



Submission to the Joint Standing Committee
into the NDIS

Inquiry into Independent Assessments

May 2021



About Vision 2020 Australia

Vision 2020 Australia is the national peak body for the eye health and vision care sector. Working with and representing almost 50 member organisations, we focus on supporting policy and funding changes to prevent avoidable blindness, enhance eye care delivery and better meet the needs of people who are blind or living with low vision.

Our members span a wide range of areas and are involved in local and global eye health and vision care, health promotion, low vision support, vision rehabilitation, eye research, professional assistance and community support. This means that the work we do in developing sector-supported policy and advice brings a diverse range of expertise and perspectives to bear, and that the perspectives and experiences of both service users and service providers are at the heart of our work.

Avoidable blindness and vision loss in Australia, and our region, can be prevented and treated by working in partnership across government, non-government, private and community sectors. People of all ages who are blind or vision impaired will benefit from these partnerships, with improved access to services that support their independence and community participation.

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Executive Summary

Vision 2020 Australia welcomes the opportunity to make a submission to the Joint Standing Committee into the NDIS' (JSC) Inquiry into Independent Assessments (the Inquiry).

The introduction of the National Disability Insurance Scheme (NDIS) under the National Disability Strategy (NDS) has improved the lives of many Australians living with disability.

Vision 2020 Australia's members **strongly support the scheme's priorities of providing choice**

and control, and have seen it deliver both for some Australians who are blind or have low vision. Our sector remains committed to the aspirations of the NDIS and its potentially transformative impact for people living with blindness, low vision or other disabilities.

Members are aware that independent assessments are being introduced as a response to feedback from participants, the disability sector, the Productivity Commission, and Recommendation 7 of the Tune Review.

The blindness and low vision sector's concern is that the changes as proposed will not meet the more specialised needs of people living with blindness and low vision and that these participants may be worse off under the changes proposed

The blindness and low vision sector's concern is that the changes as proposed will not meet the more specialised needs of people living with blindness and low vision and that these **participants may be worse off** under the changes proposed.

Vision 2020 Australia's members are committed to working with the NDIA to create an assessment process that is "simpler, faster and fairer", but any changes to assessment processes **must address some of the current system's shortcomings as they relate to people with vision loss and not exacerbate these**.

These challenges largely arise because of the **particular needs and supports** required by people who are blind or have low vision, which differ significantly from those of other disabilities. It can be challenging for staff charged with assessing people with a vast array of disabilities to understand everyone's individual needs, or what options might be available to support them.

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This is particularly so in the area of blindness and low vision, where ongoing developments in technology and supports can offer greater independence than ever before but are **challenging to remain abreast of**.

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The **degenerative and progressive nature of some vision conditions also sets all those affected apart from many of the more traditional disabilities** commonly experienced in Australia, because understanding the rate and impact of this progression requires specialist knowledge.

In some instances, such **knowledge gaps have resulted in people with vision loss being refused supports and services** which were recommended by blindness and low vision specialists, or provided options that are not suitable for their needs, without a clear rationale. A change to arrangements that addresses this is needed.

Vision 2020 Australia's members support improvements to assessment processes that both achieve the desired increase in consistency and ensure that people living with blindness and low vision get the appropriate technology and supports.

Such processes need to be accompanied by **effective, independent review mechanisms**. Participants must have genuine opportunities to both shape the content of their plans and seek independent review if the decisions or behaviour of an assessor are inappropriate. The ability for **specialist expertise to shape that planning process is essential** for our cohort.

Independent assessments will soon be used to decide eligibility and funding for participants, so this further period of consultation is vital and necessary. For the NDIS to deliver the choice and control it promised for people who are blind or have low vision, the NDIA must address some significant concerns from our sector.

There is a real risk that this direction within the NDIS will increasingly compromise established specialist capacity within the blindness and low vision (and other comparable) sectors, which will be to the detriment of all Australians who are affected either directly or indirectly by such vision loss.

