



SUBMISSION:

National Disability Insurance Scheme Consultation paper: Planning Policy for Personalised Budgets and Plan Flexibility

23 FEBRUARY 2021

Introduction

Audiology Australia (AudA) welcomes the opportunity to provide a submission in response to the National Disability Insurance Agency's (the Agency) consultation on a planning policy for personalised budgets and plan flexibility. AudA is the peak professional body for the health profession of audiology, representing over 3,000 audiologists across Australia.

Audiologists are hearing health practitioners who help their clients preserve, manage, and improve their hearing and balance and their ability to process and understand sounds. They provide hearing services to a wide range of clients, including to National Disability Insurance Scheme (NDIS) participants. Currently, there are 21,079 NDIS participants with a hearing impairment in Australia (NDIA 2020).

In principle, AudA supports the proposed changes to current NDIS planning processes to provide greater plan flexibility to participants through a personalised budget approach and the introduction of a holistic independent assessment to inform a participant's reasonable and necessary level of funding. We consider the personalised budget approach and increased flexibility in planning to be aligned with the choice and control aspect of the Agency's outcomes framework.

AudA's comments on the proposed planning policy for personalised budgets and plan flexibility are provided below.

Clarification needed for assistive technology items

There is limited information available on how high-cost assistive technology (AT) items may be budgeted in a participant's personalised budget, what the term "high cost" means and the scope of AT items considered by the Agency to be high cost.

We consider it important that participants and their families and/or carers are provided with sufficient information on the cost and complexity of AT items that participants can access and how they are able to access it in order to support participant decision-making during a planning meeting.

Participants with hearing impairments may require hearing AT ranging from low and mid cost (i.e., remote microphone systems and noise-cancelling technologies) to complex and higher cost hearing AT (i.e., cochlear implant speech processors). At this stage, it is unclear how participants who require higher cost hearing AT may be able to access their personalised budget to purchase the necessary supports. For example, can participants use funds from their flexible budget for this purpose? What if participants would like the flexibility to choose the AT of their choice?

AudA notes that further clarification may be provided in the Operational Guidelines; however, at present there is limited information on AT items which makes it difficult to provide further comments.

Concern with monthly/quarterly release of funds

The latest NDIA (2020) Quarterly Report indicates that 32% of NDIS participants with a hearing impairment are fully self-managed and 16% are partly self-managed. This shows that nearly half of all NDIS participants with a hearing impairment have a significant degree of independence in managing their NDIS funding.

The consultation paper states that participants' funds will be released in monthly or quarterly intervals. The delegate makes this decision during or after the planning meeting and once options have been discussed with the participant. AudA is concerned that a shift to monthly or quarterly payments may negatively impact some participants, particularly those participants who are experienced in fully or partly managing their current NDIS payment, which they can utilise at a time of their choosing over the course of a year.

The Agency has indicated that funds cannot be over-drawn above the funding level released into a plan at each monthly or quarterly interval. However, AudA notes that there may be situations where a participant needs to use more of their funds for services in some months compared to others without impacting their overall budget.

Further information needed on budget plans and flexible budgets

AudA considers that further information is needed regarding how the independent assessment process approach will be used to inform a participant's draft budget plan, including how results derived from the specified assessment tools used in independent assessments will affect or determine budget plans. It is presumed that similar budgets or budget funding amounts will be created for participants with similar independent assessments. However, more detail is needed on how budget plans will account for participant variances.

AudA notes that it may be easier to create budget plans for younger children where goals and supports may be more consistent, but how will budget plans be created for adults, taking into account the different goals and life situations of adult participants (i.e., seeking employment, moving out of home etc)? Other examples include how will budget plans account for the different costs associated with attending a mainstream school versus a specialist school and the potentially significant variation in travel costs for different geographic areas that may be largely based on accessibility of a particular health professional or service?

