

**Australian Autism Alliance**

**Submission to the Senate Community Affairs  
Legislation Committee  
Inquiry into the National Disability Insurance  
Scheme Amendment (Securing the NDIS for  
Future Generations) Bill 2026**

**Systems That Work:  
Ensuring Reform is Ready, Accountable and Safe**

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We acknowledge the Individual and collective expertise of those with a living or lived experience of disability, as well as the lived experience of people who have been carers. We recognise their vital contribution at all levels and value the courage of those who share their unique perspective for the purpose of learning and growing together to achieve better outcomes for all.

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## About the Australian Autism Alliance

[www.australianautismalliance.org.au](http://www.australianautismalliance.org.au)

The [Australian Autism Alliance](#) (the Alliance) is a funded national peak body Disability Representative Organisation (DRO) providing a Strong Unifying Voice for Autism, and authoritative policy expertise on autism working with Australian government at all levels to strengthen policy and service systems affecting Autistic Australians. Established in 2016, the Alliance works to improve the life chances of Autistic people and strengthen collaboration across the Australian autism community.

The Alliance contributes futures-focused adviser expertise to a range of national advisory and reform processes, including DHDA Disability Representative Organisation program, the NDIA Autism Advisory Group, the NDIA DRCO Co-Design Advisory and Reform groups, NDIS Commission Disability Sector Consultative group, the National Autism Strategy Oversight Council, and National Health and Mental Health Roadmap for Autistic people. The Alliance is focused on system design solutions that enable disability systems to respond effectively to the diversity of Autistic support needs - “Change the System, Not the Person”.

Our membership represents a cohesive national network of key organisations with a diverse focus on autism – that is led by Autistic people, advocacy groups, peak bodies, service providers, and researchers. Together, this network provides a platform for the diversity of Autistic perspectives and lived experience across Australia.

Through our members and communication channels, the Alliance reaches more than half a million people and supports Autistic people and their families across the lifespan. Most importantly, our work is informed by Autistic people and the Australian autism community.



# 1 Executive Summary

The Australian Autism Alliance (the Alliance) welcomes the opportunity to provide this submission on the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026.

The Alliance supports reform of the National Disability Insurance Scheme. We support long-term sustainability, stronger mainstream systems, effective foundational supports, action against fraud and exploitation, and reforms that improve outcomes for people with disability.

However, the Alliance does not support progression of the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026 in its current form or proposed implementation timeframe.

Our concern is not whether reform should occur.

**Our concern is whether Parliament can be confident that the systems required for reform are ready, accountable and capable of delivering better outcomes.**

The Alliance has consistently advocated for systems that work.

**Systems that work are not built after people are expected to rely on them. They are built first.**

The Bill proposes significant legislative change while many of the systems upon which those reforms depend remain under development, untested, unavailable or subject to future negotiation. Foundational supports are not yet operational, mainstream responsibilities remain unresolved, assessment methodologies have not been finalised or independently validated, and the oversight, accountability and harm-monitoring mechanisms needed to identify and respond to emerging problems have not been clearly established.

The Alliance's position is informed by the Disability Royal Commission, the Independent NDIS Review, the National Autism Strategy, previous NDIS reform processes and lessons arising from the Government's response to the Royal Commission into Defence and Veteran Suicide. These reviews and inquiries identified remarkably similar systemic risks including fragmentation, poor coordination, inadequate accountability, delayed responses to harm and people falling through gaps between systems.

The Alliance is concerned that equivalent implementation architecture has not been clearly established for disability reform despite reforms of similar scale and complexity now being proposed through this Bill. This raises a fundamental question:

**Why are disability reforms proceeding without people with disability being afforded equivalent implementation and accountability architecture that Government itself considered necessary for Veterans Affairs reform, particularly when the Disability Royal Commission identified many of the same systemic risks?**

The Alliance notes that Government recognised these risks in Veterans Affairs reform and responded by establishing implementation oversight, monitoring arrangements, escalation pathways and accountability mechanisms.

The Alliance's position is simple:

**Oversight should precede reliance.**

Government should not ask people with disability to depend upon reformed systems before accountability arrangements, escalation pathways, harm monitoring, public reporting and independent oversight are in place.

The Alliance is also concerned that discussion of sustainability has become heavily focused on expenditure without equivalent consideration of outcomes.

A sustainable system is not simply one that spends less.

The Alliance believes sustainability and good outcomes are not competing objectives. A sustainable system is one that prevents future costs, increases participation, strengthens families and communities, and enables people to contribute.

**The question is not only what support costs today.**

**It is also what Australia pays tomorrow if support is withdrawn too early.**

For Autistic people, delayed access to support can reduce educational participation, employment opportunities, independence, mental health and long-term life outcomes. Early support should be viewed as an investment in future participation and contribution, not a cost to be deferred.

Sustainable reform should therefore focus not only on controlling expenditure, but also on reducing avoidable future costs arising from crisis intervention, hospitalisation, homelessness, family breakdown, workforce exclusion and unmet need.

**Sustainability matters for people with disability, for families and carers, and for the economy.**

So, the Alliance believes this Bill is about more than legislative reform.

**It is about what kind of country Australia wants to be.**

The NDIS was established because Australians believed that people with disability should not be excluded from opportunity, participation and community life simply because they require support.

The Alliance supports sustainable reform. However, reform should proceed only when Parliament can be satisfied that systems are ready, safeguards are in place, accountability is clear and people with disability will not bear the consequences if assumptions underpinning reform prove incorrect.

**If systems are not ready, reform is not ready.**

Success should not be measured by how many people leave the NDIS.

**Success should be measured by whether people experience better lives afterwards.**

Detailed autism-specific legislative analysis, identified risks, proposed safeguards and recommended amendments are contained in Attachment A.

## 2 Summary of Recommendations and Assessment of the Bill

The Australian Autism Alliance supports reform, sustainability, stronger mainstream systems and the establishment of foundational supports.

However, the Alliance does not support progression of the Bill in its current form and timeframe.

The recommendations below are intended to ensure reforms are implemented in a manner that is safe, accountable, evidence-based and capable of delivering better outcomes for people with disability, their families and carers.

### 2.1 Summary of Recommendations

Rec No	Recommendation Topic	Summary	Section in Submission
R1	Readiness Before Reliance	Major reforms should not proceed until Government can demonstrate that replacement systems, foundational supports, workforce capability, No-Gap Transition Guarantee and implementation arrangements are operational and capable of meeting need. Government should also publicly identify the criteria by which reform readiness, success and participant outcomes will be measured.	Section 4; Attachment B (Readiness Index)
R2	Parliament Should Not Approve Undefined Future Powers	Parliament should not approve broad enabling powers where the operational detail, safeguards, implementation arrangements and accountability mechanisms have not yet been demonstrated.	Section 5; Attachment A
R3	Autism-Informed Design and Implementation	Ensure reforms reflect contemporary autism evidence, recognise the diversity of Autistic experience and support timely access to disability supports that improve long-term outcomes	Section 6; Attachment A
R4	Autism Co-Design and Shared Accountability	Autistic people, families and autism representative organisations should be actively involved in the design, implementation, monitoring and evaluation of reforms.	Section 6
R5	Demonstrate Readiness and Accountability	Government should demonstrate that reforms meet the Alliance's Systems That Work Readiness and Accountability Tests before implementation proceeds.	Sections 4 & 8; Attachments B & C
R6	Cumulative Impact Assessment	Major disability reforms should be assessed cumulatively rather than in isolation, including impacts across health, education, housing, employment, community supports and family capacity.	Section 7; Attachment A Table A
R7	Legislative Safeguards and Amendments	The Committee should have regard to the legislative concerns including autism-specific, risks, safeguards and proposed amendments contained in Attachment A and recommend amendment, strengthening or removal of	Section 7; Attachment A



Rec No	Recommendation Topic	Summary	Section in Submission
		provisions accordingly. This includes Broad Ministerial powers relating to support determinations and caps be removed or significantly amended.	
<b>R8</b>	Functional Capacity Framework Safeguards	No functional capacity assessment framework should be implemented until methodology, safeguards, validation, workforce capability and autism-specific impacts have been independently assessed and publicly scrutinised.	Section 7; Attachment A
<b>R9</b>	Oversight Before Reliance	Government should establish an independent disability reform implementation and oversight architecture, including public reporting, harm monitoring, escalation pathways, independent oversight and accountability for outcomes before major reforms commence.	Section 8; Attachment C & D
<b>R10</b>	Sustainability Must Include Outcomes	Government should publicly release the evidence, modelling, assumptions and impact analysis underpinning projected savings and reform outcomes. Reforms should be evaluated not only against expenditure reductions but also against participant outcomes, workforce participation, wellbeing, cost avoidance and long-term social and economic impacts.	Section 9; Attachment A Table D
<b>R11</b>	Preserve Disability Rights Principles	Reforms should preserve and strengthen person-centred approaches, trauma-informed practice, supported decision-making, participation, inclusion, dignity of risk, choice and control.	Section 10
<b>R12</b>	Implement the NDIS Review as a Complete Reform Package	Government should not selectively implement elements of the NDIS Review while omitting the safeguards, navigation functions, transition protections, accountability mechanisms and supporting infrastructure that accompanied those reforms.	Section 11; Attachment D

Table 1: Recommendation Summary Table

The Alliance's recommendations are informed by lessons arising from the Disability Royal Commission, the Independent NDIS Review, the National Autism Strategy, previous NDIS reform processes and the Government's response to the Royal Commission into Defence and Veteran Suicide.

