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| Child Protectionworkbook  Course 2: Preparing for working within the National Disability Insurance Scheme |
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# The National Disability Insurance Scheme Learning and Development Program

With the implementation of the National Disability Insurance Scheme (NDIS), workers in the child and family system have an important role in identifying families with disability and helping them access and navigate the NDIS. This NDIS Learning and Development Program was developed for the Victorian Government Department of Health and Human Services by the Parenting Research Centre and aims to build the capacity of workers in the child and family system to improve outcomes for families with disability.

You will probably already be using some of the skills and knowledge covered in this course; others might be new. Whether you’ve been working in this area for a short or long time, this course aims to build on your existing skills and knowledge to improve the outcomes of children and/or parents and carers with disability.

The program consists of four sequential eLearning courses and corresponding workbooks. The courses are designed to be completed alongside the NDIS 101 eLearning course. The workbooks are designed for you to work through at the completion of each course – to give you the opportunity to apply what you’ve learned to your individual work setting.

Across the four courses the NDIS Learning and Development Program will build your knowledge, skills and confidence to:

* recognise and understand disability
* understand the NDIS and the support needs of families with children and/or parents and carers with disability
* engage families in conversations about their support needs, and support them through the NDIS access, planning and implementation stages
* work collaboratively with the NDIS and other services.

# About this workbook

This workbook gives you the opportunity to apply the skills and knowledge you learned in Course 2: Preparing for working within the NDIS. In it you explored:

* pathways to access the NDIS for children six and under
* pathways to access the NDIS for children and adults from seven to 64
* process to request reviews of NDIA decisions
* planning processes
  + key roles for CFS practitioners in supporting parents and carers throughout the process.

If you haven’t already completed the eLearning component of Course 2, please do so before attempting the exercises in this workbook.

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| Microsoft Word document icon | Remember, you can download a full transcript of Course 2 under the ‘Menu’ tab on the home page of the eLearning course. |

This workbook has the following sections:

* 1. Exercise 1: Family scenario. This exercise gives you an opportunity to apply your knowledge to a fictional family scenario
  2. Exercise 2: Develop your local plan. This exercise will help you plan and identify key organisations in your local area
  3. Resources: This is a list of practice guides and other resources that might be useful in your work with families with disability.
  4. Frequently asked questions: These FAQs might be useful for you after completing this course
  5. Glossary. This is a list of definitions for key terms and acronyms used in the eLearning course
  6. Appendix 1: Pathway for access and planning flowcharts. This is a copy of the Access and Planning flowcharts used in the eLearning course
  7. Appendix 2: Evidence to determine access. This is a summary of evidence that might be used to determine access
  8. Appendix 3: Sample Access Request Form

# Exercise 1: Family scenario

In the Course 1 workbook we introduced you to a family similar to those you might encounter during your usual practice. We can now provide you with further information about this family. Read the family’s story in Box 1 and apply your learnings from Course 2 to answer the questions below. If others in your workplace are also doing this course, you might like to work through the exercises together. We’ve provided some suggested responses at the back of this workbook.

This family scenario has been produced for educational purposes. Information provided about individuals is fictitious. Any resemblance to real persons, living or dead, is purely coincidental.

## Box 1: Family scenario

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| What we already know about the family  Dana has a daughter, Sienna, who is 12, and a son, Alex, who is 10. The family are currently involved with Child Protection; Alex and Sienna are subject to a Family Preservation Order due to concerns regarding Dana’s capacity to meet the children’s’ developmental needs. The family recently moved to a new region.  In addition to the Family Preservation Order, an intervention order is in place against Dana’s former partner, the children’s father, who was very violent toward Dana and the children, but particularly Alex. Neither of the children have contact with their father and he does not provide financial support.  Alex has been significantly affected by the family violence perpetrated by his father and displays violent behaviours towards Dana and Sienna at home, and violent and sexualised behaviours at school.  The family have been involved with Integrated Family Services in their previous region and they have been referred to family services in the new region also.  Alex attends the local primary school, where staff are developing strategies to manage his behaviour in the school environment. His classroom teacher and the school nurse have also raised concerns with Dana about his development, noting that he’s well behind his peers in terms of his language, literacy and numeracy skills. He also seems to have difficulty remembering things.  Dana has a history of depression, anxiety and substance abuse. Having just moved regions, the family are socially isolated with no friendship networks or extended family nearby.  Further information about the family  As a result of the concerns you and the family service worker have about Alex’s behaviour and development, you arrange to have him assessed by a service qualified in undertaking paediatric neuropsychology assessments and he is diagnosed with a probable acquired brain injury (ABI). His ABI results in impulsiveness and he angers quickly.  As you get to know the family, you become concerned that Dana may have a psychosocial disability as she presents as significantly impaired by her mental illness. You have noticed Dana has difficulties following conversations, remembering things and followingdirections. |