In addition, once a draft budget is created, further changes to the draft budget can then only be made under specific circumstances. It is a concern that there is limited opportunity to fine tune or refine the draft budget with minor adjustments to better suit participants' needs prior to the draft plan and draft budget being shared with participants ahead of the planning meeting. The lack of opportunity to make smaller, individual amendments to the draft budget may potentially result in standardised budgets for participants based on their independent assessment outcomes.

Further information is also needed to address in detail how flexible budgets will work under the proposed personalised budget approach. The consultation paper does not sufficiently outline the potential implications of the major change to flexible budgets outside of the changes planned for independent assessments. For example, how will the Agency ensure that participants are not choosing lower cost services that may be providing a lower quality of care? How will the Agency ensure core supports under a NDIS plan are not being eroded by participants trying to achieve capacity building outcomes and vice versa?

Administrative burden faced by providers

AudA members have raised the issue of navigating the time-consuming regulatory processes within the NDIS. For example, when hearing providers assess participants' hearing needs to identify the most appropriate hearing AT, they can either choose to fill out the 25-page hearing technology assessment template or provide the information in another format, which must include all information described in the template. AudA strongly highlights the administrative burden faced by hearing providers and the need to streamline the existing hearing technology assessment process.

NDIS planning and funding for hearing participants

AudA members have previously reported issues experienced with NDIS planners such as significant variations in NDIS planners' understanding of hearing and balance issues, how the NDIS eligibility criteria apply to people with hearing difficulties and planners questioning the basis of members' clinical decisions about participants.

Our members believe that a better awareness of the effectiveness, necessity, and value of supports recommended by audiologists is required within the NDIS to ensure that Local Area Coordinators and planners are well informed on participants' hearing health care needs and the importance of audiological interventions and supports. AudA notes that an increased awareness of the hearing health care needs of hearing participants may help to support and maintain positive relationships between planners and hearing participants.

AudA members have also raised the issue of significant funding discrepancies between participants of similar hearing losses. It is understood that participant plans are specific to

participants' needs, yet the significant variations in funding for hearing participants with similar needs and goals has led to confusion on the part of our members about how best to advocate for their clients' hearing health care needs.

Improving hearing participant outcomes

AudA members have reported receiving comments from parents regarding the need for greater flexibility in using NDIS funding for their child who has a hearing impairment. For example, parents have stated that they would much prefer that funding for "community engagement" be allowed for them to purchase appropriate hearing aids, which would enable their child to participate more freely in situations where it is difficult to hear and understand what is being said. We note that one family was provided \$14,000 for "community engagement" but simply wanted to use \$3000 of the funding to purchase appropriate hearing aids for their child. If the family were able to use the funding to purchase appropriate hearing aids, it would make it easier for their child to enjoy "community engagement" activities.

Embracing a holistic approach to hearing health care in the NDIS

AudA believes that the NDIS should fund the full range of required rehabilitation services for hearing loss. Although there is often a strong focus on hearing aids in the media, hearing aids alone are not sufficient for effective habilitation/rehabilitation for hearing loss and its consequences.

Audiologists are trained to offer a holistic habilitation/rehabilitation plan that may also include: support and counselling (as needed) for the individual and family to improve ability to participate in activities that are meaningful to them; individual and group aural rehabilitation; behaviour change counselling; and devices as alternatives to, or in addition to, hearing aids such as telephone adapters, remote microphone systems and streamers and television devices for hearing assistance. More information about the range of skills of audiologists is [set out in the Scope of Practice for the audiology profession](#).

In AudA's view, it is only through such holistic rehabilitation that outcomes for participants with hearing impairment can be met across all of the domains in the Agency's outcomes framework – choice and control; daily living activities; relationships; home; health and wellbeing; lifelong learning; work; and social, community and civic participation.

AudA recommends that the Agency recognises the additional skills and services that audiologists can provide hearing participants, especially behaviour management, counselling and individual and group aural rehabilitation.

References

National Disability Insurance Agency. (2020). NDIS Quarterly Report to disability ministers 30 December 2020. <https://www.ndis.gov.au/about-us/publications/quarterly-reports>