Taken together, these recommendations reflect a simple principle:

**Readiness should precede reliance. Oversight should precede reliance. Reform should improve outcomes before it reduces supports.**

**Supporting Analysis:**

- Attachment A: Detailed autism-specific legislative analysis.
- Attachment B: The Systems That Work Readiness Index.
- Attachment C: The Systems That Work Accountability Index.
- Attachment D: Comparative lessons from the Disability Royal Commission, Independent NDIS Review, National Autism Strategy and Veterans Reform.

**2.2 Summary of the Alliance's Assessment of the Bill**

The Alliance has assessed the Bill against the principles outlined throughout this submission, including the Systems That Work Readiness Index (Attachment C), the Systems That Work Accountability Index (Attachment D), lessons arising from the Disability Royal Commission, the Independent NDIS Review, the National Autism Strategy and the Government's response to the Royal Commission into Defence and Veteran Suicide.

The Alliance's assessment is summarised below.

No	Alliance Assessment	Conclusion
1	Reform required	Yes
2	Sustainability required	Yes
3	Stronger mainstream systems required	Yes
4	Foundational supports required	Yes
5	Bill appropriate in current form	No
6	Systems demonstrably ready	Not demonstrated
7	Accountability demonstrated	Not demonstrated
8	Oversight architecture established	Not demonstrated
9	No-gap protections demonstrated	Not demonstrated
10	Functional assessment framework validated	Not demonstrated
11	Autism-specific safeguards established	Not demonstrated
12	Family capacity impacts assessed	Not demonstrated
13	Cumulative impacts assessed	Not demonstrated

The Alliance's position is therefore not whether reform should occur.

The question is whether Parliament can be confident that the systems, safeguards, accountability arrangements and implementation architecture required for reform are in place.

The Alliance's assessment is that this has not yet been demonstrated.

### 3 The Alliance Supports Reform BUT

The Alliance supports reform.

We support:

- long-term sustainability of the NDIS;
- strengthened scheme integrity;
- stronger mainstream systems;
- establishment of foundational supports;
- improved participant experiences and outcomes;
- greater transparency and consistency; and
- addressing through action against fraud, exploitation and poor-quality practice.

The Alliance has consistently supported reforms that are:

- evidence-based;
- appropriately safeguarded;
- independently evaluated;
- guarantees no participant loses supports, transition protections or funding before replacement systems are operational, accessible, accountable and capable of meeting need; and
- implemented within systems capable of delivering their intended outcomes.

We have equally and consistently opposed reforms that remove supports based upon assumptions that replacement systems will exist or function effectively at some future point or transfer risk to people with disability, families and carers before replacement systems, safeguards and accountability mechanisms are demonstrably in place.

The issue before Parliament is therefore not whether reform should occur.

The issue is whether the systems required for reform are demonstrably ready.

**The Alliance is simply asking Parliament to apply the same principles of readiness, oversight, accountability and harm monitoring that Government has recognised as necessary in other major reform programs.**

Reform should improve outcomes.

**Reform should not rely on assumptions that systems will work. It should demonstrate that they do.**

#### **Recommendation 1 – Readiness Before Reliance**

Government should demonstrate that the systems required to support the proposed reforms are operational, accountable and capable of delivering their intended outcomes before participants are expected to rely upon them.

This should include demonstrated readiness across foundational supports, mainstream interfaces, implementation oversight, accountability arrangements, workforce capacity, No-Gap Transition Guarantee, continuity-of-support protections and harm-monitoring mechanisms. Government should also publicly identify the criteria by which reform readiness, success and participant outcomes will be measured.

Hence the Bill should not proceed in its current form or proposed implementation timeframe.

## 4 The Alliance's Position Which Has Remained Consistent (2024 Inquiry)

The Alliance does not support progression of the Bill in its current form.

Some provisions may be capable of amendment and improvement. However, several elements are unacceptable as they are fundamentally problematic, including:

- broad Ministerial powers;
- support determination and support-capping powers;
- reliance on systems that are not yet operational;
- unresolved functional assessment architecture;
- inadequate accountability arrangements;
- insufficient continuity protections.

### 4.1 Specific Legislative Concerns

The Alliance's detailed legislative analysis is in Attachment A.

The Alliance categorises provisions as:

#### **Unacceptable in Current Form**

- Broad Ministerial support reduction powers.
- Unsupported functional assessment architecture.
- Non-reviewable plan renewal arrangements.
- Reliance upon theoretical mainstream availability without demonstrated readiness.

#### **Requiring Significant Amendment**

- Reassessment restrictions.
- "Directly arising" support tests.
- Family responsibility provisions.
- Automated decision-making provisions.
- Suspension and revocation powers.

#### **Potentially Supportable with Safeguards**

- Fraud measures.
- High-risk provider regulation.
- Pricing transparency.

- Conflict-of-interest reforms.

#### 4.2 Cross-cutting themes across all schedules

These are the major overarching concerns that cut across the entire Bill.

Cross-cutting Issue	Why it Matters
No-harm protections absent	No enforceable safeguard against worsening outcomes
System readiness not demonstrated	Mainstream systems not proven capable
Participant restriction vs system reform	Controls increasingly placed on disabled people
Executive power expansion	Reduced individualized rights and reviewability
Autism masking/scaffolding ignored	Hidden disability risk
Cost shifting to families	Increased unpaid care burden
Administrative attrition	Complexity may silently reduce access
Sustainability reframing	Shift from participation to expenditure management

Analysis, risk assessment and proposed safeguards are outlined in **Attachment A**.

The Alliance notes that many of the concerns raised in this submission are not new.

During consideration of the previous NDIS Amendment legislation, the Alliance cautioned Parliament against approving broad legislative powers where the operational detail, safeguards and implementation arrangements had not yet been developed.

The Alliance's concern was not dependent on which Government exercised those powers.

Rather, the concern was that Parliament should not be asked to approve broad future powers without knowing:

- how those powers would operate;
- what safeguards would apply;
- how impacts would be monitored;
- how participants would be protected; and
- how unintended consequences would be identified and addressed.

The Alliance remains concerned that Parliament is again being asked to approve significant enabling powers before the systems, safeguards and accountability arrangements required for their safe implementation have been demonstrated.

#### **Recommendation 2 – Parliament Should Not Approve Undefined Future Powers**

Parliament should not approve broad future powers before the detail is known.

The Bill should not confer broad enabling powers where the operational framework, safeguards, implementation arrangements, monitoring mechanisms and accountability requirements have not yet been developed, publicly released and subject to consultation and parliamentary scrutiny. Parliament should only be asked to approve powers where it is able to understand how those powers will operate, how participants will be protected, how impacts will be monitored and how unintended consequences will be identified and addressed

## 5 Potential Impacts for Autistic People and their Families

Autistic people may be particularly affected by several aspects of the proposed reforms.

Autism is a lifelong neurodevelopmental condition. Support needs are often influenced not only by an individual's intrinsic capacity but also by environmental factors, support scaffolding, communication demands, sensory impacts, co-occurring conditions and life transitions.

The Alliance is concerned that reforms which rely heavily on functional assessments, standardised decision-making or assumptions regarding family and community capacity may fail to adequately recognise the complexity and variability of Autistic people's support needs.

Particular areas of concern include:

- lifelong nature of autism
- functional assessment methodologies;
- masking and camouflaging behaviours;
- fluctuating support needs over time;
- executive functioning impacts;
- communication differences;
- assumptions regarding family capacity and informal supports;
- access to developmental and capacity-building supports;
- interactions between autism and mental health;
- transitions across education, employment and adulthood;
- community participation and social inclusion;
- co-occurring conditions; and
- the cumulative impacts of disadvantage across a person's life.

The Alliance is particularly concerned that support needs may be underestimated where assessments fail to adequately consider environmental context, support scaffolding, masking, cumulative impacts across a person's life.