## Questions

1. How might the NDIS be able to support this family?

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1. What is the pathway for Alex to access the NDIS?

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1. What support can you provide to help link this family to disability supports? What is your role in this process?

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1. Who can you consult if you're unsure about the disability support options for this family?

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1. Who might you consult to support the family through the NDIS access request process?

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1. What might you say to this family to describe the NDIS to them (in less than 100 words)?

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1. Once the family is granted access to the NDIS, what do they need to consider in pre-planning?

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1. What sorts of things should you encourage the family to build into their plan?

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| Tick icon | You can find some suggested answers to these questions at the back of this workbook. |

# Exercise 2: Develop your local plan

Use the information below as a prompt to develop a listing of your local providers and contacts. Write down the contact details so you can refer back when you need to.

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| [Local NDIS office](https://www.ndis.gov.au/about-us/locations.html#vic) <https://www.ndis.gov.au/about-us/locations.html#vic> | My local NDIS office is: |
| [Local ECEI partners](https://www.ndis.gov.au/about-us/locations.html#vic) <https://www.ndis.gov.au/about-us/locations.html#vic> | My local ECEI partner is: |
| [Local Area Coordinator](https://www.ndis.gov.au/about-us/locations.html#vic) <https://www.ndis.gov.au/about-us/locations.html#vic> | My Local Area Coordinator is: |
| [Advocacy organisations](https://www.dana.org.au/find-an-advocate/) <https://www.dana.org.au/find-an-advocate/> | My local disability advocacy organisations are: |

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| Local mainstream services | What mainstream services in your area might be important to the support you provide families with disability? Think about: |
| Recreation: |
| Parenting support: |
| Health and wellbeing: |
| Finances: |
| Social support: |

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| Local mainstream services continued… | Education: |
| Employment: |
| Housing: |
| Other: |

# Resources

## Pre-planning resources

The following resources can be used to help families with pre-planning.

Association for Children with a Disability: [NDIS planning workbook](https://www.acd.org.au/wp-content/uploads/2017/03/acd-ndis-workbook-V2-web.pdf) <https://www.acd.org.au/wp-content/uploads/2017/03/acd-ndis-workbook-V2-web.pdf>

* + The ACD has workshops for parents and professionals as well as a Workbook to guide the pre-planning process

Carers Australia: [Carer checklist](http://carersaustralia.com.au/storage/carer-checklist-may-2018.pdf) <http://carersaustralia.com.au/storage/carer-checklist-may-2018.pdf>

* + This checklist was developed for parents/carers to help prepare for the NDIS planning meeting

Every Australian counts: [NDIS planning workbook](https://www.everyaustraliancounts.com.au/wp-content/uploads/NDIS-Planning-Workbook.pdf) <https://www.everyaustraliancounts.com.au/wp-content/uploads/NDIS-Planning-Workbook.pdf>

* + A pre-planning workbook to guide families though the planning process

House with No Steps: [NDIS pre-planning tool](https://www.hwns.com.au/ndis/pre-planning-tool/) <https://www.hwns.com.au/ndis/pre-planning-tool/>

* + A pre-planning workbook to guide an individual through the planning process

Irabina Autism Services: [NDIS pre-planning guide](http://irabina.com/wp-content/uploads/2017/11/Irabina-NDIS-Pre-Planning-Guide-Final.pdf) <http://irabina.com/wp-content/uploads/2017/11/Irabina-NDIS-Pre-Planning-Guide-Final.pdf>

* + Irabina has a pre-planning guide targeted towards those with autism spectrum disorder

NDIS: [Getting ready for your planning conversation](https://ndis.gov.au/medias/documents/h1e/h67/8800549863454/Checklist-planning-conversation.pdf) <https://ndis.gov.au/medias/documents/h1e/h67/8800549863454/Checklist-planning-conversation.pdf>

* + The NDIS provides this resource for people prior to their planning meeting

## Resources for you

Here are some resources that you might find helpful when working with families with disability.

