

RACP RECOMMENDATION ALIGNMENT WITH THE NDIS REVIEW FINAL REPORT

The [NDIS Review Final Report: Working Together to Deliver the NDIS](#) was published by the Australian Government in October 2023. The report contains 26 recommendations to the Australian Government to improve the NDIS and the lives of people with disabilities.

Half (13) of the 26 recommendations directly or indirectly address health-related issues. These recommendations are about improving the health system and ensuring that people with disabilities have equal access to health services and are not left behind.

The table below compares the NDIS Review Final Report recommendations with those made by the RACP since 2020.

Comparison of the NDIS Review Final Report recommendations with those made by the RACP since 2020		
The NDIS Final Report: Working Together to Deliver the NDIS	Have the RACP called for similar recommendations? <i>Most recent cited first</i>	Additional comments
The following eight (8) recommendations are health related		
<p>1. Recommendation 1 urges the health system to ensure that mainstream health-related services, such as early intervention support needs for children and home and community care (HACC) programs that support people under 65 years of age, are accessible to people with disabilities, regardless of their NDIS status.</p> <p>These include children with emerging developmental concerns and disabilities and adults with a psychosocial disability or chronic health conditions.</p>	<p>Prioritising Health, 2024 Tasmanian Election Statement <i>Grow the specialist workforce in Tasmania and Improving access to quality healthcare for all Tasmanians, page 5:</i> The RACP calls on the incoming Tasmanian government to work with clinical leaders to improve adaptation of mainstream health services for patients from priority populations, and ensure reasonable adjustments are available to enable equitable access to mainstream clinical services.</p> <p>RACP Submission to the new National Disability Strategy Position Paper Stage 2 Consultation October 2020 <i>Feedback regarding question 4, page 5:</i> People with disabilities should be able to access a seamless and integrated portal for government services that clearly shows the services available in their geographic area. This portal should be agnostic to whether the service is provided by the Commonwealth or State/Territory Government and broader than the NDIS to ensure that a wide range of services are included. <i>Feedback regarding question 5, page 6:</i> The RACP would like to see the new Strategy include actions for mainstream businesses, community groups and other non-government organisations to support the full participation and engagement of people with disabilities in the community.</p> <p>RACP Submission to the Senate Select Committee on Autism May 2020 <i>Executive Summary and Recommendations, page 3:</i> ASD should not be seen only through the lens of the NDIS. ASD is a life-long condition and people with ASD need other types of supports that may not be provided through the NDIS, such as education, employment and social inclusion. This requires a broader approach to ASD that is not only focused on support, but on making schools, workplaces and so on adaptable to people with ASD.</p>	<p>The RACP has frequently called for mainstream health services to be accessible to people with disability.</p>



