



PO Box 172  
Clifton Hill VIC 3068  
Phone: 03 9417 1025  
Regional & Interstate: 1800 222 660  
ABN: 42 140 529 273  
[www.cyda.org.au](http://www.cyda.org.au)

Department of Health, Disability and Ageing  
[NDISRegulation@health.gov.au](mailto:NDISRegulation@health.gov.au)

27 February 2026

**Attention:** NDIS Provider and Worker Registration Taskforce, Department of Health, Disability and Ageing

Please accept this letter as Children and Young People Australia (CYDA)'s submission to the department's consultation paper, *Getting It Right: A New Definition for NDIS Providers*.

Thank you for the opportunity to provide written feedback on this consultation paper.

### **Children and Young People with Disability Australia (CYDA)**

CYDA is the national representative organisation for children and young people with disability aged 0 to 25 years. CYDA has extensive national networks of young people with disability, their families and caregivers, and advocacy and community organisations.

Our vision is that children and young people with disability in Australia will fully exercise their rights, realise their aspirations and thrive in all communities.

### **CYDA's Response to the consultation paper**

Our response is informed by the lived and living experience and expertise of our membership of children and young people with disability and their families and caregivers, as well as CYDA staff with lived and family experience of disability.

It is also informed by CYDA's Provider Registration survey, conducted in 2024, which received responses from 161 young people with disability, their families and carers sharing their views on NDIS registration of providers and workers.<sup>1</sup> This survey highlighted apprehensiveness about registration, with 71% of respondents concerned about the negative impact registration may have on their safety, needs, choice and control.

Our response and recommendations address topics raised in the consultation paper relating to ensuring that a new definition maintains safety and quality, while also ensuring innovation, choice and control.

## **Introduction and Context**

Children and young people represent a significant and growing proportion of people with disability in Australia and make up a large share of National Disability Insurance Scheme (NDIS) participants. In 2022, an estimated 946,300 children and young people aged 0–24 years (12.1%) had disability, with around 6% experiencing profound or severe disability. Most required assistance with everyday activities, and more than half experienced multiple types of disability, reflecting the complexity of supports required for this group<sup>2</sup>.

The NDIS plays a particularly important role in the lives of children and young people. Compared with the broader disability population, participants in the Scheme are much younger, with 43% aged 14 years or under<sup>3</sup>. Eligibility rates are highest for younger applicants, reflecting the importance of early identification and support. Children and young people rely on a wide range of providers, including therapy providers, support workers and community-based services, and require flexible supports that respond to changing developmental and family needs.

Despite the central role of the Scheme, many children and families experience gaps in support. More than four in five children with disability have unmet support needs, particularly for therapies, school-based supports and support workers<sup>4 5</sup>. These gaps are greater for children from low-income households, single-parent families, culturally diverse communities and regional or remote areas. Barriers to access also disproportionately affect girls and children with intellectual disability.

Children and young people with disability often depend on multiple and interconnected supports across health, education and community settings. A clear, meaningful and workable definition of an NDIS provider is therefore critical to ensuring safety and quality while maintaining flexibility, innovation and continuity of supports. Changes to the provider definition must avoid unintended disruption to essential supports and should strengthen choice and control for children, young people and their families.

In our submission we cover the following three topic areas as outlined in the consultation paper. For each topic area we outline one recommendation per topic area:

- 1) Definition of an NDIS provider
- 2) Impacts of a new provider definition on a new registration model
- 3) Proposed obligations for registered NDIS providers.

## **Summary of Recommendations**

1. Adopt a flexible definition of an NDIS provider within a graduated, risk-proportionate registration model that protects safety and quality while preserving choice and control
2. Implement the new provider definition with staged transition arrangements and a time-limited review
3. Provide clear and accessible guidance on provider obligations, particularly for self-managed participants and self-registered providers.

## 1. Definition of an NDIS provider

### **Recommendation 1: Adopt a flexible definition of an NDIS provider within a graduated, risk-proportionate registration model that protects safety and quality while preserving choice and control.**

CYDA supports the graduated, risk-proportionate provider registration model proposed by the NDIS Taskforce and considers a mandatory provider regulatory model to be a key lever for strengthening regulation and safeguards in the NDIS. However, the proposed revised definition of an NDIS provider should support this approach while maintaining sufficient flexibility for participants.

Changes to the definition must balance risk management with participant choice and control, particularly for children and young people with disability who often rely on a mix of formal, informal and mainstream supports. Overly restrictive definitions risk limiting access to trusted and locally available supports.

