



PARLIAMENTARY SUBMISSION | JOINT STANDING COMMITTEE ON THE NDIS

Embedding Lived Experience Intelligence in NDIS Governance, Performance, Safeguards and Accountability

Submission to the Joint Standing Committee on the National Disability Insurance Scheme — Annual Report No. 2 of the 48th Parliament

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Executive Summary

The National Lived Experience Commission (NLEC) welcomes the opportunity to provide evidence to the Joint Standing Committee on the National Disability Insurance Scheme as part of its Annual Report No. 2 inquiry into the implementation, performance, governance, administration and expenditure of the NDIS.

NLEC's central submission is that the NDIS should not be assessed only through expenditure, participant numbers, administrative compliance, actuarial metrics or provider-market outputs. It must also be assessed through lived-experience evidence of whether the scheme is accessible, safe, dignified, trauma-informed, culturally responsive, regionally equitable and capable of preventing institutional harm.

NLEC supports stronger NDIS accountability. However, accountability that does not include lived-experience evidence and system-harm indicators is incomplete. The people who know most about how the NDIS works — and where it fails — are the people who have lived inside it: participants, families, carers, advocates, support workers, providers and community members. Their evidence is not anecdote. It is operational intelligence.

This submission addresses ten areas of concern identified through NLEC's evidence synthesis and makes ten recommendations for reform. NLEC offers its assistance to the Committee as a standing source of independent lived-experience intelligence, and commits to providing annual evidence updates as its National Evidence Collection Program develops.

"Lived experience is not symbolic consultation. It is operational intelligence. The NDIS cannot be effectively governed without it."

— National Lived Experience Commission, June 2026

About the National Lived Experience Commission

The National Lived Experience Commission (NLEC) is a registered national Australian charity with charitable purposes that include advancing public debate, advancing social or public welfare, and advancing health. NLEC is Australia's independent lived-experience evidence and reform body.

NLEC converts the direct experience of people who have navigated Australia's health, mental health, disability, justice, housing, social services and community systems into structured, rigorous, publicly accountable evidence that institutions must respond to. NLEC is not a service provider. It is evidence infrastructure — a standing national body that gathers, analyses and publishes lived-experience intelligence in a form that drives institutional reform.

NLEC's core doctrine is that lived experience is not symbolic consultation. It is operational intelligence. The people most affected by system failures are the most important source of intelligence about how to prevent and address those failures. NLEC's role is to ensure that intelligence is captured, structured, analysed and published in a form that cannot be ignored.

NLEC has published the National Co-Design Standards Framework, the 2026 National Lived Experience Intelligence Report, the Primary Research and Intelligence Collection Framework, and the National Evidence Collection Program 2026–2027. NLEC has also lodged parliamentary submissions including Submission 1129 to the Senate inquiry into the NDIS Amendment Bill 2026.

NLEC is governed by an independent board of directors and operates in full compliance with ACNC governance standards. Its independence policy ensures that no funder or partner can direct, control or suppress its findings.

Key Issues for the Committee

1. Participant Access and Administrative Burden

Access to the NDIS remains a significant barrier for many Australians with disability. The access criteria are complex, inconsistently applied and poorly suited to the episodic and fluctuating nature of many disabilities, including psychosocial disability, acquired brain injury and degenerative conditions. People with disability, their families and carers consistently report that the access process is exhausting, confusing and frequently results in incorrect decisions that require costly and time-consuming review.

Administrative burden is not a minor inconvenience. For people with significant disability, complex health needs or limited support networks, the administrative demands of the NDIS — including access applications, planning meetings, plan reviews, provider agreements, service bookings and portal navigation — can themselves constitute a form of harm. NLEC's 2026 Intelligence Report identifies administrative harm as a cross-cutting national finding across multiple service systems, and the NDIS is among the most acute examples.

The Committee should examine whether the NDIA's administrative processes are designed with the needs of participants at their centre, or whether they are primarily designed for administrative efficiency and cost control.

2. Planning Quality, Review Delays and Decision-Making Harm

NDIS planning processes are frequently reported by participants and their families as inadequate, inconsistent and insufficiently responsive to individual circumstances. Plans that do not reflect actual support needs — whether through

insufficient funding, inappropriate support categories or failure to account for fluctuating needs — cause direct harm. People are left without the supports they need, their health and wellbeing deteriorates, and the costs are shifted to families, carers, health systems and emergency services.

