

# PORTFOLIO COMMITTEE NO. 2

## INQUIRY INTO THE IMPLEMENTATION OF THE NDIS AND THE PROVISION OF DISABILITY SERVICES IN NSW

### **Supplementary questions**

## **Occupational Therapy Australia**

1. Are you aware of any specific groups of people with disability who are not being captured by the NDIS and thus not receiving NDIS funding? Please describe these groups by their disability/medical/health condition.

a. How are these groups accessing the support and services they need, if not by the NDIS?

#### Answer:

Occupational Therapy Australia (OTA) is not aware of entire cohorts of people with disability being denied access to the NDIS, beyond obvious exclusions such as those aged over 65.

The Committee would be aware that each person who applies for NDIS funding is assessed on an individual basis. As a result, there are subsets of people within different groups who will inevitably miss out, depending on the NDIA's assessment of their functional impairment.

Our members report that too often a person's eligibility for the NDIS, and/or the quality of an NDIS plan, comes down to how effective the participant or their advocate are at stating their needs during plan development conversations.

OTA applauds the recent announcement by Social Services Minister Paul Fletcher that a separate psychosocial stream will be added to the NDIS, as this cohort appears more prone to rejected applications due to the fluctuating nature of mental illness.

OTA has previously expressed concern about the welfare of those who are deemed ineligible for the NDIS. In particular, our members have expressed concerns for those people who have been denied access to the scheme, or who are assessed as only partially eligible for supports on the grounds that their functional disability is the result of a chronic health condition (e.g. obesity, stroke, arthritis). This cohort includes NSW residents who previously received either ADHC delivered or ADHC funded supports, prior to the roll out of the NDIS in NSW.

Some of these people have been full-time wheelchair users for many years, and the closure of ADHC means there are no services in place. This group is resorting to applying for federally funded aged care services through My Aged Care, which is ultimately placing more pressure on a scheme designed for those aged over 65.

The other group of concern is those people whose ADHC delivered or funded services were terminated before the NDIS became available in their area or their NDIS plan was in place. This is a group that did not receive support during the transition period and may have fallen through the gaps.



The recently introduced Safe and Supported at Home (SASH) initiative, which is delivered by NSW Health, provides time-limited disability services to individuals whose needs are not addressed by the NDIS. Eligible recipients are those aged under 65 who have a functional impairment resulting from a disability or health condition, and are not eligible for NDIS funding. While it is clearly too early to comment on program outcomes, OTA hopes that this initiative will address the concerns raised above and provide necessary supports to people otherwise at risk of falling through the gaps.

It is imperative that the federal and state governments ensure that sufficient support services are in place for these groups, and that these services can be accessed in a timely manner. We reiterate our calls for governments to retain funding for existing programs upon which people have relied for decades, or else ensure continuity of support if services are withdrawn.