

To: Ms. Rebecca Falkingham
CEO, National Disability Insurance Agency

cc. The Hon. Amana Rishworth, Minister for the NDIS
Ms. Louise Glanville, Commissioner, NDIS Quality and Safeguards Commission
Mr. Kurt Fearnley, National Disability Insurance Agency Board of Directors

02 March 2025

Dear Ms. Falkingham,

We are writing an open letter on behalf of the Occupational Therapy Society (OTSi), a national society for occupational therapists. OTSi is the formalised advocacy arm of the NDIS occupational therapy community of practice, a community of over 11,000 occupational therapists.

As you know, occupational therapists and other allied health professionals play a key role in supporting NDIS participants, through the provision of capacity building interventions, and in providing disability-related evidence and reports. **We invite you to read our recent discussion paper on best practice support needs assessments, which includes recommendations on innovation and best practice, for consideration by the NDIA. [1].**

Following your contribution to Senate Estimates on February 27th [2], we wish to share feedback on key topics discussed during the hearing and highlight the need for co-design and trialing of new support needs assessments.

1. NDIS planners neglecting to read participant-provided allied health professional reports

Occupational therapists are a primary source of disability evidence as the construct of functional capacity is central to our scope of practice. Since inception, NDIS planners have sought, and continue to seek, functional capacity and support needs reports from occupational therapists to assist with Agency decision-making and to address aspects of the NDIS legislation, both at the point of Scheme access and at plan reassessments throughout the participant's journey. Frequently, these requests are provided in writing to participants through their NDIS plans.

Occupational therapy functional capacity and support needs assessments are comprehensive, to ensure the participant's range of functional impacts are documented and comprehensive support needs are clearly defined, to assist NDIS decision making. They vary in length and detail, depending on the complexity of the participants disability and circumstances. **We emphasise our willingness to work with the NDIA to provide this information in a format most helpful to NDIS systems.** Despite requests, the NDIA has never provided guidelines or templates to assist this process. Since October 2024, our community of practice has used a range of strategies to ensure therapists can address Section 10 and the associated new support lists and has also assisted thousands of participants to understand the changes made to the NDIS legislation and what they mean for their individualised supports.

We express our deep concern at your disclosure during the Senate Estimates hearing on February 27th 2025, that NDIS planners do not read participant-provided allied health professional reports. We highlight that the documented expectation that planners review disability evidence provided by the participant has been a long-term feature of NDIS planning and decision-making, and we note that internal audits from 2021-2022 indicate that this was occurring for 92% of participant plan reassessments [3]. We feel compelled to ask for clarity on the support-funding decision making process, in the absence of considering disability evidence? We note that recent data highlights that 70% of the NDIS -focused decisions at the Administrative Review Tribunal overturn original NDIS decisions on funding supports[4].

We draw attention to the safeguarding risks associated with neglecting to consider disability evidence provided by the participant's trusted allied health professionals. These include inappropriate, inadequate or ineffective funding and support needs decisions; the heightened risk of under or overfunding individual budgets; increased complaints; and potential risks to the safety and well-being of participants.

2. International evidence highlights the value of known allied health professionals providing evidence of disability support needs to inform funding decisions

The NDIS is a world-leading disability insurance scheme and must aspire to uphold this legacy. A recent scoping review of best practice disability support needs assessment from 10 jurisdictions around the world highlights the importance of support needs assessments incorporating disability evidence provided by allied health professionals who are familiar with the care of the disabled person [5]. Allied health professionals engaged with the person over time to evaluate the person's disability, environment, and evolving support needs to build a theory of change critical to planning for current and future support needs. Basing funding-decisions on professional understandings of theory of change is a factor critical for effective disability insurance scheme. While we recommend future NDIS Support Needs Assessments are delivered by AHPRA regulated allied health professionals, the formal consideration of evidence provided by allied health professionals who are familiar with the care of the disabled person becomes even more critical if the Support Needs Assessments are delivered by non-allied health professionals. None of the 10 countries examined in the international scoping review fully excluded disability evidence from qualified allied health professionals in their decision-making on disability funding.