	<p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019 <i>Service Provision for Ineligible Children, page 5:</i> Governments must ensure that ineligible children and their families are supported to access mainstream services, including health care, and assist them in obtaining effective intervention and support. Concurrently, health providers and services must ensure they are accessible and appropriate for NDIS participants.</p>	
<p>2. Recommendation 2 provides recommendations for policy improvements related to health, for example introducing a multilateral schedule to replace the current <i>Applied Principles and Tables of Support to Determine the Responsibilities of the NDIS and other service systems (APTOS)</i> designed to clarify how the health system can work alongside other systems to provide better support for people particularly when interfacing with child protection, justice, hospitals, aged care and mental health systems.</p> <p>As a priority, it is also recommended that developmental concerns and disabilities are consistently identified early across all jurisdictions by expanding state, territory and international child development checks.</p>	<p>Prioritising Health, 2024 Tasmanian Election Statement <i>Improving access to quality healthcare for all Tasmanians, page 5:</i> The RACP calls upon the incoming Tasmanian government to work across sectors to remove barriers to discharge, including accessible rehabilitation, disability services and supported accommodation.</p> <p>RACP Submission to the NSW Inquiry into improving access to early childhood health and development checks March 2024 <i>Key recommendation 4, page 3:</i> Invest and scale up models of care which aim to integrate variations of health, social care, family support, and education to promote equitable service access and supports, such as child and family hubs.</p> <p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024. <i>Recommendation 5, page 3:</i> Communities of practice should be established to support and enhance collaboration and reduce challenges at the interface between the health and disability sectors. <i>Recommendation 12, page 4:</i> Commonwealth, State and Territory Governments should consult with groups that have expertise in community-led justice reinvestment with a focus on strengthening communities, improving health outcomes, and reducing contact with the criminal justice system.</p> <p>Pathways to Wellbeing: Enhancing the health and wellbeing of all Australians Pre-Budget Submission to the Australian Treasury January 2023 <i>Support the autonomy of people living with a disability, page 12:</i></p> <ul style="list-style-type: none"> • Improve linkages and communication between the health and disability sectors, including access to appropriate specialist disability management and rehabilitation services, discharge planning from hospital, disability training for physicians and other healthcare professionals, and implementation of Australia's Disability Strategy 2021-2031. • Provide appropriate funding for specialty complex care for young people living with disability to support continuity of care and access across settings, including in the community. • Provide appropriate funding for people living with disabilities to be able to access specialist multidisciplinary rehabilitation services to assist in maintaining continued autonomy and wellness in the community. 	<p>The RACP has called for improvements within the health sector and also with the intersection of the health sector with other sectors.</p>



[RACP Submission to Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability April 2021](#)

Recommendation 17, page 11: The Commonwealth Government should establish the proposed Disability and Health Sector Consultation Committee to ensure coordination of policy initiatives across the Government, supported by consumers, carers, health care professionals and disability experts.

[RACP Submission to the new National Disability Strategy Position Paper Stage 2 Consultation October 2020](#)

Feedback regarding question 2, page 4: A key concern identified by RACP Fellows and others in the disability sector is a frequent absence of Ongoing Collaboration between professionals. Adding this as a new guiding principle would support and encourage agencies already endeavouring to ensure participants do not fall through the gaps. Improving coordination and sharing of expert knowledge at all levels will promote efficiency, minimise duplication and enhance the experience and outcomes for scheme participants.

[RACP Submission to the new National Disability Strategy Position Paper Stage 2 Consultation October 2020](#)

Feedback regarding question 4, page 5: The Commonwealth Government should maintain a mechanism for the coordination of policy initiatives across the Government such as a high-level multi-agency steering group supported by an advisory body or network to engage constructively with service providers and other stakeholders.

[RACP Submission to the National Disability Insurance Scheme \(NDIS\) Act Review and Participant Service Guarantee \(Tune Review\) October 2019](#)

The role of the health and disability sectors, page 9: Improved collaboration between the health and disability sectors can help deliver supports that enable people with disabilities to lead healthier lives.

As a priority:

[Prioritising Health, 2024 Tasmanian Election Statement](#)

Paediatric and child health, especially in NW Tasmania, page 9: The RACP urges the incoming Tasmanian government to be committed to addressing early neurodevelopmental concerns for the benefit of lifelong positive outcomes by addressing neurodevelopmental and behavioural care and taking the lead from other Australian states with dedicated neurodevelopmental teams and pathways.



