



DISABILITY

Official **Adviser** to the NSW Government

Joint Standing Committee on the National Disability Insurance Scheme
PO Box 6100
Parliament House
Canberra ACT 2600

Via email: ndis.sen@aph.gov.au

Dear Sir/Madam

The provision of hearing services under the National Disability Insurance Scheme (NDIS)

On behalf of the Disability Council NSW, I am writing to respond to the Joint Standing Committee on the National Disability Insurance Scheme call for submission on the provision of hearing services under the National Disability Insurance Scheme (NDIS).

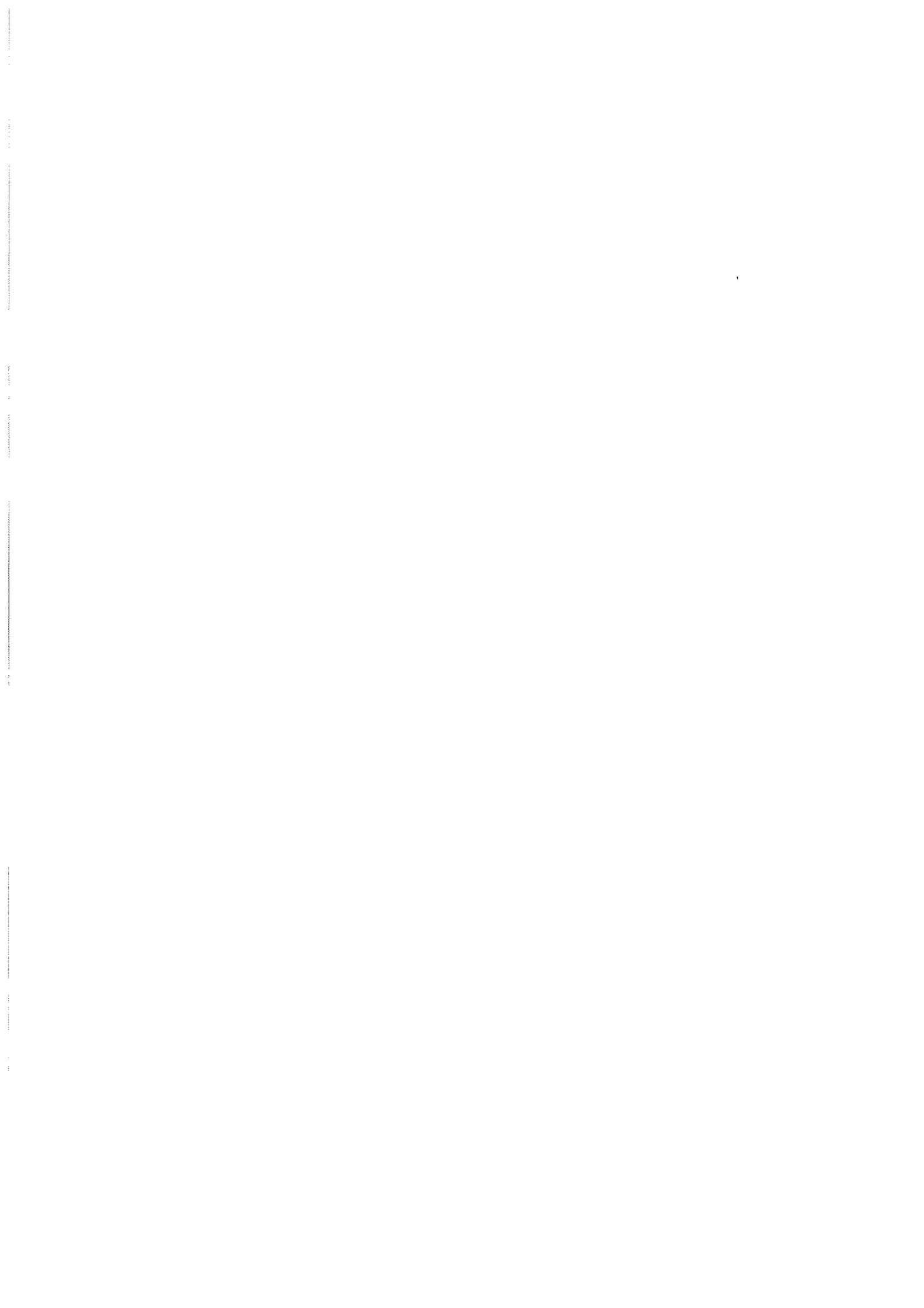
The Council welcomes the opportunity to make a submission, and thanks the secretariat for the granting of an extension.

