

Blind Citizens Australia

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Submission to Productivity Commission's position paper on National Disability Insurance Scheme (NDIS) Costs

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To:

Productivity Commission
Via email to: ndis.costs@pc.gov.au

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Table of Contents

| 1. | About Blind Citizens Australia | |
|----|---|----|
| 2. | Introductory Comments | 3 |
| 3. | Eligibility for the scheme | |
| 3 | .1. Age eligibility | |
| | .2. Early access provisions | |
| 4. | | |
| 5. | Reserve funds | |
| 6. | Information, Linkages and Capacity Building | 10 |
| 6 | .1. Local Area Coordination | 10 |
| 6 | .2. Continuation of block funding | 12 |
| 7. | Monitoring and reporting | 13 |
| 8. | Conclusion and summary of recommendations | |

1. About Blind Citizens Australia

Blind Citizens Australia is the peak national representative organisation of and for people who are blind or vision impaired. Founded in 1975, our mission is to achieve equity and equality by our empowerment, by promoting positive community attitudes and by striving for high quality and accessible services which meet our needs.

We provide peer support, information dissemination, advocacy support and advice to community and government on issues of importance to people who are blind or vision impaired.

Our work is directly informed by lived experience of blindness and vision impairment. Our members, our Directors and the majority of our staff are blind or vision impaired.

2. Introductory Comments

Blind Citizens Australia values the opportunity to provide feedback on the Productivity Commission's position paper on National Disability Insurance Scheme (NDIS) costs.

Blind Citizens Australia made a submission to the Productivity Commission's Issues Paper on NDIS costs in March 2017. We thank the Commission for prioritizing a number of issues that were raised in this submission, including:

- The need for scheme participants to be provided with accurate and up-to-date information about their rights when first making contact with the scheme (draft recommendation 4.1)
- The need for a process to allow participants to seek minor amendments or adjustments to plans without triggering a full plan review (draft recommendation 4.1.)
- The need for Planners and Local Area Coordinators to have a general awareness of a wide variety of conditions and impairments (draft recommendation 4.1)
- The need for the NDIA to assemble and resource specialised planning teams and/or utilise industry knowledge and expertise to better meet the needs of people with more specialised needs for support; including people who are blind or vision impaired (draft recommendation 4.2).

This submission will focus on those aspects of our March submission that were not adequately addressed in the Productivity Commission's position paper, but continue to compromise the independence, participation and dignity of many people who are blind or vision impaired. These issues relate to the support needs of people with disability aged 65 or over, and the interfacing arrangements between the NDIS and the aged care system.

The Government must stop viewing the needs of older people with disability solely under an aged care framework, and deliver on measures that will enhance outcomes for older people with disability in line with the broader objectives of the National Disability Insurance Scheme. To this end, we remind the Productivity Commission of the National Disability Insurance Agency's remit in:

- Administering a scheme of lifetime care and support to people whose disability was not acquired through the process of aging, and
- Implementing an Information, Linkages and Capacity Building programme which is intended to provide support to all people with disability, including those aged 65 or over.

Many of the recommendations made throughout this submission reiterate recommendations previously put forward by the Productivity Commission, or commitments that have been made under government policy which have not been operationalised to date. It is critical that these issues are adequately factored into the current review of NDIS costs to ensure that older people with disability have access to high quality and accessible services which meet their needs into the future. Should the government fail to address these issues, Australia will continue to fall short of its obligations to people with disability under the United Nations Convention on the Rights of Persons with Disabilities and the National Disability Strategy 2010-2020.

3. Eligibility for the scheme

3.1. Age eligibility

In our March submission to the Productivity Commission's issues paper on NDIS costs, we outlined a number of concerns with the age 65 cut-off that currently exists under the NDIS Act.

Blind Citizens Australia is not, in principle, opposed to measures which aim to draw a distinction between people with age-related, and people with non-age-related disability for the purpose of triaging individuals into the scheme that is most appropriate to meet their needs. We acknowledge that these measures are consistent with the terms of reference for the Productivity Commission's 2011 inquiry into disability care and support, which indicated that the NDIS was:

"Intended to cover people with disability not acquired as part of the natural process of ageing".

