



National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026



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Acknowledgement of Country

Community Options respectfully acknowledges the Ngunnawal and Ngambri peoples as the Traditional Custodians of the land on which the Australian Parliament stands. We pay our respects to their Elders past, present and emerging, and recognise their continuing connection to land, waters, and community. We also acknowledge and honour the contributions of all Aboriginal and Torres Strait Islander peoples to the life and culture of this nation.

Executive Summary

Community Options (ACT) acknowledges community and government concerns regarding the long-term sustainability of the National Disability Insurance Scheme (NDIS) and supports reforms aimed at ensuring the Scheme remains focused on Australians living with significant and permanent disability.

The organisation also recognises the importance of ensuring public funding is used effectively, consistently and sustainably into the future.

However, Community Options' frontline operational experience indicates that several measures proposed within the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026 may unintentionally increase exclusion and system instability for vulnerable individuals whose needs do not align neatly with revised eligibility and functional assessment frameworks.

Community Options is particularly concerned that tightening eligibility settings may occur ahead of the establishment of sufficiently funded foundational and transitional support systems across jurisdictions.

Through its self-funded Access and Navigation role, Community Options is increasingly supporting individuals who:

- experience significant functional vulnerability despite not meeting formal eligibility thresholds;
- experience psychosocial disability or fluctuating conditions;
- are unable to independently navigate assessment, reassessment and appeals processes;
- are ageing carers supporting adult children with disability;
- are discharged from hospital into unsupported or unsafe environments.

Operational experience indicates that many individuals excluded from formal systems nevertheless require substantial assistance to remain safely housed, engaged with healthcare systems and connected to community.

Drawing on its direct experience supporting people with disability, carers and families experiencing escalating complexity and service gaps, Community Options has seen firsthand how the absence of early navigation, stabilisation and transitional supports can lead to increased reliance on crisis-driven systems and services. Without these supports, Community Options is concerned that reforms aimed primarily at reducing NDIS growth may unintentionally increase pressure on:

- hospitals and emergency departments;
- housing and homelessness systems;
- carers and families;
- police and crisis responses;

- under-resourced community organisations.

Community Options believes sustainable reform of the NDIS must occur alongside substantial investment in foundational supports, navigation services and transition pathways to ensure vulnerable Australians are not displaced into crisis systems as a result of reform implementation.

About Community Options

Founded in 1989, Community Options is a Canberra based not for profit known for relationship based case management, brokerage expertise, and collaborative problem solving. Community Options was originally funded by the Commonwealth Government to diversify the care sector and to support a shift toward personalised care by enabling smaller, community-based organisations to participate in service delivery. Through a brokerage approach, our foundational service model supported personalised care by allowing clients to choose which service providers performed tasks in their home.

Over the years, as the aged care sector has evolved, we have collaborated with ACT Health to co-design and implement a range of innovative programs that respond to emerging needs and priorities including Transitional Support, Flexible Family Support, Community Assistance Support Program, the Women & Newborn Community Support Program, and Palliative Care while also contributing to disability support schemes over many years. Due to shifts within the industry, several programs while essential in addressing the needs of specific complex demographics were gradually phased out by ACT Health.

Today, we are focused on high impact programs where our approach adds the most value, and we are active partners in sector reform, working with government, providers, and community to co-design sustainable models that deliver dignity, continuity, and real world outcomes.

Increasing Demand evidenced by demand for our Access and Navigation Role

Community Options established a self-funded Access and Navigation role in response to growing numbers of vulnerable individuals presenting with significant unmet support needs despite not qualifying for, or being unable to successfully engage with, formal funded systems.

The role regularly supports individuals experiencing:

- psychosocial disability;
- cognitive impairment;
- ageing carer arrangements;
- housing instability;
- hoarding and self-neglect concerns;

- hospital discharge complexity;
- barriers engaging with the NDIS, aged care and health systems.