In tune with international evidence, we recommend that current and future NDIS assessment processes enable inclusion of disability and support needs evidence provided by allied health professionals engaged in participant care.

3. The proven cost-benefit of utilising participant-provided disability evidence in NDIS decision-making

The Australian National Audit Office (ANAO) report on *Effectiveness of the National Disability Insurance Agency's Management of Assistance with Daily Life Supports* [6], demonstrated the substantial cost-reduction on 'core support' (assistance with daily life supports) made by the NDIA as a result of disability-specific assessment tools and disability evidence largely provided through occupational therapy delivered functional capacity assessment reports, and evidence from other allied health professionals external to the NDIA. The cost-reduction was achieved by reducing reliance on NDIS planner-delivered WHODAS scores to inform funding decisions. Further analysis of the statistics provided by the ANAO report, indicate the provision of external disability evidence from occupational therapy functional capacity assessment and other health professional reports, likely led to an estimated NDIS core-support cost-reduction of up to \$1.5billion, for the financial year 2022-2023 [7]. We provide an extract from the ANAO report below to further illustrate our point, see Fig 1 below.

We seek that occupational therapy functional capacity and support needs assessments, and other participant-provided allied health reports are more appropriately acknowledged as an investment by the NDIA and not unfairly framed as a cost-burden.

4. The need to 'Take the Time to Co-design' NDIS Support Needs Assessments

OTSi is a signatory to the Every Australian Counts campaign letter calling for NDIS reform to proceed in a considered manner with adequate time for co-design, including trialling of new assessment and budget-setting processes [8]. The new Support Needs Assessments will be vital to the NDIS and must be well-designed to serve participants effectively. When developed collaboratively, thoroughly tested, and delivered by trusted health professionals, they can enhance fairness, restore trust, and improve outcomes for people with disabilities across Australia.

Currently, occupational therapists and other allied health professionals are not included in the co-design of NDIS reforms and **we would welcome the opportunity to contribute**. We seek that the role and value of occupational therapists and other allied health professionals is recognised and respected in the discourse related to NDIS reform.

Thank you for reading this letter. We look forward to your response and would be pleased to meet for further discussion.

With warm regards,

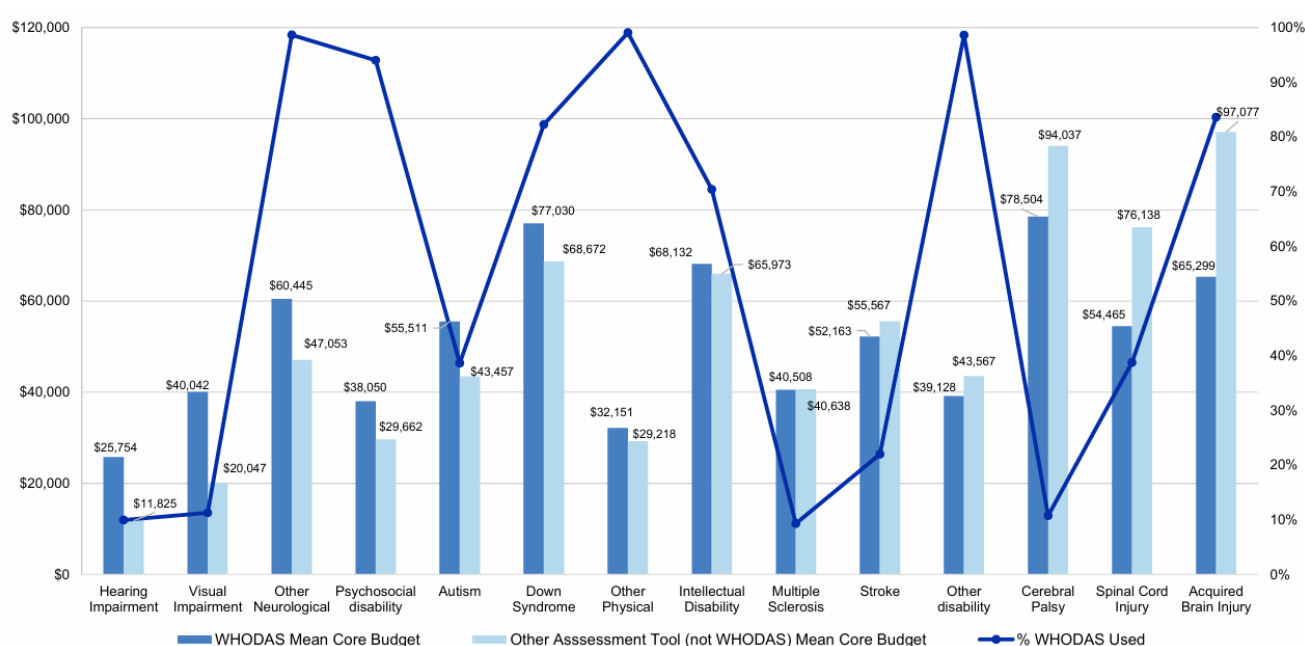
The Occupational Therapy Society for invisible and hidden disability (OTSi)

