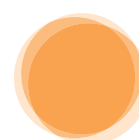


GOOD PRACTICE GUIDE

A Practice Guide for NDIS Support
Coordinators working with people
with complex support needs



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UpSkill

UpSkill is a Summer Foundation program offering professional development to support coordinators and NDIS allied health professionals. We recognise support coordinators play a key role in assisting people who are experiencing complex support needs to achieve good outcomes and live well in the community.

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Disclaimer:

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Introduction: Purpose of this guide

This guide has been written for support coordinators and specialist support coordinators who are working with people with complex needs. Throughout this guide we refer to the support coordinators' role. This reference could be to specialist or standard support coordination. This guide should not be considered an introduction to the NDIS, and assumes readers already have a strong working knowledge of the NDIS.

Participants with complex support needs usually require a more focused and skilled approach to connecting and coordinating supports and building capacity¹. This resource has been developed to provide practice guidance to support coordinators for purposeful and meaningful impact whereby participants with complex support needs have the opportunity to enjoy their rights and responsibilities as full and contributing citizens.

This guide is the starting point. It contains many links to various learning tools and resources. These include webinars, e-learning tools, videos, podcasts, and written resources, articles and guides. UpSkill encourages support coordinators to invest time in using this guide for professional and personal development. We have created this guide so you can focus on areas of importance and interest and can jump to the section relevant to the work you are doing.

UpSkill has created a companion document, "[Choosing a Support Coordinator](#)", for people with disability. We encourage you to review this resource and consider the skills and attributes you bring to the role.

A note on language use: In this resource we will use the phrase 'people with disability.' However, the Summer Foundation acknowledges and supports people's right and choice to request and use identity-first language such as 'disabled person.' There are some instances of identity-first language in this resource. It is worth noting that people with disability may have multiple identities, including their disabled identity, that are a source of pride and strength. This is often shown through the use of identity-first language such as 'disabled person' or 'autistic person' and is an individual's right and choice to make.

¹ Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8, 989-1006

Overview of sections

Section 1 - Support Coordination

Describes what it means when a person has complex support needs; discusses the role of the support coordinator and describes support coordination in practice.

Section 2 - Rights-based Practice

Focuses on human rights and orientates you to key personal values and professional competencies that equip you for purposeful work whereby the person you are supporting is achieving good outcomes.

Section 3 - NDIS and Mainstream Interfaces

Breaks down the interface between the NDIS and other mainstream systems. This interface is fundamental to the support coordinator's role as an intermediary. This section will help you understand the responsibilities of the NDIS and other service systems, and how to support good outcomes for people with complex support needs.

Section 4 - NDIS Toolkit

A list of key resources and tools to navigate the NDIS.



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Section 1: Support coordination

What do we mean by complex support needs?

Complex support needs arise from multiple and coalescing factors surrounding a person, their environment and when our service systems find it difficult, or are unable to, respond to the person in a holistic way. Importantly, complex support needs are not simply due to the individual impairment or personal factors but happen in the interaction between the person and the service system.²

"Complexity of support needs is not an issue in and of itself – an individual may be seen as 'complex' or 'challenging' to the service system because the service system is not structured, organised, resourced or otherwise able to respond to their needs."³

This guide takes a rights-based approach and in doing so we hope to shift the language and approach to understanding that complexity is within our service systems. We intend to shift the focus away from the individual as 'having' complex needs, and towards person-centred approaches to supporting people.⁴

2 Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8, 989-1006

3 NSW Department of Family and Community Services – Ageing, Disability and Homecare Services [Leading Clinical Practice and Supporting Individuals with complex support needs in an NDIS Environment](#) February 2014

4 Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8, 989-1006.; Susan Collings, Angela Dew & Leanne Dowse (2016) Support planning with people with intellectual disability and experiencing complex support needs in the Australian National Disability Insurance Scheme, *Journal of Intellectual & Developmental Disability*, 41:3, 272-276, Page 273

What is the NDIS complex needs pathway?

In 2018, the NDIA developed the 'complex needs pathway' for participants with complex support needs. The NDIA recognised access and engagement routes would not meet the needs of all NDIS participants. The NDIS complex needs pathway aims to respond to people with complex support needs by pairing them with a more experienced planner for an ongoing connection and single point of contact within the NDIA. The NDIA identified certain factors that would be taken into consideration when deciding if a participant needed to engage with the NDIA via the complex needs pathway. This includes but is not limited to:

- Interaction with multiple community supports, such as homelessness or community mental health supports
- Multiple diagnoses or psychosocial disability; a diagnosis of a degenerative condition with fluctuating needs
- Factors for complexity within a family unit (such as multiple children or family members with disability)
- A history of trauma or abuse (which will require a planner who is sensitive to their situation)
- Identified behaviours of concern
- Interaction with multiple service systems – justice, health, mental health or child protection
- Significant challenges regarding markets and services: where a person is experiencing significant difficulty in finding a provider to take them on as a client
- Significant and immediate unmet need – such as people in remand, prison or hospital who cannot exit due to inability to find accommodation
- A person who has insufficient support for decision-making⁵

It was estimated that around 10 - 15% of NDIS participants may require support through the complex needs pathway.⁶ The above factors don't necessarily determine if a participant with complex support needs requires a planner through the complex needs pathway and won't necessarily determine the need for support coordination. However, if support coordination is considered reasonable and necessary, the NDIS may facilitate the connection with a support coordinator via a 'request for service'.⁷

READ more about the complex needs pathway:

- **[NDIA gives insight into experiencing complex support needs pathway](#)**
- **[Improved NDIS planning for people with complex support needs](#)**

⁵ [NDS NDIA gives insight into complex support needs pathway](#) 13 March 2019

⁶ [NDIA Improved NDIS planning for people with complex support needs](#) - Media release 16 November 2018

⁷ [NDIS Request for Service process for registered support coordination providers](#) 11 September 2019

What is support coordination?

The support coordinator role is that of intermediary. This means the support coordinator is the go-between and facilitator who assists NDIS participants to, *'understand and implement their plan, connect them to community or mainstream services, anticipate, mitigate and manage crises, and build the participant's capacity for self-direction'*⁸

The NDIA is clear that support coordination is not a case management role. However, when a participant experiences complex support needs, the support coordinator might need to provide intense facilitation in navigating NDIS and mainstream services, linking to the right services and resolving barriers to accessing services and responding to risks and points of crisis. Additionally, a support coordinator may need to assist the participant with complex support needs to set goals, make plans and put them into action.⁹

There are 3 levels of support coordination:

1. **Support connection** – can assist a participant to build their ability to connect with informal, community and funded supports enabling the participant to get the most out of their plan and pursue their goals. Often this is performed as information and referral. An equivalent role may be carried out by the NDIS Local Area Coordinator (LAC) – though the ideal scope of a LAC is broader than this.¹⁰ Generally, a participant with complex support needs would not be funded for this lower level of support.
2. **Support coordination** – coordination of supports: This support will assist a participant to build the skills they need to understand, implement and use their NDIS plan. A support coordinator will work with the participant to ensure a mix of supports are used to increase capacity to maintain relationships, manage service delivery tasks, live more independently, and be included in their community. This is commonly funded for a person with complex support needs.
3. **Specialist support coordination** – This is a higher level of support coordination. It is for people whose situations are more complex and who need specialist support. A specialist support coordinator will assist a participant to manage challenges in their support environment and ensure consistent delivery of service.¹¹

Specialist support coordination differs from standard support coordination in that you would be assisting a participant where there is a high level of complexity in their situation. According to the NDIS, specialist support coordination aims to reduce barriers the participant experiences in implementing or using their NDIS plan. Specialist support coordinators can assist a participant to manage challenges in their support environment which may include health, housing, education and /or justice services.¹²