The Alliance is further concerned that proposed functional assessment arrangements appear to separate functioning from environmental context. Contemporary disability frameworks, including the World Health Organisation International Classification of Functioning, Disability and Health

(ICF), recognise that disability and functioning occur through the interaction between impairments, environmental factors, supports and personal circumstances.

For many Autistic people, functioning varies significantly according to sensory environments, communication supports, executive functioning demands, support scaffolding, familiarity of settings, Autistic burnout and masking. Assessing functioning in isolation from these factors risks systematically underestimating support needs and producing outcomes inconsistent with real-world functioning.

### **Early Intervention, Development and Access to Supports**

Furthermore, the Alliance is concerned by any approach that would require Autistic people or their families to exhaust treatment options, mainstream services, educational interventions or informal supports before disability supports become available.

Autism is a lifelong neurodevelopmental condition, not a condition that should be viewed through a treatment-failure model.

The evidence consistently demonstrates that timely access to appropriate supports, accommodations and developmental interventions improves participation, independence, wellbeing, educational outcomes and long-term life opportunities.

Conversely, delays in access to support can contribute to escalating needs, family stress, educational disengagement, mental ill-health, social isolation and future reliance on more intensive and costly interventions.

The Alliance supports approaches that provide support at the point of need rather than requiring individuals and families to demonstrate that all other options have first been exhausted.

**Early support should be viewed as an investment in future participation and outcomes, not as a cost to be deferred.**

The Alliance's detailed autism-specific legislative analysis and recommended safeguards are contained in **Attachment A**.

### **Recommendation 3 – Autism-Informed Design and Implementation**

Government should ensure that all assessment methodologies, support determination processes, implementation arrangements and transition pathways associated with the reforms are informed by contemporary autism evidence and expertise.

This should include recognition of masking, executive functioning, communication differences, sensory needs, fluctuating support needs, co-occurring conditions and developmental support needs.

People should not be required to exhaust treatment options, mainstream services, educational interventions or informal supports before accessing disability supports where evidence demonstrates that timely support improves long-term participation, independence and wellbeing outcomes.

#### **Recommendation 4 – Autism Co-Design and Shared Accountability**

Autistic people, families and autism representative organisations should be actively involved in the design, implementation, oversight, monitoring and evaluation of reforms.

This involvement should extend beyond consultation and include ongoing participation in governance, implementation oversight, evaluation and continuous improvement processes. Reforms affecting Autistic people should not be designed for the autism community. They should be designed with the autism community.

## **6 Systems That Work: The Foundation for Reform**

The Alliance has consistently advocated for systems that work.

The Alliance is concerned that discussion surrounding reform is increasingly focused on expenditure, efficiency and financial sustainability.

These considerations are important.

However, the question should not simply be whether systems are financially sustainable.

A system is successful when people experience improved outcomes, greater autonomy, meaningful participation and genuine choice and control.

Most importantly:

**Systems that work are built before people are expected to rely on them.**

To assist Government and Parliament assess whether reforms are ready and accountable, the Alliance has developed:

- the Systems That Work Readiness Index (Attachment B); and
- the Systems That Work Accountability Index (Attachment C).

The Alliance submits that reforms should demonstrate readiness and accountability before implementation, rather than relying on assumptions that systems will operate as intended

#### **Recommendation 5 – Demonstrate Readiness and Accountability**

Government should demonstrate that the proposed reforms satisfy the Alliance Systems That Work Readiness Index and Alliance Systems That Work Accountability Index before implementation.

## **7 Cumulative Impact Lens**

The Alliance is concerned that the reforms proposed within this Bill continue to be assessed largely in isolation.

People do not experience reforms in isolation.

Autistic people and their families experience the interaction between:

- NDIS reforms;
- health systems;
- education systems;
- housing systems;
- mental health services;
- employment systems;
- family capacity;
- community supports; and
- broader economic pressures.

Participants may also experience the combined effects of multiple reform measures including functional assessments, reassessments, support determinations, foundational supports, workforce shortages and changing family circumstances.

The cumulative effect of these changes may be significantly different from the effect of any individual measure considered in isolation.

The Alliance is concerned that cumulative impacts have not been adequately assessed.

Major disability reform should be assessed not only by the impact of individual measures but also by their combined effect on people with disability, families, carers and communities.

### **Recommendation 6 – Cumulative Impact Assessment**

Government should undertake and publicly release cumulative impact assessments before implementing major disability reforms, including assessment of impacts across disability, health, education, housing, employment and community support systems

### **Recommendation 7 – Legislative Safeguards and Amendments**

The Committee should have regard to the legislative concerns including autism-specific, risks, safeguards and proposed amendments contained in Attachment A and recommend amendment, strengthening or removal of provisions accordingly. This includes Broad Ministerial powers relating to support determinations and caps be removed or significantly amended.

### **Recommendation 8 – Functional Capacity Framework Safeguards**

No functional capacity assessment framework should be implemented until:

- the methodology has been publicly released;
- independently validated;
- impacts across disability cohorts have been assessed;
- autism-specific impacts have been evaluated;
- workforce capability requirements have been demonstrated;
- implementation arrangements independently reviewed; and
- Parliament has had the opportunity to scrutinise the completed framework.

Any assessment framework should align with contemporary disability frameworks including the WHO International Classification of Functioning, Disability and Health (ICF) which recognises that functioning occurs in interaction with environmental and personal factors.

## 8. Lessons from Previous Reforms

### 8.1 A Consistent Lesson Across Major Reviews and Inquiries

The Alliance notes that the concerns raised in this submission are not unique to the current Bill. Successive reviews, inquiries and reform processes have identified remarkably similar systemic risks, including:

- fragmentation across systems;
- poor coordination between services;
- delayed responses to harm;
- inadequate accountability;
- workforce pressures;
- people falling through service gaps; and
- a lack of clear ownership when systems fail.

These themes are evident throughout the Disability Royal Commission, the Independent NDIS Review and the National Autism Strategy.

Together they point to a consistent lesson:

**Major reforms should not rely on assumptions that systems will work. They should establish mechanisms that ensure they do.**

### 8.2 Disability Royal Commission

A central finding of the Disability Royal Commission was that people with disability experience harm when responsibility is dispersed across multiple systems and no agency is accountable for ensuring supports are delivered.

The Commission identified recurring failures associated with fragmentation, poor coordination, delayed responses to harm and people falling through gaps between systems.

The Alliance notes that the Disability Royal Commission recognised the need for ongoing accountability, oversight and system stewardship across government.

This included the recommendation for a National Disability Commission to provide independent oversight, monitoring and accountability for disability reform.

The Alliance further notes that a Disability Royal Commission Implementation Taskforce was established to coordinate and monitor implementation of the Government's response.

The current reforms rely heavily on interactions between the NDIS and mainstream systems, including health, education, housing, mental health, employment and community supports.

However, the Alliance is concerned that Government is increasing reliance on mainstream and foundational systems at the same time that elements of the Disability Royal Commission implementation architecture have been reduced and the permanent National Disability Commission recommended by the Royal Commission has not yet been established.

As a result, Parliament is being asked to consider reforms that depend upon coordinated system performance without a clearly articulated whole-of-government mechanism responsible for monitoring whether those systems are collectively delivering the intended outcomes for people with disability.

**This creates a significant accountability gap.**

### **8.3 Independent NDIS Review and National Autism Strategy**

The Independent NDIS Review did not simply recommend reducing reliance on the NDIS. Rather, it proposed an integrated ecosystem supported by:

- foundational supports;
- stronger mainstream systems;
- navigation functions;
- transition pathways;
- accountability mechanisms;
- monitoring arrangements; and
- implementation safeguards.

Similarly, the National Autism Strategy emphasises coordinated systems, early support, improved navigation, accountability and better outcomes across the lifespan.

The Alliance is concerned that legislative powers are progressing ahead of many of the safeguards, implementation mechanisms and supporting infrastructure intended to accompany them.

In particular, foundational supports, navigation arrangements, accountability mechanisms and system readiness measures remain at varying stages of development despite being central assumptions underpinning the reforms.

### **8.4 Lessons from Veterans Affairs Reform**

The Alliance notes the Government's response to the Royal Commission into Defence and Veteran Suicide.

That response recognised that reforms of significant scale require:

- implementation oversight;
- progress monitoring;
- public reporting;
- escalation pathways;
- accountability mechanisms;
- independent scrutiny; and

- coordinated whole-of-government implementation.

The Alliance notes that many of the systemic risks identified by the Royal Commission into Defence and Veteran Suicide are similar to those identified by the Disability Royal Commission, including fragmented systems, poor coordination, delayed responses to harm, unclear accountability and people falling through service gaps.

Government accepted that implementation architecture was necessary to ensure Veterans reforms could be monitored, adjusted and corrected where required.