	<p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024.</p> <p><i>Recommendation 7, page 4:</i> The National Disability Insurance Agency (NDIA) should improve communication channels on using Early Childhood Early Intervention (ECEI) to make it easier for families of children with disabilities or developmental delays to access it.</p> <p>HEALTH CARE OF CHILDREN IN CARE AND PROTECTION SERVICES AUSTRALIA Position statement JUNE 2023</p> <p><i>Recommendation 2, page 10:</i> Health services Must ensure that all children and young people entering or involved with care and protection services have a comprehensive health assessment and health management plan.</p> <p><i>Recommendation 10, page 11:</i> Australian, State/Territory governments Must commit to and invest in prevention, early intervention, and support programs to reduce the number of children and carer/s involved with care and protection services and the risk of statutory intervention.</p> <p>RACP Submission to the NDIS consultation paper: Supporting young children and their families early to reach their full potential February 2021</p> <p><i>Recommendation 7, page 4:</i> Improve sector-wide understanding of identifying families and young children experiencing disadvantage and tailor culturally appropriate services and resources.</p>	
<p>3. Recommendation 4: purposes the introduction of a navigation support role for people with disabilities, especially those with complex needs such as mental health. Individuals with complex needs require person-centred support from qualified navigators with relevant expertise in allied health, social work, or related fields to manage risks effectively.</p>	<p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024.</p> <p><i>Recommendation 6, page 3:</i> The Commonwealth Government should implement the recommendations of the Tune review in a genuinely person-centred way, guided by the participant, ensuring that the advice of treating medical professionals is considered in all assessments.</p> <p><i>Recommendation 9, page 4:</i> The NDIA should ensure that planners have sufficient expertise to provide adequate support for participants with high or complex needs, particularly those with developmental or intellectual disability or children with challenging behaviours.</p> <p>HEALTH CARE OF CHILDREN IN CARE AND PROTECTION SERVICES AUSTRALIA Position statement JUNE 2023</p> <p><i>Recommendation 1, page 10:</i> Health services must appoint a healthcare navigator/coordinator for each child/young person entering or involved with care and protection services.</p> <p><i>Recommendation 3, page 10:</i> Health services must ensure health professionals providing health assessments and treatment of children and young people involved with care and protection services are adequately trained.</p> <p><i>Recommendation 8, page 11:</i> Care and protection service providers must ensure care and protection workers are adequately trained in navigating the disability system.</p>	<p>The RACP has called for navigation supports to assist access to health services.</p>



	<p>RACP Submission to Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability April 2021 <i>Recommendation 16, page 10:</i> The NDIA should ensure that registration requirements for service providers include training and development of staff skills and practices so that they are equipped to support the health and well-being of people with disability.</p> <p>RACP Submission to the Senate Select Committee on Autism May 2020 <i>Recommendation 8, page 9:</i> The RACP recommends that NDIS planners and service providers have sufficient expertise and training to understand distinct support needs of ASD patients and their families, including help around navigating the NDIS system.</p> <p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019 <i>Executive summary and recommendations, page 3:</i> The RACP calls upon Commonwealth, State and Territories Governments to provide a health care provider-initiated entry pathway into the NDIS to improve the timeliness of the application process and ensure that participants and their families, who are often under time and financial pressure dealing with the disability, have support in navigating a complex system, and invest in developing integrated, interagency models of care that will ensure that people and their families don't need to retell their stories repeatedly; effectively coordinate intervention, especially for those people with complex needs or vulnerabilities. Also to ensure that planners and service providers are supported to develop sufficient expertise so that they may provide adequate support for participants with high or complex needs, particularly those with developmental or intellectual disabilities or children with challenging behaviours.</p>	
<p>4. Recommendation 6: suggests that families with children who have disabilities or developmental concerns should have more support available to them, without having to rely solely on the NDIS for assistance.</p> <p>It is recommended that governments prioritise the implementation of a holistic and integrated system of support to help these children. To achieve this, developmental delay assessments should be universally available through the health system and</p>	<p>Prioritising Health, 2024 Tasmanian Election Statement <i>Page 10:</i> The RACP recommends that the incoming Tasmanian government must implement and resource improved accessibility to developmental delay assessments by paediatricians.</p> <p>RACP Submission to the NSW Inquiry into improving access to early childhood health and development checks March 2024 <i>Key recommendation 3, page 3:</i> Collaborate with health services to support multidisciplinary teams for child assessments, ensuring early detection and coordinated referrals of developmental issues.</p> <p>RACP Submission to the new National Disability Strategy Position Paper Stage 2 Consultation October 2020 <i>Feedback regarding question 4, page 5:</i> The new Strategy must clearly outline the roles and responsibilities of all levels of Government in disability-specific and mainstream services and</p>	<p>The RACP has called for improved access to multidisciplinary team assessment and care.</p>



