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In July 2021, the Commonwealth, state and territory disability ministers made the decision not to proceed with the introduction of independent assessments. Information about independent assessments has been archived.

There were 12 considerations in the report. These suggest things the NDIA should look at further.

Continue testing independent assessments

The NDIA should continue testing independent assessments among participants to make sure the process works well for our broad range of participants.

Check that participants can do independent assessments virtually

If a participant needs their independent assessments to be done virtually, suppliers must make sure they are able to properly assess the participant's functional capacity this way. This means checking:

- Do they have the right technology?
- Can the participant or their supporter use the technology?

Shorten the time it takes to finish an independent assessment

Independent assessments shouldn't be longer than 3 hours. If a longer assessment is needed, the session should be split over different days.

Make sure some questions can be answered before the independent assessment

To shorten independent assessments, participants and their supporters should be able to answer some questions before the session. This will also help suppliers to find the best assessor for the participant and make sure information is correct.

Monitor the tools

The NDIA should monitor data from assessments to see if we can make independent assessments shorter. We will still ask important questions - we will just check if there are some question that aren't needed.

Improve independent assessment reports

Independent assessments reports should show participants' needs and should be easy to read.

To make sure participants and their families know what to expect from an independent assessments report, the NDIA should promote what independent assessments will mean for participants' budget and plan.

Give assessors guidance documents

To make sure assessors use their best clinical judgement, the NDIA should give assessors guidance on how to use the tools.

This will help assessors get the answers they need from participants and their supporters and keep the independent assessments process the same for everyone.

Share what participants and their supporters can expect from IAs

More information about IAs should be given to participants and their supporters before they get an assessment. This information should be shared in different ways.

This means including:

- easy read options
- translations in languages other than English
- options for people with different communication impairments

Before an assessment, we should share:

- what the IA will do
- what the process is
- how the data and information will be used

Monitor assessors' experience and qualifications

We should monitor assessors' experience and qualifications. This information will be used to see if we can make criteria to match participants with the right assessor.

This criteria will include qualification and experience.

Monitor assessors' and check assessment tools

We want to make sure independent assessments reports are accurate and consistent.

To make sure independent assessments reports are done properly, we should monitor assessor performance and check the quality of reports. We should also check how we monitor data and review our processes if we make any changes to tools.

Train assessors

There should be more assessor training involving people with a lived experience of disability.

Training on the interaction activity is needed to make sure it is related to the participants' disability. It also needs to show their functional capacity.

Assessors should take notes through the entire independent assessments. This will help IAs become more about interaction, not just questions, answers, and tasks.

Create assessor training materials

Assessor training materials should be developed with people with lived experience of disability.

Training should include working with different disability types and independent assessments delivery.

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