The Alliance submits that people with disability deserve no less.

The proposed NDIS reforms similarly depend upon multiple systems working together, including the NDIS, health, education, housing, mental health, employment and community support systems.

Yet equivalent implementation architecture has not been clearly established for disability reform.

The Alliance therefore asks:

**Why are disability reforms proceeding without people with disability being afforded equivalent implementation and accountability architecture that Government itself considered necessary for Veterans Affairs reform, particularly when the Disability Royal Commission identified many of the same systemic risks?**

If assumptions underpinning these reforms prove incorrect:

- who identifies the problem?
- who owns the outcome?
- who coordinates a response?
- who reports publicly?
- who fixes it?

The Alliance believes these questions should be answered before reforms proceed, not after harms emerge.

## **8.5 Oversight Before Reliance**

This is perhaps the Alliance's central concern.

Government is increasingly asking people with disability to rely upon:

- foundational supports;
- health systems;
- education systems;
- housing systems;
- community supports; and
- broader mainstream services.

However, the mechanisms required to monitor whether those systems are actually delivering

remain unclear.

Government should not ask people with disability to depend upon systems before:

- accountability arrangements exist;
- escalation pathways exist;
- public reporting exists;
- harm monitoring exists; and
- independent oversight exists.

**If Government cannot identify harm, Government cannot prevent harm.**

**If Government cannot identify system failure, Government cannot correct it.**

**Oversight should precede reliance.**

This principle underpins the **Alliance's Systems That Work Accountability Index (Attachment C)**.

A comparative analysis of lessons arising from the Disability Royal Commission, Independent NDIS Review, National Autism Strategy and Veterans Affairs reform is provided in **Attachment D**.

### **Recommendation 9 – Oversight Before Reliance**

The Australian Government should establish an independent disability reform implementation and oversight architecture before commencement of major NDIS reforms.

This should include:

- public reporting of implementation progress and outcomes;
- harm identification and monitoring mechanisms;
- escalation pathways where reforms are not operating as intended;
- corrective action mechanisms;
- whole-of-government coordination across NDIS, health, education, housing, employment and community systems;
- independent implementation oversight and evaluation; and
- clear accountability for outcomes.

In developing this architecture, Government should have regard to:

- the Disability Royal Commission's recommendation for a National Disability Commission;
- the role previously undertaken by the Disability Royal Commission Implementation Taskforce;
- the findings of the Independent NDIS Review;
- the National Autism Strategy; and
- lessons arising from the Government's response to the Royal Commission into Defence and Veteran Suicide.

## 9 Sustainability Must Include Outcomes

The Alliance supports the long-term sustainability of the National Disability Insurance Scheme. However, sustainability cannot be measured solely by expenditure reduction.

Government has frequently focused on the costs of the Scheme.

Far less attention has been given to the benefits achieved through participation, inclusion, capacity building and long-term social and economic outcomes.

The Alliance submits that the relevant question is not simply:

### **What does the NDIS cost?**

It is also:

### **What does the NDIS prevent?**

### **What does success save?**

and

### **What does effective support make possible?**

#### **9.1 Where Has Government Accounted for the Benefits?**

The NDIA itself regularly reports outcomes relating to participation, employment, education, independence and community engagement.

Yet the Explanatory Memorandum focuses heavily on projected expenditure reductions while providing limited visibility of:

- avoided future costs;
- productivity gains;
- workforce participation gains;
- carer workforce participation;
- reduced crisis intervention;
- reduced homelessness;
- reduced hospitalisation;
- reduced justice system involvement; and
- reduced mental health costs.

The Alliance is concerned that Parliament is being asked to consider projected savings without equivalent visibility of the benefits currently being achieved through investment.

#### **9.2 Investment Delivers Returns. Under-Support Creates Costs.**

Autistic Australians experience significantly poorer outcomes across education, employment, housing, mental health and community participation when appropriate supports are unavailable.

These outcomes carry substantial costs for governments, communities, families and the broader economy.

Evidence previously submitted by the Alliance demonstrates that:

- Autistic Australians experience unemployment rates almost six times higher than non-disabled Australians;
- Autistic students are significantly less likely to complete secondary education, vocational training and university;
- Preschool-aged Autistic children are ten times more likely to be permanently excluded from childcare settings;
- Autistic people experience substantially higher rates of mental ill-health, emergency hospital presentations and homelessness;
- Mental ill-health and suicide associated with autism are estimated to cost Australia approximately \$6.1 billion annually;
- Homelessness associated with autism is estimated to cost approximately \$1.5 billion annually;
- Informal carers experience significant losses in workforce participation, income and retirement security;
- Carer lost income is projected to exceed \$432 million annually by 2030, with associated taxation losses of approximately \$129 million and welfare costs of approximately \$254 million.

The Alliance submits that these costs should be considered when assessing the sustainability of disability reform.

### **9.3 The Cost of Getting Reform Wrong**

The Alliance is concerned that reforms implemented before systems are ready may generate short-term expenditure reductions while creating larger long-term costs.

If supports are reduced before replacement systems are operational, potential consequences include:

- increased school disengagement and exclusion;
- worsening mental health outcomes;
- increased emergency department presentations and hospital admissions;
- increased homelessness risk;
- increased family breakdown and carer burnout;
- reduced workforce participation by both Autistic people and their carers;
- increased reliance on crisis and justice systems; and
- greater future demand for intensive supports.

These outcomes are not hypothetical.

They are the very outcomes successive inquiries, reviews and government strategies have sought to prevent.

The Alliance therefore submits that reform should be assessed not only against projected savings but also against the costs of preventable deterioration, exclusion and crisis.

A sustainable system is not one that simply spends less.

A sustainable system is one that prevents future costs, increases participation, strengthens communities and enables people to contribute

### **Recommendation 10 – Sustainability Must Include Outcomes**

Government should publicly release the assumptions underpinning projected savings associated with the Bill, including:

- anticipated reductions in supports;
- projected impacts on participant outcomes;
- cost-shifting assumptions;
- expected impacts on health, education, housing, employment and community systems; and
- modelling of avoided future costs associated with maintaining effective supports.

Government should also publicly report both expenditure outcomes and participant outcomes, including employment, education, participation, wellbeing, family impacts and long-term cost avoidance.

Reforms should be evaluated not only by what they save, but also by what they prevent and what they make possible

## **10 Reform Must Remain Anchored in Principles**

The Alliance recognises that reform is necessary. However, reform should remain anchored in the principles that have guided disability policy and reform in Australia for decades.

These include:

- person-centred approaches;
- trauma-informed practice;
- supported decision-making;
- choice and control;
- participation;
- inclusion;
- dignity of risk; and
- accountability.

These are not optional design features.

They are foundational principles underpinning modern disability policy and support systems.

They are reflected throughout:

- the NDIS Act;
- the Convention on the Rights of Persons with Disabilities;
- the Disability Royal Commission;
- the National Autism Strategy; and
- the Independent NDIS Review.

The Disability Royal Commission repeatedly identified the consequences of systems that:

- failed to listen;
- failed to recognise individual circumstances;
- failed to respond to trauma;
- prioritised administrative convenience over individual needs; and
- removed decision-making from people with disability.

Similarly, the National Autism Strategy emphasises choice and control, meaningful participation, person-centred supports and coordinated, accountable systems.

The Alliance is concerned that some elements of the proposed reforms may create tension with these principles if implemented without stronger safeguards.

In particular, concerns arise where reforms rely upon:

- broad Ministerial powers;
- standardised support determinations;
- restrictive support definitions;
- limited review pathways; or
- unsupported transitions to other systems.

The Alliance submits that this Bill should be assessed not only against its administrative objectives, but also against the extent to which it preserves and strengthens the principles that underpin contemporary disability policy.

Reform should strengthen these principles, not diminish them.

### **Recommendation 11 – Preserve Disability Rights Principles**

The Bill should be amended and implemented in a manner that explicitly preserves and strengthens:

- person-centred approaches;
- trauma-informed practice;
- supported decision-making;
- choice and control;
- participation and inclusion;
- dignity of risk; and
- accountability.

All future rules, instruments, operational policies and implementation arrangements arising from the Bill should be demonstrably consistent with the NDIS Act, the Convention on the Rights of Persons with Disabilities, the Disability Royal Commission, the National Autism Strategy and the Independent NDIS Review.

## **11 Consistency with the Independent NDIS Review**

Government has frequently referred to the Independent NDIS Review in support of reform.

The Alliance agrees that the Review identified the need for significant reform and supported the development of a more sustainable and effective disability support ecosystem.

However, the Review did not recommend simply reducing reliance on the NDIS.