<p>should be conducted by trained specialists with no conflicts of interest.</p>	<p>commit to providing this information in a range of accessible formats. This should also include clear descriptions of early intervention pathways available to children and families.</p> <p><i>Feedback regarding question 9, page 7:</i> The special needs of children, including those with psychosocial disability, are very different to those of adults, and this would appropriately be specifically mentioned in the new Strategy and reflected in all policy and support programs. Support and treatment during developmental years can make a significant difference in the transition to adulthood, helping children reach their potential and significantly reducing costs in the medium to long term.</p> <p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019</p> <p><i>Responsiveness of plans to the changing needs of children and adolescents, page 10:</i> The NDIS should provide services to address barriers to the child's full participation in the activities that he or she wishes to pursue. Achievement of this goal may also require access to health and psychological services.</p>	
<p>5. Recommendation 7: This is the most noticeable health-related recommendation - proposes introducing new support for psychosocial disability, focusing on personal recovery and mental health.</p> <p>Psychosocial programs aim to assist individuals in their recovery process by providing evidence-based support that improves their engagement, skills, and independence. These services should be supplemented by the NDIS and public mental health reforms in an integrated care approach to enhance access to mental health services and minimise lifetime support costs. Psychosocial programs should be implemented by providers from both within the NDIS and mental health system, who possess a trauma-informed understanding of psychosocial supports.</p>	<p>Submission to draft report into the Productivity Commission's inquiry into the social and economic benefits of improving mental health January 2020</p> <p><i>1.3 National Disability Insurance Scheme (NDIS); page 4:</i> The draft report recognises the important role of the NDIS in providing support to people who need psychosocial supports. The RACP also supports the NDIS but has concerns about ineligible applicants and those who are not currently engaged with the NDIS system. We agree with the statement in the draft report that for people not receiving NDIS funding, Government should provide certainty on the long-term funding of psychological supports beyond the period to June 2022 that these supports will be funded by the Australian Government.</p>	



<p>6. Recommendation 13: proposes the introduction of provider panel arrangements (a range of providers with different skill levels or areas of expertise) for allied health supports in small and medium rural towns and areas with persistent supply gaps for participants. Provider panels should leverage high-quality providers and regularly monitor them to improve access and investment.</p>	<p>RACP Submission to the NSW Inquiry into improving access to early childhood health and development checks March 2024 <i>Key recommendation 2, page 3:</i> Invest in and expand models of care which support children in rural and remote communities to access local intervention and diagnostic services.</p> <p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024. <i>Recommendation 17, page 4:</i> State and Territory Governments should consider increasing funding for medical, pharmacy and allied health outreach services for people with disability, including supporting healthcare providers working in rural and regional areas to expand their capacity to care for people with disability within their area of expertise.</p> <p>RACP Submission to the NDIS consultation paper: Supporting young children and their families early, to reach their full potential February 2021 <i>Recommendation 8, page 4:</i> Provide tailored methods of delivering supports for young children and their families living in remote communities.</p> <p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019 <i>Access to the NDIS is highly variable, page 5:</i> It would be more beneficial to NDIS participants to identify different agencies to cover grouped areas of services such as allied health services. In regional and remote areas this could improve professional support and continuing education of NDIS service providers, ultimately improving the standard of service provided, as well as avoiding duplication of services and inefficient expenditure.</p>	<p>The RACP has raised access to health care in rural and remote communities.</p>
<p>7. Recommendation 14: encourages Governments to collaborate with local Aboriginal Community-Controlled Organisations and enhance local governance structures under the priority reforms stated in the National Agreement on Closing the Gap.</p> <p>It recommends exploring a comprehensive community approach to connecting service provision across other care and support systems, such as aged care and health, especially where providers do not currently have access to telehealth services.</p>	<p>Prioritising Health, 2024 Tasmanian Election Statement <i>Grow the specialist workforce in Tasmania, page 5:</i> The RACP calls upon the incoming Tasmanian government to provide funding to increase the number of Aboriginal and Torres Strait Islander health professionals, including the integration of specialist care into Aboriginal Community Controlled Health Services.</p> <p>RACP Submission to the NSW Inquiry into improving access to early childhood health and development checks March 2024 <i>Key recommendation 1, page 3:</i> Prioritise and invest in Aboriginal and Torres Strait Islander health leadership and genuine community engagement to achieve improved health outcomes for Aboriginal and Torres Strait Islander children.</p>	<p>The RACP often calls for ensuring that culturally safe and appropriate services are available, which are community led and controlled where possible.</p>