Vision 2020 Australia's members have considered **workable solutions and compromises** which would improve the way independent assessments operate for people who are blind or have low vision.

These are reflected in the following 16 recommendations regarding how current proposals for independent assessment could be enhanced. We believe the NDIA should:

1. Make DSP blind recipients and applicants who demonstrate legal blindness automatically eligible for the NDIS to reduce cost and burden of evidence gathering for participants.
2. Provide automatic eligibility for the scheme based on the specific eye conditions included in Access List B, which dictates eligibility in the current system, following provision of medical evidence.
3. Commit to a principle that "no person with vision loss will be worse off" under a system where their eligibility and level of support is decided by an independent assessment.
4. Ensure our cohort receive independent assessments from assessors with sufficient specialised knowledge of causes, management and support options (e.g. O&M, OT, orthoptists).
5. Ask applicants about their accessibility requirements at the beginning of their application process and before an independent assessment is conducted.
6. Make applicants who have progressive vision conditions exempt from independent assessments, in order to ensure supports are introduced at point of need.



7. Avoid remote independent assessments for people who are blind or have low vision.
8. Consider alternatives to the “participant interaction” component of independent assessments for people who are blind or have low vision, due to both the associated risks and the lack of reliable data.
9. Avoid excluding adults with vision loss from any aspect of their independent assessment, specifically by not using the Vineland-3 assessment tool where no other disability is present.
10. Develop innovative approaches to information sharing about independent assessors so that participants can choose the assessor they feel is best likely to understand their circumstances.
11. Report data about plan utilisation, budgets, and reviews for specific cohorts, including people who are blind or have low vision, in order to provide transparency about whether they continue to receive appropriate supports.
12. Clarify how an independent assessment will inform a participant's personalised budget (e.g. how questions or scores will decide funding levels).
13. Commit to a timeframe for delivery of a draft plan to a participant, in their preferred format, well in advance of their planning meeting so they have sufficient time to consider its content.
14. Test the independent assessment tools intended for use with children through a pilot similar to the one in progress in the general scheme, ensuring children with vision loss are included.
15. Collaborate with the blindness and low vision sector to ensure planning and access decisions in the ECEI context are informed by the complex and variable nature of vision loss, and prioritise preventing developmental delay.
16. Resource Aboriginal Community Controlled Health Organisations (ACCHOs) to provide independent assessments for Aboriginal and Torres Strait Islander people with vision loss, and ensure the processes and tools in these assessments are developed through consultation, so that they are culturally safe and appropriate for Aboriginal and Torres Strait Islander people.

This submission to the JSC will expand on a range of these in responding to the terms of reference of this inquiry, as part of our shared efforts to ensure that into the future the NDIS can reach its full potential for Australians living with disability.

Opportunities to enhance assessment in the NDIS - advice in relation to the inquiry's terms of reference

A. The development, modelling, reasons and justifications for the introduction of independent assessments into the NDIS;

Vision 2020 Australia notes that a range of independent reviews have identified challenges with existing assessment processes for NDIS participants and for people who are blind or have low vision, current arrangements can be challenging as they may be assessed by people who do not understand the cause and impacts of their vision loss nor the supports available to address these.

Vision 2020 Australia supports changes that can:

- may help remove cost as a barrier to access for some participants.
- increase transparency and help participants and providers better understand what decisions have been made, and on what basis.
- enhance consistency in assessment and decision making.
- incorporate consideration of functional impact if this enables the full and appropriate identification of the unique barriers an individual may face, particularly for those with multiple disabilities. There does however still need to be capacity for diagnosis to be considered, so that where there are progressive conditions (such as progressive eye diseases), opportunities to front-load supports for people can be taken up.
- Empower participants by minimising the need for participants to highlight their deficits to receive supports has, providing they retain a genuine role in determining what support they receive and how they receive it.