Funding for support coordination will be influenced by individual circumstances, environmental factors, identified risks, complexities and existing support networks. One of the challenges for support coordinators and specialist support coordinators is that sometimes participants with complex support needs might not be receiving support coordination funding or are not receiving it at the appropriate level.¹³

RESOURCES

-  **UpSkill Fundamentals resources** – UpSkill, Summer Foundation, 2020 (video)
-  **Best Practice podcast series** – UpSkill, Summer Foundation, 2021 (podcast)
-  **Support Coordinators Getting Great Outcomes for People who have Complex Needs** – Reasonable and Necessary with Dr George Taleporos – Summer Foundation, 2020 (podcast)
-  **Support Coordination** – Reasonable and Necessary with Dr George Taleporos – with Sam Paor, Support Coordinator – Summer Foundation, 2019 (podcast)
-  **How to Reform Support Coordination to Meet the Needs of NDIS Participants with High and Complex Support needs** – Summer Foundation, 2021 (report)
-  **Summer Foundation Response to the Support Coordination Discussion Paper** – Summer Foundation, 2020 (submission)
-  **Summer Foundation Support Coordination: a Changing Landscape** – Summer Foundation, 2017 (report)
-  **NDIS Support coordination** – NDIS, 2021 (webpage)
-  **Support Coordination** – Independent Advisory Council to NDIS, 2018 (discussion paper)
-  Section 34 Reasonable and Necessary support **NDIS Act 2013**, Australian Government, 2013 (legislation)
-  **Reasonable and necessary supports** – NDIS, 2019 (webpage and video)

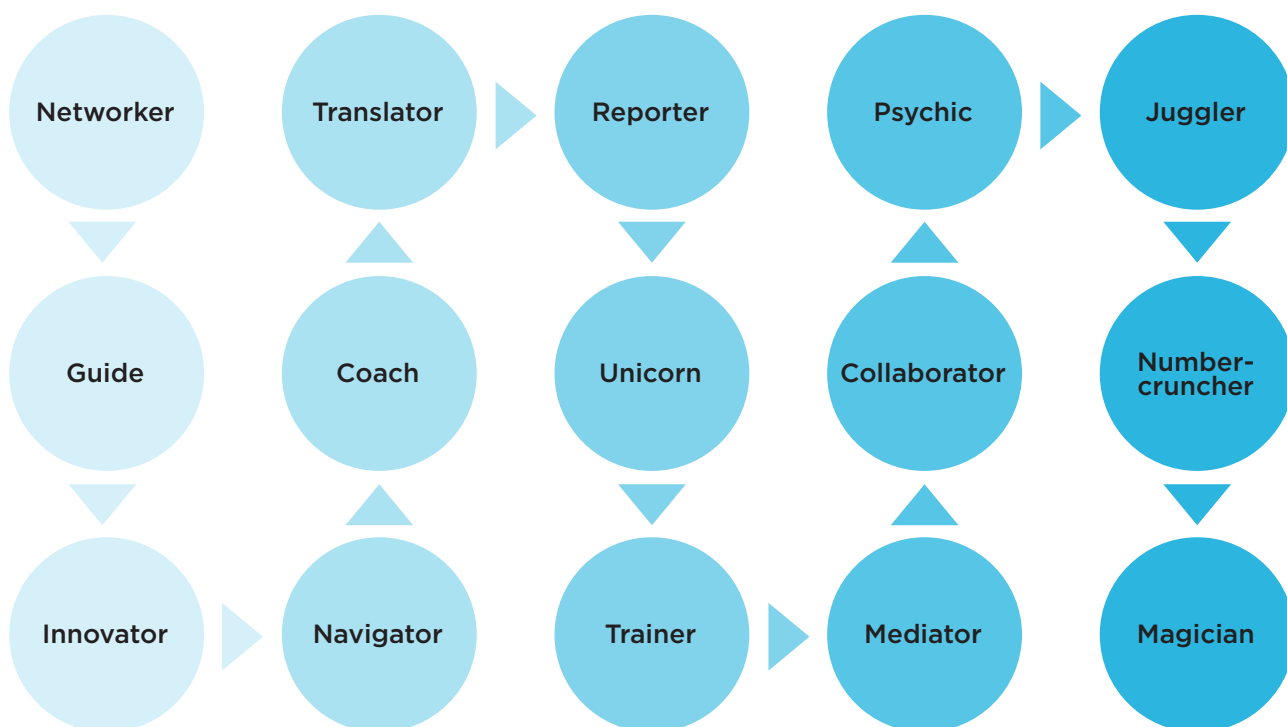
¹³ Summer Foundation [How to Reform Support Coordination to Meet the Needs of NDIS Participants with High and Complex Needs](#) January 2021

What is the role of the support coordinator?

Support coordinators can assist a participant to:¹⁴

- Understand and use their NDIS plan
- Make the most of their funded supports
- Access community and mainstream services
- Build their ability to become more independent
- Make a plan to meet needs and work towards goals
- Identify and address risks
- Connect with informal, mainstream and community services, groups and activities
- Connect with providers, and work out when to access supports and services, and how much they want to pay for these.
- Help with service agreements, service bookings and understanding how to use the NDIS portal
- Explore and design individualised living options (ILO) and/or other individualised support¹⁵

The roles of support coordinators are many and varied. The flow chart below indicates the many 'hats' a support coordinator wears in their role, illustrating the broad scope of what is required.



¹⁴ NDIS, [Support coordination](#) 4 August 2021

¹⁵ NDIS [ILO for providers](#) 6 July 2021

Planning

While the terms 'planning', 'plans' and 'planner' have become synonymous with the NDIA role of funds allocation, 'planning' is key to the role of support coordinator when working with a participant with complex support needs.¹⁶

A fundamental component is to assist a participant to identify, create, expand and strengthen their circles of support: informal, mainstream and community.¹⁷ This is called a person-centred or holistic approach. This means you do not separate disability specific tasks from the rest of a person's life. Support coordinators should ensure the participant is at the centre of their own life, and acknowledge that everything in their life is relevant, important and valid.¹⁸

To assist in the role, support coordinators first need to get to know the person, understand what is important to them, and develop trust and rapport.¹⁹ It is important to understand their history and how they got to where they are now. This is often a good opportunity to appreciate a person's resilience if they have experienced trauma and/or lived with their needs unmet for a period of time. Often the support coordinator's role is to create a safe and welcoming space and allow experiences and feelings to be identified and acknowledged.

If the person has cognitive impairment or severe complex communication needs the support coordinator might be working with their family, other informal support or formal support. It is important that the support coordinator utilises support for decision-making strategies and ensures the person's will and preferences are heard and acted upon.²⁰ We talk more about support for decision-making in Section 2 of this guide.

With the person/their representative's permission, the support coordinator might gather background information from others close to them around the services they use - including mainstream and NDIS services. With a greater understanding of the person, the services they use, what has worked, what hasn't, the support coordinator will begin to see the capabilities, strengths and assets around a person, as well as what is creating a barrier or risk.

Understanding a person's goals and aspirations will help the support coordinator and the person being supported to create a plan. It is important to have safeguards in place to mitigate risks and plan for when things don't go to plan.²¹

Putting plans into action means identifying the right service and support. This can be complicated when mainstream and NDIS-funded supports come together. We will discuss this further in section 3.

16 Collings, S., Dew, A., & Dowse, L., UNSW (2015). **BEING A PLANNER WITH A PERSON WITH DISABILITY AND COMPLEX SUPPORT NEEDS: PLANNING RESOURCE KIT**. UNSW: Sydney.