As identified in our March submission, the difficulty with the current age requirements lies in the fact that they do not make a clear distinction between older people with agerelated, and older people with non-age-related disability. The current provisions of the Act exclude all people who are aged 65 or over when the NDIS commences roll out in their area; regardless of the fact that many of these people may have been born with or acquired disability early in life (and not through the process of aging). These people continue to be forced into an aged care system that is ill-equipped to meet their disability-related needs.

As noted in Appendix C of the report from the Commission's 2011 inquiry into disability care and support, the principles that underpin the aged care system in Australia are vastly different to the principles that underpin the NDIS. Appendix C states:

"...in the aged care sector, a major goal is to minimise the rate of loss of autonomy of the person, and preserve people's links to their current home, familial supports

and social networks. This recognises too that people have come from (at least the opportunity of) living a full life."

The assumption that those accessing the aged care system will have had the opportunity to live a 'full life' may be applicable to people who acquire vision loss after the age of 65. People who were born with or acquired vision loss earlier in life, however, have often been subjected to a lifetime of discrimination and exclusion and require targeted measures to be put in place to ensure they are able to access services on an equal basis with others.

The aged care system also focuses on a medicalised model of disability, which conflicts with the social model of disability that underpins the disability rights landscape across Australia. As recognised by the Parliamentary Joint Committee on Human Rights in its report on the NDIS Bill 2012:

"This (the age 65 cut-off) assumes that the aged care system does or will deliver all the forms of assistance and support required, and is organised in accordance with the principles and operates in compliance with the obligations set out in the CRPD and the NDIS. While the incidence of disability may increase with age, the assumption that a person who has lived with disability for many years can transition without difficulty to a different system that may be organised around different principles deserves further examination."

Under Information Request 9.1, the Commission has asked for feedback on how slowing down the roll out of the NDIS may impact upon current and future scheme participants. If the Government decides to slow down the roll out without addressing the issues with the age requirements referenced in the NDIS Act, this will result in a greater number of older people with non-age-related disability being excluded from the scheme, and instead being forced into an aged care system that is ill-equipped to meet their needs.

We remind the Productivity Commission that the Australian Government is a signatory to the United Nations Convention on the Rights of Persons with Disabilities and is therefore bound by the obligations that it establishes. The steps to be taken to implement the Convention at a national level have been articulated in the National Disability Strategy 2010-2020, which has been endorsed by the Council of Australian Governments (COAG). It was this strategy that first underpinned the introduction of a National scheme of lifetime care and support for people with disability, and the Strategy sets out to achieve the following two outcomes in this regard:

- 1. A disability support system which is responsive to the particular needs and circumstances of people with complex and high needs for support.
- 2. Personal and community support services are available to meet the needs of people with disability, their families and carers.

In order for Australia to meet its obligations to people with disability, as outlined under the National Disability Strategy, there must be equality of support for all people with non-age-related disability through the National Disability Insurance Scheme; irrespective of whether an individual happens to be age 65 or over when the scheme reaches their area.

The principles of Equality and non-discrimination have been at the heart of international human rights law since the drafting of the Universal Declaration of Human Rights in 1948. Rights of equality and non-discrimination are subsequently contained in the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights, which have both been signed and ratified by the Australian Government. The Australian Human Rights Commission has interpreted Australia's human rights obligations in this area to mean that:

- Laws, policies and programmes should not be discriminatory
- Public authorities should not apply or enforce laws, policies and programmes in a discriminatory or arbitrary manner
- The law should provide protection against discrimination
- Laws, policies and programmes should promote equality.

Blind Citizens Australia submits that the age requirements currently expressed in the NDIS Act go against Australia's broader human rights obligations. Older people with non-age-related disability continue to be excluded from the NDIS according to birth and geographic location. While the NDIS promises to be a nationally consistent scheme, these provisions can see two people of the same age and with the same access requirements having their support needs met under different service systems depending on when the NDIS happens to roll out in their area.