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FIG 1: NDIS planner-delivered WHODAS compared to ‘other’ assessment tool where ‘other’ assessment tools are predominantly disability-specific assessments provided by an allied health professional engaged in participant care. “Plan [core] budgets were higher for eight out of the 14 disability groups when WHODAS was used compared to when other tools were used during plan development.” Source: P.39, ANAO report 2023, available at [Effectiveness of the National Disability Insurance Agency’s Management of Assistance with Daily Life Supports | Australian National Audit Office \(ANAO\)](#)

Note: We do not suggest these participants whose plan-decisions were based on external disability-specific tools provided by health professionals received an overall lower-value plan, as they may have received a more tailored plan inclusive of capacity building, assistive technology and other individualised supports. The ANAO report analysed ADL (core support) data only.

Figure 2.1: Assistance with Daily Life (ADL): WHODAS assessment tool usage and average core supports budget 2021–22, relative to other assessment tool, by disability



Note: ADL is included in core supports budget (see paragraph 1.7). Analysis includes plans for participants aged 17 years or older approved in 2020–21 and 2021–22, and expenditure greater than zero. Excludes plans less than one month duration and groups with less than 1000 plans: Development Delay, Global Development Delay and Other Sensory/Speech. High usage of WHODAS is expected as the preferred tool for Other Neurological, Other Physical and Other Disability (see Appendix 3).

Source: ANAO analysis of NDIA data.

REFERENCES

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2. [NDIS boss admits staff don't have time to read costly reports | Daily Telegraph](#)
[Dailytelegraph.com.au | Subscribe to The Daily Telegraph for exclusive stories](#)
3. Australian National Audit Office (2023) *Effectiveness of the National Disability Insurance Agency’s Management of Assistance with Daily Life Supports*. Section 2.62, p.41. Available here: [Effectiveness of the National Disability Insurance Agency’s Management of Assistance with Daily Life Supports | Australian National Audit Office \(ANAO\)](#)
4. ART Caseload Report For the period 14 October 2024 to 31 December 2024 [ART Caseload Report 2024-25](#). Retrieved 02/03/2025
5. Health Information and Quality Authority (2024) *Scoping review to inform standards for assessment of need*. Dublin, Ireland. [Scoping review to inform standards for assessment of need](#) Retrieved 26/01/2025
6. Chapter 2, Assessment Tools (Section 2.5) and Consideration of Evidence in Planning (Section 2.6). Available here: [Effectiveness of the National Disability Insurance Agency’s Management of Assistance with Daily Life Supports | Australian National Audit Office \(ANAO\)](#)
7. [NDIS REFORM STRATEGIES THAT ENSURE SCHEME SUSTAINABILITY & UPHOLD NDIS CORE PRINCIPLES - Allied](#)
8. [Campaign Statement: Take the Time for Codesign - Protect NDIS Participants' Safety and Wellbeing - Every Australian Counts](#)