Community Options has observed increasing presentations from individuals who are not “unwell enough” to qualify for acute or crisis systems but are also unable to independently maintain safe and sustainable community living without ongoing support and navigation assistance.

In many cases, individuals require substantial assistance to:

- complete forms and assessments;
- attend appointments;
- navigate appeals processes;
- coordinate housing and healthcare supports;
- maintain tenancy stability;
- engage appropriately with services.

While these supports are often relatively low-cost and preventative in nature, the absence of timely intervention frequently leads to escalating crisis, increased complexity and greater reliance on emergency and acute service systems.

Community Options considers the growing demand for this unfunded service to be a significant indicator of broader systemic failure, with increasing gaps and fragmentation emerging across the disability, health, housing and aged care systems.

Over recent years, Community Options has observed increasing presentations involving psychosocial complexity, ageing carer arrangements, housing instability and individuals unable to independently navigate formal systems despite significant functional vulnerability.

Demand for assistance and support from our Access and Navigation role has continued to increase throughout the 2025/26 financial year, particularly relating to:

- NDIS access and reassessment processes;
- psychosocial disability;
- hospital discharge coordination;
- housing instability;
- cumulative system complexity.

This trend highlights growing pressure on community organisations to support individuals who do not meet formal eligibility thresholds but nevertheless require substantial intervention and support to prevent crisis escalation.

Position Statement

Community Options supports reforms aimed at improving the long-term sustainability, integrity and consistency of the National Disability Insurance Scheme (NDIS).

However, Community Options' frontline operational experience indicates that some proposed reforms may unintentionally increase exclusion for individuals whose disability impacts are cumulative, fluctuating or difficult to quantify within standardised assessment frameworks.

The organisation is particularly concerned regarding:

- increased reliance on standardised functional assessments;
- approaches requiring exhaustion of treatment pathways prior to access;
- uncertainty regarding foundational support systems for individuals excluded from the NDIS;
- growing pressure being transferred onto health, housing, carers and community organisations.

Through its self-funded Access and Navigation role, Community Options is increasingly supporting individuals who:

- have been deemed ineligible for the NDIS despite significant functional vulnerability;
- are unable to independently navigate reassessment, review or appeals processes;
- experience psychosocial disability, trauma-related impairment or cognitive decline not easily evidenced through formal assessment;
- are awaiting reassessment or plan review outcomes for extended periods;
- are being discharged from hospital into unsupported environments.

Our operational experience suggests that where individuals are unable to access appropriate supports early, presentations frequently escalate into crisis responses involving hospitals, emergency departments, homelessness systems, police and acute carer breakdown.

Community Options believes sustainable reform of the NDIS must occur alongside targeted investment in foundational community supports, navigation services and transitional pathways.

Concerns Regarding Proposed Eligibility and Functional Capacity Changes

Community Options is concerned that proposed tightening of eligibility requirements and increased reliance on functional capacity assessments may disadvantage individuals whose disability impacts are fluctuating or difficult to adequately capture within standardised assessment frameworks. Through its Access and

Navigation role, Community Options regularly supports individuals experiencing significant functional impairment who nonetheless struggle to meet formal evidentiary thresholds.

Our frontline experience indicates that standardised assessments do not always adequately capture the cumulative impact of psychosocial disability, trauma-related impairment, executive functioning difficulties and complex social instability. As a result, some individuals may appear functionally capable during isolated assessments while remaining unable to sustainably manage housing, healthcare, finances, appointments or community participation without substantial external support.

Real-World Example — Psychosocial Disability and System Navigation

Community Options recently supported a middle-aged individual experiencing chronic psychosocial disability, a significant trauma history, executive functioning impairment and housing instability.

The individual was able to present relatively well during short clinical interactions, however:

- was unable to independently complete forms or attend appointments consistently;
- repeatedly disengaged from services due to overwhelm;
- accumulated tenancy breaches;
- experienced significant self-neglect;
- presented to emergency departments during periods of crisis.