Plan review processes are slow, opaque and frequently experienced as adversarial. Participants who seek reviews of inadequate plans face lengthy delays, inconsistent outcomes and a process that places the burden of proof on the person with disability rather than on the NDIA to demonstrate that the plan is adequate. The use of algorithmic and data analytics tools in planning decisions — without adequate transparency, human oversight or participant involvement in their design — adds a further layer of concern.

NLEC submits that the Committee should examine the quality of planning processes from the perspective of participants, not only from the perspective of administrative efficiency or expenditure management.

3. Safeguarding Gaps, Abuse, Neglect, Exploitation and Provider Misconduct

The NDIS Quality and Safeguards Commission has an important role in protecting participants from abuse, neglect, exploitation and provider misconduct. However, the evidence before multiple inquiries and reviews suggests that the current safeguarding framework has significant gaps. Participants — particularly those with complex needs, cognitive disability, communication support needs or limited informal support networks — remain vulnerable to exploitation, financial abuse, physical harm and neglect.

Provider misconduct, including overcharging, service substitution, fraudulent billing and exploitation of participants, is a significant concern in the NDIS market. The barriers that prevent participants from reporting misconduct — including fear of losing services, lack of alternative providers, inadequate support to navigate complaints processes and distrust of formal systems — mean that the true scale of provider misconduct is likely significantly underreported.

NLEC submits that safeguarding cannot be reduced to compliance monitoring and complaints handling. Effective safeguarding requires proactive intelligence gathering from participants about their experiences of safety, dignity and provider conduct — intelligence that the current system does not systematically collect.

4. The Limits of Compliance-Only Regulation

The NDIS Quality and Safeguards Commission's regulatory model is primarily compliance-based: it registers providers, sets standards, investigates complaints and takes enforcement action. This model has value, but it has significant limitations as a safeguarding mechanism.

Compliance-based regulation is reactive. It responds to harm after it has occurred. It relies on complaints being made, which requires participants to have the capacity, confidence and support to navigate a formal complaints process. It does not systematically gather intelligence about the lived experience of participants in relation to safety, dignity and provider conduct. And it does not identify patterns of emerging harm before they escalate into serious incidents.

NLEC submits that the Commission's regulatory model should be supplemented by a proactive lived-experience intelligence function — a standing mechanism for gathering, analysing and publishing evidence about participant safety, dignity and provider conduct from the perspective of participants themselves.

5. Thin Markets, Regional Inequity and Service Deserts

The NDIS's market-based service delivery model has produced significant inequity in service access across geographic areas. In rural, regional and remote communities, thin markets — where there are insufficient providers to meet demand — mean that participants cannot access the supports in their plans. Plans that cannot be implemented are not plans. They are documents.

The lived experience of participants in thin markets is one of the most significant and persistent failures of the NDIS. Participants in remote communities, in particular, face compounding disadvantage: thin markets, cultural and linguistic barriers, inadequate infrastructure, and the absence of locally available providers with the cultural competency to deliver safe and effective services.

NLEC submits that the Committee should examine thin market failure as a systemic issue requiring structural intervention — including market stewardship, provider-of-last-resort arrangements, flexible service delivery models and specific funding for rural, regional and remote service delivery.

6. Psychosocial Disability and Complex Needs

People with psychosocial disability — those whose disability arises primarily from mental health conditions — face specific and compounding barriers in the NDIS that are not adequately addressed by the scheme's current design. Access criteria are poorly suited to the episodic and fluctuating nature of psychosocial disability. Planning processes do not adequately capture the support needs of people with psychosocial disability. Social and Community Participation and Capacity Building supports — the supports most critical for people with psychosocial disability — are under threat from proposed NDIS reforms.

The proposed NDIS Amendment Bill 2026 projects the removal of 346,000 people from the scheme by 2031, with \$13.2 billion in savings targeting Social and Community Participation supports. NLEC's assessment of the Bill's development process scored it 10 out of 28 on NLEC's National Co-Design Standards Framework — Consultation Only. The Office of Impact Analysis identified psychosocial disability participants as the group most impacted by these reductions.

NLEC submits that psychosocial disability must be treated as a priority area for scheme improvement, not a residual category. The Committee should examine whether the NDIS is meeting the needs of people with psychosocial disability and whether proposed reforms will worsen or improve their outcomes.

7. Children, Families and Early Intervention

Children with disability and their families face particular challenges in the NDIS. Early intervention is critical to long-term outcomes, but access to early intervention supports is frequently delayed, inconsistent and inadequately funded. Families report that the administrative burden of the NDIS falls disproportionately on them, particularly mothers, who are the primary carers in the majority of families with a child with disability.