It does, however remain concerned that people with vision loss will be worse off under the approach currently proposed to independent assessments. . Key difficulties are that:

- The assessment tools haven't been extensively tested for use on people who are blind or have low vision.
- The chosen assessment workforce is unlikely to have sufficient knowledge of low prevalence disabilities such as vision loss.
- That assessment workforce is already insufficient to meet the current demand for services.
- The assessment tools do not seem culturally safe, and the assessment workforce may not be appropriately trained to understand the perspectives of Aboriginal and Torres Strait Islander people.
- Aspects of the assessment process may be upsetting, disempowering or produce unreliable information - the opposite of what they set out to do.
- It is unclear how the results of an independent assessment will be used to establish a participant's plan budget.

These problems have arisen because, while the NDIA has facilitated some trials, and engaged in some consultation, this has not been sufficient for the introduction of such a complex new system. Members therefore appreciate the decision to delay the rollout of independent assessments pending further conversation with the sector.



Vision 2020 Australia notes that, the Tune Review stated that the agency "...should not implement a closed or deliberately limited panel of providers to undertake functional capacity assessments". The approach adopted to date around independent assessments appears to run counter to this.

In addition, while the policy rationale for separating out the assessment ("gatekeeper") role from the service provider ("deliverer") role is understood, it poses some practical challenges for lower prevalence disabilities such as vision impairment, as there is not sufficient scale in the market to support both assessment and service delivery workforces with the necessary skills and expertise.

B. the impact of similar policies in other jurisdictions and in the provision of other government services;

Claims have been made that the assessment tools for independent assessments have been "used all around the world".

However, Vision 2020 Australia understands that they have not been extensively used in the way it is proposed they be employed for independent assessments in Australia.

These tools are largely designed either to measure a person's eligibility for access, or their function, but we understand there is no precedent for using these tools to calculate how much funding or support a participant should receive as proposed under the current plans.

C. the human and financial resources needed to effectively implement independent assessments;

The proposed use of allied health providers to conduct independent assessments is likely to pose practical challenges, given the existing thin markets and workforce shortages across many of these professions, particularly outside metropolitan and regional centres.

Vision 2020 Australia members have noted that this, and the limitations of what assessment tasks the different allied health professionals can perform given their professional scope, may present a significant barrier to effectively rolling out an assessment workforce.

In response to these concerns, the NDIA has said that:

1. Remote assessments can be provided for some people, and
2. The NDIA is decreasing reporting obligations in other areas, which will increase workforce availability.

This will not be sufficient to remedy the issue. Vision 2020 Australia members have significant concerns about the adequacy and appropriateness of remote assessments for people who are blind or have low vision and we understand this would have significant and adverse impacts for Aboriginal and Torres Strait Islander People and those living in rural and remote communities.

Our membership has, as part of its deliberations around independent assessments, explored possible remedies to current arrangements. One of the options examined was whether it would be feasible to offer training to independent assessors regarding people with vision loss. Unfortunately, we concluded that this was unlikely to be effective or efficient, as:

- The low prevalence of vision loss means most assessors won't use this training.
- Training would need to be maintained and updated frequently to ensure assessors were aware of rapid new technological and other developments.

D. the independence, qualifications, training, expertise and quality assurance of assessors;

Since its inception, Vision 2020 Australia members have reported instances of people with vision loss being denied crucial supports from the NDIS because the staff making decisions did not fully understand the complex impacts of vision loss, and the supports which can help alleviate these.

The introduction of a new workforce of independent assessors has the potential to exacerbate this situation, causing costly review processes and missed opportunities for early intervention.

To be able to effectively assess the needs of a person with vision impairment, assessors need to have a strong knowledge of:

- How to work and interact with people with vision impairment
- The conditions that cause that vision loss, their impacts and their likely progression
- How those conditions and the associated vision impairment is likely to impact their activities of daily living, noting that this will differ according to how they spend their time and the things they want to do, as well as the characteristics of their vision condition, particularly for those whose vision will degenerate over time.
- The most appropriate training, support and equipment to address the current functional impairment but also its likely progression.
- The unique perspective offered by cultural background.