17 Summer Foundation [Support coordination a changing landscape](#) 2017

18 Laura Schutz, [Support coordination for Newbies](#)

19 Collings S, Dew A, Dowse L. Unpacking the complexity of planning with persons with cognitive disability and complex support needs. *J Appl Res Intellect Disabil*. 2018;31:142-151

20 Bigby, C., Douglas, J., & Vassallo, S. (2019). The La Trobe Support for Decision Making Practice Framework. An online learning resource. Retrieved from: www.supportforddecisionmakingresource.com.au

21 Collings, S., Dew, A., & Dowse, L., UNSW (2015). **BEING A PLANNER WITH A PERSON WITH DISABILITY AND COMPLEX SUPPORT NEEDS: PLANNING RESOURCE KIT**. UNSW: Sydney

A clear plan will:

- Help to guide the support coordinator and the person towards their goals and aspirations
- Assist to review the current state of play, who is involved, what services and supports
- Provide an opportunity for risk assessment and safeguarding strategies
- With the person and other stakeholders, agree on priorities and strategies of approach, define roles and set out responsibility and timeframes for follow up
- Provide opportunities for regular review with the person - continuous monitoring of a live plan may result in reframing priorities
- Allow collaboration on the action plan - the person/their supports, manager, peer review, allied health specialist
- Report to NDIS on participant's progress, barriers, risk factors, major life changes, and achievements across the plan period

RESOURCES

- 📺 **Support Coordination vs Great Support Coordination** – UpSkill, Summer Foundation and Ablelink, 2020, (video)
- 📄 **Improving Outcomes for Participants who Require Supported Independent Living (SIL)** – Summer Foundation, 2020 (consultation paper)
- 📄 **Individualised Living Options (ILOs)** – Housing Hub, Summer Foundation (webpages)
- 🔧 **Guide to Developing a Participant's Housing Statement** – Summer Foundation, 2020 (guide and template)
- 🔧 **How to write a housing plan** – Summer Foundation, 2020 (guide and template)
- 📄 **How to Reform Support Coordination to Meet the Needs of NDIS Participants with High and Complex Needs** – Summer Foundation, 2020 (report)
- 🔧 **Being A Planner With A Person With Disability And Complex Support Needs** – University of NSW and NSW Department of Family and Community Services, 2015 (kit)
- 🔧 **PATH** – Inclusive Solutions (planning tool)
- 🔧 **MAPS** – Inclusive Solutions (planning tool)
- 📺 **What is 'Important to' and 'Important for'** – Michale Smull (video)
- 📺 **Person Centred Approach to Risk** – Helen Sanderson and Associates (video)

Record keeping and reporting to NDIA

From the date the support coordinator starts supporting a person with complex support needs they are working towards them achieving their goals and living a good life. Support coordinators are often required to submit an 8 week report when they first engage with a person with complex support needs, as well as a review at the end of the plan.

While NDIS plans vary in length, a person with complex support needs will generally have an annual plan review with the NDIA. Plan reviews are also an opportunity to take stock of the progress and challenges to a person achieving their goals.

Reporting to the NDIA is an opportunity to present clear and comprehensive information to the NDIA, to identify the person's progress, barriers, risk factors, major life changes, and achievements across the plan period. NDIS reports can also demonstrate how support coordination services have and facilitated engagement with mainstream and community services, self-direction, choice and control, capacity building and outcomes.

Often, when a person is at risk of a crisis or in a crisis situation, the support coordinator should request an interim or short term plan to address the immediate disability support needs and gather evidence for other supports, such as specialist disability accommodation (SDA), daily living or supported independent living supports.

RESOURCES

-  **Working Efficiently with Templates and Systems UpSkill** – Summer Foundation and Ablelink, 2020 (video)
-  **Planning Operational Guideline - Reviewing and changing a participant's plan** – NDIS, 2021 (webpage)
-  **Change in circumstances** – NDIS (form)
-  **How to review a planning decision** – NDIS (form)
-  **Home and Living Supports Request form** – NDIS (form)
-  **Applied Principles and Tables of Services** – Council of Australian Governments (COAG Principles to determine the responsibilities of the NDIS and other service systems)
-  **Getting the Language Right** – Summer Foundation, 2018 (guide)

Practical applications:

- Set up your resource toolkit and networking files / folders for accessibility
- Have simple checklists for each stage (getting to know the person – planning – implementing – linking – monitoring – reviewing – measuring)
- Make sure you have templates that are functional, practical, and adaptable
- Forms and templates should be accessible and clear and have an identifiable purpose and actions

Practicing self care

During a crisis, trauma, major loss, or a life changing impactful event, the support coordinator may be at risk of experiencing burn-out by setting unrealistic personal expectations in an effort to get the best possible outcome for the person being supported.

Empathy is the support coordinator's biggest asset, but must be applied wisely and safely within the role.

- Build a supportive network: friends, family, peers, colleagues, GP, counsellors, psychologists
- Ensure you have opportunities to do things you enjoy and recharge
- Eat well, exercise, sleep well and practice mindfulness
- Have clear boundaries and manage expectations; define and agree on personal and professional scope
- Engage in regular and proactive supervision, and utilise opportunities to debrief
- Access secondary consultants and mentoring
- Make use of employee assistance programs and pathways to access additional support
- Participate in peer and social support groups and networks with a focus on self-care

***"Compassion and care** towards others and yourself is essential. Lead with kindness. If you're having a tough day, take a moment to ground yourself before calling a participant or responding to that email.*

***If you need time off, take time off.** Be personable and show your human fallibilities, but do not let it become so personal that you negatively project your stuff onto the people you are meant to assist. You are going to be impacted personally whilst working within this role. That is a given. How you respond to and work through this is within your control.*

***This role is amazingly rewarding.** But it is also tough. It challenges and tests you. It can deplete your half-empty cup. Make sure you replenish it regularly. **Self-care isn't selfish.**"²²*

RESOURCES

- 🎥 **Building Networks of Support and Recognising Vicarious Trauma** – NDS, 2020 (video)
- 📄 **Self Care – Everymind** (online apps/tools, self-help groups)
- 📄 **Self Care – Beyond Blue** (videos, articles)
- 🎥 **How to deal with difficult feelings. The cure for burnout (hint: it isn't self-care)** – TED Talk: Dr. Emily Nagoski and Dr. Amelia Nagoski, 2021 (video)
- 🔊 **Burnout and How to Complete the Stress Cycle** – Brené Brown with Emily and Amelia Nagoski, 2020 (podcast)

²² **NDIS Support Coordination Newbies Fundamentals**, Laura Shchutz May 2021

Professional development

There are no particular formal qualifications required for support coordinators nor requirements for professional development. However, we highly recommend you invest in personal and professional development to build your capabilities for supporting people with complex needs.

Invest in yourself

- Set yourself up for success. Identify what you need and seek professional development through training, mentoring and peer networks
- Ask for supervision, training, and professional development opportunities if you are with an organisation and complement this with your own personal and individual development
- Expand your connections and establish pathways to network and check in with other Support Coordinators. For example, join the [UpSkill Community of Practice](#)
- Connect on social media groups, whilst being mindful of maintaining professionalism and acknowledging the amount of interpretive and opinion based "knowledge" being shared online varies in quality and accuracy
- Work out what gaps you have and build your knowledge through reading (lots of skimming and drawing out the pivotal points), listening and reflecting (actively) and asking valuable questions (be curious)
- Attend UpSkill training to build your knowledge and skills

Enhance your critical thinking skills by adding value and context to your questions.