### National Disability Insurance Scheme

[Finding your local LAC or ECEI partner](https://www.ndis.gov.au/about-us/locations.html) <https://www.ndis.gov.au/about-us/locations.html>

[Access checklist](https://www.ndis.gov.au/ndis-access-checklist) <https://www.ndis.gov.au/ndis-access-checklist>

* + Use this to screen whether a person meets the access criteria

[List of conditions](https://www.ndis.gov.au/operational-guideline/access/list-a) <https://www.ndis.gov.au/operational-guideline/access/list-a>

* + This is the list of conditions that meet the disability requirements of the NDIS

[Understanding your plan and supports](https://www.ndis.gov.au/participants/understanding-your-plan-and-supports) <https://www.ndis.gov.au/participants/understanding-your-plan-and-supports>

* + Outlines the options for managing the funding for the supports in the plan

### National Disability Insurance Agency

[Operational guidelines](https://www.ndis.gov.au/Operational-Guidelines) <https://www.ndis.gov.au/Operational-Guidelines>

* + This outlines the guidelines by which the NDIS is operating

[Internal review of a decision](https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review) <https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review>

* + For information about how and when you might request a review

NDIA phone contact: 1800 800 110

### Department of Health and Human Services

[Child Protection manual](http://www.cpmanual.vic.gov.au/) <http://www.cpmanual.vic.gov.au/>

* + For current and up-to-date information, policy and procedures for Child Protection workers

[National Disability Insurance Scheme (NDIS) interim guidelines for Child First, Integrated Family Services, Child Protection and Out of Home Care](http://providers.dhhs.vic.gov.au/practice-guidelines-ndis-and-mainstream-services) <http://providers.dhhs.vic.gov.au/practice-guidelines-ndis-and-mainstream-services>

## Resources to share with parents and carers

These articles and videos from [raisingchildren.net.au](http://raisingchildren.net.au/)<https://raisingchildren.net.au/> may be helpful to share with parents and carers when talking about disability.

### Articles

[NDIS: FAQs](http://raisingchildren.net.au/articles/national_disability_insurance_scheme_faqs.html) <http://raisingchildren.net.au/articles/national\_disability\_insurance\_scheme\_faqs.html>

[NDIS in your area](http://raisingchildren.net.au/articles/national_disability_insurance_scheme_in_your_area.html) <http://raisingchildren.net.au/articles/national\_disability\_insurance\_scheme\_in\_your\_area.html>

[NDIS and Better Start: FAQs](http://raisingchildren.net.au/articles/national_disability_insurance_scheme_and_better_start_faqs.html) <http://raisingchildren.net.au/articles/national\_disability\_insurance\_scheme\_and\_better\_start\_faqs.html>

[NDIS and HCWA: FAQs](http://raisingchildren.net.au/articles/national_disability_insurance_scheme_and_hcwa_faqs.html) <http://raisingchildren.net.au/articles/national\_disability\_insurance\_scheme\_and\_hcwa\_faqs.html>

[Early intervention and the NDIS](http://raisingchildren.net.au/articles/ndis_and_early_intervention.html) <http://raisingchildren.net.au/articles/ndis\_and\_early\_intervention.html>

[The NDIS pathway: how to get NDIS support](http://raisingchildren.net.au/articles/ndis_pathway_get_support.html) <http://raisingchildren.net.au/articles/ndis\_pathway\_get\_support.html>

[The NDIS support pathway: Georgia’s story](http://raisingchildren.net.au/articles/ndis_support_pathway_georgias_story.html) <http://raisingchildren.net.au/articles/ndis\_support\_pathway\_georgias\_story.html>

[The NDIS support pathway: Sam’s story](http://raisingchildren.net.au/articles/ndis_support_pathway_sams_story.html) <http://raisingchildren.net.au/articles/ndis\_support\_pathway\_sams\_story.html>

[NDIS plans: choosing service providers](http://raisingchildren.net.au/articles/choosing_ndis_service_providers.html) <http://raisingchildren.net.au/articles/choosing\_ndis\_service\_providers.html>

