

# Supporting an applicant who has made previous access requests

Many applicants to the NDIS have been previously supported to apply without success. Each time an applicant makes an access request, NDIA access assessors must review all evidence held by the agency.

It's important when supporting an applicant to be aware of what has previously been provided to the NDIA, so that you can fill evidence gaps and navigate any conflicting or problematic information.

Before you start a new application, make sure you're familiar with the access process and are confident in putting together a strong application. See our resources on <a href="https://www.tspforall.com.au">www.tspforall.com.au</a> to learn more about access.

# How to obtain copies of previous applications

If you are not sure how many times a person has applied, and what evidence was presented, the applicant can request their previous applications and evidence from the NDIA.

A freedom of information (FOI) request gives the applicant access to:

- information that they have supplied to the NDIA
- copies of documents (except exempt documents) that the NDIA holds about the applicant this can be internal memos, emails and other information
- other information about the NDIA's operational policies and procedures.

There are costs involved in making a full FOI request. The NDIA's freedom of information page provides more information: <a href="https://www.ndis.gov.au/about-us/policies/freedom-information">https://www.ndis.gov.au/about-us/policies/freedom-information</a>.

Generally, a full FOI request is not necessary, and an applicant should be able to obtain all evidence previously submitted without following a formal process and *at no cost*. Email the FOI team (<a href="foi@ndis.gov.au">foi@ndis.gov.au</a>) to find out whether the information you need can be provided to you outside the FOI Act.

Some applicants will be upset about their previous unsuccessful applications – they may perceive it as a 'rejection'. It can be helpful to reframe this in your conversations as 'evidence not meeting NDIS legislation'. It may prove less distressing if the applicant requests that previous applications/evidence be forwarded to their support worker or clinician.

It is helpful to include a signed consent form with that request. (In general, a copy of a recent consent form is always useful to have to hand so that you can present it to the NDIA any time it is requested.) The consent forms can be found here <a href="https://www.ndis.gov.au/about-us/policies/access-information/consent-forms">https://www.ndis.gov.au/about-us/policies/access-information/consent-forms</a>. Note section 3.1a of the form 'Consent for the NDIA to Share Your Information'.



# Reviewing the evidence

Once you have copies of the previous applications it is important to carefully consider and sort the evidence. If this is not distressing for the applicant, a collaborative approach to the evidence for their next application will be respectful, empowering and help effectively manage expectations.

Review the access not met letter(s) from the NDIA and find out in what ways the previous application(s) did not meet the access criteria.

### Step 2

Consider the evidence, and the applicant's disability. Which conditions are most likely to meet the access requirements? What further evidence do you require to demonstrate the applicant's disability and likely permanence?

### Step 3

Complete section B of the Evidence of psychosocial disability form (and an access request form or supporting evidence form if the applicant has what you believe to be an eligible co-occurring condition).

Compare the current evidence against previously submitted evidence. Is the new evidence stronger than the evidence previously submitted? If not, consider how you could strengthen the application.

### Step 5

Check for conflicting evidence. For example, if you or the applicant have stated that they are unable to leave their home but other evidence shows that they have been able to participate in community activities, this will bring the credibility of their evidence into question. (For a clear example of incongruent evidence that proved problematic, see paragraphs 65-68 of AAT ruling Madelaine and the NDIA).

# Step 6

Consider how you will resolve any conflicting evidence. Remember that the applicant's functional impairment only needs to be substantial in one of the domains to meet criteria. Potentially, conflicting evidence could be left out of a subsequent application altogether.

### Step 7

Without specifically highlighting any problematic prior evidence, ensure that the evidence is presented in such a way that you have left no outstanding issues.

There may be a considerable amount of evidence from previous applications, which can be very overwhelming. A helpful way to manage this is:

- 1. Sort through the evidence and attachments by the dates on the evidence i.e., the date of letters etc., NOT the date of each entire application.
- 2. Put any exact duplicates to one side.
- Complete a table summarising the evidence you have, barriers to access and how you could overcome these (see example table on the next page). NOTE: DO NOT SEND THIS TABLE TO THE NDIA.
- Discuss any issues or what evidence may be required to proceed with the applicant. This way, the applicant can make an informed decision about whether they believe they meet the legislative requirements of the NDIS and whether they wish to proceed with the application.



Date	Evidence	Barrier to access	Existing solution	Further steps
12/01/2018	GP access request form	Depression and anxiety diagnosis 'still hoping for recovery'  Chronic fatigue, back pain, obesity, and	Psychiatrist's letter to GP – 15/2/2019 – bipolar diagnosis provided.  See comments regarding psychiatrist's letter	
23/1/2018	Psychologist's support letter	arthritis – 'would benefit from therapies'.  States that multiple clinical therapies would benefit the applicant and remedy their impairment.  Lists various therapies that might be helpful in the plan.		As this was some time ago, you would not refer to this document in your next application. Ensure, however, that any therapies attempted with this psychologist are listed on page 4 of the Evidence of psychosocial disability form.
16/03/2019	OT Report	Focuses on the applicant's chronic fatigue, back pain, obesity, and arthritis.  Applicant has no evidence to demonstrate that these conditions are permanent.  States that the therapies and supports for the applicant's ineligible conditions will improve the applicant's function and mental health.		If the applicant requires extensive support around physical disabilities, you can either: A. seek the evidence required to meet criteria for these disabilities B. apply for access for their psychosocial disability only, ensuring that these physical conditions do not feature in the new application.  If the applicant becomes a participant they can gain support from their NDIS workers to obtain the necessary evidence to have secondary disability accepted into the scheme.
15/2/2019	Psychiatrist's letter to GP	Bipolar diagnosis Trial of appropriate medication commenced. Whilst this evidence is good, the applicant will need to demonstrate that they have trialled the appropriate medication and though they have experienced some improvement they are still functionally impaired.		GP or psychiatrist to complete Section A of the Evidence of psychosocial disability form. The statement should indicate that the applicant is fully treated and stabilised and that they are still substantially functionally impaired. If appropriate, state that any further clinical interventions are to maintain current function and that further improvements in function are unlikely.

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