Feedback from CYDA members via our 2024 registered provider survey highlights the importance of:

- Tailored and personalised supports, including for children with complex or intersectional needs
- Continuity of relationships with workers
- Supports that enable inclusion in the community
- Flexible service arrangements and timely access.

CYDA supports the inclusion of platform providers in the definition of NDIS provider to strengthen safety and accountability. However, the definition should avoid unintentionally capturing low-risk informal or mainstream supports where registration would not improve safety or quality, for example, short-term community programs or small mainstream businesses that provide occasional supports (such as tutoring or music lessons), where registration requirements would be unlikely to improve safety or quality but may reduce participant access.

Maintaining flexibility is particularly important for children and young people in regional and remote areas and those from First Nations, culturally and linguistically diverse and LGBTIQ+ communities who may depend on trusted local or culturally safe providers.

CYDA recommends that the new definition of an NDIS provider:

- Supports a graduated risk-proportionate and mandatory registration model
- Includes higher-risk and intermediary services, including platform providers
- Avoids capturing low-risk informal and mainstream supports unnecessarily
- Maintains flexibility for self-managed participants to engage appropriate providers.

## **2. Impacts of a new provider definition on a new registration model**

### **Recommendation 2: Implement the new provider definition with staged transition arrangements and a time-limited review.**

CYDA supports the move to a stronger and more consistent registration model. However, changes to the definition of NDIS provider may have significant impacts on the availability and continuity of supports for children and young people with disability.

Disruption to therapies, support workers or community-based supports can have immediate impacts on a child or young person's development and participation. Implementation should therefore strengthen safeguards in higher-risk areas without reducing the availability or quality of supports or limiting innovation.

CYDA recommends staged implementation, prioritising higher-risk services first, supported by clear transition arrangements for participants and providers, and ongoing monitoring of market impacts and service availability.

A formal review within two years of implementation should assess whether the new definition and registration model:

- Maintain access to appropriate supports for children and young people
- Strengthen safeguards in higher-risk areas
- Avoid unintended service gaps or disruption
- Support a sustainable and innovative provider market.

## **3. Proposed obligations for registered NDIS providers**

### **Recommendation 3: Provide clear and accessible guidance on provider obligations, particularly for self-managed participants and self-registered providers.**

Changes to provider obligations must be accompanied by clear and accessible guidance on how the new definition and the risk-proportionate registration model will operate in practice, particularly for self-managed participants.

Registration alone does not guarantee safety or quality. CYDA has consistently heard from children and young people with disability and their families that there can be a gap between provider governance requirements and the quality of supports delivered in practice.

Recent NDIS reforms have also created confusion for many families. Implementation of new registration arrangements must be supported by clear and accessible communication and meaningful engagement with participants.

#### **CYDA recommends that the Government:**

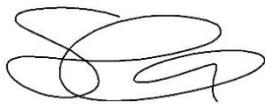
- Publish clear guidance on the new provider definition and registration model, including for self-managed participants
- Clearly explain self-registration requirements and safeguards
- Provide accessible information in plain language and Easy Read

- Undertake targeted engagement with children and young people with disability and their families during implementation.

Thank you again for this opportunity to make a submission.

If you have any questions about this letter or you would like to know more about CYDA's policy and research work please do not hesitate to contact Dr Liz Hudson, Policy and Research Manager at [lizhudson@cyda.org.au](mailto:lizhudson@cyda.org.au), or Dr Shae Hunter at [shaehunter@cyda.org.au](mailto:shaehunter@cyda.org.au).

Kind regards,



Skye Kakoschke-Moore

Chief Executive Officer

## Endnotes

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<sup>1</sup> CYDA (2024) *Submission to the NDIS Provider and Worker Registration Taskforce*

<sup>2</sup> Australian Bureau of Statistics (ABS) (2025). *Children and young people with disability, 2022*. Visit: <https://www.abs.gov.au/articles/children-and-young-people-disability-2022>

<sup>3</sup> Australian Institute of Health and Welfare (AIHW) (2024). *People with disability in Australia: Specialist disability support services*. Visit <https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia>.

<sup>4</sup> National Disability Insurance Agency (NDIA) (2025). *Explore data. Period: Q4 FY24-25*. Visit <https://dataresearch.ndis.gov.au/explore-data>.

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<sup>5</sup> O'Flaherty, M. et al. (2024). *Australian children with disabilities' unmet support needs: Evidence from the Better Support for Kids with Disabilities survey*. Life Course Centre Working Paper Series. Visit: <https://lifecoursecentre.org.au/working-papers/australian-children-with-disabilities-unmet-support-needs-evidence-from-the-better-support-for-kids-with-disabilities-survey/>.