The Council looks forward to further discussions of this matter.

Yours sincerely,

A handwritten signature in blue ink, appearing to read "Helen McFarlane".

(Helen McFarlane on behalf of) **Mark Tonga**
Chair, Disability Council NSW
14 February 2017





Disability Council NSW

Submission to

Joint Standing Committee on the NDIS: Hearing
Services

15 February 2017

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Disability Council NSW

The Disability Council NSW (Council) was established under the *Community Welfare Act 1987* (NSW), and was re-constituted under the *Disability Inclusion Act 2014* (NSW) on 3 December 2014. Council's main responsibilities under the Act are to:

- Monitor the implementation of Government policy;
- Advise the Minister on emerging issues relating to people with disability, and about the content and implementation of the NSW State Disability Inclusion Plan and Disability Inclusion Action Plans;
- Advise public authorities about the content and implementation of Disability Inclusion Action Plans;
- Promote the inclusion of people with disability in the community and promote community awareness of matters concerning the interests of people with disability and their families;
- Consult with similar councils and bodies, and people with disability; and
- Conduct research about matters relating to people with disability.

The Council consists of a diverse group of 8 to 14 members (currently 12 members). Each member is appointed for up to four years by the Governor of NSW on the recommendation of the Minister for Disability Services. Members are selected to be on Council because:

- They have lived experience of disability
- They have particular expertise on disability issues
- They want to improve the lives of people with disability

Council is funded by the NSW Government through the NSW Department of Family and Community Services (FACS) and is supported by a secretariat team within FACS.

In preparing this submission, Council consulted with a range of individuals (including our Members), disabled people's organisations¹ (DPOs) and service providers. Council thanks them all sincerely for their time and contribution. This submission represents the views of Council.

¹ <http://www.pwd.org.au/student-section/disabled-people-s-organisations-dpos.html>

Executive Summary

The Disability Council is strongly supportive of the aims of the National Disability Insurance Scheme (NDIS). People who are Deaf, hard of hearing or deafblind will achieve greatly increased participation in the community, including employment, if the aims of the NDIS are fulfilled. However, this requires a commitment from the Commonwealth Government to continued, uncapped funding for hearing services based on need.

The Disability Council understands 'hearing service' to include all services which assist people who are Deaf or hard of hearing to participate in the community and in employment, whether they are covered by the NDIS or not. Hearing services include:

- Audiology and audiometry
- Speech therapy
- Real-time captioning (for example, of work meetings)
- The National Relay Service²
- Auslan training for family members of Deaf people, and paid leave to undertake intensive Auslan training for parents of Deaf children, as is provided for example in Norway³
- Sign language interpreters (both Auslan/English⁴ and Deaf/relay⁵).

The provision of assistive technologies must also be considered 'hearing services'. These include:

- Hearing devices such as hearing aids, cochlear implants, bone implants
- Associated costs for hearing devices, such as insurance, batteries, processor replacements
- Light- or vibration-based emergency warning, alarm clock and 'doorbell' systems
- Audio/FM systems
- Access to reliable, fast internet connection and dependable, user-friendly devices in order to make functionally equivalent 'phone' calls, including to emergency services
- Trained assistance animals.

However, not all of these hearing services will be available under the NDIS:

- Some fall into the category of 'mainstream systems' – that is, supports which, according to the NDIA, must be funded by mainstream providers⁶ (for

² <http://relayservice.gov.au/>

³ Hyde, M., Ohna, S. E., Hjulstad, O. 2009. 'Education of the deaf in Australia and Norway: A comparative study of the interpretations and applications of inclusion'. American Annals of the Deaf. Vol 150, Number 5, Winter 2006, pages 415-426. 10.1353/aad.2006.0004

⁴ An individual, usually Hearing, accredited by the National Accreditation Authority for Translators and Interpreters (NAATI) at Paraprofessional, Professional or Conference level and who works between Auslan and (usually) spoken English: https://naati.com.au/media/1109/outline_naati_credentials.pdf

