



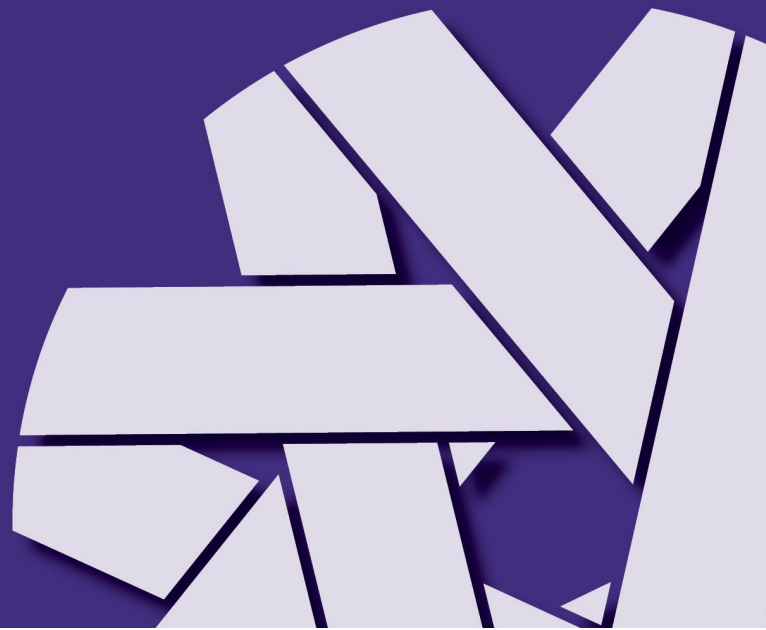
**Allied Health  
Professions  
Australia**

# **Submission to Independent Review of the National Disability Insurance Scheme *What We Have Heard* NDIS Review Interim Report**

**August 2023**

**This submission has been developed in consultation  
with AHPA's allied health association members.**

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## About Allied Health Professions Australia and the allied health sector

Allied Health Professions Australia (AHPA) is the recognised national peak association representing allied health professions. Allied health is Australia's second largest health workforce, and allied health professionals work across a diverse range of locations and sectors. Allied health professionals are a critical part of the National Disability Insurance Scheme (NDIS), providing a wide range of supports and services to help participants maintain and improve function, build their capacity to participate in community life, education and employment, and to access vital assistive technology.

AHPA's membership consists of 27 national allied health associations and a further 13 affiliate members, each representing a particular allied health profession. AHPA collectively represents some 200,000 allied health professionals and AHPA works on behalf of all Australian allied health practitioners, including the largest rural and remote allied health workforce numbering some 14,000 professionals.

AHPA's Disability Working Group comprises policy and clinician representatives drawn from the range of AHPA's members that provide services in the NDIS. The Working Group is therefore informed by the views and experiences of both individual allied health professions and the allied health sector as a whole.

AHPA and its member associations are committed to ensuring that all Australians, regardless of disability, can access safe, evidence-based services to assist them to realise their potential for physical, social, emotional and intellectual development.

## Introduction

AHPA welcomes the opportunity to make a final submission to the NDIS Review. We made a detailed submission to the Review in February 2023, and a further submission on the NDIS Quality and Safeguarding Framework in May 2023. More recently, AHPA responded to the Review's Pricing and Payments Issues Paper in July 2023.

AHPA strongly commends the separate and detailed final submissions to the Review from our members Australian Physiotherapy Association (APA) and Occupational Therapy Australia (OTA). Below, we highlight key aspects and recommendations from those submissions that we believe speak more broadly to issues faced by our NDIS allied health providers regardless of their individual profession.

We also draw the Review's attention to aspects of our first submission that do not appear to have been sufficiently acknowledged in either the *What We Have Heard* Interim Report or the subsequent Town Hall in Newcastle.