Rather, the Review proposed a broader reform architecture including:

- foundational supports;
- stronger mainstream systems;
- navigation functions;
- coordinated pathways;
- implementation safeguards;
- transition protections; and
- accountability mechanisms.

The Alliance is concerned that legislative powers are progressing ahead of many of the guardrails, implementation arrangements and supporting infrastructure intended to accompany them.

The Alliance submits that reforms should be implemented in a manner that is consistent with both the recommendations and the intent of the Independent NDIS Review.

This includes ensuring that safeguards, accountability mechanisms and supporting systems are established before participants are expected to rely upon them.

## **Recommendation 12 – Implement the NDIS Review as a Complete Reform Package**

Government should not implement elements of the Independent NDIS Review in isolation.

Legislative reforms that increase reliance on foundational supports, mainstream services or alternative pathways should only proceed where the corresponding safeguards, transition protections, navigation functions, accountability mechanisms and supporting infrastructure are demonstrably in place

## **12 Conclusion**

The Australian Autism Alliance supports reform.

The Alliance supports long-term sustainability of the NDIS.

The Alliance supports stronger mainstream systems, foundational supports, improved participant outcomes and action against fraud, exploitation and poor-quality practice.

However, the Alliance does not support transferring risk from systems onto individuals before replacement systems, safeguards and accountability mechanisms are demonstrably in place.

The Alliance's position is not based on opposition to reform.

It is based on lessons repeatedly identified through the Disability Royal Commission, the Independent NDIS Review, the National Autism Strategy, the Alliance's previous NDIS Amendment submissions and the Government's response to the Royal Commission into Defence and Veteran Suicide.

Those lessons are remarkably consistent.

Major reforms require:

- readiness;
- safeguards;
- accountability;
- oversight;
- transition protections;
- outcome monitoring; and
- mechanisms to identify and respond to harm.

The Alliance is concerned that the Bill seeks to progress significant legislative powers ahead of many of the safeguards, implementation mechanisms and supporting systems intended to accompany them.

Some elements of the Bill may be capable of amendment and improvement. Other elements—including broad enabling powers, insufficient safeguards, unsupported implementation assumptions and reliance on systems that have not yet been demonstrated to exist or operate effectively—are not appropriate in their current form and should not proceed.

The question before Parliament is not whether reform should occur.

The question is whether Parliament can be confident that:

- systems are ready;
- safeguards are in place;
- accountability is clear;
- harms can be identified and addressed;
- cumulative impacts have been considered; and
- outcomes will improve.

The Alliance believes reform should proceed only when Government can demonstrate the characteristics of a system that works:

- ready;
- accountable;
- coordinated;
- measurable;
- transparent;
- safe; and
- focused on outcomes.

The Alliance further submits that sustainability should be measured not only by what reforms save, but also by what they prevent and what they make possible.

Ultimately, systems should be judged not by what they promise, but by whether they work for the people who rely on them.

For this reason, the Alliance's central message to Parliament is simple:

**Readiness should precede reliance.**

**Oversight should precede reliance.**

**And reforms should improve outcomes before they reduce supports**

## Attachment A – Detailed Legislative Analysis and Autism-Specific Safeguards

The Australian Autism Alliance supports reform that improves outcomes, strengthens safeguards and ensures the long-term sustainability of the NDIS.

However, the Alliance is concerned that several provisions within the Bill may create significant risks for Autistic people and their families if enacted without removal or substantial amendment.

This attachment identifies:

- the relevant reform measure;
- the Alliance's position;
- autism-specific risks; and
- required safeguards.