[HEALTH CARE OF CHILDREN IN CARE AND PROTECTION SERVICES AUSTRALIA Position statement JUNE 2023](#)

Recommendation 11, page 11: Australian and State/Territory governments must commit to and invest in First Nations community-led providers for comprehensive proactive support that address the needs of First Nations children and their carer/s.

[RACP Submission to Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability April 2021](#)

Recommendation 20, page 12: The RACP supports the ten priorities to address disability inequity developed by the First People's Disability Network Australia (the FDPN). This includes a priority to:

- Create links between the National Disability Strategy and Closing the Gap Framework for coordinated policy and programs at the Commonwealth, State and local levels in partnership with Aboriginal and Torres Strait Islander people with disability and their organisations.
- Invest to create an Aboriginal Community Controlled Disability Service Sector for the provision of disability supports by Aboriginal and Torres Strait Islander people with disability for their communities.
- Recognise and value the existing knowledge, skills and expertise within Aboriginal and Torres Strait Islander communities.
- Resource a community-directed research strategy which focuses explicitly on Aboriginal and Torres Strait Islander disability.

[RACP Submission to the Senate Select Committee on Autism May 2020](#) *Recommendation 3, page 7:* Ensure that culturally safe and appropriate services are available which are community led and controlled where possible to assist the provision of services to Aboriginal and Torres Strait Islander people with ASD. The RACP recommends that increased assistance is given to the families of Aboriginal and Torres Strait Islander children with ASD to access the NDIS and post-diagnostic support services, and information is designed specifically for Aboriginal and Torres Strait Islander communities, in varied formats and translated into local languages.

[RACP Submission to the National Disability Insurance Scheme \(NDIS\) Act Review and Participant Service Guarantee \(Tune Review\) October 2019](#)

Access to the NDIS is highly variable, page 5: The RACP favours tailored, culturally appropriate services that are community-informed and community-led where possible, to support the provision of services to Aboriginal and Torres Strait Islander people with disability.



<p>8. Recommendation 20: seeks commitment of all governments to the United Nations Convention on the Rights of People with Disability. Foundational support costs for the sustainability of the NDIS should be shared equally between the Australian government and state and territory governments for their commitment to human rights to be upheld.</p>	<p>RACP feedback on the draft National Care and Support Economy Strategy Department of the Prime Minister and Cabinet July 2023 <i>Current key challenges for the care and support economy, page 7:</i> Governments at all levels, as well as all health services, should adopt and implement a rights-based policy foundation for people with disability.</p> <p>RACP Submission to Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability April 2021 <i>Recommendation 1, page 6:</i> Governments at all levels and health services should adopt and implement a rights-based policy foundation for people living with disability.</p>	<p>The RACP is committed to disability policies underpinned by the UNCRPD.</p> <p>However, opinions on the funding arrangements for the implementation of new foundational supports has not been voiced by the RACP.</p> <p>(Note: foundational disability supports are new, they aim to make mainstream services equally accessible to people with disability, whether they are an NDIS participant or not)</p>
<p>The following five (5) recommendations relate to the transition of responsibility for advising on NDIS pricing to the Independent Health and Aged Care Pricing Authority (IHACPA) and how it functions in a governance, regulatory and monitoring role</p>		
<p>9. Recommendation 9: supports the transition of responsibility for advising on Specialist Disability Accommodation pricing to the IHACPA.</p>	<p>Prioritising Health, 2024 Tasmanian Election Statement <i>Improving access to healthcare for priority population groups, page 7</i> The RACP urges consideration of the need for appropriate supported accommodation (for example, residential aged care for elderly people and disability-appropriate accommodation for younger people for whom aged care is not appropriate), to thereby enable rapid discharge from hospital wards when clinically appropriate.</p> <p>RACP Submission to Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability April 2021 <i>Recommendation 29, page 19:</i> The Commonwealth Government should review and improve, and State Governments should fund, more appropriate accommodation options for people with disability. This should include options for young people who require a similar level of personal care as that provided to older persons in RACFs.</p>	<p>The RACP supports that people living with a disability require Specialist Disability Accommodation but does not specifically advise that the IHACPA holds this responsibility.</p>
<p>10. Recommendation 11: calls for greater alignment of pricing across the care and support sector, by giving the IHACPA and other agencies authority over NDIS pricing.</p>	<p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024. <i>Recommendation 2, page 3:</i> The Independent Hospital Pricing Authority (IHPA) should specifically address the needs of people with disability in their pricing framework to ensure systemic barriers to health care are addressed.</p>	<p>Note: the IHACPA was first introduced as the IHPA in 2011.</p>