## Themes from the *What We Have Heard* Interim Report

### Applying and getting a plan

We join with the APA in referring the Review to the work AHPA has begun to undertake with the National Disability Insurance Agency in the Information Gathering for Access and Planning (IGAP) project, and to the reports on Independent Assessments and on Planning from the Joint Standing Committee on the NDIS.

AHPA endorses the final submissions of both the APA and OTA on planning issues, including Appendix 1 of the APA's submission, 'Specific issues with assessments and reports for eligibility and planning'.

### **A complete and joined up ecosystem of support**

AHPA endorses the submission of the APA.

### **Defining reasonable and necessary**

We strongly endorse the detailed submissions of the APA and OTA, including associated recommendations.

### **Early childhood supports**

We strongly endorse the detailed submissions of the APA and OTA, including associated recommendations.

### **The support and service marketplace**

AHPA strongly endorses the detailed submissions of the APA and OTA, including associated recommendations. For more detail we also refer the Review to our July 2023 response to the Review's Pricing and Payments Issues Paper, together with various submissions from our members on that Paper.

We particularly support OTA's critique of 'allied health price gouging' claims and the related impact on the morale of allied health professionals who provide services under the NDIS, and associated recommendations. The 'elephant in the room' – that many allied health providers are operating at a loss – is still not being taken seriously.<sup>1</sup>

### **Measuring outcomes and performance**

AHPA strongly endorses the detailed submissions of the APA and OTA. As outlined in our earlier submission on the Pricing and Payments Issues Paper, we do not support outcomes-based payments for therapy supports, or the proposal to pursue preferred provider arrangements.

### **Achieving long term outcomes**

We support the APA's submission.

### **Participant safeguards**

We refer to our comments on over-regulation of allied health providers in our February 2023 submission to the Review.

We also support OTA's recommendation that the NDIA strengthen the understanding of NDIS staff, planners and delegates in understanding the need to balance dignity of risk with vulnerabilities of participants to engage unregistered providers.

## **Themes from our first submission to the Review**

Contributing to the NDIS Review process has required overcoming 'submission fatigue', because the allied health sector has highlighted many of the same themes over a long time period to a variety of entities, to little effect.

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<sup>1</sup> <https://www.abilityroundtable.org/post/white-paper-telling-the-sector-s-story-financial-and-workforce-fy22>.

As our APA colleagues have noted in their submission, it is now difficult to see how current submissions are likely to have any practical impact when it appears that at least some major policy decisions about the NDIS have already been made.

AHPA is especially concerned that decisions pertaining to therapy supports may have already been discussed and even finalised without our participation. As our February submission details, this was allied health providers' experience with respect to the NDIA's development of the now discredited model of independent assessments.

AHPA fully appreciates that NDIS participants and their advocates should co-design NDIS policies and processes. However, as we document in some depth in our February submission, allied health provider peaks' experience continues to be that the NDIA does not always treat us and our member providers as other valued stakeholders in the NDIS ecosystem.

This then results in NDIS participants not receiving the full value of allied health services that they need and deserve. It is essential that the NDIA institute processes to foster respect for the distinct value and roles of allied health in supporting participants, and for the clinical judgment of our practitioners.

It is also therefore disappointing that aspects of Review consultation material, such as the Pricing and Payments Paper, have continued (no doubt with media amplification) the scapegoating of allied health professionals as contributors to NDIS 'unsustainability'.

AHPA further notes that at least some of the key issues we raised in our February submission were not identified in the Interim Report, and so it is unclear whether the Review intends to make the appropriate recommendations.

These issues include:

- underutilisation of therapy supports, including in comparison to overall utilisation rates
- under-pricing of allied health
- marginalisation of allied health in NDIS workforce planning
- inadequate allied health NDIS data
- lack of integration of the NDIS with other national care and support systems, including via workforce planning and digital systems

We hope that AHPA and our member peak organisations will be fully involved in consideration and implementation of all relevant changes proposed by the Review in its final report.