1 June 2026

QIDAN
Queensland Independent Disability Advocacy Network

Committee Secretary
Senate Standing Committee on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Committee Secretary,

NDIS Amendment (Securing the NDIS for Future Generations) Bill 2026

The Queensland Independent Disability Advocacy Network (QIDAN) welcomes the opportunity to provide feedback on the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026 (the Bill). We are, however, disappointed by the inadequate 2-week period that has been provided for submissions on such a technical and extensive legislative instrument that, if accepted, has the potential to have profound impact on hundreds of thousands of Australians with disability.

Australians with disability have been extensively consulted in recent years through the Royal Commission into Violence, Abuse, Neglect and Exploitation of people with disability (the DRC) and the Independent NDIS Review (the NDIS Review). By sharing their stories, experiences and ideas, people with disability have gone through trauma and memories they wish they did not have to revisit. But they did, in the hope that, learning from the past, better rules and laws would offer an improved disability ecosystem. The Federal Government too has invested a lot of time and resources in these reforms and processes, only to, in QIDAN's view, continuously disregard recommendations and findings made. The drafting of this Bill is a clear example of that.[1]

It is especially disappointing that such a significant piece of legislation has come before the implementation of foundational supports, despite the recommendations of the NDIS

[1] Despite repeated statements in the Explanatory Memorandum that is draws on these key independent reports.

Review.[2] This sequencing will only increase the widening gap in supports and subject people with disability to further risk of violence, abuse, neglect and exploitation, again progressing reforms in the opposite direction envisioned by the DRC and the NDIS Review. We are calling upon the Government to urgently pause this Bill as a matter of priority and undertake meaningfully consultation with people with disability, representative organisations, legal experts and states and territories. In its current form, the Bill departs from the intent and direction of both the NDIS Review and the DRC. A pause is necessary to address the following critical issues:

1. Introduction of a de facto means test through "appropriate treatment" that disregards cost, location and safety. Forcing unsafe pathways, increasing restrictive practices, and denying equitable access to the NDIS.
2. Unclear and punitive revocation powers based on undefined "reasonable attempts" to contact individuals (proposed s 30(1A)).
3. Unconditional ministerial powers without sufficient statutory constraints, parliamentary oversight, or individual review rights.
4. Erosion of the whole of person approach risking fragmented supports.
5. Ableist test on supports for children.
6. Participants who seek a plan reassessment are often in crisis and need urgent support, not more bureaucratic and administrative processes
7. Use of automated decision making must be explicitly aligned with the safeguards and precautionary principles identified by the Robodebt Royal Commission
8. Absence of a coherent human rights framework to safeguard and promote fundamental human rights, leaving significant gaps in protection of people with disability without a Federal Human Rights Act.

QIDAN endorses Queensland Advocacy for Inclusion's (QAI) recommendations and technical analysis of the Bill[3] as well as the community legal sector statement.[4]

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[2] NDIS Review (2023), 'Working together to deliver the NDIS', p 87 https://www.ndisreview.gov.au/sites/default/files/resource/download/working-together-ndis-review-final-report.pdf.

[3] https://qai.org.au/submissions/.

[4] https://clcs.org.au/sector-statement-ndis-bill/.

The NDIS principles

The NDIS is instrumental to Australia's efforts to meet its obligations under the Convention on the Rights of People with Disability (CRPD).[5] The National Disability Insurance Scheme Act 2013 (the Act) reflects this by embedding core principles drawn from the CRPD. However, this Bill departs from that foundation, weakening the human rights framework that underpins the scheme and removing key legislative safeguards.

We are particularly concerned with the removal of core NDIS principles currently set out in s 31 of the Act. Despite the Explanatory Memorandum stating these have been added elsewhere, they have not been fully replicated. Critical elements including participant-directed individualised plans, inclusion and participation in the community, and maximising choice, control and independence are absent from the proposed provisions in s 17A. Their removal is not explained or justified, and risks shifting the scheme away from a rights-based framework towards a more constrained and administrative model, inconsistent with both the CRPD and the intent of the NDIS Review and the Disability Royal Commission.

We are also concerned about the operation of s 17B(3), which places responsibility for "day-to-day living costs" on participants. In the context of the proposed amendments, this risks reclassifying essential disability-related supports, such as therapy, assistance animals, and specialised diets, as ordinary expenses.

These supports are not comparable to general living costs. They are necessary to prevent health deterioration, reduce risk, and enable participation due to a person's disability. Treating them as out-of-pocket expenses effectively shifts the cost of disability back onto individuals, increasing the "disability tax" and widening existing inequities.

New access criteria – introducing reversed means-testing

This Bill fails to implement the broader intent of the NDIS Review in relation to access. Action 3.9 recommends legislative changes to clarify access[6] and strengthen the

[5] s 3(1)(a) of the Act.