No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
1	<b>Permanence and Access Requirements</b>	<b>Do not support</b> in current form.	<p>Creates unacceptable risks for Autistic people and families.</p> <p>Autism may be reframed through a treatment-compliance lens rather than a support, accommodation, participation and inclusion framework. This risks inappropriate access restrictions and loss of supports.</p> <p>This also risks delaying support during critical developmental periods and may reduce future participation, independence and wellbeing. <b>Effectively a loss of life chances.</b></p>	<ul style="list-style-type: none"> <li>• Retain recognition of autism as a lifelong neurodevelopmental condition.</li> <li>• Preserve access pathways consistent with participation, inclusion and support needs objectives.</li> <li>• Access to disability supports does not depend upon exhaustion of treatment options, therapies, educational interventions, family supports or mainstream services (to maintain the integrity of best practice regarding early intervention).</li> </ul>
2	<b>Other Available Support Systems (s25B)</b>	<b>Removal</b> of Schedule 1, Part 9 of the Bill, which includes the removal of the proposed rule-making power under section 25B.	<p>High risk of support exclusion based on theoretical availability of supports that are unavailable, inaccessible, unaffordable or not autism-capable.</p> <p>Participants may be directed to theoretical alternative supports and required to</p>	<ul style="list-style-type: none"> <li>• Remove Schedule 1, Part 9 of the Bill including the proposed s25B rule-making power.</li> <li>• No participant should lose access to supports based on</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
			<p>pursue multiple systems before receiving disability supports.</p> <p>Besides the human impact while there may be short-term saving there will be increased costs in the long terms and poorer outcomes.</p>	<p>theoretical system responsibility or future service availability.</p> <ul style="list-style-type: none"> <li>Participants should not be required to exhaust other systems before disability-related support needs can be recognised and addressed (particularly in the context of early intervention)</li> </ul>
3	<p><b>Functional Assessment Framework Readiness</b></p>	<p><b>Oppose.</b> Do not support implementation of a functional assessment framework. Implementation cannot proceed until methodology, safeguards, workforce capability, implementation arrangements and validation have been publicly released, independently clinically evaluated and subjected to parliamentary scrutiny.</p>	<p>Parliament is being asked to approve a future assessment framework that does not exist and therefore before methodology, clinical validation, workforce capability requirements and implementation safeguards have been demonstrated</p>	<ul style="list-style-type: none"> <li>Publication of methodology;</li> <li>Independent clinical validation;</li> <li>Disability cohort testing.</li> <li>autism-specific testing;</li> <li>workforce capability assessment;</li> <li>independent implementation review;</li> <li>parliamentary scrutiny prior to implementation</li> </ul>
4	<p><b>Functional Capacity Definition : assessed without supports/environment</b></p>	<p><b>Oppose.</b> Do not support as it is unacceptable if assessed in artificial unsupported conditions.</p>	<p>Functional capacity is highly dependent on environmental context, communication supports, executive functioning demands, sensory environments, support scaffolding and personal circumstances. Assessing functioning in isolation risks underestimating support needs.</p> <p>Assessments conducted outside real-world environments risk:</p> <ul style="list-style-type: none"> <li>overestimating capability;</li> <li>hidden disability underestimating need;</li> <li>masking being misinterpreted as independence;</li> <li>overlooking burnout as its invisible;</li> </ul>	<p>Assessment approaches must include:</p> <ul style="list-style-type: none"> <li>real-world environments and circumstances such as the WHO International Classification of Functioning, Disability and Health (ICF), which recognises that disability and functioning arise through interaction</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
			<ul style="list-style-type: none"> <li>• failing to recognise fluctuating support requirements;</li> <li>• overlooking cumulative fatigue;</li> <li>• family scaffolding being ignored;</li> </ul> <p>Risks created:</p> <ul style="list-style-type: none"> <li>• exclusion from access;</li> <li>• underfunding;</li> <li>• delayed support until crisis;</li> <li>• increased hospitalisation;</li> <li>• school exclusion;</li> <li>• family collapse.</li> </ul>	<ul style="list-style-type: none"> <li>• between impairments, environmental factors and supports;</li> <li>• cumulative fatigue/burnout consideration;</li> <li>• masking/camouflaging consideration;</li> <li>• support scaffolding recognition;</li> <li>• environmental and sensory impacts;</li> <li>• fluctuating presentation recognition.</li> </ul> <p>Additional legal safeguard Require:</p> <ul style="list-style-type: none"> <li>• publication of assessment methodology;</li> <li>• inter-rater reliability testing;</li> <li>• cohort validation for autism/psychosocial disability;</li> <li>• access to raw assessment outputs;</li> <li>• review rights.</li> </ul> <p>Alternative approach Use:</p> <ul style="list-style-type: none"> <li>• supported functioning;</li> <li>• sustainable participation; and</li> <li>• real-world functioning over time rather than unsupported snapshot performance.</li> </ul>
5	<b>Autism-Specific Assessment Safeguards</b>	<b>Requires autism-specific safeguards</b> to be embedded in assessment design, implementation,	Autism may be misunderstood where assessments fail to recognise masking, Autistic burnout, communication differences, executive functioning challenges, sensory impacts, support scaffolding and co-occurring conditions.	<ul style="list-style-type: none"> <li>• Autism-specific validation.</li> <li>• Autism representation on advisory and technical bodies.</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
		governance and evaluation and oppose approaches that fail to recognise the diversity of Autistic experience.	Functioning may appear significantly different across environments and over time.	<ul style="list-style-type: none"> <li>• Lived experience plurality.</li> <li>• Recognition of non-medical expertise. Recognition of masking, burnout and co-occurring conditions.</li> </ul>
6	<b>Directly Arising Test</b>	<b>Do not support</b> the current wording. This is an unacceptable risk. It is too narrow and mechanistic.	<p>The “directly arising” test risks fragmenting support needs and excluding legitimate supports:</p> <ul style="list-style-type: none"> <li>• anxiety-linked supports;</li> <li>• sensory regulation;</li> <li>• behavioural supports;</li> <li>• social communication supports;</li> <li>• executive functioning supports;</li> <li>• trauma-related impacts; and</li> <li>• environmental demands.</li> </ul> <p>Autism support needs are often:</p> <ul style="list-style-type: none"> <li>• cumulative;</li> <li>• intersecting;</li> <li>• relational; and</li> <li>• inseparable from co-occurring conditions.</li> </ul> <p>The risks created are:</p> <ul style="list-style-type: none"> <li>• fragmented supports;</li> <li>• disputes over causation;</li> <li>• increased tribunal burden;</li> <li>• artificial separation of co-occurring conditions</li> </ul>	<p>Supports should remain fundable where:</p> <ul style="list-style-type: none"> <li>• disability is a substantial contributing factor;</li> <li>• supports prevent deterioration;</li> <li>• supports maintain participation and safety.</li> </ul> <p>Alternative wording Replace: “directly arising” with: “substantially related to” or “materially connected to”.</p> <p>Replace: "directly arising" with broader wording such as "substantially related to" or "materially connected to"</p>
7	<b>Reasonable and Necessary - Proposed s34(1A)</b>	<b>Removal</b> of proposed subsection 34(1A).  Unacceptable in current form. 34(1B) and (1C) <b>requires qualification.</b>	<p>The provision risks creating a narrower interpretation of disability-related support needs, may undermine whole-of-person approaches and reduce individualisation in practice.</p> <p>Support decisions need to reflect a person's overall circumstances rather than artificial segmentation of support needs.</p>	<p>Remove provision.</p> <p>Additional safeguards:</p> <ul style="list-style-type: none"> <li>• independent human rights assessment;</li> <li>• safeguarding assessment;</li> <li>• disability impact assessment;</li> <li>• public transparency regarding impacts;</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
				<ul style="list-style-type: none"> <li>• post-implementation review;</li> <li>• participant notification;</li> <li>• written reasons;</li> <li>• merits review rights;</li> <li>• parliamentary scrutiny</li> </ul>
8	<b>Reasonable and Necessary (34(1B)-(1C))</b>	<b>Require further safeguards.</b>	May contribute to cumulative narrowing of supports and reduced individualisation.	<ul style="list-style-type: none"> <li>• Public guidance</li> <li>• Decision-making should remain transparent</li> <li>• Independent review rights.</li> <li>• Monitoring of cumulative impacts.</li> <li>• Preservation of review rights</li> </ul>
9	<b>Reasonable and Necessary (34(1E)-(1F))</b>	<b>Remove</b> from the Bill as the current Supports Rules provide an appropriate structure for the 'effective and beneficial' consideration.	Narrow effectiveness tests may disadvantage preventative, developmental and participation-focused supports.	Remove the provisions or substantially broaden interpretation of effectiveness.
10	<b>Family Capacity and Informal Supports (34(1G),34(1H), 34(1J), 34(1K))</b>	<p><b>Oppose</b> assumptions that family members can provide unlimited, ongoing or substitute support in place of funded supports.</p> <p><b>34(1H) requires removal.</b></p> <p><b>Rest requires substantial amendment.</b></p>	<p>Risks creating an overly restrictive interpretation of support need, treating informal supports as unlimited and permanent, inappropriate thresholds and may fail to recognise legitimate disability-related support requirements with underestimating cumulative caring needs, co-regulation, supervision and emotional support needs, sibling impacts; and ageing carers.</p> <p>As a result risks workforce withdrawal, burnout, family breakdown, financial stress and future support failures.</p> <p>Parents should not be expected to become quasi:</p> <ul style="list-style-type: none"> <li>• therapists;</li> <li>• support coordinators;</li> <li>• case managers;</li> <li>• book keepers/ contract managers;</li> <li>• system navigators.</li> </ul>	<p>Family capacity should never be presumed. Parents should be supported to be parents.</p> <p>The legislation should recognise the role of supports in maintaining sustainable family and caring arrangements and informal supports should not be treated as a substitute for funded supports in a number of circumstances.</p> <p>So the legislation or supporting rules requires explicit</p>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
			<p>Autistic children frequently require substantially greater support than same-age peers across:</p> <ul style="list-style-type: none"> <li>• communication;</li> <li>• regulation;</li> <li>• executive functioning;</li> <li>• participation;</li> <li>• safety;</li> <li>• community engagement.</li> </ul>	<p>consideration of the following or related:</p> <ul style="list-style-type: none"> <li>• willingness;</li> <li>• exposes to harm;</li> <li>• sustainability;</li> <li>• workforce participation impacts;</li> <li>• health impacts;</li> <li>• family wellbeing/ burn out/ breakdown;</li> <li>• financial impact;</li> <li>• future caring capacity;</li> <li>• ageing carers;</li> <li>• sibling impacts;</li> <li>• cumulative caring needs;</li> <li>• co-regulation needs;</li> <li>• supervision needs;</li> <li>• emotional needs;</li> <li>• changed circumstances including illness, death</li> <li>• reliance on unsupported caring arrangements to compensate for failures in formal service systems; and</li> <li>• long-term viability of caring arrangements particularly of the appropriateness of expecting a particular individual to provide supports.</li> </ul> <p>Ensure supports are not excluded merely because they improve</p>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
				<p>family functioning, reduce distress or maintain stability within the home environment.</p> <p>The sustainability of caring arrangements should be regularly reviewed over time.</p> <p>Requires autism-specific safeguards to be embedded in assessment design, implementation, governance and evaluation.</p>
11	<p><b>Support Determinations and Support Caps</b></p>	<p><b>Oppose.</b> Unacceptable in current form. Cannot have broad or Scheme-wide application and there is no independent oversight/ transparency or resolution pathways.</p>	<p>Fundamentally inconsistent with individualised support principles. Risks scheme-wide reductions, loss of individualisation, erosion of choice and control, inequitable outcomes and harm for those with essential supports for health, safety and isolation.</p> <p>Concerned about:</p> <ul style="list-style-type: none"> <li>• insufficient parliamentary scrutiny;</li> <li>• reduced transparency;</li> <li>• scheme-wide impacts;</li> <li>• lack of right to review</li> <li>• inability to account for individual circumstances</li> <li>• ability to make harmful decisions with no consequences</li> </ul>	<ul style="list-style-type: none"> <li>• Support determinations through Category A Rules process</li> <li>• Human rights assessment</li> <li>• Safeguarding assessment.</li> <li>• Independent disability impact assessment.</li> <li>*Assessments provide for immediate overrides</li> <li>• Public transparency regarding anticipated impacts.</li> <li>• Disability-led consultation</li> <li>• Participant notification.</li> <li>• No harm certification</li> <li>• System Readiness Certification</li> <li>• Written reasons with impact and financial analysis.</li> <li>• Merits review rights.</li> <li>• Mandatory post-implementation review to assess</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
				<p>unintended harm and system consequences.</p> <ul style="list-style-type: none"> <li>• Parliamentary scrutiny.</li> <li>• Resolution pathways</li> <li>• Consequences for those making negligent or lack of good faith/ reasonable and necessary decisions resulting in harm, safety or longer term unfavourable consequences.</li> </ul>
12	<b>Reassessments and Review Pathways</b>	<b>Requires amendment.</b>	<p>Support needs may change because of:</p> <ul style="list-style-type: none"> <li>• Autistic burnout;</li> <li>• exclusion including school exclusion;</li> <li>• masking;</li> <li>• sensory overload</li> <li>• loss of supports including family collapse and ageing carers;</li> <li>• mental health deterioration;</li> <li>• cumulative deterioration rather than a single event;</li> <li>• delayed presentation of distress;</li> <li>• loss of informal supports.</li> </ul> <p>These changes may be foreseeable but does not make them less serious</p>	<ul style="list-style-type: none"> <li>• Remove "unanticipated" requirement</li> <li>• Recognise masking, delayed presentation of distress, cumulative deterioration and Autistic burnout.</li> <li>• Urgent reassessment pathways for escalation.</li> <li>• Reinstate deemed refusal provisions.</li> <li>• Crisis reassessment mechanisms</li> <li>• Reinstate deemed refusal provisions</li> <li>• Temporary stabilisation funding</li> </ul>
13	<b>Review Rights and Procedural Fairness</b>	<b>Oppose</b> removal of legislative protections that support individualisation, participation, choice and control, right to review unless equivalent protections are	Reduced review rights increase risk of incorrect decisions remaining uncorrected and disproportionately affect participants facing communication or advocacy barriers.	<ul style="list-style-type: none"> <li>• Independent review rights to challenge decisions affecting eligibility, supports, funding, reassessments and support determinations.</li> <li>• Access to reports, evidence used and</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
		explicitly preserved elsewhere in the Act.  <b>Requires</b> strong review rights and required safeguards are essential.		understanding of reasons. • Receive draft reports
14	<b>Repeal of Section 31 Principles</b>	<b>Oppose</b> removal unless equivalent protections are explicitly preserved elsewhere in the Act.	Weakens legislative recognition of individualisation, participant direction, participation, choice and control, tailored supports and community inclusion.	Retain Section 31 principles or explicitly preserve equivalent protections elsewhere in the Act.
15	<b>Foundational Supports Transition</b>	<b>Support</b> foundational supports <b>only with stronger safeguards</b> . Do not support transition or removing supports before readiness based on assumptions that future systems will operate effectively. Cannot proceed until demonstrated.	Participants may lose supports before alternatives exist. Risk of service gaps with loss of support before alternatives exist and cost shifting. There is concern of mainstream system reliance, criticality of early intervention supports and system readiness. Government has not demonstrated: <ul style="list-style-type: none"> <li>• workforce readiness;</li> <li>• service availability;</li> <li>• waitlist capacity;</li> <li>• autism capability.</li> </ul>	<ul style="list-style-type: none"> <li>• No-Gap Transition Guarantee. Supports should not be removed until replacement systems are: <ul style="list-style-type: none"> <li>•operational;</li> <li>•accessible;</li> <li>• affordable</li> <li>•sustainable;</li> <li>• workforce-ready</li> <li>• independently evaluated; and</li> <li>•have accepted responsibility</li> </ul> </li> <li>• Independent readiness assessment.</li> <li>• Demonstrated availability, accessibility and workforce capacity before transition.</li> </ul>
16	<b>Navigation, Warm Referrals and No Wrong Door</b>	<b>Support only with stronger safeguards</b>	Autistic people and families may be left navigating fragmented systems without accountability due to mainstream interfaces, systems that are broken and lack of system readiness  Participants should not bear responsibility for resolving disputes between: <ul style="list-style-type: none"> <li>• NDIS;</li> <li>• education;</li> <li>• health;</li> <li>• housing;</li> <li>• justice;</li> </ul>	<ul style="list-style-type: none"> <li>• Adequate./ Timely Navigation functions,</li> <li>• Warm referrals/ independent advocacy accessibility,</li> <li>• No Wrong Door accountability.</li> <li>• Escalation pathways.</li> <li>• Joint resolution mechanisms.</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
			<ul style="list-style-type: none"> <li>community services.</li> </ul>	<ul style="list-style-type: none"> <li>Refer Australian Autism Alliance Thriving Kids submission</li> </ul>
17	<b>Community Participation Supports</b>	<p><b>Strongly support</b> the availability, accessibility and affordability of community participation supports <b>but do not support</b> removal of availability of individualised supports due to individual differences and choice and control.</p>	<p>Community participation is safeguarding infrastructure.</p> <p>It protects against:</p> <ul style="list-style-type: none"> <li>isolation;</li> <li>abuse;</li> <li>exploitation;</li> <li>mental ill-health;</li> <li>crisis escalation.</li> </ul> <p>Social isolation is one of the strongest predictors of deteriorating mental health, crisis escalation, vulnerability to abuse and reduced participation.</p> <p>It supports belonging, confidence and participation</p> <p>Community participation should not be treated as discretionary expenditure.</p>	<ul style="list-style-type: none"> <li>Preserve community participation supports.</li> <li>Recognise participation as safeguarding infrastructure rather than discretionary expenditure.</li> </ul>
18	<b>Outcome Measurement and Public Reporting</b>	<p><b>Oppose</b> implementation of major reforms without mechanisms to identify, monitor and respond to emerging harms.</p> <p>Major gap in current reform architecture.</p> <p><b>Requires significant safeguard strengthening.</b></p> <p>Outcome monitoring should be established before implementation.</p> <p>Support public reporting of participant outcomes.</p>	<p>Harms may emerge without being identified or addressed. Reforms may unintentionally increase exclusion, crisis intervention, cost shifting, family stress and future costs including service demand, without visibility.</p> <p>The Alliance supports reform where Government can demonstrate:</p> <ul style="list-style-type: none"> <li>systems are ready;</li> <li>supports exist;</li> <li>accountability is clear;</li> <li>harms can be identified;</li> <li>outcomes are measured; and</li> <li>people are not left to navigate system failures alone.</li> </ul>	<ul style="list-style-type: none"> <li>Monitor and public reporting on outcomes including participation, education, employment, wellbeing and family sustainability, school exclusion, hospitalisation, homelessness, restrictive practices, family breakdown, caregiver burnout, suicidality, justice system contact and cost shifting between systems.</li> <li>Realtime resolution pathways</li> <li>Other safeguards/amendments identified in this table</li> </ul>