This can be particularly challenging for generalist assessors as the needs of people who are blind or have low vision are comparatively complex, because:

- Some of these conditions, associated needs, and available supports are highly technical and constantly evolving as technology and other factors change.
- Alongside ongoing support, there may be a need for episodic or ad hoc supports, particularly as a range of vision conditions are degenerative, resulting in a change in need over time.
- Where conditions are progressive, there is sometimes a time limited opportunity for affected people to be trained in the use of equipment and supports while they still have a level of functional vision. Such training is much easier to complete early in the course of their condition, and better equips them to manage the impacts of further deterioration in their sight.

Vision 2020 Australia thus recommends that independent assessors available to people being assessed include professionals with sufficient skills and specialist knowledge of vision impairment and its functional impacts.

These specialist assessors are most likely to apply the assessment tools in a way that accounts for the complexities of this low prevalence disability, without the need to train a large number of workers in issues relevant to a small cohort of participants.

Specialist assessors for this cohort could include, for example, appropriately experienced orientation and mobility specialists, occupational therapists and orthoptists. This solution would ensure that the assessment tools were used in the way which is most likely to correctly identify both the capacity and the needs of these applicants.

It is understood that for children under nine years of age, independent assessments will be conducted by Early Childhood partners, rather than a separate assessor workforce. This would be the ideal arrangement for all applicants/participants with vision impairment.

Quality assurance through transparency

Independent assessments require NDIS participants and applicants to reveal extensive detail about their personal lives including behaviours, feelings, and personal relationships.

Providing participants and service providers with access the information that allows them to judge the quality of assessments and assessors would be a powerful tool for addressing some of the information asymmetry and building confidence in the people to whom this deeply personal information is being provided.

To ensure the assessment process is meeting participant expectations and be true to the principles of choice and control, Vision 2020 Australia believes it is important that the system enables participants and applicants to

1. Readily access information about the skills, qualifications and experience of assessors, to help ensure a good fit between the participant/applicant's circumstances and the assessor,
2. Be supported to actively provide feedback about their IA experience, which will inform future applicants and participants in their choice of assessors.

Such a system would offer a valuable mechanism for providing both positive and negative feedback, to the benefit of all involved, and would be in keeping with the fundamental principles of choice and control underpinning the scheme.

Consideration could be given to a web-based system, such as those currently being used to share stories of individual health and care services and provide service providers with opportunities to drive real-time quality improvement. A dedicated NDIS version could potentially deliver similar benefits.

Collecting and sharing more transparent, regular data that provides information in relation to specific cohorts would be another valuable way of communicating both how budgets are being expended and the level of requested review activity and comparing these across the breadth of primary disabilities. For example, the NDIA should release information in relation specifically to people who are blind or have low vision about:

- Their average plan budgets.
- The changes in average plan budgets overtime,
- The number of reviews requested, and the results of these, and
- The utilisation of their plans.

This kind of benchmarking would provide a quantitative way of monitoring expenditure of funds and getting proxy measures (for example, through number of requested reviews and their outcomes) of current participants satisfaction with existing budgets.

E. the appropriateness of the assessment tools selected for use in independent assessments to determine plan funding;

Alongside ensuring that assessors have the skills and understanding required to work effectively with people who are blind or have low vision, it is also essential that the tools they use can accommodate the particular needs of this group.

Vision 2020 Australia members appreciate the NDIA's clear commitment to including our cohort in the second pilot of independent assessments, but remain concerned that the assessment tools may not be fit for purpose for vision impaired applicants/participants.

Members provided early advice in relation to assessment tools and at that time, expressed concerns that the CHIEF assessment tool was not able to effectively record information about how vision impacted on functional capacity.

Participant Interaction

More recently, members have expressed significant concerns about the performance component of independent assessments (sometimes referred to as participant interaction"), and the suitability of this component for assessing the functional impacts of vision impairment because of its relatively narrow focus.

This part of the assessment has not been created with the same level of expert input as the other tools in the toolkit, and the NDIA has not provided a clear explanation of what data is being gathered or how it will be used.