⁵ Deaf interpreters are trained and NAATI-recognised Deaf individuals who work alongside Auslan/English interpreters to provide essential language services for individuals who are deafblind, or who are Deaf and have a cognitive disability and/or a lack of fluency in Auslan. See https://naati.com.au/media/1287/deaf_interpreter_information_booklet.pdf

⁶ https://www.ndis.gov.au/html/sites/default/files/documents/fact_sheet_how_ndis_works_other_mainstream_systems.pdf

example, public and private hospitals must provide sign language interpreters for Deaf patients; schools must provide audio systems for hard of hearing students)

- Many hearing services are what may be considered 'group' access requirements – for example, television or DVD captions, Auslan-interpreted theatre performances, the National Relay Service, awareness campaigners such as the Indigenous Australians' Health Program, Auslan-interpreted online information videos⁷. While some of these may also be considered 'mainstream systems', some may not (particularly where a mainstream provider chooses to invoke the *Disability Discrimination Act's* unjustifiable hardship provisions⁸) and some are simply impractical to deliver on an individual basis.

The NDIS itself must also be delivered fairly to all Deaf, hard of hearing and deafblind participants. The Disability Council has consulted with service providers and organisations representing users of hearing services, as well as individual consumers, and has been disappointed to be told numerous accounts of inconsistencies in NDIS packages, and a lack of knowledge of hearing services in its broadest sense by staff of the NDIA and its planning providers.

Further, any changes to Australian Hearing must not compromise access to hearing services, particularly for people in rural and remote areas and for those ineligible for the NDIS.

Recommendation 1: The Disability Council strongly recommends a co-ordinated approach between the NDIA and other Commonwealth agencies; and between the Commonwealth, the State and industry; to address two of the major issues to date of the NDIS:

- the apparent inconsistencies between packages, which appear to be currently dependent on the knowledge and self-advocacy of the participant; the knowledge of the adviser; and where the participant lives, rather than on need
- the hearing services which NDIS does not provide, and the lack of Government support for these.

⁷ Because Australia's Deaf community is by definition a CALD community as well as a disability community, English is the second (or non-existent) language of many Deaf Australians. Written information must therefore be translated into Auslan in order to enable access. Examples can be seen at <http://deafsocietynsw.org.au/translation/page/portfolio>

⁸ http://www.austlii.edu.au/au/legis/cth/consol_act/dda1992264/s11.html

List of Recommendations

Recommendation 1: That the NDIA and other Commonwealth agencies; and the Commonwealth, States and industry take a coordinated approach to address two of the major issues to date of the NDIS:

- the apparent inconsistencies between packages, which appear to be currently dependent on the knowledge and self-advocacy of the participant; the knowledge of the adviser; and where the participant lives, rather than on need
- the hearing services which NDIS does not provide, and the lack of Government support for these.

Recommendation 2: That access to hearing services is not compromised by any changes to Australian Hearing

Recommendation 3: That the transfer of private medical interpreting services from the block-funded National Auslan Booking Service (NABS) to the NDIS does not disadvantage Deaf or deafblind people

Recommendation 4: That the NDIA clarifies the eligibility of potential participants who have a mild or moderate hearing impairment but still require hearing services in order to fully participate in the community

Recommendation 5: That the NDIA more accurately estimates the number of Deaf, deafblind and hard of hearing people within its service framework to fully account for needs

Recommendation 6: That the NDIA commits to ensuring that all of its services (including outsourced services) are fully accessible to people who are Deaf, hard of hearing or deafblind

Recommendation 7: That the NDIA uses a social model of disability to determine eligibility

Recommendation 8: That the NDIA ensures that its own staff, as well as public-facing staff of outsourced planning and advice services, are fully aware of all available hearing services, including technologies and devices (see p3 of this document, noting that this is not exhaustive)

Recommendation 9: That NDIS participants, including parents of participants who are eligible for early intervention services, are provided with unbiased information as to the various supports available and the evidence base for any successes claimed

Recommendation 10: That intensive Auslan training and financial assistance for time off for carers or close family members of Deaf or deafblind NDIS participants, particularly those who are under 18, is included as a possible hearing support

Recommendation 11: That the NDIA ensures that reference packages are informed by the views of Deaf, deafblind and hard of hearing people, service providers and parents/carers

Recommendation 12: That the NDIA provides clear guidelines to NDIS participants and the public as to how to manage 'group access' requirements, including encouraging Government to provide 'group access', for example by ensuring information on Government agency websites is available in Auslan