- Research, read, discuss, and apply. Question your findings, discuss your understanding, read further and reflect
- Don't just ask for the answer - identify potential solutions and unpack through informative shared discussions





Section 2: Rights Based Practice

Throughout this resource we are challenging you to consider all your work through the lens of human rights and values you bring to your work. We encourage you to think less in terms of the traditional medical, charity or welfare models and more in terms of the social model of disability. In doing so, we also encourage person-centred approaches with sensitivity to trauma and cultural diversity.

Human Rights

*"Human rights recognise the inherent value of each person, regardless of background, where we live, what we look like, what we think or what we believe. They are based on principles of dignity, equality and mutual respect, which are shared across cultures, religions and philosophies. They are about being treated fairly, treating others fairly, and having the ability to make genuine choices in our daily lives. Respect for human rights is the cornerstone of strong communities in which everyone can make a contribution and feel included."*²³

Australia became a signatory to the United Nations Convention on the Rights of People with Disability (UNCRPD) in 2008 signalling a paradigm shift in our understanding of disability, to one of people with disability having entitlement and rights as equal and active members of society.²⁴

²³ Australian Human Rights Commission. [What are Human Rights?](#) July 2021

²⁴ Australian Human Rights Commission. [What are Human Rights?](#) July 2021

The UNCRPD²⁵ embodies the following principles:

- Raising awareness - changing attitudes about people with disability
- Respect for inherent dignity including the freedom for self-determination
- Non-discrimination and equal opportunity, with the right to language and communication including augmentative and alternative communication (AAC)²⁶
- Freedom from exploitation, violence and abuse
- Full participation, accessibility and inclusion in society
- Respect for rights of children with disabilities
- Social models which see people with disability disabled by societal barriers
- Respect and acceptance of differences as part of human diversity and humanity

It is important to note a key principle of the NDIS is to put into practice Australia's obligations under the UNCRPD²⁷ and this is codified in the NDIS Act 2013. Unfortunately, the aspirations of the UNCRPD are not yet realised and many people with disability are still not afforded their rights. This is particularly so for people with complex support needs.²⁸ A human rights approach will give you a sound basis for your work as a support coordinator working with people with complex needs. This guide will point you towards more information and how you can incorporate a rights-based approach into your practice.

RESOURCES

- 📺 **Human Rights Lens to Behaviour Support** – Is there a Better Way and Microboards Australia, 2021 (video)
- 📄 **We have Human Rights** – Harvard Law School Project on Disability, 2008 (publication)
- 🌐 **Citizen Network:** For a World Where Everyone Matters (social movement)



Take a moment to reflect

- How do you know that you are upholding the human rights of the people you assist?
- Can you think of a person with complex support needs that you are working with at the moment and one action you can take towards upholding one of their human rights principles that you notice is lacking?

25 United Nations [Convention on the Rights of Persons with Disabilities](#) 2006

26 Novita Tech [Augmentative and Alternative Communication](#) (AAC)

27 NDIS Act 2013 [National Disability Insurance Scheme Act 2013](#)

28 Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8, 989-1006.

Social Model of Disability

The social model of disability is embedded in the UNCRPD and shifts our understanding of disability from traditional notions that disability is seen as a problem faced by the individual, to seeing people with disability as dis-abled by the barriers in our society. The social model of disability says that disability is caused by the way society is organised, rather than by a person's impairment(s). It looks at ways of removing barriers that cause discrimination and limit life opportunities for people with disability.²⁹

It is important to know that the social model of disability was developed by disabled activists (many of whom choose to use identity first language) to challenge the oppression people with disability faced in their lives. The war cry, “**nothing about us without us**”, demands that all decisions affecting a person or people with disability should always be made with their involvement. This seeks genuine involvement of people with disability in any decision from policy to the individual that affects their lives.

RESOURCES

- ▶ **Defiant Lives** – tells the story of the rise and fight of the disability rights movement in the United States, Britain and Australia (documentary)
- ▶ **I'm not your inspiration, thank you very much** – Stella Young, TED talk (video)
- ▶ **Social Model of Disability** – UK (video)
- ▶ **Social Model of Disability** – People With Disability Australia (video)



Take a moment to reflect

- What are some of the barriers you see when assisting a person with complex support needs?
- How can the social model of disability help you think about solutions?
- Can you think of one situation you are facing in your work at the moment? What is one action you could take, or one thing you could change, based on the social model of disability?




²⁹ **PWDA Social Model**; Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8, 989-1006.

Self-determination

Freedom and self-determination are important to all of us, and are important human rights. People with complex needs are often denied self-determination on all levels. They are often denied the opportunity to make decisions, both large and small, including decisions about where they would like to live and who they want in their lives. Promoting self-determination is promoting dignity and respect and raising expectations of, and for, people with disability to determine the way they live their lives. Underpinning self-determination is:

- Having the freedom and support to choose, and enact change
- Self-direction of support
- Advocating for oneself
- Determining own preferences and goals
- Support for decision-making
- Positive risk taking
- Trying new things and gaining more experience
- Learning from mistakes
- Problem solving

RESOURCES

-  **Supporting Community Contribution and Self Determination through Person Centred work** – John O'Brien 2013 (conference paper)
-  **Self-Direction Worldwide Contrasting beliefs and their impact on practice** – Lyn Breedlove, Citizen Network, 2020 (discussion paper)
-  **What is Self Determination and why is it Important?** – National Gateway to Self-Determination Project (resource)



Take a moment to reflect

- What can you do to support the autonomy and self-determination of the people you assist?

Dignity of Risk and Duty of Care

Dignity of risk is a person's right to make their own choices, including the choice to take some risks in life (as we all do!), while a **duty of care** is the legal responsibility to ensure our actions or inactions don't cause harm or injury to other people. It can be difficult to support someone to make **decisions** when there is a perceived risk, or those decisions contradict what we would choose for ourselves. Read the following resources to gain a better understanding of how you can support positive risk, and balance this with your duty of care.

RESOURCES

- ▶ [What is 'Important to' and 'Important for'](#) – Michale Smull, 2011 (video)
- 🔧 [Enabling Risk: Putting Positives First](#) – La Trobe University, 2018 (online self-paced training)
- ▶ [Person Centred approach to Risk](#) – Helen Sanderson and Associates, 2016 (video)



Take a moment to reflect

- How do you support people with disability to take positive risks?



Supported Decision-Making

It is important to know that people with complex support needs may need additional support to make decisions, which may include providing access to communication aids.³⁰

Support for decision-making describes various types of supports and resources to help a person with disability make decisions. People who assist a person with decision making are called 'decision supporters'. As a support coordinator your role might be to assist a person by breaking decisions down into smaller elements that are easier to understand. You can assist in identifying options, creating opportunities to trial options and understand the consequences and practicalities.³¹ People with complex needs may also require decision supporters to help enact their decisions and this too might be part of your role as support coordinator.

Substitute decision making is a last resort option where someone who understands a person's will and preferences "stands in the shoes" of the person. They then make decisions based on their best interests, are least restrictive, and involve the person in the decision, even if the person cannot make the decision themselves. Support coordinators should never make decisions for the people they support.

RESOURCES

-  **Support for Decision Making Practice Framework** – La Trobe University (online self-paced training)
-  **Supported Decision Making** – WA Individualised Services (tools, videos, fact sheets, brochures and posters)
-  **Decision Time Activating the rights of adults with cognitive disability** – Office of the Public Advocate, Victoria, 2021 (report)
-  **NDIS and Making Decisions** – VALID, 2019 (guide)
-  **Your NDIS Decisions** – Vic Office of Public Advocate, Victoria (guide)
-  **Making Decisions for Others: Substitute Decision Making** – SA Office of Public Advocate (guide)
-  **National Decision-Making Principles** – Australian Law Reform Commission, 2014 (report)
-  **Public Guardian FAQs** – NSW Trustee and Guardian (FAQs)



Take a moment to reflect

- How do you involve people with complex needs in decision making?
- How do you ensure people have the support they need to make decisions?
- How can you raise expectations and increase opportunities for people with complex needs to be supported to make decisions about their life?