Recommendation 1:

The eligibility criteria outlined in the NDIS (National Disability Insurance Scheme) Act 2013 must be amended to retrospectively allow any person who was born with, or acquired disability before the age of 65 (and whose disability is not attributable to the natural process of aging) entry into the National Disability Insurance Scheme, irrespective of age.

Recommendation 2:

Any attempt to slow down the roll out of the NDIS must be accompanied by a strategy to ensure that no individual nearing the age 65 cut-off for the scheme will miss out on meeting the age eligibility requirements because of these changes.

3.2. Early access provisions

Section 22 (1: A) of the NDIS Act states that a person meets the age requirements if the person was aged under 65 when the access request in relation to the person was made. This allows for some older people who will be aged 65 or over when the NDIS reaches their area to make an early access request for the scheme before they turn 65; depending on their date of birth and when the NDIS is scheduled to roll out in their region. The issues outlined in the previous section of this submission could be partially mitigated by the NDIA assisting those individuals who would narrowly miss out on meeting the age requirements for the scheme to complete an early access request.

Provisions relating to early access requests are contained in Schedule A (Additional age and residence requirements) of the NDIS 2016 (Becoming a Participant) Rules. The

early access provisions apply differently in each state and territory, and the legislation underpinning these provisions is extremely complex.

Earlier this year, Blind Citizens Australia provided an individual with information about early access requests which enabled them to gain early entry into the scheme. Had this individual waited until the NDIS commenced roll out in their region, they would no longer have met the age requirements for the scheme and would have been forced into an aged care system that is ill-equipped to meet their needs. While this was a small victory for our organisation, it was extremely difficult for us to obtain accurate and up-to-date information about how early access requests worked. The individual concerned had also requested information about early access requests directly from the National Disability Insurance Agency, but was unable to be provided with this information in an accessible format.

For this one individual who was able to gain early entry into the scheme, Blind Citizens Australia submits that there are many more who have now missed their window of opportunity because this option was simply not communicated to them. The NDIA has continuously failed to provide people with timely, accessible and easy to understand information about early access requests, which has caused many people to fall through the cracks that still exist between the NDIS and the aged care system.

Recommendation 3:

The NDIA must work with Centrelink to obtain a list of people with permanent disability who will be aged 65 or over when the NDIS rolls out in their area, and put a plan in place to provide these individuals with assistance to make an early access request for the NDIS.

Recommendation 4:

The NDIA must commit to a comprehensive communication strategy to ensure people with disability, their families and carers are aware of the early access provisions that exist under the NDIS Act and know how to make an early access request.

4. Specialist planning and assessment

Draft Recommendation 4.2 from the Productivity Commission's position paper states:

"The National Disability Insurance Agency should ensure that planners have a general understanding about different types of disability. For types of disability that require specialist knowledge (such as psychosocial disability), there should be specialised planning teams and/or more use of industry knowledge and expertise."

Blind Citizens Australia commends the Productivity Commission for prioritising the matter of specialist planning and assessment, and submits that people who are blind or vision impaired in particular may benefit from such an approach. It does, however, seem counter-intuitive to establish such a robust framework that adequately accommodates specialist needs for support without extending this assessment framework to the broader population of people with disability who may benefit from such an approach.

Blind Citizens Australia draws the Productivity Commission's attention to Australia's obligations under Article 26 (1: A) of the Convention on the Rights of Persons with Disabilities, which states:

"States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, in such a way that these services and programmes begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths."

Assessors from Regional Assessment Services and Comprehensive Assessment Teams (previously known as ACATs) within the aged care system currently fall short of this obligation; as they have no awareness of the needs or capabilities of people who are blind or vision impaired. Without timely access to appropriate supports, people who are blind or vision impaired are far more likely to experience declining health due to factors such as social isolation and loneliness, depression and anxiety and potential falls.

Peak body, National Disability Services, has previously acknowledged that when older people are being assessed by an Aged Care Assessment Team, the person undertaking the assessment may have difficulty understanding what level and types of support a person with permanent disability may require. While the supports might ultimately be funded by the aged care system, there could still be a role for the NDIA to play in providing specialist assessments that focus on the individual's disability-related needs.