Recommendation 13: That the NDIA ensures that all parties, not only NDIS participants, are offered choice in regards to interpreters

Recommendation 14: That NDIA policy specifies that no interpreting can be performed by individuals who are not NAATI-accredited (Auslan/English interpreters) or NAATI-recognised (Deaf interpreters)

Recommendation 15: That NDIA policy encourages choice based on the skills and appropriateness of interpreters, and actively discourages any additional service provision by interpreters which could compromise an interpreter's professional ethics, specifically objectivity and impartiality

Recommendation 16: That the Commonwealth continues to fund National Acoustics Laboratories (NAL)

Recommendation 17: That the Commonwealth provides significant funding towards research into early intervention, with the aim of providing honest, evidence-based, unbiased information, particularly for parents, on the pros and cons and likely outcomes of all methods. As part of achieving this, it is essential that ethics committees tasked with reviewing applications of research into any aspect of deafness must consult with representatives of both Deaf and hard of hearing organisations

Recommendation 18: That the NDIA prioritises access to essential and effective hearing services, particularly for infants and children, or where employment or education is at risk, and particularly in rural and remote areas, including Aboriginal communities

Recommendation 19: That the NDIA, its Minister and supervising department actively liaise with the appropriate parts of government (eg State and Commonwealth departments of health and Aboriginal affairs) to encourage the provision of appropriate health services to eliminate otitis media in Aboriginal communities.

Recommendation 20: That the Department of Communications and the Arts immediately releases its report on the results of its review *Communications accessibility: 2016 and beyond*, which closed on 6 May 2016⁹

Recommendation 21: That the Commonwealth Department of Health provides clear direction to public and private hospitals and their peak bodies that they (the hospitals) are responsible (both financially and in terms of planning) for ensuring that their services are accessible to people who are Deaf, hard of hearing or deafblind, by

⁹ <https://www.communications.gov.au/have-your-say/communications-accessibility-2016-and-beyond>

providing interpreters, audio loops and other equipment, real-time captioning and so on as required by individuals

Recommendation 22: That the Department of Communications and the Arts makes a public commitment to the continued funding of the National Relay Service, both the phone service itself and all customer support currently provided by its outreach arm

Recommendation 23: That the Commonwealth Department of Employment ensures that employers and potential employers understand that the existence of the NDIS does not release them of their obligations under the *Disability Discrimination Act 1992* to provide reasonable adjustments. The Commonwealth should also use the National Disability Strategy to encourage employers and potential employers to recognise the benefits of hiring employees with disability

Recommendation 24: That the Commonwealth Department of Employment expands the Employment Assistance Fund (EAF) so it covers more modifications in more circumstances (including voluntary work and internships), and especially an increased access to interpreting and real-time captioning services; streamline the process for applying for support under the EAF; and establish a "one-stop-shop" central information point for EAF assessors, employers and people who are Deaf, deafblind or hard of hearing to find out what modifications are available to make workplaces more accessible

Recommendation 25: That the NDIA and the Australian Human Rights Commission work together to establish clear guidelines for mainstream service providers (such as health and education providers, cinemas, theatres, telecommunications companies) in their continued responsibilities to provide reasonable adjustments

Recommendation 26: That the NDIA provides clear guidelines to NDIS participants and the public as to how to manage 'group access' requirements, including encouraging Government to provide 'group access', for example by ensuring information on Government agency websites is available in Auslan.

Introduction

The Disability Council welcomes the opportunity to make a submission to the Joint Standing Committee on the NDIS – Hearing Services inquiry.

With due regard to the terms of reference of the inquiry, the Disability Council has chosen to comment on the following issues:

- a. eligibility and access to NDIS-funded services, including
 - the inconsistency of packages provided to Deaf, deafblind and hard of hearing NDIS participants
 - the necessity of consulting with key stakeholders in the design of NDIS hearing services, particularly in the development of reference packages
- b. the difficulty of applying the principle of consumer choice to services which by definition include a client who is *not* eligible for the NDIS (that is, interpreting services where the interpreter is working between Auslan with a Deaf client and English with a hearing client)
- c. research investment
- d. delays to the provision of hearing services
- e. essential hearing services which cannot be or are not provided by the NDIS.

Eligibility and access

Eligibility

The Disability Council believes that the NDIA has not accurately estimated the number of Deaf, deafblind and hard of hearing people who will require access to NDIS funding packages.

