

I am a 24-year-old female with disability, who applied for the NDIS in August 2017. Before application, I was living independently, studying full-time, working part-time, and volunteering each week. My condition began to deteriorate, so I applied for the NDIS. I could no longer walk around my home. I couldn't clean my room, prepare meals, or do my laundry. I'd faint several times a day, often on my way to the bathroom. I was getting injured every day from falling when I faint. My safety was at stake. My housemates became my carers. It was not a sustainable solution.

I applied with plenty of evidence. I included a report from an OT assessment which specified that I needed an electric wheelchair, a shower chair, a fall detection device, and more. I was initially rejected on the 1st November because I did not have "an impairment or impairments that result in substantially reduced functional capacity... in undertaking one or more of the following activities: communication, social interaction, learning, mobility, self-care, self-management" (Result of your NDIS Access Request letter).

As per section 8.3.1 of Access to the NDIS, "an impairment results in substantially reduced functional capacity to perform one or more activities when:

- the person is unable to participate effectively or completely in the activity or perform tasks or actions required to undertake or participate effectively or completely in the activity, without assistive technology, equipment...
- the person usually requires assistance... from other people to participate in the activity or to perform tasks or actions...
- the person is unable to participate in the activity, even with assistive technology, equipment, home modifications or assistance from another person" <https://www.ndis.gov.au/operational-guideline/access/disability-requirements.html>

I couldn't walk, couldn't access meals without them being prepared and placed in my hands, couldn't maintain the cleanliness of my environment, and often struggled with hygiene (from fainting in the shower). This clearly meets the criteria on reduced functional capacity.

In response to this, I submitted an internal review request (attached in confidential file) within a few days. I sent a follow-up email to the reviews team on 30th November 2017. In this email, I made it clear that I faint whenever I stand up, and that I usually need an ambulance when this happens. I told the reviews team that I cannot live safely in my current environment without supports. I could not move around the house without fainting and either getting injured or needing assistance to regain consciousness. In this email, I asked the reviews team to speed up the review process because I was not living in a safe environment, and I had serious safety concerns. I also noted that should the review not be conducted promptly, I would have to move away from my university, employment, volunteer work, and social supports, to move in with parents to care for me.

Also, on the 30th November, I submitted a complaint to the Minister for Disability Services, highlighting my safety concerns, and my need for support urgently. After a delay, I received a phone call where I was advised to follow the NDIS Complaints Management Process.

In December 2017, I moved in with my parents. My condition remained poor. Since I moved here, I have seen my friends only several times (it's been 8+ months). I can only leave the house with parental assistance as I don't have an appropriate wheelchair, a modified car, or an ability to use public transport (due to the dodgy wheelchair). I live all day every day either in my bed on my computer, or on the lounge watching TV. That's it. The only exceptions are appointments, and my occasional outing which involves joining my mother for the grocery shopping.

On 4th January 2018, I received a response regarding my internal review request (attached in confidential file). This time, I was rejected from the scheme because my conditions were not considered permanent, and because I did not have substantially reduced functional capacity. In my initial access request, my GP noted that my conditions were permanent or were likely to be permanent. I applied to the AAT.

The first case conference at the AAT was 14th March 2018. A solicitor attended this conference, with no representative from the NDIA who had authority to settle the case. This is in breach of the Model Litigant Policy. I provided further medical evidence, including a detailed report about my functional limitations, and a report detailing an additional diagnosis of Ehlers-Danlos Syndrome, a lifelong condition. At the conference, I was

advised to provide a personal statement, which I submitted on the 16th March. The NDIA was verbally instructed to contact myself and the AAT on the 9th of April. They were instructed to advise whether the additional evidence presented at the conference would result in my being accepted onto the scheme. If the NDIA still considered the evidence insufficient, they were instructed to provide a detailed report indicating the gaps and the additional reports/information I needed to provide. The NDIA did not do this.

On the 23rd April we had our second case conference. The NDIA-appointed solicitor said the NDIA requires me to under a comprehensive OT assessment by a medico-legal OT appointed by the NDIA. This OT assessment was quoted to be about \$3000. When I asked why they needed this, the solicitor said the NDIA is concerned about the "potential for bias" in the reports written by my GP and OT (OT report attached in confidential file). She said they are "more likely to be biased" and to "exaggerate my symptoms" to "advocate" for me "as their patient". I was angry. I asked her why their chosen OT would be considered any less biased than mine. I also made it clear that my condition changes with the seasons, changes based on the temperature, humidity, and barometric pressure of the day, and based on the amount of activity I had done in the days prior. Thus, seeing their OT on one occasion would not provide a more reliable picture of my functional limitations than the numerous reports provided the GP I have been seeing for 8 years, and my OT. I made it clear that I could not afford an OT assessment. The registrar said she did not expect the NDIA would take my case this far because I have provided plenty of evidence to demonstrate eligibility. The solicitor excused herself to call the NDIA. Upon return, she advised that the NDIA would pay for the assessment because I could not. The NDIA conceded on the permanency issue in light of the new evidence I had provided. They were now only questioning the reduced functional capacity criterion.