30 Bigby, C., Douglas, J., & Vassallo, S. (2019). [The La Trobe Support for Decision Making Practice Framework. An online learning resource](#)








31 [Independent Advisory Council, Support for decision making in the NDIS, July 2019](#)

Person-centred Practice

Person-centred practice focuses on the person, who they are and what they can do. Services are flexible and responsive to the individual and tailored to their needs, preferences and unique circumstances. A person-centred approach should enable the person to live the life they want to.³² Key parts of person-centered practice are:

- The person is central and involved in all decision-making about their life
- The whole person is considered (holistically), taking into account each person's life experience, beliefs and identity
- People have freedom and choice, and are the experts in their own lives
- A strengths-based approach – focusing on gifts, skills and talents
- Building and sustaining relationships, collaborating and working in partnership with support networks
- Based on community inclusion and active citizenship
- Responsive and tailored supports for the person with flexibility to suit the person's wishes and priorities
- Cultural sensitivity and transparency, accountability and respect
- Working together as equal partners

RESOURCES

-  **Best Practice Series Episode 4. Key features of using a person-centred approach** – UpSkill, Summer Foundation 2021 (podcast)
-  **Person-Centred versus Service-Centred** – Beth Mount – Open Futures Learning (video)
-  **Making a training video for support workers** – Summer Foundation (video, guide and tool)
-  **Seven Keys to Citizenship** – Simon Duffy (video)
-  **PATH** – Inclusive Solutions (planning tool)
-  **MAPS** – Inclusive Solutions (planning tool)
-  **Being A Planner With A Person With Disability And Complex Support Needs** – University of NSW and NSW Department of Family and Community Services, 2015 (kit)



Take a moment to reflect

- How person-centred is your work with individuals with complex needs?
- Are you seeing barriers to person centred practices? How might you address these?

³² [What is a person-centered approach?](#) NSW Health

Cultural Competence

People with complex support needs come from a range of backgrounds and cultural identities. Cultural competence is an ongoing learning process that involves working ethically and sensitively across cultural groups. Ultimately, cultural competence is about valuing diversity for the richness and creativity it brings to society.

When considering cultural diversity this may include:

- Aboriginal and Torres Strait Islander people
- People from culturally and linguistically diverse background
- People who are LGBTIQ+
- People of faith or spirituality
- People who are Neurodiverse
- People from the Deaf community





In the disability sector, it is worth noting that people with disability may have multiple identities, including their identity as a person with disability, that are a source of pride and strength. It is also important that we recognise the value and rights of the people we work with to embrace these cultural elements of their lives. This is an important part of a person-centred approach.

Kate Smith and Cathryn McAddie from Eunoia Lane joined UpSkill for a Learning Lunchtime in July 2021. Working in remote communities in the Northern Territory, their approach focuses on ongoing learning, and being curious and respectful. They are solutions focused and challenge the status quo from services, speaking up with the people they support and challenging racism. The team at Eunoia Lane understand that *"returning to Country is the best therapy"* and work through the risks and concerns to support people return to their communities.³³

RESOURCES

- 🎥 **UpSkill and Centre for Culture, Ethnicity and Health** – working with people from culturally and linguistically diverse communities – UpSkill, Summer Foundation and Centre for Culture, and Ethnicity and Health, 2020 (videos)
- 🔊 **Talking ethnicity, culture and the NDIS** – Reasonable and Necessary with Dr George Taleporos with Sophie Dutertre from the Centre for Culture, Ethnicity and Health, and NDIS participant Julie Duong, 2020 (podcast)
- 📄 **Guide to Cultural Competence** – Federation of Ethnic Communities Councils of Australia (guide)
- 🔧 **Person Centred Practice Across Cultures Reflective Practice – why different points of view matter** – National Disability Services (workbook)

³³ Kate Smith and Cathryn McAddie from [Eunoia Lane](#) in the NT at UpSkill Lunchtime Learning, 12 July 2021

-  **Jax Jacki Brown speaks about disability and sexuality** – OUT in Perth 2018. (media article)
-  **VALID Statement on spirituality** – VALID (statement)
-  **First Peoples Disability Network** (resource)
-  **Diversity Disability Alliance** (resource)



Take a moment to reflect

- What are some of the cultural groups that are important to you in your life? Why are they important? What helps you to connect with them?
- Have you had any positive experiences connecting someone with complex support needs with their cultural groups?
- Can you think of someone you support whose life would be enriched through stronger connections with their culture? What is one action you can take to facilitate this connection?

Trauma Informed Practice

Trauma informed practice acknowledges that people you support may have experienced trauma or multiple traumas in their life and these traumatic experiences can continue to have an impact. Trauma informed practice is a sensitive approach that actively seeks to avoid re-traumatisation and supports pathways for recovery.³⁴ People with disability of all ages are more likely to experience and witness trauma more often than people without disability.³⁵

Acts of violence can affect anyone. But Australians with disability are more likely to have experienced violence, abuse or sexual harassment at some point in their lives. People with psychosocial or intellectual disability are even more likely to experience violence.³⁶

- 65% of adults with disability have experienced violence after the age of 15, compared to 45% without disability
- 52% of adults with disability have experienced physical violence after the age of 15, compared to 34% without disability
- 21% of adults with disability have experienced at least 1 incident of sexual violence after the age of 15, compared to 10% without disability

34 **NDS Trauma Informed Support Films: Facilitator's Guide** 2020

35 Australian Federation of Disability Organisations **Abuse of People with disability**

36 Australian Federation of Disability Organisations **Abuse of People with disability**




What are Trauma informed Practice principles?

The principles of trauma informed practice include:

- Safety: physical, emotional, environmental, cultural
- Trustworthiness: clarity, consistency and interpersonal boundaries
- Collaboration: maximising collaboration and sharing power
- Choice: maximising a person's choice and control
- Empowerment: finding opportunities to empower and build resources

Like cultural competence, trauma informed practice involves ongoing learning and we recommend you engage in training from time to time. The Blue Knot Foundation offers training to workers in the disability sector on Trauma Informed Practice

RESOURCES

-  **Taking Time A Literature Review Background for a trauma-informed framework for supporting people with intellectual disability** – NSW Government and Berry Street, 2015 (literature review)
-  **Trauma Informed Support Videos** – NDS³⁷ (videos)
-  **Blue Knot Foundation** – (training in Trauma Informed Practice)



Take a moment to reflect

- How do you ensure the people you support feel safe?
- What can you do in your role to support a trauma informed approach within your organisation?

³⁷ Much of the content of these films was based on the Taking Time Framework (A Trauma Informed Framework for Supporting People with Intellectual Disability); Jackson, A. L., & Waters, S. E. (2015). Taking Time – Framework: A trauma-informed framework for supporting people with intellectual disability. Melbourne, Australia: Berry Street. This report was sponsored by the NSW Statewide Behaviour Intervention Service (SBIS), Clinical Innovation and Governance (CIG), Ageing Disability and Home Care (ADHC), Family and Community Services (FACS)

Safeguards

When we think of the safeguarding of people with disability we tend to think of regulation and compliance. Our mind turns to the policies and procedures in our daily practice that help us meet our compliance obligations with the NDIS Quality Safeguards Commission. However, as we seek to minimise dangers and risks to people with disability through regulatory frameworks, we often forget the importance of 'developmental safeguards'. Developmental safeguards are the capacities we can build within and around the person to help keep them safe. Developmental safeguards are things like:

- People with disability being empowered to make informed decisions – with support if needed
- People with disability understanding their rights and developing self-advocacy skills
- People with disability have a range of freely given relationships and connection³⁸

As the inquiry into the tragic death of Anne Marie Smith noted, *"the best safeguard for any potentially vulnerable individual is to have a number of people in their lives, who make sure the person is not left to their own devices when things go wrong"*.³⁹ We all need people watching out for us. This is even more important when a person has complex support needs.