[6] NDIS Review, 'Working together to deliver the NDIS', recommendation 3.9, https://www.ndisreview.gov.au/sites/default/files/resource/download/working-together-ndis-review-final-report.pdf.

permanence criteria, following *NDIA v Davis*[7], while ensuring that treatment outside the NDIS is available and affordable. The Explanatory Memorandum states the Bill draws on key independent reports, including the NDIS Review, it does not demonstrate how these amendments reflect the required engagement with people with disability, representative organisations, and legal experts, [8] nor how they meet the condition that treatment be genuinely accessible.

Instead, the Bill introduces a significantly narrower test. Proposed sections 24(5) and 25(1B), and 25A require a person to undertake "all appropriate treatment" before an impairment can be considered permanent, while explicitly allowing treatment to be deemed appropriate regardless of whether it is accessible due to cost, location, or personal circumstances.

This fundamentally departs from the intent of the NDIS Review. While we acknowledge concerns arising from decisions, such as *Davis*, the Bill fails to address the key safeguard identified by the NDIS Review: the need for a simultaneous response that ensures there is greater availability and affordability of treatments".[9]

In practice, this will exclude people who have permanent disability but cannot access or afford treatment or obtain additional evidence. In QIDAN's experience, this will disproportionately affect people on low incomes, including those on the Disability Support Pension, as well as those in regional, rural and remote communities.

For example, a person with psychosocial disability may be required to undertake Eye Movement Desensitization and Reprocessing (EDMR) therapy. Under the current framework, where that treatment is unaffordable, it is not considered "available", and the person may meet the permanence criteria. Under the proposed amendments, that same

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[7] *National Disability Insurance Agency v Davis* [2022] FCA 1002; NDIS Review, 'Working together to deliver the NDIS – supporting analysis', pg. 248, https://www.ndisreview.gov.au/sites/default/files/resource/download/NDIS-Review-Supporting-Analysis.pdf.

[8] *National Disability Insurance Agency v Davis* [2022] FCA 1002; NDIS Review, 'Working together to deliver the NDIS – supporting analysis', pg. 248, https://www.ndisreview.gov.au/sites/default/files/resource/download/NDIS-Review-Supporting-Analysis.pdf.

[9] NDIS Review, 'Working together to deliver the NDIS – supporting analysis', pg. 233, https://www.ndisreview.gov.au/sites/default/files/resource/download/NDIS-Review-Supporting-Analysis.pdf.

person would be required to undertake the treatment, despite it being financially out of reach, in order to qualify.

This approach also risks reinforcing an overly medicalised model of disability. Policies that prioritise clinical "treatment compliance" can drive overmedicalisation and overmedication of both children and adults, particularly where medical practitioners remain the primary gatekeepers of access. This not only undermines person-centred and rights-based approaches, but it also increases the risk of restrictive practices being used in place of appropriate supports.

This shifts the burden of proof and access onto the individual, creating a two-tier system where access to the NDIS depends on financial capacity and geographical access rather than need. It also required people in regional areas to undertake costly and repeated travel to metropolitan areas simply to demonstrate that all treatment has been tried.

Critically, these reforms are being introduced without the complementary supports envisaged by the NDIS Review.[10] Where people cannot access treatment and are excluded from the NDIS, there are no alternative supports available. This leaves people without care, increasing the risk of neglect and harm.

Revocation of a person's status as a participant and plan suspensions

The proposed Bill gives the CEO power to revoke a person's status as a NDIS participant or to suspend a plan if "reasonable attempts" to contact the participant have been made and the participant is not contactable. There is, however, no detail in the proposed amendment to s 30 about what constitutes "reasonable attempts" in this context, whether it means three contacts by phone, letter or SMS, and whether the contact is made in English or in the person's preferred language. However, it is clear that once the "reasonable attempts" have been made, the CEO is required to give the participant a written notice of a decision to suspend their plan, specifying the date of effect. This all fails to consider the nature of the participant's disability and whether they can read or understand the correspondence provided by the NDIA.[11]

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[10] NDIS Review, 'Working together to deliver the NDIS – supporting analysis', pg. 227, https://www.ndisreview.gov.au/sites/default/files/resource/download/NDIS-Review-Supporting-Analysis.pdf.

[11] Explanatory Memorandum, p, 56.

From QIDAN's experience, several barriers already exist in contacting the NDIA as current processes are inaccessible, complicated, not reliably recorded and do not take into account communication preferences. For example, people with disability we work with often do not pick up calls from undisclosed numbers. In our experience, this is more common for people from culturally or linguistically diverse (CALD) backgrounds who are afraid of scams or lack confidence to speak with someone they don't know. Unfortunately, there has already been an instance where a person from a CALD background was removed from the NDIS as they could not be contacted by phone. This is highly problematic and not aligned with the principle around communication and response to cultural needs as per s 4(9) of the Act. This amendment exacerbates existing issues we have observed, where NDIA delegates and staff contact people without any notice resulting in missed calls or important conversations happening at inadequate times and places.