The individual did not meet thresholds for sustained community support through multiple systems and instead cycled between crisis presentations, short-term interventions and disengagement.

From Community Options' perspective, the issue was not absence of need, but rather the inability of existing assessment frameworks to adequately capture cumulative functional vulnerability.

Community Options is concerned that increased reliance on standardised functional assessments may further exclude individuals with fluctuating psychosocial conditions who do not present consistently during formal assessments.

Exhaustion of Treatment Pathways Prior to Access

Community Options is concerned about the proposal requiring individuals to exhaust treatment options prior to accessing supports.

In practice, many vulnerable individuals experience substantial barriers accessing treatment pathways in the first instance, including:

- long public waitlists;
- financial barriers;
- inability to coordinate appointments independently;
- cognitive impairment;
- unstable housing;
- lack of transport or informal supports.

Real-World Example — Delayed Intervention Escalating to Crisis

Community Options supported an older carer caring for an adult son with suspected intellectual disability and significant mental health concerns.

The family had attempted for several years to engage multiple systems including:

- public mental health;
- housing services;
- disability assessment pathways;
- NDIS access processes.

The individual repeatedly disengaged from services and struggled to tolerate formal assessment processes

During this period:

- the ageing parent's health deteriorated significantly;
- police attended multiple welfare concerns;
- the tenancy became unsafe due to hoarding and self-neglect;
- both individuals became increasingly socially isolated.

By the time intensive intervention occurred, both the complexity of the situation and the level of multi-system involvement required had escalated significantly and were far greater than may have been necessary had earlier navigation, engagement and stabilisation supports been available.

Community Options is concerned that requiring prolonged treatment exhaustion prior to eligibility may increase crisis escalation for highly vulnerable individuals.

Impact on Hospital and Health Systems

Community Options is increasingly observing individuals remaining within hospital settings not because of acute medical need, but because safe and sustainable discharge pathways do not exist.

Operational experience indicates that discharge delays are frequently linked to:

- lack of disability supports;
- housing unsuitability;
- absence of carers or informal supports;
- delayed NDIS reassessment processes;
- inability to independently coordinate services;
- psychosocial instability and executive functioning impairment.

Within the ACT, Community Options has also observed increasing pressure on community organisations and health systems as vulnerable individuals experience difficulty navigating fragmented systems across disability, mental health, housing and ageing sectors.

Real-World Example — Functional Need Without Appropriate Supports

Community Options recently assisted an individual discharged from hospital following significant health deterioration. Although the individual demonstrated substantial functional limitations affecting daily living, they did not have timely access to formal disability supports and were unable to independently coordinate:

- personal care;
- transport;
- tenancy management;
- medication management;
- follow-up healthcare appointments.

Without intervention from community organisations and informal supports, the discharge was considered unlikely to remain sustainable, placing the individual at significant risk of rapid deterioration and hospital re-presentation.

Frontline experience indicates that individuals with significant functional impairment frequently fall between hospital, disability, health and community systems when timely navigation and stabilisation supports are unavailable. Community Options is concerned that narrowing access to support without corresponding investment in foundational community-based services may increase:

- avoidable hospital admissions and delayed discharges;
- emergency department presentations;
- carer burnout;
- tenancy breakdown and homelessness risk
- policing and crisis system involvement;
- long-term disengagement from services and support.

Operational experience consistently demonstrates that relatively low-cost early intervention, navigation and stabilisation supports are significantly more effective and cost-efficient than prolonged crisis responses once individuals have deteriorated.

Ageing Carers and “Sub-Threshold” Disability

Community Options is seeing a growing number of ageing parents and carers supporting adult children with disability whose support needs remain largely unmet because they either:

- do not meet revised NDIS thresholds;
- have never successfully navigated the application process;
- have psychosocial or cognitive impairments without formal diagnosis;
- experience fluctuating functioning.