A personalised approach to safeguarding in the NDIS, is a process of promoting a person's wellbeing, safety and opportunities to live a good life. This is achieved through building capacity, increasing social inclusion and connections, and freely given relationships. These elements are not only life enriching, but are a key safeguard.⁴⁰

The NDIS Quality and Safeguards Commission regulates NDIS providers, provides national consistency, promotes safety and quality services, resolves problems and identifies areas for improvement.⁴¹ The NDIS Commission has oversight on the use of restrictive practices and positive behaviour support plans. It is important to understand the role of the NDIS Commission and your role in terms of:

- NDIS code of conduct standards
- Practice standards
- Worker screening
- Incident management and reportable incidents including unauthorised restrictive practice
- Behaviour support and restrictive practices
- Complaints and concerns⁴²

38 Department of Social Services [NDIS Quality and Safeguarding Framework](#) 9 December 2016

39 [Safeguarding Task Force Report](#) - July 2020

40 Marita Walker, Kate Fulton Bruce Bonyhady [A personalised approach to safeguarding in the NDIS](#) March 2013

41 [NDIS Quality Safeguards Commission](#)

42 NDIS Quality and Safeguards Commission <https://www.ndiscommission.gov.au/>

RESOURCES

-  [NDIS Quality and Safeguards Commission](#) (website)
-  [Regulated Restrictive Practices Guide](#) – NDIS Quality and Safeguards Commission (guide)
-  [What constitutes a regulated restrictive practice with children and young people](#) NDIS Quality and Safeguards Commission (interactive decision tree)
-  [Microboards Australia](#) (website)
-  [Circles of support](#) – Resourcing Inclusive Communities (guide)
-  [Circles of Support and Microboards Australia](#) (website)



Take a moment to reflect

- What are the factors in your life that help keep you safe? Do the people you assist have the same safeguards?
- How can you support a person with complex needs to be more included in the community?



A Good Life

To put it simply, a good, or ordinary life is one where a person has the same opportunities as people without disability. People with complex support needs might need more support to lead a good life and this priority can be left out when there is a lot going on in a person's life.





When thinking about a good life, it's useful to think about what makes **your** life good; what is important to **you**?

When we talk about a good life we usually think of the importance of:

- Relationships, friendships, family and community connections
- A home where we are safe and belong
- A life with purpose and meaning
- Freedom to live life as one chooses
- A decent standard of living

The same ideas are important to people with complex needs, though very often are not given the attention they need.

RESOURCES

-  **Reasonable and Necessary Support across the Lifespan: An Ordinary Life for People with Disability** – Independent Advisory Council to the NDIS, 2014 (report)
-  **Seven Keys to Citizenship** – Centre for Welfare Reform (video)
-  **Bringing the good life to life** – Community Resource Unit Ltd (video and articles)
-  **Keys to Citizenship in Action** – Citizen Network, WA's Individualised Services (webinar)



Section 3: NDIS and Mainstream Interfaces

In this section we take you through the common mainstream interfaces, provide some guidance on responsibilities of respective systems and tools to help you navigate the systems. We also include case study examples. It's important to remember that each person's situation is unique, which requires a unique approach - what has worked for one person, may not work for another.

As a support coordinator working with participants with complex support needs it is important you have a good grasp of roles and responsibilities of the NDIS and other service systems. Understanding these responsibilities will help ensure you are seeking support and services for the person with disability from the relevant service system. Even when responsibilities are not clear, by acknowledging the ambiguity and highlighting the impact of system gaps you can take a solutions-focused approach with respective parties to achieve good outcomes for the person with disability.

"NDIS-speak" is not only vital for your own understanding - it is an essential skill for communicating effectively across multiple systems and platforms. Getting the language right can be an important factor in determining the service system responsible for a particular support.

There also may be times when you need to be a strong representative for the person you are supporting , and provide critical feedback when service systems are not meeting their responsibilities - be that the NDIS or other service systems.

It is important to know the complaints process for each system. It is also important to connect the person with complex support needs to an advocate. Both [Disability Advocacy Network Australia](#) and the [Department of Social Services](#) have advocacy finders on their website.

Finding your niche

Every person you work with is unique, but as you become more familiar with the systems and make connections with other professionals working in mainstream services, you will begin to pave the way for the next time you are assisting a person with complex support needs.

To be confident with your abilities and experiences, and with the space you're working in you need to:

- Know what you know / don't know, and focus on continuous learning
- Find your **passion** and motivation – hone in on your expertise and aligned skills
- Identify and confront your "pain points", and work on strategies to reduce your own barriers/blocks
- Expand on your relationships and rapport with your networks and connections

Look at your experience and skill set, and where your passion lies. Do you enjoy working in a particular space or with a specific cohort? Do you have expertise in a certain area that you want to focus on?

For example:

- Home and Living – SDA housing, community engagement, building circles of supports, independent living options
- Assistive Technology – specialist capital supports, aids and equipment for independence and innovation
- Life transition periods – leaving home as a young adult, vocational transition, functional capacity changes
- Health interface – hospital / mental health, new injury, rehabilitation, palliative care
- Other mainstream interfaces – Justice, Child / family and youth, education, residential aged care, transport, housing

Engagement:

- Identify and understand how you communicate best, how you can adapt, and how you can listen
- Explore alternate methods of communication and open conversations for best practice for you and with others
- If you have a barrier to engaging and connecting, you can't do your job regardless of system knowledge

Learn and adapt with your cohort:

- Who are you working with and why? Do you have aligned skills and awareness?
- What do you need to be mindful of, considerate of, sensitive to?
- How does each individual want, and need, to engage and communicate with you?
- Are you the right fit?⁴³

43 Schutz, L. [NDIS Support Coordination Newbies - Fundamentals](#) 2021

Universal service obligation

Mainstream services are intended to deliver services to all Australians and are obliged to make reasonable adjustments when providing services to people with disability. This is called the universal services obligation.

Often it is assumed that because a person has an NDIS plan the universal service obligation of other service systems are reduced or no longer applicable.⁴⁴ Mainstream service systems have a responsibility to provide accessible services to people with disability. The NDIS might also have responsibility in supporting a person to access mainstream services. It is also worth noting that each system has a financial interest in deferring costs to another system. This is extremely unfortunate as unmet needs are both costly to the individual and the State.

At the interface

Like the idiom 'at the coalface' working within the NDIS and mainstream interfaces is where you will be dealing with real issues and problems. This is complex where the lives of real people matter. While the term 'interface' implies the seamless connection of 2 or more systems, this is often not the case with the NDIS and mainstream interfaces.⁴⁵ Support coordinators frequently encounter a lack of clarity about the responsibility of the mainstream service or NDIS and certainly some contestable gaps, where it appears no system is taking responsibility.

Participants with complex support needs are exceptionally vulnerable to falling through the cracks and not having their needs met.⁴⁶ Skilled support coordination is vital to supporting a person with complex support needs to navigate interfaces, connect with services in a cohesive way that meets their support needs, in line with their goals, and preferences.

