



AQA Victoria Ltd
ABN 90 006 691 185
P.O. Box 219, Fairfield VIC 3078
P: (03) 9489 0777
E: admin@aqavic.org.au

29 October 2021

Committee Secretary
Joint Standing Committee on the National Disability Insurance Scheme
Department of the Senate
PO Box 6100
Parliament House
Canberra ACT 200

Dear Committee Members

Inquiry into the future of the NDIS - Current Scheme Implementation and Forecasting for the NDIS

AQA Victoria welcomes the opportunity to contribute to the Joint Committee's inquiry into current scheme implementation and forecasting for the NDIS.

AQA, founded in 1987, is a member-based not-for-profit organization that exists to resource people with spinal cord injuries and other complex conditions to live well. We are a registered service provider with the National Disability Insurance Scheme (NDIS) and the Transport Accident Commission (TAC).

The attached submission reflects AQA's commitment to its spinal cord injury community and the broader disability community, including those whose voices are not often heard.

Thank you for the invitation to contribute to this inquiry into the future of the NDIS, which could affect many of our community. We would be pleased to provide further input if the Committee so desires.

Yours Sincerely

Chief Executive Officer



Submission by AQA VICTORIA Ltd

To

Inquiry into the future of the NDIS –
Current Scheme Implementation and Forecasting
for the NDIS

Joint Standing Committee on the National Disability Insurance Scheme

OCTOBER 2021

BACKGROUND

AQA Victoria Ltd

AQA is a member-based not-for-profit organisation and a registered public company limited by guarantee. We are a quality accredited and registered service provider with the National Disability Insurance Scheme (NDIS) and the Transport Accident Commission (TAC). For more than 30 years, we have resourced people whose lives have been disrupted by injuries, illnesses, and other events, to participate in all aspects of life and contribute.

Our Purpose

AQA exists to resource people to live well.

Our Vision

An inclusive community where people have access to the resources they need to meet the challenges of change and live fully.

Our History

Formed in January 1987 from the Melbourne office of the Australian Quadriplegic Association, which had operated it as a subsidised workplace, AQA Victoria Ltd rapidly built a highly respected and peer-led attendant care business, established an information hub, and pioneered a peer-support outreach service in collaboration with Austin Health.

Over the past decade we have expanded the scope of the supports we provide to clients across a broad spectrum of complex neuromuscular and other disorders. We have trained an extensive register of peer mentors and coaches, whose services are available informally and through the NDIS. We have taken our information service and bimonthly newsletter online through our Spire website. And we continue to sustain more than 400 support workers from diverse backgrounds with meaningful employment.

For further information on how we support people with spinal cord injuries and other challenges to live well and fully participate please visit: [www. https://www.aqavic.org.au/services](https://www.aqavic.org.au/services)

This Submission

In keeping with our Purpose and Vision, AQA tenders this submission to the Inquiry to ensure the Committee is fully informed, particularly regarding the views and circumstances of those living with the challenges of disability.

AQA Victoria's Response to Two Terms of Reference

T.O.R (b): The interfaces of NDIS service provision with other non-NDIS services provided by the States, Territories and the Commonwealth, particularly aged care, health, education and justice services

Acquired Disability in the Aged Care System

The interface between the NDIS and the Aged Care system is one that AQA argues should not divide the disability community into young and old, where the young are worthy of full support and the old are not. Currently, those over 64 years of age are excluded from the NDIS, where the average annual level of support for someone with spinal cord injury is \$165,000 but can be more dependent on need. For those over 64 years, the financial support they will receive through the aged care system is capped at approximately \$52,000.

The Productivity Commission's 2011 report on the inquiry into disability care and support states that the NDIS should be a scheme that *"provides insurance cover for all Australians in the event of significant disability"* and defines the scheme as one that *"should cover disability present at birth, or acquired through an accident or health condition, but not due to the natural process of ageing"*. The intent, therefore, was not to exclude from the scheme those living with disability of any given age, but only those whose disability is due solely to natural processes of ageing. As a signatory to the United Nations *Convention on the Rights of Persons with Disabilities*, Australia has a responsibility to *"... combat ... prejudices and harmful practices relating to persons with disabilities, including those based on ... age"*.

Because they acquired their disability at age 65 and 66, two members of our spinal cord injury community explained how they are forced to spend their lifesavings on crucial support needs and in a matter of years will be forced to live in aged care facilities with inadequate supports¹. This could be while they are still in their sixties. If they had acquired their injuries one and two years earlier, they would not be in this dire situation. There are likely many more Australians in similar circumstances. If the current inequity is not quickly rectified, albeit in temporary form until new policy and funding can be implemented, some will lose their independent lifestyle and assets while others could pass away never having received the support originally envisaged of the NDIS.

T.O.R (e): Financial and actuarial modelling and forecasting of the scheme, including:
(ii) assumptions, measures, and methodologies used to forecast and make projections about the scheme, participants, and long-term financial modelling

Need for Evidence Based Decision Making

The NDIS is not analogous to private car, house or life insurance, as it deals with loss of human function and dimensions of wellbeing, and is a social intervention. We would therefore argue that proposed major changes ought to be rigorously evaluated for social and economic benefits versus costs, not just financial or actuarial analyses. Such evaluation should include comprehensive consultation with participants and their advocates, along with analysis of whether outcomes will be in line with the

¹ <https://www.spire.org.au/media/3047/newslink-august-21-final.pdf>

scheme's principles and intent. Evidence based decision making is more likely to produce better outcomes for our community² and sound evidence should inform decisions, not simply justify them. The recent foray into independent assessments and resultant inquiry and findings by the Committee could be seen as an example of why such an approach would be prudent.

RECOMMENDATIONS FOR CONSIDERATION

Recommendation 1:

AQA urge the government to give access to persons over the age of 64, whose disability is not solely due to processes of ageing, to the benefits and support levels that are provided under the NDIS as soon as possible.

Recommendation 2: Include social cost benefit analysis or similar evaluation techniques when forecasting and modelling proposed major changes to the scheme

AQA recommend including appropriate social and economic cost benefit analyses in the forecasting and modelling of proposed major changes to the scheme, and adequate consultation with those likely to be impacted.

² Australian Bureau of Statistics <<https://www.abs.gov.au/ausstats/abs@.nsf/lookup/1500.0chapter32010>>