We urge the Government to remove the proposed s 30(1A) from the Bill.

Minister's superpower: Shifting, not saving, costs

Disguised by the promise of ensuring sustainability of the scheme, the Bill introduces unfettered ministerial powers with no real oversight mechanisms or consideration of individual circumstances. By inserting s 34A, a new power will enable the Commonwealth Minister, of the day, to make determinations to reduce funding for groups of supports, classes of plans or classes of participants, where the supports have already been deemed reasonable and necessary. While the Bill provides that "the Minister must have regard to the safety of participants" in making a determination,[12] it does not account for individual safety, oversight mechanisms or individual review rights.

In QIDAN's view, this power is concerningly broad and unrestricted in a way that is incompatible with the human rights of people with disability and the key principles of transparency and accountability. This type of reform has not been recommended by the NDIS Review, and it is not aligned with the findings of the DRC.

We understand that the first change under this new power will include a 50 per cent reduction to budget allocations for social, civil and community participation supports

[12] NDIS Amendment (Securing the NDIS for Future Generations) Bill, Part 4, s 34A(4).

(SCCP) and a 10 per cent reduction to capacity building daily activity (CBDA) budget allocations from 1 October 2026.[13] Forcing people to stay at home, these cuts will have devastating and far-reaching consequences for entire groups of people with disability, including social isolation, forced segregation and exclusion from community life which have all been identified by the DRC as forms of abuse for people with disability.[14]

In QIDAN's view, these cuts will have disproportionate consequences particularly for First Nations people with disability despite the significant findings and recommendations of the DRC.[15] For example, this power could be applied to a class of participants living in certain locations. If this is used to target specific geographical locations such as rural and remote areas, it would have a disproportionate impact on First Nations participants who usually live in more isolated regions where support is already scarce.

Further, we are concerned that by giving such a discretionary power to a Federal Minister that this will create another significant gap for people with disability that States cannot prepare for or build into policy or programs. For example, if the Minister were to decide at any time to make determination in relation to social participation budget allocations for women accessing social and community participation, the States would likely be expected to fill in this support gap without any time to adequately plan or properly implement the supports. The reality is, no Foundational Supports are in place to respond to the needs of people who will have their funding reduced.

With no statutory constraints, parliamentary accountability, appropriate oversight mechanisms and right to review Minister's decision, this power ai arbitrary and unreasonable as it will result in people receiving less support than they have been assessed as needing under the reasonable and necessary criteria.

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[13] Department of Health, Disability and Ageing, 'About the changes to the NDIS', https://www.health.gov.au/our-work/ndis-legislation-changes/amendments/ndis-amendment-securing-the-ndis-for-future-generations-bill-2026/about-the-changes-to-the-ndis.

[14] Royal Commission in Violence, Abuse, Neglect and Exploitation of People with Disability, 'Final Report', Vol 3, pg., 2, https://disability.royalcommission.gov.au/system/files/2023-09/Final%20Report%20-%20Volume%203%2C%20Nature%20and%20Extent%20of%20Violence%2C%20abuse%2C%20neglect%20and%20exploitation.pdf ('DRC Final Report').

[15] See DRC Final Report, Vol 9, Recommendations 9.7-9.9.

We urge the Government to remove this section from the proposed Bill as it fails to consider participants' circumstances and individuals risk factors.

People need support during life transitions

Timely access to plan reassessment is critical, particularly during periods of crisis, instability or significant life change.

Proposed section 48A extends the time the NDIA has to consider a request for a plan reassessment (Change of Circumstances) from 21 days to 90 days**,** despite this being only a decision about whether to conduct a reassessment, not the reassessment itself. In our view, the current 21-day timeframe is sufficient for this threshold decision.

It is further concerning that s48(4), which deems a reassessment refused if no decision is made within the timeframe, is no longer a reviewable decision under s 99 of the Act. This further limits participant's rights, including access to review.

Section 48A(1) also restricts reassessment to circumstances directly linked to an impairment tested against the access criteria, prioritising administrative thresholds over the provision of support. It imposes an additional condition that a significant and ongoing alteration in the participant's living, education, work or network of informal support must be unanticipated. In practice, many life changes are foreseeable but still critical, such as the death of elderly parents, changing impact of a disability or moving houses given people with disability are often exposed to house insecurity. These provisions make it slower, more bureaucratic and in some cases almost impossible to access reassessment when it is needed most.