There are some important guides and signposts to help you when assisting a participant with complex support needs. These provide guidance on the responsibilities of NDIS and other parties:



- The **NDIS Act 2013** is the law behind the NDIS. Section 34 of the Act outlines Reasonable and Necessary Supports. It helps understand what is reasonable and necessary for the NDIS to fund, and is the criteria that planners apply when deciding what to fund in a participant's plan.
- The **NDIS Rules** are also laws. They are tabled in parliament and sit under the NDIS Act. They have more detail about what can be funded in a participant's plan. For more information, read the [overview of the NDIS Operational Guideline - about the NDIS](#). Rules to be aware of are:
 - [Becoming a participant](#)
 - [Supports for participants](#)
 - [Plan management](#)
 - [Children](#)
 - [Specialist disability accommodation](#)

44 NDS [News on the ground: Who is responsible?](#) 11/01/2019

45 Aminath Didi, Leanne Dowse & Louisa Smith (2018) Intellectual disability and complex support needs: human rights perspective for policy and practice, *The International Journal of Human Rights*, 22:8.

46 Leanne Dowse, Michele Wiese & Louisa Smith (2016) Workforce issues in the Australian National Disability Insurance Scheme: Complex support needs ready?, *Research and Practice in Intellectual and Developmental Disabilities*, 3:1.

- The Applied Principles and Tables of Services (APTOS) was developed by the Council of Australian Governments (COAG). COAG was made up of state and federal government ministers and its role was to manage matters of national significance. As the NDIS rolled out, COAG agreed to principles that determine the responsibilities of the NDIS and other service systems. This means the NDIS does not need to fund everything, and that other systems have responsibilities to people with disability too. The APTOS is important because it gives guidance on what NDIS will fund and what other service systems are responsible for. The COAG has since been replaced with the National Federation Reform Council, but the principles that determine the responsibilities of the NDIS and other service systems are here to stay for the time being.
- The Operational Guidelines are guidelines based on the NDIS Legislation and Rules. They explain what the NDIA needs to consider and how they make decisions based on the legislation.
- The Planning Operational Guideline Appendix 1 - Table of guidance on whether a support is most appropriately funded by the NDIS is an appendix to the Operational Guidelines that covers most of the mainstream interfaces. It discusses supports generally funded by NDIS; supports generally funded by other parties; and in the middle column supports which, dependent on their purpose, may be funded by the NDIS or other parties. This document can be very helpful when navigating the NDIS and mainstream interfaces.

You can read Section 4 of this Guide for more details on the above, and additional NDIS tools.



Health

Like most Australians, people with disability need to engage with the health care system - seeing doctors, using community health services and going to hospital. Often people with complex health needs might engage with the health system frequently. It is important that people with disability have access to proactive healthcare. People with disability may need assistance to access health care, this may include strategies in a positive behaviour support plan. These are just some examples of how the NDIS might support a person to access the health system.

Confusion arises when a person's disability causes health issues and when a health condition results in disability. It is often not clear whether the NDIA or health systems need to provide the service or support to the person. People with disability often have difficulty accessing health services, which can lead to poorer health outcomes.

NDIS Reasonable and Necessary NDIS supports for eligible people	Other parties
<ul style="list-style-type: none"> ● Assistance with activities of daily living ● Home modifications ● Planning and support for hospital discharge ● Prosthetics, orthoses and specialist hearing and vision supports (excluding surgical services) ● Allied health and other therapy directly related to maintaining or building capacity, assessment and planning ● Nursing support where the care required due to the impact of a person's impairment/s on their function ● Routine personal care at home and community ● Supports for complex communication needs or challenging behaviours while accessing health services, including hospitals and in-patient facilities ● Training of NDIS-funded workers by nurses, allied health or other relevant health professionals ● Aids and equipment to enhance increased or independent functioning in the home and community ● Palliative care, functional supports as part of an NDIS participant's plan may continue to be provided at the same time as palliative care ● The coordination of NDIS supports, with supports offered by the health system and other relevant service systems 	<ul style="list-style-type: none"> ● Diagnosis and assessment of health conditions, including mental health conditions and disabilities ● Medication ● Medical and dental services and treatment ● Hospital care, surgery and rehabilitation ● Clinical care for mental health conditions ● Palliative care, geriatric and psychogeriatric services ● Sub-acute, rehabilitation and post-acute care including treatment of wounds by a nurse ● Planning and preparation for a patient to return home after a hospital stay ● General hearing and vision services not related to a person's disability (for example, prescription glasses)⁴⁷

⁴⁷ **Applied Principles and Tables of Services** Council of Australian Governments (COAG Principles to determine the responsibilities of the NDIS and other service systems) November 2015

Case Study

Meet: John is 48 years old and was living with his wife and 2 sons when he had a cycling accident resulting in an acquired brain injury and a permanent disability.

Situation: John is currently in a rehabilitation setting and really wants to return home to live with his wife and children. He has significantly reduced mobility and uses a wheelchair. He has difficulty telling nurses when needs to go to the toilet due to speech difficulties and requires person-to-person support in all his daily activities. His current supports are his wife who works 3 days a week.

Outcome: Discharge planning began early with John gaining access to the NDIS and working with his support coordinator and his rehabilitation team to plan his return home. An interim NDIS plan includes funding for an occupational therapist to assess his home for modifications. John's support coordinator helps him find a service provider, and rehabilitation staff assist with the training of support workers. Assistive technology is trialled with NDIS funding as well as PEG consumables.

Following the investigations carried out with the funding in the interim plan, John's support coordinator submits a home and living supports request form for home modifications, medium term accommodation, and core and capacity building supports. While home modifications are being carried out, John rents an apartment with his family using medium-term accommodation. He is supported by his wife and paid support workers. John is funded for allied health therapy to maintain his functioning and build capacity.

Disability related health supports

From 1 October 2019, additional **disability-related health supports** can be purchased with NDIS funds when the need for these supports directly relate to an NDIS participant's functional impairment, and are ongoing:

- Continence support
- Respiratory support
- Diabetic management support
- Dysphagia supports
- Nutrition supports
- Epilepsy support
- Podiatry supports
- Wound and pressure care supports⁴⁸

⁴⁸ NDIS **Disability related health supports** 24 July 2020










Health Liaison Officer

The Health Liaison Officer (HLO) is an NDIA employed role to improve the communication between health and the NDIS around hospital discharge. Their role is to support everyone involved so people with disability can move through the NDIS process faster, in order to be discharged from hospital.

Health Liaison Officers will:

- Promote understanding of the NDIS within Health to support hospital discharge.
- Connect with hospitals and link directly with health clinicians to provide support for planning, case conferences and information exchange
- Build connections between existing government and community services and the NDIA to ensure the right information is available for the planning process
- Work closely with the participant's NDIS Support Coordinator regarding specific service issues
- At the start of COVID-19 feedback that HLO instrumental in the safe discharge of participants from hospital into living in the community⁴⁹

RESOURCES

-  **NDIS Act 2013** – Section 34 Reasonable and Necessary Supports (legislation)
-  **Disability related health supports** – NDIS (website)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 – Table of guidance on whether a support is most appropriately funded by the NDIS** – (NDIS guidelines)
-  **Collaborative discharge approach – Practice guide** – Summer Foundation (guide)
-  **Getting the language right** – Summer Foundation (guide)
-  **Best practice series Episode 2: Supporting someone who needs to leave hospital**
– UpSkill, Summer Foundation (podcast)
-  **Services if you're in hospital** – (NDIS website)
-  **Transitions of care between disability services and hospitals** – (NDIS Commission practice alert)

49 Steven Davidson, NSW Health **Health & NDIS: Interface in the age of COVID-19** 8 April 2020

Mental health

Psychosocial disabilities are disabilities that arise from mental health issues. People with psychosocial disability will likely engage with community mental health care services as well as the NDIS. Complex support needs may be apparent when a person has an episode of mental illness or when service systems are fragmented. People with psychosocial disability will need their support coordinator to help them navigate and connect with community mental health services as well as the supports that can be provided through the NDIS.