At this same conference, the NDIA was verbally advised to book the OT assessment, and advise us of the details, in, I believe, 2 weeks. The NDIA did not do this. After contacting the AAT to chase them up, the AAT produced a directions document with instructions in writing. I also demanded we go to a hearing after the OT report has been received. Due to the NDIA's failure to approach this case in, what I consider, a fair manner, considering all the evidence, I demanded we proceed to a hearing. At a hearing, an independent AAT member will have the decision-making power, rather than the NDIA. I wanted an unbiased opinion. After requesting this in the conference, the NDIA-appointed

solicitor proceeded to tell me that they will take an entire team of lawyers and a top Barrister to the hearing. She pointed out that I have no legal representation, and that they will have an entire team. She attempted to intimidate me by telling me their team of lawyers and Barrister will cross-examine me, my housemates, my health professionals, and my family. It was obvious intimidation tactics. So obvious that the registrar spoke over her and reassured me that hearings are a fair, balanced, and relaxed process. She reassured me that it's not about how much legal representation you have, the member conducting the hearing will only care about the evidence.

On the 27th of April 2018, I contacted my Local Member Mr. Bert van Manen, as well as The Hon. Greg Hunt MP, Minister for Health and The Hon. Jane Prentice MP, Assistant Minister for Social Services and Disability Services. In this email, I summarised the case so far. I noted that the NDIA was in breach of the Model Litigant Policy and discussed in detail the issue of the NDIA rejecting my GP and OT reports because they may be biased. I discussed my concerns about the NDIA prioritising the evidence of their appointed OT (who I'd see only once), over the evidence provided by my health care team who see the fluctuation of my conditions. I noted my social isolation and removal from community.

On the 16th May, I submitted a formal complaint through the NDIS website. The NDIS website makes it clear that they will take immediate action where complaints indicate that there appears to be a high risk of harm. I highlighted my safety issues. That I faint regularly and hurt myself as I fall. That crawling around the house injures my hypermobile, weak wrists. That I fall in the shower and need an ambulance when I don't regain consciousness alone. I did not receive a prompt response. After over 2 weeks of my local member hounding them, I received a phone call regarding my complaint. Their response was that I must follow the AAT process. So, I guess they really DON'T care if there is a high risk of harm.

On the 18th May, my local member responded to my email. He indicated that he had forwarded my email to the Hon Dan Tehan the Minister for Social Services.

The NDIA did not follow the directions, so we had a Directions Hearing on the 11th June, my 25th birthday. This hearing was scheduled to address

the NDIA's failure to comply with previous directions, including, but not limited to, not scheduling the OT assessment.

On the 16th July, I received a response from Jane Prentice's office. This letter included straight out lies. A quote from the letter is as follows: "an extension was sought when the Occupational Therapy assessment could not be arranged within the timeframe provided by the AAT." This is not true. The NDIA did NOT seek an extension. If they'd sought an extension, the AAT would not have had to organise a Directions Hearing on my birthday. The AAT member even mentioned this IN the Directions Hearing. The letter also stated: "The NDIA does not suggest the evidence provided by your treating professionals is biased, but that it does not meet the access criteria." The NDIA may not wish to admit to this, but the solicitor representing them at the conference clearly stated there were concerns of bias and exaggeration.

On the 12th July, I had the OT assessment at my home.

On the 1st August, I received an email with a copy of the report and other relevant information. The OT report clearly stated that I meet the criteria for Substantially Reduced Functional Capacity, and Self-Management.

If the NDIA meet the next deadline (unlike every OTHER deadline), then they will advise of their final decision on the 10th September 2018. Should they not concede, we will proceed with further back-and-fourths and finally get to a hearing.

In the meantime, I am still living with my parents. I am still living primarily in bed and on the couch. I leave the house for appointments and grocery shopping. Sometimes I go to family dinners for people's birthdays. I am still socially isolated, and I have had to reject employment offers due to my inability to actually get there (no accessible transport/inadequate wheelchair).

To date, all response from Ministers indicated that I must follow through with AAT processes. This is despite me indicating that I am at a high risk of harm and that I need either the NDIS immediately, or interim basic

support while we go through the process. It seems our government couldn't care less about the safety of its disabled citizens.