We welcome the government's announcement of an additional \$1.9 million over two years to establish and support an industry-led aged care workforce taskforce. This taskforce will explore options to improve productivity in the aged care workforce and contribute to the development of an aged care workforce strategy, however it is unlikely that such measures will result in the aforementioned issues being resolved in a timely manner.

It is essential for government to put strategies in place to ensure all staff working across the aged care sector have undertaken basic disability awareness training in alignment with a human rights based approach to people with disability. This will not, however, resolve the need for specialist assessments for particular cohorts; such as people with age-related vision loss. Rather than duplicating resources, Blind Citizens Australia submits that it would be far more cost effective for the government to implement a specialist planning and assessment framework that can be accessed by people with specialist needs for support; regardless of whether their supports are being funded under the NDIS or the aged care system.

Blind Citizens Australia also draws the Productivity Commission's attention to recommendation 3 from its 2011 report, which stated that:

"The NDIS should put in place memoranda of understanding with the health, mental health, and aged and palliative care sectors to ensure that individuals do not fall between the cracks of the respective schemes and have effective protocols for timely and smooth referrals."

This recommendation has not been fully operationalised to date, and must be implemented as a matter of urgency to prevent older people with specialist needs for Page 8 of 15

support from falling through the cracks. Such an initiative would be beneficial in allowing the NDIA to identify how it will work more collaboratively with the Department of Health to enhance outcomes for older people with disability into the future.

Recommendation 5:

In establishing a framework for the implementation of specialised planning teams and/or more use of industry knowledge and expertise, the NDIA must work with the Department of Health to ensure specialist assessments are also available to older people with specialist disability-related needs who are accessing support under the aged care system.

5. Reserve funds

The issues paper that was published to help form the basis of this inquiry questioned whether there should be a scheme of last resort for people whose needs would otherwise not be met, and whether this should fall to the National Disability Insurance Agency to administer. Such an approach would provide an important safety net for people with disability who currently fall outside the NDIS. This approach would also align closely with recommendations put forward by the Productivity Commission in its 2011 inquiry report, which noted that:

"...in exceptional cases, the scheme should also include people who would receive large identifiable benefits from support that would otherwise not be realised, and that are not covered under the eligibility criteria for the scheme."

The Productivity Commission also recommended that guidelines be developed to inform the scope of this criterion.

Additionally, we refer to the NDIS Information, Linkages and Capacity Building Framework which states:

"The NDIS should have capacity to provide ease of access to one off low cost supports or low cost equipment where it is sufficient to facilitate independent living or social and economic participation, or reduce potential future support costs and requirements."

Blind Citizens Australia asserts that there are many instances where people who do not meet the eligibility criteria for the NDIS would benefit from the timely provision of one-off supports; such as a talking barcode scanner, a stand-alone talking scanner that can enable an individual who is blind to read their mail independently, or another aid or equipment item that would substantially increase levels of independence and participation. Such aids and equipment are not adequately funded at the state level and since the introduction of the NDIS, the future of state-based aids and equipment programmes has become increasingly uncertain.

The entry level Commonwealth Home Support Programme that exists within the aged care system also fails to provide funding for aids and equipment. This means an individual would need to be allocated with a Home Care Package in order to receive funding for such interventions under the aged care system. In light of the fact that some

of our members have had to wait up to six months to receive an assessment for a Home Care Package, and then another 12 or more months to receive a package once their assessment has taken place, it is clear that many older people with disability are currently being left without the tools they need to enable them to continue to lead a full and active life.

We remind the Commission that under Article 26 (3) of the Convention on the Rights of Persons with Disabilities, the Australian Government has made a commitment to:

"Promote the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities, as they relate to habilitation and rehabilitation."