These carers are increasingly ageing without long-term support plans in place.

Real-World Example — Carer Collapse Risk

Community Options recently supported an elderly parent caring for an adult child with severe anxiety, suspected autism spectrum disorder and functional dependence.

While the adult child could complete some daily tasks independently, they were unable to:

- manage finances;
- engage with services;
- maintain employment;
- independently navigate healthcare systems;
- sustain social or community participation.

The parent expressed significant fear regarding:

- what would occur upon their death;
- inability to continue caring responsibilities;
- lack of appropriate service pathways.

Community Options notes that many individuals within this cohort may not meet increasingly narrow disability thresholds despite requiring substantial long-term support to remain safely housed and connected to community.

Cost Shifting to Community Organisations

Community Options currently self-funds its Access and Navigation role in response to increasing numbers of vulnerable individuals presenting outside formal funded systems despite requiring substantial support and intervention to safely remain living and connected in the community.

Operational demand within the role highlights increasing fragmentation and service gaps across the disability, health, housing, psychosocial and aged care systems, particularly for individuals with complex and overlapping support needs.

The organisation is increasingly providing unfunded support relating to:

- service coordination;
- advocacy;
- housing navigation;
- NDIS guidance;
- psychosocial stabilisation;
- crisis prevention;
- hospital discharge coordination.

Community Options is concerned that without significant investment in foundational and transitional supports, community organisations will continue absorbing increasing levels of complex unfunded demand as individuals are excluded from formal systems, creating an unsustainable burden on already stretched community services and workforces.

This approach risks shifting costs away from the NDIS while increasing pressure on hospitals, housing systems, carers, police, crisis services and underfunded community organisations.

Conclusion

Community Options supports the long-term sustainability and integrity of the National Disability Insurance Scheme and acknowledges the importance of ensuring public funding is used effectively.

However, frontline operational experience indicates that many vulnerable individuals already experience substantial barriers navigating disability, health, housing and aged care systems despite significant functional impairment and social vulnerability.

The organisation is increasingly observing individuals who fall outside formal eligibility frameworks but nevertheless require substantial support to remain safely housed, connected to healthcare systems and engaged with community.

Community Options is concerned that reforms focused primarily on reducing NDIS growth without a corresponding investment in foundational and transitional supports may unintentionally increase:

- crisis escalation;
- avoidable hospital presentations;
- delayed discharge pressures;
- carer breakdown;
- demand on emergency and community systems.

Community Options believes sustainable reform of the NDIS must occur alongside substantial investment in foundational supports, navigation services and early intervention pathways to ensure vulnerable Australians are not displaced into crisis systems as a result of reform implementation.

The organisation considers community-based early intervention, stabilisation and navigation supports to be critical in reducing long-term pressure on hospitals, homelessness systems, carers, emergency services and the broader community sector.

Recommendations

Community Options recommends that the Committee consider:

1. Ensuring revised eligibility frameworks appropriately recognise psychosocial, fluctuating and cumulative disability impacts;
2. Ensuring functional capacity assessments consider real-world functioning over time rather than isolated assessment presentation;
3. Remove treatment exhaustion requirements, which are likely to create unreasonable challenges and barriers for individuals unable to independently navigate complex and fragmented service systems;
4. Establishing a nationally funded foundational Navigation and Transition Support Stream for individuals unable to access or sustain engagement with the NDIS;
5. Undertaking detailed modelling regarding likely cost-shifting impacts onto:
 - hospitals and emergency departments;
 - housing and homelessness systems;
 - carers and families;
 - community sector organisations;
6. Establishing stronger transition pathways and early intervention supports for individuals found ineligible for the NDIS;
7. Increasing investment in community-based psychosocial, navigation and stabilisation support, aimed at reducing crisis escalation and avoidable hospital presentations;
8. Consulting directly with frontline community organisations experiencing increasing presentations from individuals falling between disability, health, housing and aged care systems.