No	Legislative Issue	Alliance Position	Autism-Specific Risks and Impacts	Required Safeguards / Amendments
19	<b>Automated Decision Making</b>	<b>Support only with strong safeguards.</b>	Hidden disability, masking and communication differences may be misinterpreted. Risk of algorithmic bias and reduced transparency.	<ul style="list-style-type: none"> <li>• Human oversight.</li> <li>• Bias auditing.</li> <li>• Transparency.</li> <li>• Explainability.</li> <li>• Review rights for all substantive decisions affecting eligibility, supports or funding.</li> </ul>
20	<b>Administrative Burden and Accessibility</b>	<b>Requires amendment</b>	<p>Reforms should not increase administrative burden on participants, families and carers without clear evidence of benefit.</p> <p>Executive functioning differences, communication differences, cognitive overload, paperwork requirements, repeated evidence requests and complex administrative processes may create barriers to accessing or maintaining supports.</p> <p>Increased administrative burden and compliance requirements may disproportionately impact Autistic people, families and carers, small providers, sole practitioners, regional providers.</p> <p>Hence administrative processes should be proportionate, accessible, proportionate and disability-responsive.</p>	<ul style="list-style-type: none"> <li>• Accessible processes.</li> <li>• Plain language communications.</li> <li>• Reduced duplication of evidence requests.</li> <li>• Supported decision-making.</li> <li>• Assistance with navigation and reviews.</li> <li>• Reasonable adjustments throughout administrative processes.</li> <li>• Monitoring of participant administrative burden and unintended impacts</li> </ul>

Attachment A should be read alongside the Alliance's Systems That Work Readiness Index (Attachment B), Systems That Work Accountability Index (Attachment C), and Comparative Lessons from the Disability Royal Commission, Independent NDIS Review, National Autism Strategy and Veterans Reform (Attachment D).

The Alliance recommends that the provisions identified above be amended, strengthened or removed consistent with the positions and safeguards outlined in this Attachment.



# Attachment B – Systems That Work Readiness Index

## SYSTEMS THAT WORK READINESS INDEX

### IF SYSTEMS AREN'T READY, REFORM ISN'T READY.

#### 10 Point System Readiness Index

The Australian Autism Alliance calls on the Government to apply the following 10 Point System Test to every reform measure.



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### CUMULATIVE IMPACT LENS

People experience reforms cumulatively — Not one policy change at a time.

The cumulative impact of reform must be assessed - because people experience systems collectively, not in isolation. The combined impact of multiple reforms, reassessments, transitions and support changes on the same person must be considered when assessing reform readiness and safety.