The participant interaction component is also especially likely to provide unreliable information about the functional capacity of a person with vision loss. For example, if a person with vision loss chooses a task they can perform well, and the assessor fails to understand this performance in the larger context of their condition, this may lead to an unreasonably high measurement of capacity which fails to recognise that outside a familiar environment or a task they are comfortable with, an applicant is much less capable.

In a range of instances, people with vision impairment may have developed strategies that enable them to function well in their home environment but have much less capacity to independently travel and access the community. It is difficult and risky to both the individual and the assessor to assess the latter unless the assessor has access to (or possesses) specific expertise in the field.

Conversely, an applicant may choose or be asked to perform a task which is difficult for them at the time of the assessment. This would be both a risky and a highly demeaning experience, at a point where some people, especially those who acquire vision loss, feel extremely vulnerable.

Given that people who are blind or have low vision are at greater risk of depression, and that during their application process they may lack knowledge about how independently they can live with their new vision level, this component risks negatively impacting on an applicant's mental health without gathering reliable data.

Therefore, Vision 2020 Australia has strongly encouraged the NDIA to **consider alternatives to this proposed performance component of independent assessments to determine functional performance and capacity for people with vision impairment.**

One option could be to exempt people with vision loss from the participant interaction component of an independent assessment on the potential grounds the NDIA has already suggested – "that the process is likely to do more harm than benefit to the individual, and may pose a safety risk to



the individual or the assessor”. On the other hand, the blindness and low vision sector would be happy to contribute its time and expertise to exploring potential alternatives that could be implemented within the overarching assessment framework.

Vineland-3

Members have also raised significant concerns about the appropriateness of the Vineland-3 assessment tool for people living with vision loss. This assessment is usually conducted via an interview with a proxy, such as a family member or carer, rather than the participant or applicant themselves.

While the Vineland-3 may be necessary for people with some disabilities, its application to people who can speak for themselves is at odds with the philosophy of the NDIA which sought originally, wherever possible, to respect people with disabilities as experts in their own lives.

Excluding people who are blind or have low vision from conversations about their own futures is disempowering, and should be avoided whenever possible. Vision 2020 Australia therefore suggests that the **Vineland-3 not be used for people with vision loss where no other disability is present.**

Assessment Tools for Children

The NDIA has selected a separate set of tools to assess the functional capacity of children between one and nine years of age. This is part of their “Early Childhood, Early Intervention” (ECEI) pathway, which is currently undergoing a process of significant reform.

To access NDIS supports via this pathway, children have previously needed to demonstrate “developmental delay”. This has resulted in some children with vision loss being denied support because their disability has not yet resulted in a developmental delay. Crucial opportunities to pre-emptively equip children for living with low vision or blindness have been missed as a result.

Vision 2020 Australia is advocating for changes in the criteria for ECEI access so that it clearly **prioritises preventing developmental delay rather than responding to it.** To be appropriate for this task, independent assessments for children must capture not just the current, but also the potential changes in functional capacity which will be caused by a child’s vision loss.

These tools, as far as members are aware, have not yet been tested extensively for use by children with vision loss. While it is envisaged the second pilot of IAs will yield information about how the general scheme’s assessment tools will work, appropriate testing of the tools intended for use in the ECEI process hasn’t yet been conducted.

Vision 2020 Australia’s members recommend that a **pilot process, similar to that conducted for the general scheme, be completed before IAs are introduced into the ECEI process, and that the NDIA ensure that children with vision loss are included in this pilot.**

F. the implications of independent assessments for access to and eligibility for the NDIS;

Previously, access to the NDIS for many people with vision loss was decided by a series of Access lists, which dictated eligibility according to medical conditions. For example, people who were legally blind were automatically eligible for NDIS support according to [Access List A](#), and people with specific eye conditions were potentially eligible for the NDIS under [Access List B](#). As part of the introduction of independent assessments, the NDIA intends to remove these access lists.