[NDIS plans: services overview](http://raisingchildren.net.au/articles/ndis_services_overview.html) <http://raisingchildren.net.au/articles/ndis\_services\_overview.html>

### Videos

[The NDIS: what is it?](http://raisingchildren.net.au/articles/what_is_ndis_video.html) <http://raisingchildren.net.au/articles/what\_is\_ndis\_video.html>

[NDIS: getting started](http://raisingchildren.net.au/articles/ndis_getting_started_video.html) <http://raisingchildren.net.au/articles/ndis\_getting\_started\_video.html>

[NDIS pathways to early intervention](http://raisingchildren.net.au/articles/ndis_parent_pathway_video.html) <http://raisingchildren.net.au/articles/ndis\_parent\_pathway\_video.html>

[The NDIS approach to early intervention](http://raisingchildren.net.au/articles/ndis_early_intervention_video.html) <http://raisingchildren.net.au/articles/ndis\_early\_intervention\_video.html>

[NDIS plans: choosing early childhood support and services](http://raisingchildren.net.au/articles/ndis_choose_support_video.html) <http://raisingchildren.net.au/articles/ndis\_choose\_support\_video.html>

[NDIS plans and how to use them](http://raisingchildren.net.au/articles/ndis_plan_video.html) <http://raisingchildren.net.au/articles/ndis\_plan\_video.html>

# Frequently asked questions

1. What does the NDIA mean by ‘reasonable and necessary’?

Reasonable and necessary supports are funded by the NDIS in a range of areas, which may include education, employment, social participation, independence, living arrangements and health and wellbeing.

Reasonable and necessary supports should:

* be related to the participant's disability
* not include day-to-day living costs that are not related to a participant's disability support needs
* represent value for money
* be likely to be effective and beneficial to the participant
  + take into account informal supports given to participants by families, carers, networks, and the community.

1. What can be done if the NDIS plan doesn’t meet the person’s needs?

Participants are encouraged to speak with their LAC, Support Coordinator or ECEI partner in the first instance. Practitioners may offer to speak on a parent’s behalf, or an advocacy service may be engaged to provide support. A review of the plan can be requested at any time if a participant is dissatisfied with the plan, or if there has been a change in circumstances.

The steps for requesting an internal plan review are:

* + 1. [Submit an application for an internal review of a decision](https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review) <https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review>
    2. An NDIA assessor will make a decision that confirms, changes or replaces the initial decision. The reviewer will always be different to the initial assessor. Once a decision has been made, the NDIA will contact the participant.

If the participant is not satisfied following the internal review, an appeal can made to the [Administrative Appeals Tribunal (AAT)](https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-appeals) <https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-appeals>.

Practitioners should assist families with the review process if the families are unable to do it themselves. Many plans will be improved following review so review requests should be encouraged when families are not happy with their NDIS plans and funding packages.

1. How can I help families understand the review and complaints processes?

Parents and carers may need you to help them understand their plan and the review and complaints processes. It’s important for you to understand these three processes:

* + 1. [Making a complaint](https://www.ndis.gov.au/about-us/contact-us/feedback-complaints) <https://www.ndis.gov.au/about-us/contact-us/feedback-complaints>
    2. [Requesting an internal review](https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review) <https://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review>
    3. [Understanding the plan and supports](https://www.ndis.gov.au/participants/understanding-your-plan-and-supports.html) <https://www.ndis.gov.au/participants/understanding-your-plan-and-supports.html>.

1. Will the NDIA consider urgent requests for plan reviews?

A process for urgent plan reviews is not prescribed by the NDIA and varies depending on local arrangements. A request for a plan review will need to be submitted. Contact your DHHS transition team to assist with flagging the request for a plan review as a priority by the NDIA. However, it is important to note that even when plan reviews are prioritised by the NDIA, this process can take weeks or months.

It is important that where the current NDIA plan still has some funding, that this funding be used flexibly to address priority needs pending the result of the review.

1. How can a family access respite under the NDIS?

The NDIA recognises that sustaining the informal support of family or carers is very important to meet the needs of people with a disability and maintaining close supportive relationships.

Overwhelming caring responsibilities and other factors such as illness and ageing can place carers’ wellbeing at risk and compromise their ability to continue in the caring role.