Further, there is confusion about who is eligible to participate in the NDIS, with the NDIA using the term 'severe', thus appearing to exclude people who have a mild or moderate hearing impairment but who need hearing services in order to participate in the community.

Under our international convention obligations, Australia should use the social model of disability to determine eligibility, for example by considering:

- a person's overall experience of disability, rather than discounting the experience of disability by taking a compartmentalising approach to their experiences of differing impairments
- the socio-economic impacts of disability (e.g. disability serves as a barrier to education, employment or social inclusion) rather than on abstracted, clinical measures of impairment.

Access to planning and to hearing services

Access to hearing services under the NDIS must be available to all Deaf, deafblind and hard of hearing people who require them, regardless of age and where the person lives, and where relevant, their families too.

NDIS-related changes to current services, such as Australian Hearing and the National Auslan Booking Service, must not disadvantage any consumer of hearing services.

Further, the NDIA and any agencies to which it outsources services must themselves be accessible.

The Disability Council is aware of a number of examples where Deaf people have not had access to a NAATI-accredited interpreter (or a staff member *fluent* in Auslan) for planning meetings or other discussions, or have received repeated phone messages despite the staff member knowing that they are Deaf. The fact that one cannot register online, and that reliable email contact is not available, further disadvantages people who are Deaf, hard of hearing or deafblind. How, for example, is a deafblind person to complete a paper-based form?

Inconsistency of packages

A number of individuals, Disabled People's Organisations and service providers have reported that there appear to be significant inconsistencies between packages, with differences based on factors other than individual requirements. For example, it has

been reported that in some NDIS sites, Deaf people receive a set number of hours of Auslan/English interpreting regardless of need, whereas other sites (rightly) allow Deaf people to estimate the number of hours they will require, with this being available to review if required.

Other reports have contended that individuals only receive appropriate packages after lobbying politicians or contacting the media. And unfortunately, it also appears to be the case that the most disadvantaged – who are likely to be the least knowledgeable about their own needs and what is available to support them, and also to be the least prepared for planning – receive the least.

The Council is also aware of instances where Deaf people have been refused interpreter hours in order to attend family and social events because they have been unable to provide evidence of previous usage of interpreters in these situations. This demonstrates a lack of understanding on the part of decision-makers that, until the implementation of the NDIS, Deaf people usually suffered total exclusion from any meaningful participation in such events, because it is extremely rare for family members of Deaf people (other than their children) to be able to sign, and because there was no funding available for Deaf people to hire interpreters in such circumstances.

Reference packages

Given the inconsistency referred to above, it is absolutely essential that service providers and consumers have robust input into the development of reference packages. The consultation process itself must be accessible to people who are Deaf, hard of hearing or deafblind.

The Disability Council considers the following stakeholders as essential to be included in such a consultation process:

DPOs

- Deaf Australia
- Deafness Forum of Australia¹⁰
- Better Hearing Australia
- Australian Deafblind Council

Service providers

- Australian Federation of Deaf Societies
- Able Australia
- Australian Sign Language Interpreters Association
- Deaf Children Australia
- Australian Hearing
- Royal Institute for Deaf and Blind Children

¹⁰ Deafness Forum of Australia has a majority board which is Deaf, hard of hearing or deafblind but also includes members which are or represent service providers:
<http://www.deafnessforum.org.au/members>

- Audiology Australia

Parents

- Parents of Deaf Children
- Aussie Deaf Kids

Reference packages must take a holistic approach to the individual's experience of disability, rather than narrowly relying on a measure of clinical impairment. New assessment processes must consider the whole-of-life experience of disability, which for people who are Deaf, hard of hearing or deafblind, can be profound in its impacts on education, literacy, employment and social inclusion.

Service models must not be restricted to deficit-based, device-centric models but instead consider the original aims of the NDIS – to provide support so that an individual can make choices about how they would like to participate in the community.

It is absolutely vital that reference packages refer to the full range of hearing services from which an individual could benefit – even if a service is not currently available in that person's locale, as some people with disability may have the capacity and desire to advocate for new services or even to move to obtain appropriate services. Further, planners and decision-makers need to fully understand the very varied needs of the different individuals they work with, and provide advice which is:

- unbiased
- evidence-based
- complete
- accessible.