An independent assessment will decide whether a person is eligible for NDIS access based on whether, and to what degree, their functional capacity is diminished by their disability. It is possible that, given the narrow focus of the proposed assessment process, a person with vision loss could have their needs significantly underestimated.

For example, a person who is legally blind could seem to have a very high functional capacity due to supports already in place, but if these supports aren't maintained (e.g. frequently updated orientation and mobility training, new assistive technology), their functional capacity will very quickly diminish.

Particularly for children and older people, it is possible to have been diagnosed with a progressive vision condition, which has not yet resulted in deterioration significant enough to impact functional capacity. But these are the cases where early intervention is most valuable, since pre-emptively introducing resources and training is proven to be far more effective and less costly.

Removing the access lists has the potential to increase administrative and financial burdens for some applicants/participants who were previously exempt from some requirements under Access Lists A and B.

Vision 2020 Australia suggests an additional change to the proposed approach to independent assessments to avoid the new system imposing unnecessary financial and administrative burden for participants who were previously on Access List A, specifically those who are legally blind.

People on Access List A who were previously deemed automatically eligible for the scheme would now need to have their eligibility decided by their independent assessor. For people who are legally blind, this is an unnecessary requirement as:

- A. Other government processes will likely have already established the degree of their disability, and
- B. A person who is legally blind will absolutely require a level of support under the NDIS to address the functional impacts of their vision loss: the issue is mainly how much.

People who are blind or have low vision seeking to access the Disability Support Pension must often undergo a number of processes in order to establish their disability, which includes providing proof from an ophthalmologist of their vision loss. If proof is provided that the person is legally blind (i.e. visual acuity is $<6/60$), applicants are automatically eligible, and are paid a special version of the DSP, typically referred to as the DSP Blind.

The kinds of tests proposed for inclusion in the access components of the independent assessment are the same as those used to establish eligibility for DSP Blind.

It is thus proposed that **when an applicant to the NDIS can provide evidence they are in receipt of DSP Blind, the access component of the independent assessment should be expedited with no requirement to supply separate medical evidence.**

There are a small number of cases where a person may be legally blind but not in receipt of DSP Blind (E.G. children aged under 16). In these instances, if the NDIS applicant is able to provide medical evidence that demonstrates they are legally blind, Vision 2020 Australia proposes that they too should have guaranteed eligibility.

Such an approach would maintain the integrity and universality of the proposed system for independent assessments, ensuring that all participants go through the same process for

assessment of functional capacity as part of the planning process, but avoiding unnecessary administration, and potential distress for applicants, by:

- removing duplication of effort in instances where an applicant/participant has previously provided the relevant information to DSS for purposes of the Disability Support Pension, and
- not expending additional resources on the access component of an assessment in other cases where vision loss is so profound that a level of NDIS support will be required.

Additionally, Vision 2020 Australia recommends that **NDIS applicants with the specific eye conditions included in Access List B should be given access to the scheme following the provision of medical evidence**, since many of these people have progressive medical conditions which will deteriorate over time, and thus require supports and training early in their arc of vision loss.

Fundamentally, Vision 2020 Australia recommends that the government should make a commitment to the principle that “no person with vision loss will be worse off” under a system where their access to the scheme is decided by a functional assessment.

G. the implications of independent assessments for NDIS planning, including decisions related to funding reasonable and necessary supports;

The introduction of independent assessments (IAs) represents a major change to the planning process that current participants have become accustomed to.

Planning meetings, which were previously discussions about what funding or supports would help them achieve their goals, will now be used largely to establish how participants can deploy a budget which has been predefined by the assessment results.

This change in emphasis is significant for current NDIS participants who are accustomed to a pathway where the planning meeting is the most important touchpoint with the NDIA. A range of members undertook significant work to educate their clients about the NDIS during the rollout process, and these changes are likely to require similar levels of re-education.