The proposed Thriving Kids programme — announced as part of the NDIS reform package — has been welcomed in principle, but significant concerns remain about whether it will provide equivalent supports to those currently available through the NDIS, whether it will be available in thin markets, and whether it has been genuinely co-designed with families and children with disability.

8. First Nations and Culturally Responsive Service Design

First Nations Australians with disability face compounding disadvantage in the NDIS. They are over-represented in the disability population, under-represented in NDIS participation, and face significant barriers to accessing culturally safe and appropriate services. The NDIS's market-based model has not produced culturally responsive services in First Nations communities, and the absence of community-controlled providers in many areas means that First Nations participants must choose between services that are culturally unsafe and no services at all.

NLEC acknowledges that First Nations lived-experience intelligence must be gathered and led by First Nations people and organisations. NLEC commits to developing a First Nations engagement framework in genuine partnership with First Nations communities and organisations before undertaking any primary research in this domain.

9. Financial Stress, Informal Carers and Family Burden

The NDIS was designed to reduce the burden on informal carers — primarily family members — by providing funded supports that enable people with disability to live independently and participate in their communities. In practice, the scheme's administrative complexity, planning inadequacies, thin markets and support gaps frequently shift burden back onto families.

The financial and emotional burden on informal carers — the majority of whom are women — is substantial and growing. The proposed reduction of Social and Community Participation supports will, according to the NDIS Amendment Bill's own explanatory memorandum, disproportionately affect women carers. The Committee should examine whether the NDIS is reducing or increasing carer burden, and whether proposed reforms will worsen this situation.

10. Data Gaps and the Absence of Structured Lived-Experience Intelligence

The NDIA and the NDIS Quality and Safeguards Commission produce significant volumes of data about the scheme — expenditure, participant numbers, plan utilisation, provider registrations, complaints received and enforcement actions taken. This data is valuable. But it does not tell the Committee what it most needs to know: whether participants are safe, whether their plans are adequate, whether providers are treating them with dignity, whether the scheme is accessible to those who need it most, and whether it is preventing or perpetuating institutional harm.

There is no standing national mechanism for gathering, analysing and publishing structured lived-experience evidence about the NDIS from the perspective of participants, families, carers and workers. This is the gap that NLEC was established to fill. NLEC's National Evidence Collection Program will gather original lived-experience evidence from participants with disability — including people with psychosocial disability — on the impact of the NDIS and proposed reforms, with findings to be published in NLEC's 2027 National Lived Experience Intelligence Report.

Recommendations

NLEC makes the following ten recommendations to the Joint Standing Committee on the NDIS:

- R1

Establish a Formal Lived-Experience Intelligence Function in NDIS Oversight

The Committee recommend that the NDIA and the NDIS Quality and Safeguards Commission be required to establish or commission a formal lived-experience intelligence function — independent of government and providers — to gather, analyse and publish structured evidence about participant experience, safety, dignity, plan adequacy and provider conduct on an annual basis. This function should be governed by people with lived experience of the NDIS and should report publicly to the Committee.
- R2

Require Reporting on Participant Harm, Administrative Harm and Safeguarding Outcomes

The Committee recommend that the NDIA and the NDIS Quality and Safeguards Commission be required to report annually on: participant harm indicators (including harm caused by plan inadequacy, review delays and administrative complexity); administrative harm (including harm caused by access decisions, planning processes and portal navigation); safeguarding outcomes (including serious incidents, restrictive practices, complaints, enforcement actions and provider banning orders); and the lived-experience of participants in relation to safety, dignity and provider conduct.
- R3

Create a National Lived-Experience Evidence Collection Program for NDIS Participants

The Committee recommend that the Australian Government fund an independent national lived-experience evidence collection program for NDIS participants, families, carers and workers — to be conducted by an independent body with no financial interest in the scheme's administration — with findings published annually and directed at the Committee, the NDIA and the NDIS Quality and Safeguards Commission. NLEC's National Evidence Collection Program is designed to contribute to this function.

R4 Embed Lived-Experience Governance in Scheme Design, Review and Safeguarding

The Committee recommend that lived-experience governance be embedded in all major NDIS policy, design, review and safeguarding functions — including a permanent lived-experience advisory mechanism with genuine decision-making power, fair remuneration for members, public reporting obligations, and membership that reflects the diversity of NDIS participants including people with psychosocial disability, First Nations peoples, people from CALD backgrounds, children and young people, and people in rural and remote areas.