At information Request 10.3, the Commission has asked for feedback on the level of a future contingency reserve that would enable the National Disability Insurance Agency to operate like an insurance scheme, and how this would best be implemented. In its assessment of this issue, we urge the Commission to consider the need for the NDIA to reserve a pool of funds for the purpose of providing one-off or low-cost supports for people who are ineligible for the NDIS who would benefit from such interventions. This would align closely with the vision articulated in the Information, Linkages and Capacity Building policy framework, and would provide an important safety net for many people with disability.

Recommendation 6:

The NDIA must be directed to reserve a pool of funds to provide one-off or low-cost supports for people who are ineligible for the NDIS who would benefit from such interventions, and whose support needs would otherwise remain unaddressed. Information about the nature and type of supports to be funded under this approach should be clear and transparent, and should be developed in close consultation with people with disability and their representative organisations.

6. Information, Linkages and Capacity Building

Blind Citizens Australia agrees with Draft Finding 5.1. That is, it is a false economy to have too few resources for Information Linkages and Capacity Building to ensure people with disability (both inside and outside the NDIS) are connected with appropriate services. To this end, we support Draft Recommendation 5.1, which will see funding for Information, Linkages and Capacity Building (ILC) increased to the full scheme amount for each year during the transition period.

6.1. Local Area Coordination

Draft recommendation 5.1 highlights the need to review the effectiveness of the ILC programme in improving outcomes for people with disability as part of the next COAG (Council of Australian Governments) agreed five-yearly review of scheme costs. Blind Citizens Australia submits that this measure falls short of addressing service gaps that currently exist with the ILC framework; particularly for those individuals who are ineligible to receive an individually funded package of supports under the NDIS.

In 2015, COAG published a document entitled: 'Principles to Determine the Responsibilities of the NDIS and other Service Systems'. This document states:

"The interactions of people with disability with the NDIS and other service systems should be as seamless as possible, where integrated planning and coordinated supports, referrals and transitions are promoted, supported by a no wrong door approach."

In order for a "no wrong door approach" to be effective, the focus needs to be on the needs of the consumer. The government has made it clear that Information Linkages and Capacity Building, or ILC, will play a crucial role in assisting people with disability who are ineligible for an individually funded package of supports under the NDIS to access the supports that will best meet their needs. This work will fall largely to Local Area Coordinators whose work forms the centerpiece of the ILC system.

When considering workforce strategies that will enhance outcomes for older people with disability who fall outside the NDIS, the Commission must think beyond the scope of aged care services and ensure agencies funded to undertake local area coordination in each state and territory have a comprehensive understanding of referral mechanisms for older people with disability and are adequately resourced to meet their needs. At present, agencies that have been tasked with undertaking Local Area Coordination are being inundated by work arising in relation to the roll out of the NDIS, which means their primary focus has been on the development of NDIS plans. This means there are still very few information and referral mechanisms available to effectively meet the needs of those older people with disability who fall outside the NDIS.

We support Draft Recommendation 9.4, which outlines the need for improved and comprehensive output and outcome performance indicators that directly measure performance against the scheme's objectives. In implementing this recommendation, the NDIA must expand its performance reporting by seeking data in relation to outcomes for non-NDIS participants accessing Local Area Coordination and other Information, Linkages and Capacity Building activities.

Recommendation 7:

The Disability Reform Council must commission an audit of agencies undertaking Local Area Coordination (LAC) in each state and territory as a matter of urgency. This audit should seek to determine the extent to which LAC agencies are resourced to address the needs of people with disability who fall outside the NDIS, and aim to rectify any service gaps that are identified through this process.

Recommendation 8:

The NDIA must immediately expand its performance reporting by seeking data in relation to outcomes for non-NDIS participants accessing Local Area Coordination and other ILC-related activities.

6.2. Continuation of block funding

According to Vision 2020 Australia, around 80% of vision loss in Australia is caused by conditions that become more common as people age. The need for blindness services that can adequately respond to the needs of an aging population will only become more pertinent in years to come; with one in every four Australians projected to be 65 years of age or older by the year 2056.