Currently there is no item listed under NDIS specifically as ‘respite’. It is available but is described under different terms such as:

* short-term accommodation and short-term living assistance
* assistance in living arrangements (host family/alternative family) solution
  + assistance with self-care overnight (different levels)

There are three levels of respite-like supports available for funding as part of plans:

* Level 1: Seven to 14 days per year to allow the carer to attend key activities
* Level 2: 14 to 28 days per year and includes a strategy to build capabilities for future independence.
  + Level 3: Equivalent of 28 days per year, when the carer provides support most days and informal support is at risk of not continuing due to the intensity of the support required or severe behavioural issues.

These levels of support will be determined by the level of disability and intensity of support required from family or informal carers, and other commitments – like work or study – of carers.

1. What information should be provided by families to support an access request?

People who do not currently access disability services will need to be assessed for eligibility to access the NDIS. They will need to provide the NDIA with evidence of their disability from their doctor, specialist or any other health professionals such as therapists, and the supports they need.

The applicant can provide evidence of their disability by having their treating doctor or specialist complete the Professional’s Report section in Part F of the Access Request Form, the NDIS Supporting Evidence Form or the same evidence can be provided in a different format, such as copies of existing assessments and reports. If the applicant chooses not to use the Professional’s Report section in Part F of the Access Request Form or the NDIS Supporting Evidence Form, it is important that the information they provide contains the same information that the form collects and provides evidence of a diagnosis.

1. What sort of evidence of impact of disability is required?

If the applicant has a condition identified by the NDIA as always resulting in permanent impairment and substantially reduced functional capacity, then they do not require any further information. This list can be found on the [NDIS website](https://www.ndis.gov.au/operational-guideline/access/list-a) <https://www.ndis.gov.au/operational-guideline/access/list-a>.

If the condition is **not** on ‘List A – Conditions which are likely to meet the disability requirements in section 24 of the NDIS Act’ applicants must provide evidence of the impact of their condition on their life, including any impact on mobility, communication, social interaction, learning, self-care and self-management.

This can be provided by getting a specialist or an allied health professional to complete the Professional’s Report section in Part F of the Access Request Form, the NDIS Supporting Evidence Form or provide it with other written evidence from their specialist or a health professional. ‘Health professional’ includes a physiotherapist, an occupational therapist, speech pathologist, psychologist or a nurse.

‘Other written evidence’ could include existing assessments or reports which were prepared by a specialist or allied health professional that provide the equivalent information on the impact of their condition on their life.

1. What types of support coordination can be accessed?

There are three levels of support coordination which vary to reflect a person’s needs and level of support required.

* + 1. Support Connection

Time-limited assistance to strengthen a participant’s ability to connect with informal, mainstream and funded supports, and to increase capacity to maintain support relationships, resolve service delivery issues, and participate independently in NDIA processes.

* + 1. Coordination of Supports

Assistance to strengthen a participant’s abilities to connect to and coordinate informal, mainstream and funded supports. This includes resolving points of crisis, developing capacity and resilience in a participant's network and coordinating supports from a range of sources.

* + 1. Specialist Support Coordination

The provision of support coordination within a specialist framework. This support is time limited and focuses on addressing barriers and reducing complexity in the support environment, while assisting the participant to connect with supports and build capacity and resilience. It may also involve development of an intervention plan which will be put in place by disability support workers.

1. What information is needed for an NDIS planning meeting?

The most important information is a list of key disability supports that have been identified as being required by the family. Use one of the pre-planning guides with families to work through and identify their needs.

At the planning meeting a questionnaire will be used by the planner. The questionnaire asks a series of questions about functional capacity. This means they ask what the participant thinks about how their disability affects their life. NDIS uses either a WHODAS or PEDI-CAT assessment of need depending on age.

The WHODAS covers six domains of functioning, including:

* Cognition – understanding and communicating
* Mobility – moving and getting around
* Self-care – hygiene, dressing, eating and staying alone
* Getting along – interacting with other people
* Life activities – domestic responsibilities, leisure, work and school
  + Participation – joining in community activities.

The Pediatric Evaluation of Disability Inventory Computer Adaptive Test (PEDI-CAT) is one of the functional assessment tools used for children in this context.

1. How do I find out what is funded in a participant’s plan?

The plan belongs to the participant. As the plan owner, your client can make the plan available to you in order to understand the types of supports and services that are being funded. If you are involved in supporting the client with the plan development and attending a planning meeting you can request that a copy of the plan be provided to you.