This is of particular importance in the area of hearing services, and especially with early intervention, where there unfortunately still remains a chasm between 'oralist' and sign-based methods of communication and education.

Further, it is likely that the most disadvantaged individuals and families are those most likely to need support and advice as to what hearing services might work best for them. For example, Deaf people with cognitive or psychosocial disability, or who are immigrants, may not even be aware of the existence of Deaf interpreters, and how such professionals can support them to more fully participate in the community.

Recommendation 2: That access to hearing services is not compromised by any changes to Australian Hearing

Recommendation 3: That the transfer of private medical interpreting services from the block-funded National Auslan Booking Service (NABS) to the NDIS does not disadvantage Deaf or deafblind people

Recommendation 4: That the NDIA clarifies the eligibility of potential participants who have a mild or moderate hearing impairment but still require hearing services in order to fully participate in the community

Recommendation 5: That the NDIA revises estimates of the number of Deaf, deafblind and hard of hearing people within its service framework to fully account for needs

Recommendation 6: That the NDIA commits to ensuring that all of its services (including outsourced services, and including registration) are fully accessible to people who are Deaf, hard of hearing or deafblind

Recommendation 7: That the NDIA uses a social model of disability to determine eligibility, with packages based on need only

Recommendation 8: That the NDIA ensures that its own staff, as well as public-facing staff of outsourced planning and advice services, are fully aware of all available hearing services, including technologies and devices (see p3 of this document, noting that this is not exhaustive)

Recommendation 9: That NDIS participants, particularly parents of participants who are eligible for early intervention services, are provided with unbiased information as to the various supports available and the evidence base for any successes claimed

Recommendation 10: That intensive Auslan training and financial assistance for time off for close family members of Deaf or deafblind NDIS participants, particularly those who are under 18, is included as a possible hearing support

Recommendation 11: That the NDIA ensures that reference packages are informed by the views of Deaf, deafblind and hard of hearing people, service providers and parents

Recommendation 12: That the NDIA ensures that such consultations are fully accessible, for example that discussion papers are available in Auslan and can be responded to in Auslan

Consumer choice

Unlike any other disability support of which the Disability Council is aware, Auslan/English and Deaf interpreters *a/ways* have at least one client who does not have a disability and is therefore ineligible for the NDIS – that is, interpreters have at least one client who uses Auslan or another signed language or system, and who is Deaf or deafblind, and at least one client who uses English and who is hearing (or very occasionally hard of hearing).

Further, neither party is in a position to know with any certainty the quality of the interpretation. The Deaf party can certainly make an informed judgement as the quality of an interpreter's Auslan, and the hearing party can certainly make an informed judgement as to the quality of the interpreter's English, but *neither party* can know whether the interpretation is in fact *accurate*.

The notion of consumer choice in relation to selection of interpreters is therefore extremely problematic.

While the Disability Council strongly supports consumer choice as a rule, we therefore recommend that the NDIS consults further with Deaf Australia and the Australian Sign Language Interpreters Association with a view to putting in place policies which ensure that:

- *all* parties in an interpreter-mediation situation are always offered consumer choice, and
- quality is ensured by only allowing NAATI-accredited Auslan/English interpreters and NAATI-recognised Deaf interpreters to undertake interpreting using NDIS funding
- consumers of interpreting services (both Deaf or deafblind, and hearing) are encouraged to choose interpreters based on skill (for example, NAATI accreditation level, university qualifications, education in a particular field etc) rather than on factors irrelevant to skill (such as whether an interpreter is personally known to an individual, whether the interpreter is prepared to offer additional non-interpreting services such as driving a client to and from an appointment etc – noting that such additional services in fact compromise an interpreter's ability to be objective and impartial and should be discouraged by NDIS policy).

Recommendation 13: That the NDIA ensures that all parties, not only NDIS participants, are offered choice in regards to interpreters

Recommendation 14: That NDIA policy specifies that no interpreting can be performed by individuals who are NAATI-accredited (Auslan/English interpreters) or NAATI-recognised (Deaf interpreters)

Recommendation 15: That NDIA policy encourages choice of interpreter based on skill and appropriateness, and actively discourages any additional service provision by interpreters which could compromise an interpreter's professional ethics, specifically objectivity and impartiality

Research investment

The Disability Council strongly supports continued funding of National Acoustic Laboratories (NAL) to continue to research new developments in hearing assessment and hearing loss prevention, undertake clinical trials, and consider early intervention practices across a person's lifespan, from birth to ageing.