As identified in our March submission, the activity streams listed in the current Information, Linkages and Capacity Building framework do not allow for the continuation of block funding for services that are tasked with addressing the needs of the many people who are blind or vision impaired who fall outside the NDIS. This goes against recommendations put forward in the Productivity Commission's 2011 report, which stated that tier 2 of the scheme (now known as Information, Linkages and Capacity Building), would include a number of block funded programmes to ensure the continuation of services for people who would not be eligible for the NDIS.

In a joint press release issued by The Hon Jenny Macklin MP and Senator Jan McLucas in 2013, there was an acknowledgement that blindness services were one service type that might require such an approach. The press release stated:

"existing services for older Australians, such as hearing and vision services, that complement the assistance available through aged care will also continue to provide supports to people who develop a disability after age 65."

Specialist blindness services cannot be expected to receive sufficient income through individually funded NDIS packages alone. The fact that age-related vision loss continues to be the leading cause of blindness means that the vast majority of people who are blind or vision impaired will fall outside the NDIS. In instances where an individual is eligible to receive an individually funded package under the NDIS, they will generally access specialist blindness services on an episodic basis or for rehabilitative purposes; making revenue received through this income stream extremely inconsistent and unreliable for the service provider. As such, there is a very real risk that specialist blindness services will not be able to remain financially sustainable into the future.

At a bare minimum, specialist blindness services that were receiving block funding under previous arrangements should continue to receive transitional funding to enable them to adjust to the new business environment leading up to full roll out of the NDIS. At full roll out, however, we assert that providers should continue to receive a proportion of the funding that was available to them prior to the introduction of the NDIS; in recognition of the fact that the vast number of clients accessing specialist blindness services will not be eligible for an individually funded package of supports under the scheme. The amount of block funding to be provided should be calculated according to the proportion of clients aged 65 and over who accessed specialist services during the previous financial year. This approach would be consistent with recommendations put forward in the Productivity Commission's 2011 report, and would also align with draft recommendation 5.2 from the Commission's position paper on NDIS costs.

Recommendation 9:

Specialist blindness services that were receiving block funding under previous arrangements should continue to receive transitional funding to enable them to adjust to

the new business environment leading up to full roll out of the NDIS. At full roll out, however, providers should continue to receive a proportion of the funding that was available to them prior to the introduction of the NDIS; in recognition of the fact that the vast number of clients accessing specialist blindness services will not be eligible for an individually funded package of supports under the scheme.

7. Monitoring and reporting

Blind Citizens Australia recognises the need for the implementation of a robust monitoring and reporting framework to:

- Track whether the NDIS is being rolled out according to budget
- Track the extent to which the NDIS is effectively delivering on its key objectives, and
- Identify interfacing issues and service gaps.

As stated in Section 6.1 (recommendation 6) of this submission, one critical aspect of this framework must involve collecting performance data in relation to outcomes for non-NDIS participants accessing Local Area Coordination and other ILC-related activities.

Blind Citizens Australia also agrees with Draft Recommendation 5.2 outlined in the Productivity Commission's position paper, which states that:

- The Australian, State and Territory Governments should make public their approach to providing continuity of support and the services they intend to provide to people (including the value of supports and number of people covered), beyond supports provided through the National Disability Insurance Scheme. These arrangements for services should be reflected in the upcoming bilateral agreements for the full scheme.
- The National Disability Insurance Agency should report, in its quarterly COAG
 Disability Reform Council report, on boundary issues as they are playing out on
 the ground, including identifying service gaps and actions to address barriers to
 accessing disability and mainstream services for people with disability.

The measures outlined in Draft Recommendation 5.2 are crucial in ensuring transparency and accountability around interfacing issues. We envisage that such measures will be particularly useful in addressing some of the existing challenges that exist for people with disability aged 65 and over.

We also support Draft Recommendation 5.3, which requires that:

- Each COAG Council that has responsibility for a service area that interfaces with the National Disability Insurance Scheme (NDIS) should have a standing item on its agenda to address the provision of those services and how they interface with NDIS services. This item should cover service gaps, duplications and other boundary issues.
- Parties should include specific commitments and reporting obligations consistent
 with the National Disability Strategy. The Agreements should be strengthened to
 include more details around how boundary issues are being dealt with, including
 practical examples.