# Glossary

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| Access Request Form (ARF) | Anyone wanting to access the NDIS has to complete an Access Request Form (ARF) to confirm their identity and answer questions about their disability and the impact on their daily life. |
| Acquired brain injury | Acquired brain injury is an injury caused to the brain since birth – for example, as the result of a fall, road accident, tumour or stroke. |
| Active listening | Active listening skills are key to building trust and rapport in a collaborative relationship, and include asking open-ended questions, paraphrasing and summarising, checking for understanding, and that your language and body language is appropriate in the cultural context that you’re working in. |
| Administrative Appeals Tribunal (AAT) | The Administrative Appeals Tribunal (AAT) reviews decisions made by Australian Government ministers, departments and agencies including the NDIA. |
| Advocating | Advocating means giving a voice to a person who might not be able to represent themselves. |
| Care Services | Care Services (formerly Out-of-home care) refers to the living arrangements for children and young people who cannot live in their family home. These arrangements can be temporary, medium or long term and include foster care, kinship care, permanent care or residential care. |
| Carer | The term carer has a particular meaning in the context of disability. A carer is the person responsible for the majority of the day to day care of a person with additional needs. A carer can be a parent, partner, grandparent or kinship carer, foster carer, child, sibling, friend, or guardian. When a child is caring for a parent with disability, they’re called a young carer. Carers are not paid support workers. Some families have more than one person with disability, so a carer might be caring for more than one person. |
| Carer Statements | Carer Statements give carers the opportunity to tell the NDIA about the care they provide – for example how often they provide care, for how long and the level of support they provide. |
| Child and family system (CFS) | The child and family system (formerly Children Youth and Families (CYF) division of DHHS) includes: Child and Family Services, Care Services (formerly Out-of-home care) and Child Protection. |
| Children Youth and Families (CYF) | Children Youth and Families (CYF), now known as the child and family system (CFS) |
| Choice and Control | Choice and control means people with a disability are able to make their own decisions about what, where, how and by whom their supports are provided. It gives them greater decision-making power and places them at the centre |
| Early Childhood Early Intervention (ECEI) | The Early Childhood Early Intervention (ECEI) approach replaces the Victorian government Early Childhood Intervention Services (ECIS) in NDIS rollout areas. |
| Early Childhood Intervention Services (ECIS) | Early Childhood Intervention Services (ECIS) are being replaced by ECEI in NDIS rollout areas. |
| Families with disability | In this course, we refer to ‘families with disability’. This will be used to refer to families with a parent or carer with disability; families with one or more children with disability; families with both a parent and child with disability; and carers with legal responsibility for children with disability. |
| Functional Impact | Functional impact is the impact of the disability or condition on the person’s life, including any impact on mobility, communication, social interaction, learning, self-care and self-management. |
| Information Linkages and Capacity Building (ILC) | Information Linkages and Capacity Building (ILC) is an important part of the NDIS. It provides grants to organisations to undertake activities in the community for people with disability and their families. The aim of ILC is to build the capacity of the community to become more inclusive of people with disability and to enable people with disability to become more connected to their local community. |
| Intellectual disability | Intellectual disability involves problems with mental abilities that affect how a person learns and functions in everyday life, including difficulty understanding new or complex information and learning and applying new skills. A diagnosis of intellectual disability involves formal testing. This can be done by a psychologist. |
| Internal Review | Internal Review involves problems with mental abilities that affect how a person learns and functions in everyday life, including difficulty understanding new or complex information and learning and applying new skills. A diagnosis of intellectual disability involves formal testing. This can be done by a psychologist. |
| Local Area Coordinators (LAC) | Local Area Coordinators (LACs) work for local organisations in partnership with the NDIA, to help participants, their families and carers access the NDIS. LACs will help participants write and manage their plans. They will also connect participants to mainstream services and local and community-based supports. |
| National Disability Insurance Agency (NDIA) | The National Disability Insurance Scheme (NDIS) is administered by the National Disability Insurance Agency (NDIA) |
| National Disability Insurance Scheme (NDIS) | The National Disability Insurance Scheme (NDIS) is a single, national scheme that funds reasonable and necessary support to help people with disability reach goals throughout life. It also supports carers of people with disability. It replaces the state-based disability services previously run by DHHS. |
| NDIA-managed budgets | These are budgets managed by the NDIA. The invoices are submitted to the NDIA and they pay the providers direct. Providers must be registered with the NDIS in this option. |
| Neurological disorder | A neurological disorder is caused by damage to the nervous system (including the brain and spinal cord) A person might have difficulty with memory, motor skills, speech, language, or organisational skills. |
| Nominee | A nominee acts on behalf of the plan participant. They can be nominated by the participant or NDIA. |
| Ordinary life | An ordinary life means having access to the things like community, education, employment, and choosing who it is you want to be involved in your life. |
| Out-of-home care (OOHC) | Out-of-home care (OOHC) is now known as Care Services |
| Paraphrasing | Paraphrasing is using your own words to reframe what you’ve heard, and also helps show parents and carers that you’re listening. |
| Permanent impairment/functional capacity | The disability or condition needs to be, or be likely to be, permanent. It also needs to result in a substantially reduced ability to communicate, interact socially, learn, get around, look after yourself, and organise your life. |
| Physical disability | Physical disability affects a person's physical capacity and/or mobility |
| Plan management provider | These are organisations who will manage the funds and pay providers on behalf of the person with disability. This method allows use of registered and non-registered providers. |
| Psychosocial disability | Psychosocial disability is a term used to describe a disability that may arise from a mental health issue. Not everyone who has a mental health issue will have a psychosocial disability but for those that do, it can be severe and longstanding. |
| Reasonable and necessary supports | The NDIS funds **reasonable and necessary supports** which means support must be directly related to the functional impact of the participant’s disability. All plan goals and supports must relate to the impact of the disability on the participant’s life. |
| Self-managed budgets | A person can choose to self-manage all or some of the budgets in an NDIS Plan. The NDIS will pay the participant (or their nominee) directly who will then pay the providers. |
| Sensory disability | Sensory disability is a disability of the senses – sight, hearing, smell, touch, taste. It can affect how a person gathers information from the world around them. |
| Support coordination | Support coordination helps participants choose and access service providers and implement their plan. |
| Support Coordinator | ASupport Coordinatoris a person who helps participants choose and access service providers and implement their plan. |
| Team leader | Your team leader is your line manager or supervisor; the person who supports you in your role. |
| Victorian Aboriginal Community Controlled Health Organisation (VACCHO) | The Victorian Aboriginal Community Controlled Health Organisation (VACCHO) can support organisations in the child and family system to become culturally competent when working with Aboriginal and Torres Strait Islander people and families with disability. |

