

On this page:

[Findings](#)

[Questions](#)

In 2020, COVID-19 brought significant disruption to the way NDIS and many disability support services were offered.

The NDIS made a number of changes to assist participants to stay safe and ensure they were able to continue to access their essential services and supports, including offering planning consultations (over the phone or internet based video conferencing) and plan extensions of current plans (for up to 24 months). Many NDIS funded supports (including consultations with allied healthcare clinicians) also transitioned to remote service delivery via telephone or video over the internet.

In collaboration with the University of Melbourne, the NDIA conducted a national survey to investigate the experiences of NDIS participants, or their family members/carers, when accessing allied healthcare supports during the COVID-19 pandemic.

This research was done through an online survey. 2,391 NDIS participants, family members or carers across Australia took part in the survey.

Findings

The findings are presented in two parts:

- Research into [participant experiences with NDIS services during the COVID-19 pandemic \(Part 1\) \(DOCX 835KB\)](#)
- Participant experiences with NDIS funded allied healthcare services during COVID-19 (Part 2). This report is hosted on the [University of Melbourne Centre for Health, Exercise and Sports Medicine website](#).
- A [plain language summary of Part 2 \(DOCX 1.2MB\)](#) is also available.

What the survey found:

- Of the respondents that had a phone or video based plan review during the pandemic, most were happy, found the technology safe and easy to use and were comfortable communicating over the phone or video. Nearly half said they would likely choose a plan review by phone or video in the future.
- Of the respondents that were offered a plan extension, most were happy and four in five said they would like the option for plan extensions to continue.

The impact of COVID-19 on NDIS, allied healthcare services and consumer experiences transitioning to telehealth

20/04/2024, 02:51

- Like many Australians, some participants found it difficult to access some non-essential services during restrictions. However more than half transitioned to remotely delivered services via telephone or video to enable services to continue.
- Those who had remotely delivered consultations during the pandemic reported positive experiences overall. They felt comfortable and safe communicating and believed the care they received was effective during the lock down.
- One in three of respondents said they would be interested in remote service delivery of allied health consultations by phone or video in the future, equivalent to approximately 130,000 NDIS participants.

From this research we have learnt much about the NDIS and how to better support participants and providers during emergency responses. These findings were used to help support decisions we make around what COVID related initiatives we will keep for the future and our proposed reforms to the NDIS planning processes, which aim to further enhance participant choice and control, such as continuing with the flexible approach to plan review meetings and the possibility of having plan durations of up to three (3) years. [Read more information about these new changes.](#)

Due to the continuing risk of COVID-19 in the Australian community, the NDIA extended some of the support measures and mechanisms place to support providers (both registered and non-registered) to ensure supports are continued and have been working with other government agencies, states and territories to share and discuss initiatives to ensure we respond to issues in the future.

Questions

If you have any questions about these reports, they should be addressed to:

For Part 1 – NDIA Research and Evaluation Branch

Email: research@ndis.gov.au

or

For Part 2 - The University of Melbourne, Centre for Health, Exercise and Sports Medicine
Level 7, Alan Gilbert Building
161 Barry Street
The University of Melbourne, 3010

Email: belinda.lawford@unimelb.edu.au

This page current as of
6 October 2022