The consequence is that people may be left without appropriate supports during periods of heightened vulnerability, increasing the risk of harm, hospitalisation or homelessness. This approach prioritises administrative control over timely support, contrary to the intent of the NDIS Review and the findings of the DRC.

Ableist test on supports for children

New provisions added to section 34 of the Act (1G-1J) are extremely concerning, as they are based on assumptions that all children who are NDIS participants have access to consistent, informal support from parents who are able to meet their disability-related

needs. This reflects a narrow and privileged understanding of "parental responsibility" that does not align with the lived reality of many families.

In our experience, many parents of children with disability also live with disability themselves. Families may be supporting multiple children with disability or may be single-parent households without additional informal supports. These provisions fails to account for children in kinship care, and families from CALD communities, where caregiving arrangements may different from dominant assumptions about what is "ordinary".

By embedding these assumptions, the Bill risks setting an ableist benchmark for support, where children are denied necessary supports because their circumstances do not align with an idealised model of family capacity. This shifts the burden of care onto families who are already under significant strain and risks leaving children without the supports they need to be safe, included, and able to participate in their communities.

"By breaking down the smallest level, we have lost sight of the big picture and the whole person" (NDIS Review, 2023)

In 2024, long overdue amendments were made to the Act by the National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Act 2024 to include the 'whole of person' approach.[16] This "common sense" approach was reaffirmed in the recent Federal Court Case of *Eastham*.[17]

The proposed Bill recklessly eliminates the 'whole of person' individualised approach and effectively reverses the decision in *Eastham* by replacing the words 'arising from an impairment' in section 34(1)(aa) of the Act with 'arising **directly** from an impairment' throughout. Note (b) from that section, which currently clarifies that supports needs may be affected by environmental factors or compounding impairments, is now repealed.

In doing so, this Bill not only disregards the NDIS Review recommendation to set a budget to a 'whole-of-person level' (Action 3.3), it also enlivens a discussion that was brought up during the amendments of the Act in 2024, wasting resources and time. Not to mention

[16] s 34(1)(aa).

[17] *Chief Executive Officer of the National Disability Insurance Agency v Eastham* [2026] FCA 147.

revisiting the point the community thought was behind us, further erodes the already fragile trust in the NDIS.

In practice, this risks people being denied access to essential supports where they have multiple, interacting disabilities. For example, a person who uses a wheelchair due to a permanent back injury and has PTSD as a result of sexual abuse may require both physiotherapy and psychological support. Access to both is critical to enable them to safely participate in the community, engage in everyday life and employment.

This Bill fails to recognise how these needs interact. When we consider environmental factors in this scenario, living in a small regional Queensland town, where the alleged perpetrator also lives, their PTSD symptoms may be exacerbated, increasing their supports to safely leave their home and access their community.

This proposed amendment attempts to artificially separate out the various factors and underlying conditions that may impact a person's life, "adding unnecessary layers of complexity to decision-making within an already complex process. By breaking down the smallest level, we have lost of sight of the big picture and the whole person."[18]

The whole of person approach currently in s 34 of the Act, including its notes, should be maintained as is.

Caution against the use of automated decision making

We are concerned about the introduction of "automated decision making" (ADM) under proposed s 59B. It is of concern that there is no reference in the Explanatory Memorandum to the Royal Commission into the Robodebt Scheme (Robodebt Royal Commission) recommendations and how these are to be addressed in designing and implementing ADM. This is crucial given the relevant commentary and precautionary measures in the Robodebt Royal Commission report recommendations, applicable when vulnerable people will be impacted by ADM. Without robust safeguards, transparency, and accountability mechanisms, ADM risks replicating systemic failures, leading to incorrect decisions, reduced procedural fairness, and significant harm to people with disability.

[18] NDIS Review (2023), 'Working together to deliver the NDIS', p 26 https://www.ndisreview.gov.au/sites/default/files/resource/download/working-together-ndis-review-final-report.pdf.

At a minimum, any use of ADM must be explicitly aligned with the safeguards and precautionary principles identified by the Robodebt Royal Commission, particularly where decisions impact access to essential supports.

Conclusion

QIDAN reiterates its call for the Government to pause the Bill and undertake genuine, co-designed consultation with people with disability, representative organisations, legal experts, and states and territories.

Reform of this scale must be grounded in the evidence, recommendations and lived experience that informed the NDIS Review and the DRC.

We remain committed to working collaboratively with Government to ensure that any legislative changes strengthen, rather than undermine, the rights, safety, and inclusion of people with disability.

I can be contacted via email (caitlin@qai.org.au) or on 07 3844 4200.

Yours sincerely

Caitlin de Cocq van Delwijnen

Principal Advocate, Queensland Advocacy for Inclusion

On behalf of the Queensland Independent Disability Advocacy Network (QIDAN)