# Suggested responses to the Exercise 1: Family scenario

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| 1. How might the NDIS be able to support this family?   The NDIS might be able to support this family by providing funding for disability-specific interventions for Alex, such as behaviour support. The family might also consider support coordination to identify and help secure other supports that will assist Alex. A Support Coordinator would also and work with family services to provide integrated care to the family. It is also important to explore the disability needs for Dana, and whether she may have a psychosocial disability and might be eligible for NDIS funding in her own right.   1. What is the pathway for Alex to access the NDIS?   Given Alex is 10 years old, he will need to access the NDIS via the 7-64 pathway. If Dana is going to put in her own application she would also need to do so via the 7-64 pathway.   1. What support can you provide to help link this family to disability supports? What is your role in this process?   You can support the family to negotiate the process by:  supporting them to gather evidence of disability  providing advice on contacting the NDIA or actively initiating contact with them  providing advocacy if required, participating in meetings or phone calls where a parent feels overwhelmed  supporting assessments that can assist with determining NDIS eligibility.   1. Who can you consult if you're unsure about the disability support options for this family?   If you’re uncertain about the options for the family you could contact a NDIS LAC for advice. If Alex had been under seven you might have also spoken to a ECEI partner. If you’re still uncertain you should consult your team leader and/or the NDIA. An advocacy organisation or disability organisation may be able to provide advice on disability specific supports that will be funded by the NDIS.  The DHHS Principal Disability Practice Advisors which are located in each DHHS division can also provide advice on complex clients.   1. Who might you consult to support the family through the NDIS access request process?   Again, it’s best to start with the LAC or ECEI partner, your team leader and/or the NDIA about how best to support the family through the NDIS process. You might also contact DHHS Principal Disability Practice Advisors, an advocacy organisation or disability-specific organisation.   1. What might you say to this family to describe the NDIS to them (in less than 100 words)?   Practise a script you might be able to use with families. Think about what they need to know and what they might have questions about. Think about how they might feel anxious or overwhelmed.  You might consider things like:  The purpose of the NDIS – ‘The NDIS is a new way for people with a permanent disability to get the support they need.’  The process to access the NDIS – ‘The NDIS has rules, so the first step is to check if you’re eligible. I can help you to gather the information you need and to contact the right people to get the process started.’  The information the NDIS might need to make a decision – ‘The NDIS will need a range of information to help it make a decision. It might need reports from doctor/psychologist/paediatrician etc.’  The kind of support that might be available from the NDIS.   1. Once the family is granted access to the NDIS, what do they need to consider in pre-planning?   It will be important for this family to consider a number of things in pre-planning:  The goals for Alex (and Dana if she is also putting in an application).  The reasonable and necessary supports that are required. For example, for Alex this might include disability-specific interventions (behavioural, speech/language, psychological). It might also include recommendations from any therapists, schools or doctors.  Support coordination – it is likely the family will need a Support Coordinator to assist with implementing the plan.  Plan management – the family will need to consider how they want the funding to be managed.   1. What sorts of things should you encourage the family to build into their plan?   In addition to disability-specific supports, encourage the family to include:  support coordination  hours for team meetings and report writing  travel of therapists if required  specific needs that might need to be considered for rural or remote areas  any equipment or home modifications that might be required. |