One of the most notable impacts of vision loss is on information access and delivery. With the benefit of lessons learned in recent years, the NDIA has the opportunity to lead a much more organised and equitable information delivery process as these changes are finalised. **It will be essential that all current participants receive information, in their preferred format**, about what the new process will look like, so they can make informed decisions about where they might employ advocates or acquire evidence.

A key issue to be communicated is **how the independent assessment will be used to determine the budget contained in a participant’s draft plan.**

To effectively prepare for the planning meeting, participants need to understand:

- what is in the proposed plan, and how this was determined (including budget)
- how the process will run,
- the decisions they will be able to participate in at that stage of the process,
- who else can attend,
- who will be involved in decision making, and

- any information they require in advance to make those decisions.

For people with vision impairment, this will require clarity regarding when the specialist advice that will help ensure they get the technical supports most suited to their needs will be provided.

Timing, in particular providing information well in advance, is critically important.

Participants must be provided with draft plans sufficiently far in advance of the planning meeting to allow them to consider the contents of plans, determine the nature of any changes they wish to seek, and compile any evidence required to support those changes. It would also be helpful for them to understand in advance what review options are open to them if they are uncomfortable with either the planning meeting or plan outcome.

H. the circumstances in which a person may not be required to complete an independent assessment;

Vision 2020 Australia members agree with the NDIA's suggestions that **people who have suffered from trauma should be exempted from independent assessments, as well as those who may suffer behavioural issues** that would render the IA invalid.

Additionally, it would be valuable for **people whose vision loss was caused by extremely progressive medical conditions (e.g. brain tumours) to be exempted from IAs in instances where earlier possible provision of supports and services is needed.**

In these cases, as mentioned in the NDIA's consultation paper on the topic, an alternate process should allow treating medical professionals to quickly provide evidence of the functional impact of an applicant's vision loss.

I. opportunities to review or challenge the outcomes of independent assessments;

While the NDIA's decisions are reviewable by the Administrative Appeals Tribunal (AAT), a body independent of the NDIA, independent assessments will not be. But with planning and access decisions so significantly informed by independent assessments, it is **essential that they be accountable to a similar review process.** The agency has said that:

- an independent assessment can be rendered invalid if it is considered to have been inconsistent with the independent assessment framework, or if there is a significant change in a person's functional capacity or circumstances.
- a complaints process will be established for those dissatisfied with assessments or assessors.
- it does not intend to fund new assessments for those who disagree with the results of an assessment.

Clearly, if an assessment does not accurately reflect a participant's functional capacity there are negative consequences for the applicant's access decision.

It is thus important that there be a **mechanism for a participant to seek an independent review of that assessment if they feel it does not reflect their functional status/need.** This would likely, by nature of the issue at hand, require the system design to allow for either a full or partial, funded re-assessment to be undertaken.



Vision 2020 Australia members have indicated that the current appeals mechanism, which has involved both internal review processes and the capacity to seek an independent review (via the AAT) has been an effective way of achieving this to date.

J. the appropriateness of independent assessments for particular cohorts of people with disability, including Aboriginal and Torres Strait Islander peoples, people from regional, rural and remote areas, and people from culturally and linguistically diverse backgrounds;

It is important that there be **flexibility in how, when and by whom assessments are conducted** as Vision 2020 Australia members advise that remote assessments and/or other approaches that do not allow a trusting and respectful relationship to be built between the assessor and individual will not be effective.

Further, it is vital that the **tools and processes used in independent assessments also be culturally appropriate and safe**. It is not clear to what extent these tools have been tested for use with people in minority groups such as Aboriginal or Torres Strait Islanders or people from culturally and linguistically diverse backgrounds.

In particular, many Aboriginal and Torres Strait Islander languages do not have a word for disability. Their cultures are often antithetical to the deficit model of disability used by the NDIS. The assessment tools ask people to highlight their deficits and explain when they find things difficult, which is likely to be confusing.

Further, the **three hour time window specified by the NDIA for the completion of independent assessments is not appropriate for this cohort**. Building the kind of rapport that would allow the kind of information gathering this process would entail may require longer or repeated visits.