NAL's research into hearing has opened new ways in which people who are Deaf, hard of hearing or deafblind can be helped, and is NAL's practical research focus is critical to helping people with hearing loss lead long and productive lives.

NAL is currently funded by the Department of Human Services and the Office of Hearing Services.

Further, the Disability Council seeks guaranteed research investment into early intervention methods, with the aim of providing honest, evidence-based, unbiased information for people who are Deaf, hard of hearing and deafblind, and the parents of children who are Deaf, hard of hearing or deafblind. The Disability Council considers that such work is best undertaken by an institution such as Macquarie University, which has ties to both 'oralist' and 'signing' schools of thought.

Recommendation 16: That the Commonwealth continues to fund NAL

Recommendation 17: That the Commonwealth provides significant funding towards research into early intervention, with the aim of providing honest, evidence-based, unbiased information, particularly for parents, on the pros and cons and likely outcomes of all methods. As part of achieving this, it is essential that ethics committees tasked with reviewing applications of research into any aspect of deafness must consult with representatives of both Deaf and hard of hearing organisations .

Delays in the provision of hearing services

Access to the right professional service isn't always straightforward. Any delays can have a knock-on affect, impacting on access to rehabilitation services, appropriate assistive technology and hearing aids

Better Hearing Australia has reported that hearing loss costs the economy up to 12 billion dollars a year, as a result of productivity loss and people leaving the labour force as a result of issues with their hearing.¹¹

For people who benefit from them, a hearing aid or other assistive hearing device is a long-term investment in health and quality of life. Any delay in provision of these devices and surrounding services will affect the individual's ability to engage in everyday activities, including participation in the labour force and education.

For infants and children particularly, any delay in access to hearing augmentation and Auslan can have profound, lifelong effects.

Recommendation 18: That the NDIA prioritises access to essential and effective hearing services, particularly for infants and children, or where employment or education is at risk, and particularly in rural and remote areas, including Aboriginal communities

¹¹ <http://www.betterhearingaustralia.org.au/hearing-loss/social-impact/>

Essential hearing services not provided by NDIS

Not all hearing services will be available under the NDIS.

Mainstream systems

Some hearing services fall into the category of 'mainstream systems' – that is, supports which, according to the NDIA, must be funded by mainstream providers¹² (for example, public and private hospitals must provide sign language interpreters for Deaf patients; schools must provide audio systems for hard of hearing students).

It is essential that relevant Commonwealth agencies – including Employment, the NDIA and Health – stress to the relevant stakeholders their continuing obligations to provide access to these mainstream systems. In particular, the Disability Council is aware that Deaf and hard of hearing individuals have been asked by certain private hospitals to provide their own interpreters or audio systems¹³.

'Group' access

Many hearing services are what may be considered 'group' access requirements – for example, television or DVD captions, Auslan-interpreted theatre performances, the National Relay Service, awareness campaigners such as the Indigenous Australians' Health Program, Auslan-interpreted online information videos¹⁴.

While some of these may also be considered 'mainstream systems', some may not (particularly where a mainstream provider chooses to invoke the Disability Discrimination Act's unjustifiable hardship provisions¹⁵) and some are simply impractical to deliver on an individual basis.

A real concern is the Department of Communication's lack of response to its own review, *Communications accessibility: 2016 and beyond*, which closed on 6 May 2016¹. This lack of transparency has caused concerns amongst consumers of the National Relay Service (an essential phone service for people who are Deaf, hard of hearing, deafblind or speech-impaired, and most importantly, the only method that this cohort has for contacting emergency services). The National Relay Service, which is funded by a small levy on telecommunications providers, is comprised of a relay arm (which provides phone calls) and an outreach arm (which provides community awareness, marketing, helpdesk functions and training). Both arms of the National Relay Service are fundamental to ensuring the employment and social participation of people who are Deaf, hard of hearing or deafblind. For example, the

¹² https://www.ndis.gov.au/html/sites/default/files/documents/fact_sheet_how_ndis_works_other_mainstream_systems.pdf

¹³ For example: <https://www.piac.asn.au/2015/11/11/discrimination-case-launched-against-ramsay-health-care-ltd/>

¹⁴ Because Australia's Deaf community is by definition a CALD community as well as a disability community, English is the second (or non-existent) language of many Deaf Australians. Written information must therefore be translated into Auslan in order to enable access. Examples can be seen at <http://deafsocietynsw.org.au/translation/page/portfolio>

¹⁵ http://www.austlii.edu.au/au/legis/cth/consol_act/dda1992264/s11.html

outreach arm provides awareness training to business and government agencies in making and receiving calls, to ensure that Deaf, hard of hearing or deafblind consumers do not have their calls rejected.

