

Submission to the Joint Standing Committee on the National Disability Insurance Scheme – Inquiry on Independent Assessments.

April 2021

Australian Podiatry Association

The Australian Podiatry Association is the largest and oldest peak body representing podiatry and promoting foot health and mobility that affects participation in everyday life. We support our members with opportunities to develop their professional career, uphold standards and build connections.

We are committed to the advancement of podiatry to improve foot health in the community, enabling mobility and independence across the lifespan. The positive impact of podiatric care changes the lives of one in five Australians who experience pain, mobility issues or have personal hygiene concerns affecting their foot health.

The Australian Podiatry Association (APoDA) welcomes the opportunity to provide a submission to the Joint Standing Committee on the National Disability Insurance Scheme – Inquiry on Independent Assessments.

Summary

In responding to this inquiry, the APoDA has sought to focus on potential issues and opportunities to address these. Our key focus is ensuring the safety of participants and the integrity of the Scheme. We stand by the participant sector and other stakeholders in calling for a delay in the rollout plan for independent assessments. Our belief is that extra time is required to support an evaluation of current trials, and to allow additional trials to be undertaken, in order to ensure that the goals of the independent assessment proposals are achieved without adversely impacting participants.

Allied health professions are well-recognised for their role in providing functional assessments for people with disability, and allied health professions from six key professions will comprise the independent assessment workforce under current proposals. This recognition of the important role and clinical expertise of allied health professionals has been welcomed, however without the input of all allied health disciplines (limited to six key professions) there is likely to be areas of mobility, psychosocial, disability related health concerns that will be inadequately assessed. Podiatry is a key profession in the area of the High-Risk foot/lower limb amputation, gait and mobility (neurological) and early intervention (paediatric) gross motor skill development.

While the sector has significant questions about the current design of the independent assessment process, we are strongly supportive of the valuable role of podiatrists in supporting access and eligibility

decisions. We note in this context that any introduction of independent assessments for early childhood intervention should also require assessments to be conducted by allied health professionals including podiatrists.

Assessors

The role of the independent assessor is to gather information with the intention to describe an NDIS applicants / participants functional capacity. The functional capacity information is subsequently communicated to an NDIA delegate to support decisions on scheme access, supports listed within the plan and how the plan is funded. Independent assessors may be psychologists, occupational therapists, physiotherapists or speech pathologists and are required to have a minimum one year of clinical experience and a broad clinical background but are not required to have specialised knowledge with the applicants / participants disability.

A Podiatrist is uniquely qualified to assess an applicants / participants functional requirements and to request the use of assistive technology in obtaining an applicants / participants goals. Without the inclusion of podiatry input applicants / participants may not have an appropriate assessment to deem access and/or need for assistive technology they require in order to fulfill their goals.

Based on the required assessor experience and expertise APodA calls in to question the scope of practice and entry-level competencies of independent assessors. It is unlikely that an independent assessor in the proposed model will have sufficient expertise to inform scheme access, plan development and funding decisions in relation to assistive technology such as lower limb orthotics.

Recommendation 1:

The JSC include Podiatrists on the listed professions for conducting independent assessments.

Development, modelling, reasons and justifications for the introduction of independent assessment.

APodA and its members feel poorly placed to comment on the modelling and justifications for the introduction of independent assessments. The Australian government and the NDIA have provided limited data or justification for the changes, primarily focusing on Scheme sustainability as a result of projected future costs, and the varying size of plan budgets between postcodes supports arguments. It is not clear how well-substantiated these arguments are, given that the Scheme is still relatively immature and experiencing significant and ongoing change. Nor is it clear that the independent assessment proposals will significantly impact the advantage that inner city participants, with higher levels of education and capacity to self-advocate, may have.

Recommendation 2:

Delay the introduction of the independent assessments to allow for additional testing and evaluation.



Recommendation 3:

Make public Publish pilot results to show outcomes of current expanded independent assessment trials.

Recommendation 4

That an additional Assistive Technology standardised assessment be utilised by Allied Health Professionals Assessors (Podiatrist/Orthotists).