While Draft Recommendation 5.3 provides some reassurance that some of the outstanding interfacing issues between the NDIS and other service systems will be prioritised and systematically addressed, we would like to see this recommendation strengthened to provide greater transparency around reporting requirements. Ideally, we would like the Council of Australian Governments to commit to a quarterly public communiqué to highlight the interfacing issues that have been identified during the reporting period, and the measures that have been put in place to ensure these issues are addressed.

Recommendation 10:

Draft Recommendation 5.3 should be strengthened to require COAG to issue a quarterly public communiqué to highlight the interfacing issues that have been identified during the reporting period, and the measures that have been put in place to ensure these issues are addressed.

8. Conclusion and summary of recommendations

Blind Citizens Australia recognises the NDIS represents the single largest reform Australia has seen since the introduction of Medicare. As such, it is understandable that there are still a number of operational and interfacing difficulties that remain outstanding. The challenge is in ensuring these matters are promptly responded to and resolved.

We acknowledge the important role of this first five-yearly review of NDIS costs in allowing Government, in consultation with people with disability and their representative organisations, to work towards a disability support system that truly meets the needs of all people with disability. As such, we are very grateful to have the opportunity to provide feedback on the Productivity Commission's position paper on NDIS costs and look forward to continuing these conversations into the future.

Should you wish to discuss any of the issues raised throughout this submission in further detail, please do not hesitate to contact us. A summary of these recommendations has been included below for ease of reference:

- 1. The eligibility criteria outlined in the NDIS (National Disability Insurance Scheme) Act 2013 must be amended to retrospectively allow any person who was born with, or acquired disability before the age of 65 (and whose disability is not attributable to the natural process of aging) entry into the National Disability Insurance Scheme, irrespective of age.
- 2. Any attempt to slow down the roll out of the NDIS must be accompanied by a strategy to ensure that no individual nearing the age 65 cut-off for the scheme will miss out on meeting the age eligibility requirements because of these changes.
- 3. The NDIA must work with Centrelink to obtain a list of people with permanent disability who will be aged 65 or over when the NDIS rolls out in their area, and

- put a plan in place to provide these individuals with assistance to make an early access request for the NDIS.
- 4. The NDIA must commit to a comprehensive communication strategy to ensure people with disability, their families and carers are aware of the early access provisions that exist under the NDIS Act and know how to make an early access request.
- 5. In establishing a framework for the implementation of specialised planning teams and/or more use of industry knowledge and expertise, the NDIA must work with the Department of Health to ensure specialist assessments are also available to older people with specialist disability-related needs who are accessing support under the aged care system.
- 6. The NDIA must be directed to reserve a pool of funds to provide one-off or low-cost supports for people who are ineligible for the NDIS who would benefit from such interventions, and whose support needs would otherwise remain unaddressed. Information about the nature and type of supports to be funded under this approach should be clear and transparent, and should be developed in close consultation with people with disability and their representative organisations.
- 7. The Disability Reform Council must commission an audit of agencies undertaking Local Area Coordination in each state and territory as a matter of urgency. This audit should seek to determine the extent to which LAC agencies are resourced to address the needs of people with disability who fall outside the NDIS, and aim to rectify any service gaps that are identified through this process.
- 8. The NDIA must immediately expand its performance reporting by seeking data in relation to outcomes for non-NDIS participants accessing Local Area Coordination and other ILC-related activities.
- 9. Specialist blindness services that were receiving block funding under previous arrangements should continue to receive transitional funding to enable them to adjust to the new business environment leading up to full roll out of the NDIS. At full roll out, however, providers should continue to receive a proportion of the funding that was available to them prior to the introduction of the NDIS; in recognition of the fact that the vast number of clients accessing specialist blindness services will not be eligible for an individually funded package of supports under the scheme.
- 10. Draft Recommendation 5.3 should be strengthened to require COAG to issue a quarterly public communiqué to highlight the interfacing issues that have been identified during the reporting period, and the measures that have been put in place to ensure these issues are addressed.