<b>1</b>	<b>OUTCOMES TEST</b> Does this improve real outcomes for Autistic Australians and the autism community?	Not just activity, compliance or cost reduction Safety Health & wellbeing Participation Independence Long term cumulative participation outcomes assessed	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready
<b>2</b>	<b>NO HARM TEST</b> Will anyone be worse off because of this reform?	Loss of support Reduced access Increased risk Cumulative Impacts considered	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes to any of these, the proposed reform is not ready
<b>3</b>	<b>SYSTEM READINESS TEST</b> Are the receiving systems actually ready?	Workforce capability Service availability Infrastructure	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Not just assumed readiness, this must be demonstrated.
<b>4</b>	<b>NO-GAP TEST</b> Is there guaranteed continuity of support?	No service gaps No waiting periods No "talking between systems" Interaction between multiple systems assessed	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes to any of these, the proposed reform is not ready.
<b>5</b>	<b>ACCOUNTABILITY TEST</b> Is responsibility clear across governments?	Who is responsible Who is accountable What happens if it fails Responsibility for cumulative system failures is clear	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'I don't know' to any of these, the proposed reform is not ready.
<b>6</b>	<b>CONTROL PLACEMENT TEST</b> Are controls placed where risks sit?	Provider-level controls System-level controls Controls do not include participant-level restrictions.	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready.
<b>7</b>	<b>WORKFORCE CAPABILITY TEST</b> Do frontline workers have the skills to deliver this?	Autism capability Decision-making ability Extends beyond "not just compliance training"	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready.
<b>8</b>	<b>DECISION QUALITY TEST</b> Will decisions be consistent, fair and correct first time?	Clear criteria Transparency Review/correction pathways	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready.
<b>9</b>	<b>VALUE &amp; COST TEST</b> Does this reduce waste without reducing necessary support?	Targets leakage Avoids cost shifting Considers downstream costs	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready.
<b>10</b>	<b>MEASUREMENT TEST</b> Will success be measured publicly and transparently?	Clear metrics Regular reporting Outcome-based	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If no to any of these, the proposed reform is not ready.

### READINESS IS THE FIRST TEST. ACCOUNTABILITY IS THE SECOND.

The Accountability Index asks whether reform can safely continue. Both tests must be passed.

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# Attachment C – Systems That Work Accountability Index

## SYSTEMS THAT WORK ACCOUNTABILITY INDEX

### IF GOVERNMENT CAN'T IDENTIFY HARM, IT CAN'T PREVENT IT.

#### 10 Point Reform Accountability Index

The Australian Autism Alliance calls on Governments to apply the following Accountability Test to every major reform measure.

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### CUMULATIVE IMPACT LENS & ACCOUNTABILITY LENS

People experience the consequences of reforms cumulatively — not one policy change at a time.

Government accountability should therefore assess:

- Combined Impacts
- Interactions between systems
- Unintended consequences
- Cumulative outcomes for people, families and communities

The cumulative impact of reform must be monitored because people experience system changes collectively, not in isolation.

Accountability must extend beyond individual reforms to include how multiple reforms interact and affect the same person, family or community over time.

<b>1</b>	<b>OWNERSHIP TEST</b> Who owns the outcome?	Responsible agency identified Accountable decision-maker identified Escalation pathway identified No "wrong door" accountability	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If I don't know who owns the outcome, the reform is not accountable.
<b>2</b>	<b>WARM TRANSITION TEST</b> Will Government complete the handover?	Warm referral required Receiving system accepts responsibility Support confirmed available Transition actively managed	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Participants should not be expected to navigate system failures alone.
<b>3</b>	<b>NO HARM MONITORING TEST</b> How will Government know if people are being harmed?	Unmet need Safeguarding Incidents Hospital presentations Homelessness Family breakdown	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If harm cannot be identified, it cannot be prevented.
<b>4</b>	<b>EARLY WARNING TEST</b> Will risks be identified before crisis occurs?	Waiting lists monitored Referral refusals monitored Workforce shortages monitored Service gaps monitored Access delays monitored	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Early warning indicators prevent predictable failure.
<b>5</b>	<b>REAL-TIME RESOLUTION TEST</b> Can problems be fixed quickly?	Local resolution pathway Joint State/Commonwealth escalation Advocacy access available Timely review pathway	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	People should not wait years while systems argue.
<b>6</b>	<b>REVERSAL TEST</b> Can Government correct course?	Support restoration pathway Emergency review process Corrective action powers Reform adjustment mechanism	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	If reforms create harm, there must be a way back.
<b>7</b>	<b>TRANSPARENCY TEST</b> Can the public see whether reform is working?	Public reporting Outcome reporting Harm reporting Progress reporting	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Transparency drives accountability.
<b>8</b>	<b>INDEPENDENT OVERSIGHT TEST</b> Who is independently monitoring reform?	Independent oversight body Independent evaluation Independent review Reporting to Parliament	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Governments should not be the sole judges of their own success.
<b>9</b>	<b>EQUITY TEST</b> Who is most affected?	First Nations peoples CALD communities Regional communities Women and girls Complex support needs	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reforms should not widen existing inequities.
<b>10</b>	<b>LEARNING TEST</b> Are reforms improving over time?	Pilot before scale Continuous improvement Six-monthly review Public lessons learned	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	The goal is learning and improvement, not simply implementation.

**READINESS IS THE FIRST TEST. ACCOUNTABILITY IS THE SECOND.**  
 The Readiness Index asks whether reform can safely commence. Both tests must be passed.

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## Attachment D – Comparative Lessons from the Disability Royal Commission, NDIS Review and Veterans Affairs Reform

Below is a DRC–NDIS Review–National Autism Strategy–Veterans–comparison table demonstrating why oversight, public reporting, escalation and accountability must be established **before** reliance on new systems is expected.

Table 2 provides a comparison of lessons of what successive inquiries have told Government demonstrating that the Alliance’s recommendations are based on the same lesson across all major reform agendas.

Table 3 provides a comparison of what was recommended versus what is currently visible in the NDIS Legislation.

### The Critical Difference

The Alliance notes that Government’s response to the Royal Commission into Defence and Veteran Suicide included:

- implementation architecture;
- national oversight arrangements;
- monitoring;
- public reporting;
- escalation pathways;
- accountability mechanisms;
- whole-of-government coordination.

These mechanisms recognise that reform cannot simply assume systems will work. They create structures capable of identifying problems and correcting them when they occur.

By contrast, the proposed NDIS reforms rely heavily upon:

- foundational supports;
- health systems;
- education systems;
- housing systems;
- community supports;

without equivalent implementation architecture being clearly established.

The Alliance is concerned that people with disability are being asked to rely on systems before equivalent safeguards, oversight and accountability arrangements are in place.

Hence the question is why the implementation architecture considered necessary for Veterans Affairs reform has not yet been clearly established for disability reform despite successive inquiries identifying many of the same systemic risks?

**Oversight should precede reliance.**



Common System Failure	Disability Royal Commission	NDIS Review	National Autism Strategy	Veterans Royal Commission Response	Current Concern with NDIS Amendment Bill
People fall through gaps between systems	Major finding	Major finding	Recognises need for coordinated systems	Whole-of-government implementation oversight established	Increased reliance on multiple systems without equivalent oversight
Poor coordination between services	Major finding	Major finding	Priority area	National implementation architecture established	No clear implementation architecture
Lack of accountability when systems fail	Major finding	Safeguards and monitoring recommended	Accountability and outcomes focus	National Commission and oversight arrangements established	Unclear ownership of outcomes
Delayed identification of harm	Major finding	Foundational supports and navigation proposed	Early identification and support emphasised	Monitoring and reporting mechanisms established	Limited harm monitoring mechanisms visible
Fragmented supports	Major finding	Navigators recommended	Lifespan coordination focus	Integrated implementation response	Reform progressing before foundational supports are operational
Reliance on individuals to navigate systems	Major finding	Stronger monitoring proposed	Better system navigation identified	Coordinated government response	Risk remains on participants and families
Lack of transparency and public reporting	Major finding	Major issue	Data and accountability commitments	Public reporting built into response	Limited implementation reporting arrangements
Workforce pressures	Identified as systemic issue	Early intervention and foundational supports emphasised	Major issue	Workforce reforms included in implementation response	Same workforce expected to support reforms without demonstrated readiness
Prevention and early intervention failures	Identified repeatedly	Monitoring and evaluation recommended	Early support central objective	Prevention focus embedded	Risk of waiting for deterioration before support
Systemic harms become visible too late	Major finding		Outcome tracking emphasised	Escalation pathways established	No equivalent escalation framework visible

Table 2: Comparative Lessons: What Successive Inquiries Have Told Government



Reform Element	DRC	NDIS Review	Veterans Response	Current NDIS Reform Environment
Independent oversight	Required	Recommended	Established	Unclear
Public reporting	Required	Recommended	Established	Limited
Harm monitoring	Required	Recommended	Established	Unclear
Escalation pathways	Required	Recommended	Established	Unclear
Whole-of-government coordination	Required	Recommended	Established	Unclear
Navigation supports	Required	Recommended	Implemented through coordination architecture	Not yet fully operational
Transition safeguards	Required	Recommended	Built into implementation	Still developing
Readiness before rollout	Implied	Strongly recommended	Implementation-first approach	Reform and implementation occurring simultaneously
Accountability for outcomes	Required	Recommended	Clear oversight arrangements	Diffuse responsibility

Table 3: Comparative Lessons: What Was Recommended vs What Is Currently Visible