# Appendix 1: Pathway for access and planning flowcharts

These flowcharts, used in the eLearning module, outline the typical pathway for access to the NDIS and planning within the NDIS.

You can think of the overall NDIS process as having three stages – Access, Planning and Implementation. Although Planning and Implementation are the same for all, the Access stage has two main paths. There’s a procedure for children aged six and under, and a procedure for people aged 7–64. The two paths connect at the point of submitting the NDIS request for access. People aged 65 or older can access support through the aged care system.

Figure 1: Access to the NDIS for children aged six and under



This figure shows the following process for children under six years old:
1. Recognise a need
2. Refer to ECEI
3. ECEI initial screen
If they are likely to meet the criteria, they are sent to ECEI Support to complete their access request.
If they are unlikely to meet the criteria, they are linked to mainstream services.
If it is unsure whether they meet the criteria, they are provided with a short-term intervention.
If they need invensive support after the intervention, they are sent to ECEI Support to complete their access request.


Figure 2: Access to the NDIS for people aged 7–64



This figure shows the following process for people aged seven to 64:
If it is unlikely they will meet the access requirements they should contact a LAC for advice.
If it is likely they will meet the access requirements, they take the following steps:
1. Support the carer to gather evidence.
2. Contact NDIS to request an access form.
3. Complete and submit the form.
If the application is accepted, they move to the planning stage.
If the application is declined, they can submit more evidence in a new request or go to an internal review.

Figure 3: Planning for the NDIS



Once an approval letter is received, the following process takes place:
1. Pre-planning
2. Planning meeting
3. Plan developed
4. Plan submitted to NDIS for approval
5. Plan approved
If you disagree with the plan, then speak to an NDIS planner.
If you agree, move to the implementation stage.

# Appendix 2: Evidence to determine access

Below is a summary of information that can be used to help determine whether a person meets the access criteria for the NDIS. Use this as a guide when supporting families to gather evidence of disability.

Types of information:

* completed assessments
* reports from practitioners involved in the treatment and care of the person with a disability
* letters and referrals from practitioners
* functional assessments and reports
  + other documentation that outlines the functional impact of the person’s disability.

Health professionals who might provide evidence includes:

* GP
* maternal and child health nurse
* paediatrician
* medical specialists such as neurologist, psychiatrist, audiologist
* allied health practitioners such as occupational therapists, speech pathologists, physiotherapists, continence nurses, dietitians
* psychologist or neuropsychologist
* teacher
  + social worker.

Some disability types have a recommended health professional to provide the required evidence. You can find this information on the [NDIS website](https://ndis.gov.au/people-with-disability/access-requirements/evidence-from-professional.html) <https://ndis.gov.au/people-with-disability/access-requirements/evidence-from-professional.html>.

# Appendix 3: Sample Access Request Form