	<p>RACP feedback on the draft National Care and Support Economy Strategy Department of the Prime Minister and Cabinet July 2023</p> <p><i>How the Government achieve a sustainable and productive care and support economy page 8:</i> The Independent Hospital Pricing Authority (IHPA) should specifically address the needs of people with disability in their pricing framework to ensure systemic barriers to health care are addressed.</p>	
<p>11. Recommendation 21: requires IHACPA to collaborate with other agencies to more closely coordinate disability supports, workforce, safeguard mechanisms and regulation across the care and support systems.</p>	<p>RACP Submission to the Department of Social Services regarding the Disability Royal Commission Final Report Feb 2024.</p> <p><i>Recommendation 10, page 4:</i> The Commonwealth Government should further strengthen and continue to fully implement the National Framework for Quality and Safeguarding to protect NDIS participants from potential abuse by service providers.</p> <p>RACP Submission to the new National Disability Strategy Position Paper Stage 2 Consultation October 2020</p> <p><i>Feedback regarding question 9, page 8:</i> The new Strategy needs to outline a new governance model for disability services. Disability is a complex policy area where funding and services are delivered by multiple levels of Government as well as the private and community sectors. There remains a risk that people with disabilities will continue to suffer because of a lack of coordination.</p> <p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019</p> <p><i>Executive summary and recommendations, page 3:</i> The RACP calls on Commonwealth, State and Territories Governments to fully implement the National Framework for Quality and Safeguards in order to protect NDIS participants from potential abuse by service providers.</p>	<p>The RACP strongly supports the National Framework for Quality and Safeguarding to protect NDIS participants from potential abuse by service providers.</p> <p>While the RACP recognises the inherent risk of disability as an uncoordinated complex system, the RACP has not specifically called for the IHACPA to provide coordination.</p>
<p>12. Recommendation 23: requires IHACPA to collaborate with other agencies to facilitate the establishment and management of a new NDIS Evidence Committee, to provide guidance on reasonable and necessary disability supports.</p>	<p>RACP Submission to the National Disability Insurance Scheme (NDIS) Act Review and Participant Service Guarantee (Tune Review) October 2019</p> <p><i>Executive summary and recommendations, page 4:</i> The RACP calls on the National Disability Insurance Agency (NDIA) to ensure that practices and therapies funded by the NDIS are evidence based, explicitly goal-directed, and accountable to meaningful, measurable outcomes over set timeframes.</p>	<p>This was only very briefly addressed and made 4 years ago: opportunity to raise in future RACP submissions.</p>



<p>13. Recommendation 24: invites the IHACPA to work closely with the NDIS Review Implementation Working Group to coordinate NDIS reforms across Australian governments.</p> <p>The working group provides updates to the NDIS Review Implementation Advisory Committee appointed by the Disability Reform Ministerial Council for implementing reforms.</p>	<p>This is a new recommendation.</p>	<p>N/A</p>
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