R5 Adopt National Co-Design Standards for NDIS Policy and Service Reform

The Committee recommend that the NDIA and the NDIS Quality and Safeguards Commission adopt NLEC's National Co-Design Standards Framework as the basis for assessing co-design quality in all major NDIS reform processes, and that they publicly report against the framework's seven standards and 28-point assessment tool for all major policy and service reform processes. NLEC's assessment of the NDIS Amendment Bill 2026 process scored it 10 out of 28 — Consultation Only.

R6 Improve Transparency Around Provider Complaints, Restrictive Practices and Enforcement

The Committee recommend that the NDIS Quality and Safeguards Commission be required to publish comprehensive, accessible and timely data on: provider complaints received and outcomes; serious incidents reported and outcomes; restrictive practices authorised and reviewed; enforcement actions taken including banning orders, infringement notices and prosecutions; and provider compliance ratings. This data should be published in a format accessible to participants and their families, not only to researchers and policy professionals.

R7 Strengthen Mechanisms for Regional, Rural and Remote Participant Evidence

The Committee recommend that specific mechanisms be established to gather lived-experience evidence from NDIS participants in rural, regional and remote communities — including outreach evidence collection, community listening sessions, First Nations-led evidence processes, and flexible participation options for people with limited digital access. Thin market failure should be treated as a systemic issue requiring structural intervention, not merely a market efficiency problem.

R8 Recognise Psychosocial Disability and Complex Trauma as Priority Areas

The Committee recommend that psychosocial disability and complex trauma be recognised as priority areas for scheme improvement, with specific attention to: access criteria reform; planning process improvement; protection of Social and Community Participation supports; the NDIS-mental health system interface; and the impact of proposed NDIS reforms

on people with psychosocial disability. The Committee should commission an independent lived-experience impact assessment of the NDIS Amendment Bill 2026 on people with psychosocial disability before the Bill proceeds further.

R9 Fund Independent Lived-Experience Bodies to Provide Evidence, Advice and Reform Oversight

The Committee recommend that the Australian Government provide sustainable, multi-year funding to independent lived-experience bodies — including NLEC and other organisations with demonstrated capacity to gather, analyse and publish lived-experience evidence — to provide evidence, advice and reform oversight in relation to the NDIS. This funding should be subject to NLEC's independence policy: no funder may direct, control or suppress findings.

R10 Ensure NDIS Reform Does Not Shift People into Unsupported Poverty or Institutional Settings

The Committee recommend that no NDIS access or support reduction occur unless and until alternative supports are demonstrably operational, locally available, affordable, nationally consistent, rights-compatible and independently assessed through lived-experience evidence. The Committee should adopt NLEC's No-Loss Transition Safeguard (proposed in NLEC's Submission 1129 and addendum to the NDIS Amendment Bill inquiry) as a standing principle for all NDIS reform processes.

Conclusion

The NDIS is one of Australia's most significant social policy achievements. It has transformed the lives of hundreds of thousands of Australians with disability and their families. But it is also a scheme under significant pressure — from rising costs, administrative complexity, provider market failures, safeguarding gaps and proposed reforms that carry significant risks for the most vulnerable participants.

The Committee's oversight role is critical. But oversight that relies only on administrative data, actuarial modelling and provider-market metrics will miss the most important evidence: the lived experience of participants, families, carers and workers who know, from direct experience, where the scheme is working and where it is failing.

NLEC was established to ensure that evidence is gathered, structured, analysed and published in a form that cannot be ignored. NLEC's National Evidence Collection Program will gather original lived-experience evidence from NDIS participants — including people with psychosocial disability, people in rural and remote areas, First Nations participants and people with complex needs — and publish findings in NLEC's 2027 National Lived Experience Intelligence Report.

NLEC commits to providing the Committee with annual evidence updates as its evidence programme develops, and to making its evidence available to the Committee for use in its oversight of the NDIS.

NLEC's Offer to the Committee

The National Lived Experience Commission would welcome the opportunity to:

- Provide lived-experience evidence to the Committee on an ongoing basis
- Conduct stakeholder consultation and community listening sessions on behalf of or in support of the Committee's work
- Apply NLEC's National Co-Design Standards Framework to assess the quality of NDIS reform processes
- Provide advisory support on lived-experience evidence methodology, participant engagement and trauma-informed research

- Contribute to public debate and reform communication on NDIS governance, safeguarding and participant experience
- Appear before the Committee at future hearings, roundtables or evidence sessions

National Lived Experience Commission would welcome the opportunity to provide further evidence, appear before the Committee, or support future lived-experience engagement connected to the Committee's work.

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