



Ms Bonnie Allan  
Committee Secretary  
Joint Standing Committee on the NDIS  
Via email: [NDIS.Sen@aph.gov.au](mailto:NDIS.Sen@aph.gov.au)

28 May 2021

Dear Ms Allan

**Allied Health Professions Australia response to additional written question on notice (Senator Coral Brown), public hearing 23 April 2021**

Allied Health Professions Australia (AHPA) thanks the Joint Standing Committee on the National Disability Insurance Scheme (NDIS) for the opportunity to appear before the Committee on 23 April 2021, and to respond to the following question from Senator Carol Brown taken on notice at the hearing:

**Question:**

1. Do you see the tools that have been selected by the NDIA – such as the WHODAS and PEDI-CAT – as being appropriate measurements to inform a funding decision in a NDIS plan?

**Answer:**

Since independent assessments were first mooted by the NDIA, AHPA has held a firm view that the associated proposed assessment tools, whether employed singly or together, are not designed or fit for the purpose of assessing functional capacity, let alone for informing a funding decision in an NDIS plan.

AHPA understands that the Joint Standing Committee of the 45<sup>th</sup> Parliament raised concerns about the use of the PEDI-CAT:

‘The committee is concerned by reports that the PEDI-CAT tool is unsuited to assessing the functional capacity of children with a developmental delay, including those with Autism Spectrum Disorder (ASD), yet it is being used by the NDIA and its Partners to inform access and funding decisions and track children's developmental progress.’<sup>1</sup>

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<sup>1</sup> Joint Standing Committee on the National Disability Insurance Scheme, *Provision of services under the NDIS Early Childhood Early Intervention Approach*, December 2017, ix, and see further 22-28.



The WHODAS 2.0 is at least, unlike the other independent assessment tools, better able to be utilised across the diversity of people with disabilities.<sup>2</sup> Design of the WHODAS 2.0 incorporates an ability to gauge general environmental function such as mobility and self-toileting.

Given that the NDIS reforms aim to enhance participants' personal choice and control, such tools must also be capable of effectively and fairly producing individualised funding. In relation to mobility, for example, this means that in order to address individual needs it is not simply a matter of focusing on, for instance, improving a person's gait. This environmental function must also be addressed within a broader framework which includes the goals of encouraging individualised lifestyle activities, belonging and community inclusion. Quality of life measures are then an important aspect of the process of decision-making concerning directing mobility-related support in the context of the participant's preferred activities of daily living. These measures are not sufficiently encompassed in the WHODAS 2.0.<sup>3</sup>

As a second illustration, there are numerous factors to be considered when planning a participant's budget, with one possible inclusion being identifying their orthotic/prosthetic supports. Here the independent assessment tools simply do not capture the detail required to make decisions that genuinely support the individual participant. None of the tools are able to measure a participant's orthotic/prosthetic potential – as for the previous mobility example, the specific improvements in quality of life and capability they gain by using an orthosis/prosthesis, and their likely future needs. Other measurements and assessments that should be included for the purposes of budget planning include potentially varying amounts of clinical time required to assess for, prescribe, and review orthoses/prostheses, and the quantum of technical time required to manufacture them.

Additional elements of planning for participants needing orthotic/prosthetic supports may be highly individualised, with the cost of specific components being linked to the participant's specific goal. For example, goals of being able to swim, run or participate safely in sport will each require different orthotic/prosthetic components and designs. It is also important to bear in mind that two participants can have the same level of function but different goals, and as a result, their orthotic/prosthetic budgets would look very different. However at best, the independent assessment tools will only measure a baseline level of function.

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<sup>2</sup> Although even the WHODAS 2.0 is insufficient to assess disabilities related to mental illnesses:  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5032648/>.

<sup>3</sup> See eg <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5032648/>.



Similarly, it may be particularly important for some participants that there is consideration of weight limitations on components or appropriateness in wet or dirty conditions, or that a budget incorporate travel costs to fit, supply and review appropriate orthoses/prostheses, particularly for participants in rural and remote areas.

We further refer the Committee to examples provided by our member Speech Pathology Australia, where participants have different goals, environments, support needs and lives, but would generate similar independent assessment scores and therefore be allocated the same funding budgets.<sup>4</sup>

Standardised tools such as those proposed for independent assessments are also not helpful tools for supporting person- and family-centred decision-making, nor for identifying and addressing family needs.

Funding decisions and plan design must be supported by methodology that facilitates individualised tailoring of the desirable outcomes to be achieved for that particular participant within the scheme, together with a more bespoke support package delivery.

AHPA therefore continues to assert that decisions concerning individual functional capacity, support needs and associated funding must be based on the use of more nuanced and detailed instruments than the independent assessment tools. We further refer the Committee to the separate response to this Question by our member Occupational Therapy Australia.

Yours sincerely

Claire Hewat  
Chief Executive Officer

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<sup>4</sup> Speech Pathology Australia, Submission to NDIA consultation paper 'Access and Eligibility Policy with independent assessments', 23 February 2021 and Submission to the Joint Standing Committee on the National Disability Insurance Scheme Inquiry: Independent Assessments, 14 April 2021.