faster access to services and more appropriate plans for children with less complex needs.</p>
Recommendation 6	<p>The committee recommends the NDIA urgently finalise, publish and introduce the early intervention reference packages.</p>
Government response	<p>Partially support.</p> <p>The NDIA is well advanced in producing planning guidance and baseline reference packages. The NDIA has received advice and input from key sector stakeholders on these topics. As a result, the NDIA is currently conducting further actuarial modelling to understand fully the potential impact of this advice. The NDIA continues to engage extensively with</p>

	stakeholders during this time to ensure they are aware of the status of this work. The NDIA intends to provide the Committee with further information in respect to timeframes for the finalisation of planning guidance and baseline reference packages.
Status	Not progressed. At the committee's public hearing in March 2018, Vicki Rundle advised that the role of reference packages is for the Scheme Actuary to monitor progress and performance of the scheme rather than be the determinant of a reasonable and necessary package for participants.

Provision of hearing services under the NDIS – Final Report	
Recommendation 1	The committee recommends that the NDIA contract Australian Hearing as the national ECEI Partner for early intervention hearing services for families of deaf and hard of hearing children.
Government response	Partially supported This recommendation is only partly supported. The approach taken by Government balances the alignment between the NDIS principles of participant choice and control and recognition of Australian Hearing's key role as an entry point for children with hearing impairment in Australia, and in providing consistent and specialist information to parents to help them make informed choices about their children's needs. On 21 June 2018, the Commonwealth Government announced that Australian Hearing's current in-kind support to the NDIS would continue to 30 June 2020. This announcement recognises Australian Hearing's key role as an entry point for children with hearing impairment, and in providing specialist information to parents to help them make informed choices about their children's needs. The NDIA will implement a dedicated hearing stream within the participant pathway for children 0-6 years with hearing impairment in the second half of 2018. The hearing stream will strengthen the collaboration between Australian Hearing and the NDIA, consistent with the above recommendation. The NDIA is now working closely with Australian Hearing to refine its role within the revised hearing stream for participants with hearing impairment. Australian Hearing has indicated a strong desire to work in partnership with the NDIA by providing recommendations for access and evidence of the level of severity of the child's hearing impairment. This information will be used to provide

	<p>the child with an initial hearing plan to cover their hearing support needs.</p> <p>Under the new arrangements, Australian Hearing will:</p> <ul style="list-style-type: none"> • Provide the NDIA with evidence of disability, including severity level, to enable rapid access to the Scheme and creation of an initial hearing plan • Provide parents with outcomes focused information on the choices they have for hearing supports <p>After participants receive an initial hearing plan, an ECEI partner will follow up with the family (where appropriate) to identify and engage broader support needs beyond hearing.</p> <p>The NDIA will continue to work with the hearing sector including Australian Hearing to ensure the new arrangements provide families of deaf and hard of hearing children with rapid access to early intervention services.</p> <p>Australian Hearing will continue to provide early access to hearing services such as the fitting of hearing aids as part of the new arrangements.</p>
Status	<p>Partially addressed. The establishment of the referral pathway through Australian Hearing for newly diagnosed children aged nought to six years is encouraging. However, the committee noted the concerns expressed by the sector around the limited remit of this referral pathway.</p>
Recommendation 2	<p>The committee recommends that the NDIA reintroduce transdisciplinary packages quotes from specialist service providers for children who are deaf and hard of hearing and require access to early intervention services.</p>
Government response	<p>Partially supported</p> <p>In consultation with hearing providers, the NDIA is currently considering how to set funding and pricing arrangements to support families to choose the type of hearing supports that meet their children's needs. This includes ensuring there are no barriers for families who wish to choose bundled early intervention hearing support. Bundled supports refers to funding in a child's NDIS plan that is linked to a particular goal or outcome. These supports mirror the intent of this recommendation, allowing families to have greater flexibility in the way they organize their child's early intervention supports. A family can still choose a transdisciplinary model that incorporates their reasonable and necessary funded NDIS supports, mainstream supports and/or privately funded</p>

	<p>supports. As stated previously, they can implement this model themselves or through a service provider. The NDIA has conducted detailed consultation and analysis to understand the impact of the current funding and pricing arrangements on specialist service providers offering bundled supports to children with hearing impairment. The revised hearing stream will alleviate some of the issues raised by the committee in relation to funding and pricing arrangements. This includes:</p> <ul style="list-style-type: none"> • Providing improved support and training for planners and ECEI partners, including baseline reference packages, to reduce plan variance • Increasing guidance for participants, including through Australian Hearing, to support plan implementation and reduce unintended underutilisation of funds <p>The nature of transdisciplinary support provision can mean that in some cases the cost of each component of service delivery is less transparent for participants and their families as they choose the supports that are right for them. In response to this, the NDIA is exploring pricing mechanisms which support the delivery of services in a way which does not compromise best practice outcomes but still enables clarity and transparency of the price of supports.</p>
Status	Not progressed.
Recommendation 3	The committee recommends that the Australian Government put in place an arrangement similar to 'Jordan's Principle' in Canada to ensure that a child-first approach is taken in the delivery of services for children with hearing loss.
Government response	<p>Noted</p> <p>The work underway through the NDIA and Australian Hearing establishes a clear pathway where children can get rapid access to hearing services consistent with the NDIS Act and the Principles to determine the responsibilities of the NDIS and other service systems, which sets the funding and delivery responsibilities of the NDIS and other service systems, agreed by all Governments. The NDIS through the early intervention for Hearing Loss approach has strengthened the ability of all children, adolescents and young adults who meet the access criteria, to have timely access to reasonable and necessary supports. This should ensure that the issues of jurisdictional disputes and payments for services to children with hearing loss at first request, which gave rise to Jordan's principle in</p>

	<p>Canada, do not occur in the NDIS in Australia. The Australian Government Department of Health also has a range of activities that target the disproportionate burden of ear and hearing health in first nation's children in Australia. These include funds totalling over \$136 million (2012-13 to 2021-22) which are being provided for a range of activities. This includes the May 2018 announcement of \$30 million (2018-19 to 2021-22) for a new targeted outreach program which will provide an annual hearing assessment for Aboriginal and Torres Strait Islander children prior to the commencement of school, with a focus on children in rural and remote communities. The Government also makes a significant investment in multidisciplinary clinical outreach services in regional, rural and remote areas through the Healthy Ears - Better Hearing Better Listening program providing access to surgical support and capacity building activities such as provision of training and equipment to Indigenous primary health services. The independent examination of Australian Government Indigenous ear and hearing health initiatives concluded that the Australian Government's investment is conceptually sound in its elements and has facilitated and improved access to multidisciplinary ear health care for Indigenous children and young people. Since commencement of the Healthy Ears - Better Hearing Better Listening program in 2013-14, the number of patients accessing care has increased significantly each year. In 2016-17, over 47,000 patients received services in 304 locations, with a focus on regional, rural and remote regions. Under the Australian Hearing Specialist Program for Indigenous Australians, the Australian Government provides hearing services in more than 200 Aboriginal and Torres Strait Islander communities across Australia each year to help overcome access, distance, culture and language barriers. These initiatives are evidence of the Government's existing commitments to a child-first approach to the delivery of services to children with hearing loss.</p>
Status	<p>Not progressed. Although the introduction of the new hearing stream on 20 August 2018 is ameliorating some of the delays and information gaps for families of children with hearing impairment.</p>