Finally, the intended partial reliance on remotely performed independent assessments may disproportionately impact Aboriginal or Torres Strait Islander people, who are more likely to live in rural or remote communications, where telecommunications technology is not always reliable. Some of these people may also lack the technical literacy or access to the appropriate equipment to enable a remote assessment.

The best way to create culturally safe assessments is to **fund and resource community controlled organisations such as Aboriginal Community Controlled Health Organisations (ACCHOs)** to perform independent assessments for Aboriginal and Torres Strait Islander Peoples. Rural and remote communities should be prioritised in this process. This approach would be consistent with Priority Reform 2 under the new National Agreement on Closing the Gap.

K. the appropriateness of independent assessments for people with particular disability types, including psychosocial disability; and

This aspect has already been extensively addressed by previous comments, but briefly, **independent assessors are unlikely to have the appropriate expertise to accurately and safely measure the functional capacity of people who are blind or have low vision**.

L. any other related matters

Vision 2020 Australia appreciates recent improvements made by the NDIA in regard to the provision of information in a participant's preferred format. In order to ensure the inclusivity of the application process going forward, members believe the NDIA should:

- Ask participants about their preferred format for information delivery at the beginning of their application process, before an independent assessment is conducted.
- Provide an applicant with independent assessment results, in their preferred format, at the same time as planners receive them.
- Explain the results of an IA in a narrative format, rather than or in addition to a table or diagram.

The prospect of independent assessments performed remotely via teleconference is also of significant concern to Vision 2020 Australia members. While remote independent assessments may partially address concerns raised by members around workforce availability and thin markets, **for people living with vision loss they are also likely to be more challenging to participate in effectively and may produce less reliable results.**

This would be particularly challenging for **applicants who are new to living with vision loss, as they are likely to struggle significantly to use screen reading or magnification software,** therefore making the setup of a teleconference problematic.

Other factors that may limit the effectiveness of remote assessments include:

- The inability to incidentally observe applicants and recognise functional limitations, which the frame of a video call may not reveal.
- Poor internet connectivity, particularly in more rural or remote communities – the very communities where local assessors are least likely to be available.
- Issues of cultural safety, with Vision 2020 Australia members who work with Aboriginal and Torres Strait Islander Peoples indicating that remote assessments would not be culturally safe or appropriate for this cohort, since they offer less opportunity to build rapport with an applicant.

Vision 2020 Australia members recommend that **remotely performed IAs be avoided for assessment of people with vision impairment,** given a range of practical factors will likely limit their effectiveness and/or reliability.



Conclusion

Vision 2020 Australia and its members stand ready, willing and able to work with the NDIA to support enhancements to current assessment processes that ensure the needs of people living with blindness and low vision are met.

It is essential that any changes to assessment do not leave people who are blind or have low vision worst off.

Changes to assessment that make the assessment system more consistent and transparent are welcomed, if these do not have the adverse consequence of making it harder for people with less common conditions such as vision loss to benefit from the equipment, training and support that can maximise their independence and participation.

Applicants who have already been assessed as eligible for List A and List B should be automatically eligible for the NDIS, as this leverages existing assessment outcomes rather than requiring multiple, often duplicative information and application processes.

Providing scope for assessments to understand and consider the progressive nature of some conditions and accommodate 'front loading' of training and supports. It is also essential, as such early intervention equips participants to better manage the subsequent functional loss that occurs in conditions with a well-known and established pattern of progression.

Providing capacity for assessments to be conducted by practitioners with the necessary knowledge of common sight threatening eye conditions, their prognosis and functional impacts, and the ever-evolving range of supports available to minimise those impacts is essential.

Ensuring that participants have a genuine say during assessment processes, and retain the right to readily seek independent review of key decisions, is also vital to deliver on the overarching policy of choice and control.

Vision 2020 Australia thanks the Committee for the opportunity to contribute to its inquiry, and looks forward to working with all interested parties to enhance assessment processes and deliver Australians living with vision loss the same opportunities as other Australians.