The Commonwealth needs to recognise that the NDIS is not and cannot be 'the solution' to access and participation. In line with the National Disability Strategy, disability inclusion is 'everybody's business'. This includes clear direction from the Commonwealth to providers of goods and services as to their responsibilities.

For example:

- telecommunications providers must continue to be levied to support both arms of the National Relay Service
- NDIS participants and the arts/events community must be provided with guidelines as to how to manage interpreted events (particularly when more than one Deaf person is attending, in order to avoid a number of individuals using their NDIS funds to provide multiple interpreters)
- employers and providers of goods and services, particularly in health, education and other essential services, must be made aware of their continued responsibilities under the Disability Discrimination Act
- employers similarly should be made aware of the benefits of employing people with disability and any assistance available, such as the EAF, which should be expanded
- Government should lead the way by ensuring that essential information is provided in Auslan on public-facing websites.

Otitis media and the Aboriginal community

The incidence of otitis media and associated hearing problems in Aboriginal communities is well documented.¹⁶ The provision of remedial services and technology support to Aboriginal children and adults whose hearing is chronically affected by this condition will impact heavily on NDIS costs, whilst being largely preventable. It is in the interest of NDIS for the NDIA to advocate for preventive strategies to be put into place to minimise this problem.

The health, social, employment, educational and financial consequences of not addressing this readily preventable problem make it an imperative on both humanitarian and financial grounds. Inter-departmental co-operation is needed, but this inquiry is well placed to make the point that the ramifications of not addressing the problem fall not only onto affected individuals but on the cost of the NDIS.

¹⁶ For example:

http://www.aihw.gov.au/uploadedFiles/ClosingTheGap/Content/Our_publications/2014/ctgc-rs35.pdf

Recommendation 19: That the NDIA, its Minister and supervising department actively liaise with the appropriate parts of government (eg State and Commonwealth departments of health and Aboriginal affairs) to encourage the provision of appropriate health services to eliminate otitis media in Aboriginal communities.

Recommendation 20: That the Department of Communications and the Arts immediately releases its report on the results of its review *Communications accessibility: 2016 and beyond*, which closed on 6 May 2016¹

Recommendation 21: That the Commonwealth Department of Health provides clear direction to public and private hospitals and their peak bodies that they (the hospitals) are responsible (both financially and in terms of planning) for ensuring that their services are accessible to people who are Deaf, hard of hearing or deafblind, by providing interpreters, audio loops and other equipment, real-time captioning and so on as required by individuals

Recommendation 22: That the Department of Communications and the Arts makes a public commitment to the continued funding of the National Relay Service, both the phone service itself and all customer support currently provided by its outreach arm

Recommendation 23: That the Commonwealth Department of Employment ensures that employers and potential employers understand that the existence of the NDIS does not release them of their obligations under the *Disability Discrimination Act 1992* to provide reasonable adjustments but should also use the National Disability Strategy to encourage employers and potential employers to recognise the benefits of hiring employees with disability

Recommendation 24: That the operation of the Employment Assistance Fund (EAF) is expanded so it covers more modifications in more circumstances (including voluntary work and internships), and especially an increased access to interpreting and real-time captioning services; streamline the process for applying for support under the EAF; and that a “one-stop-shop” central information point for EAF assessors, employers and people who are Deaf, deafblind or hard of hearing to find out what modifications are available to make workplaces more accessible is established

Recommendation 25: That the NDIA and the Australian Human Rights Commission work together to establish clear guidelines for mainstream service providers (such as health and education providers, cinemas, theatres, telecommunications companies) in their continued responsibilities to provide reasonable adjustments

Recommendation 26: That the NDIA provides clear guidelines to NDIS participants and the public as to how to manage ‘group access’ requirements, including encouraging Government to provide ‘group access’, for example by ensuring information on Government agency websites is available in Auslan