Participants with psychosocial disability may use their NDIS funding for support to maintain their wellness and recovery and utilise community mental health supports for treatment orientated services.

NDIS Reasonable and Necessary NDIS supports for eligible people

- Disability supports that are not clinical in nature
- Community re-integration and planning and support for hospital discharge
- Support for decision-making
- Daily living activities including personal care and household tasks
- Social and community participation
- Allied health and other therapy directly related to maintaining or capacity building, assessment, and planning
- Support to maintain tenancy
- Support coordination

Other parties

- Clinical supports, including acute, and continuing care in the community, rehabilitation/recovery
- Early intervention supports related to mental health
- Residential care /inpatient treatment or clinical rehabilitation
- Supports relating to a comorbidity with a psychiatric condition where the comorbidity is clearly the responsibility of another service system (for example, treatment for a drug or alcohol issue)

Case Study










Meet: Alan is 27. He first started experiencing mental health issues as a 15 year old. He had many admissions to hospital due to episodes of mental illness.

Alan joined the NDIS 2 years ago. He has a support coordinator who assists him to design his support to maintain wellness and support recovery.

Situation: With Alan's permission, his support coordinator is the key point of contact between the mental health services and NDIS services he is using. When there are early signs of an episode he is able to access more intensive support before matters become acute.

Outcome: NDIS supports have assisted Alan to remain well and he is increasingly active in the community. Alan has not had a hospital admission for 18 months.

RESOURCES

-  **NDIS Act 2013** – Section 34 Reasonable and necessary (legislation)
-  **Mental health and the NDIS** – NDIS (website)
-  **NDIS and Mental Health Care Plans** – Australian Association of Psychologists Inc (resource)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 - Table of guidance on whether a support is most appropriately funded by the NDIS** – NDIS (guideline)
-  **Collaborative discharge approach – Practice guide** – Summer Foundation (guide)
-  **Transitions of care between disability services and hospitals** – NDIS Commission (practice alert)
-  **Complex Needs Capable – a practice resource for drug and alcohol services** – Network of Alcohol and Drug Agencies (NADA) (resource)
-  **Getting the language right** – Summer Foundation (guide)



Residential aged care

Usually younger people living in residential aged care (RAC) have had little or no choice in their living arrangement. They live in RAC because there is no suitable housing for them. Government targets are to ensure younger people have opportunities to live in the community, and support available through the NDIS may assist a participant living in RAC to seek more suitable housing.

The Government has strengthened the initial targets of the Younger People in Residential Aged Care Action Plan. Apart from exceptional circumstances, the strengthened targets are:

- no people under the age of 65 entering residential aged care by 2022
- no people under the age of 45 living in residential aged care by 2022
- no people under the age of 65 living in residential aged care by 2025.⁵⁰

Support coordinators have a valuable role assisting younger people in RAC to think about and move to age-appropriate accommodation. Younger people living in RAC should have ample support coordination, specialist support coordination and allied health support to assist them to explore housing and support in the community.⁵¹

NDIS Reasonable and Necessary NDIS supports for eligible people

- Daily care subsidy 'Basic Care Subsidy', NDIS reimburse this fee through the cross billing arrangement
- Social and community support
- Continence supports if receipt of Services Australia/CAPS allowance
- Consumables such as Auslan interpreters
- Therapy supports related to skill development, capacity building, Assistive Technology assessment, specification and training
- Support to find housing solutions e.g. support coordination, allied health
- Assistive technology that is personal or customised for the participant⁵²

Other parties

- 'Basic Daily (Care) Fee' paid to the aged care facility is the participant's responsibility
- Therapy supports the RAC required under the Aged Care Act
- Continence supports are paid for by the aged care facility if Services Australia/CAPS allowance is cancelled
- Shared assistive technology equipment within an aged care facility (eg. ceiling hoists, recliner chairs, mobile hoists, manual wheelchairs)

⁵⁰ Australian Government, Department of health [Younger people in residential aged care: priorities for action](#)

⁵¹ Summer Foundation [How to Reform Support Coordination to Meet the Needs of NDIS Participants with High and Complex Needs](#) January 2021

⁵² NDIS [How do we make decisions about other supports for younger people in residential aged care?](#) Current 28 September 2020

Case Study











Meet: Louise is 51 and had a stroke at the age of 43, resulting in an acquired brain injury. Once she recovered and was deemed medically stable she was discharged to a local residential aged care facility. Despite choosing somewhere close to her family home, her relationship with her husband ended and her young adult children visit infrequently, though she speaks to them on the phone once or twice a week. She has been living in RAC for 6 years and calls it her 'daily nightmare'.

Situation: She has had NDIS funding for 2 years and uses it to go into the community.

She recently met a new support coordinator. The new support coordinator explained that some of the fees Louise currently pays for living in RAC can be reimbursed. She may also be eligible for some personal care support on the days the RAC does not shower her. More importantly, her support coordinator told her she does not need to live in aged care if she does not want to.

Outcome: Louise is working with her support coordinator to explore moving out of aged care and into the community. With her support coordinator's help Louise has successfully secured Specialist Disability Accommodation (SDA) funding in her plan, and is now looking for a new home in the community.

RESOURCES

-  **NDIS Act 2013** Section 34. Reasonable and Necessary Supports (legislation)
-  **Younger People in Residential Aged Care – Action Plan** – Australian Government (action plan)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 – Table of guidance on whether a support is most appropriately funded by the NDIS** – (NDIS guideline)
-  **Younger people in residential aged care operational guideline** – (NDIS guideline)
-  **Living in and moving out of residential aged care** – (NDIS resource)
-  **How do we make decisions about other supports for younger people in residential aged care** – NDIS
-  **What aged care fees and charges can we fund?** – (NDIS guideline)
-  **Best practice series Episode 3: Supporting a person in aged care to live a better life** – UpSkill, Summer Foundation (podcast)
-  **Moving out of a Nursing Home** – Housing Hub, Summer Foundation (resource).

Housing

For most people, home is a place to feel safe, belong, keep our things, express ourselves and share with others we care about. However, home is not like this for many people who have complex support needs. Accessible, affordable housing can be difficult to find. People with disability may have no choice but to live in a certain place such as RAC, boarding houses, institutions or group homes. Often this is because it is the only way they can have their support needs met. People with disability have the same right to live in the community as a person without a disability.⁵³

The NDIA does not supply housing but can provide funding for a small number of NDIS participants to pay for SDA. SDA housing for NDIS participants who have an 'extreme functional impairment' or 'very high support needs' and who meet the SDA needs requirement.⁵⁴ The **SDA Rule 2020**⁵⁵ sets out the criteria for SDA eligibility. Apart from SDA, the NDIA can provide a range of home and living supports, including assistance for a participant to live in their home, for domestic tasks, to maintain tenancy obligations and to explore and design new home and living options.

As a support coordinator you might be responsible for connecting a person with NDIS services and/or services offered by other parties. Your role might be to assist a person with complex support needs to navigate NDIS supports for home and living, as well as other mainstream housing services and other housing services.

NDIS	Other parties
<ul style="list-style-type: none">● Assistance with daily living● Capacity building to live independently in the community<ul style="list-style-type: none">○ living skills○ money and household management○ social and communication skills○ behaviour management● Supports to find and maintain accommodation and/or tenancies● Home modifications to private dwellings● Home mods - case by case basis in social housing● SDA● Supports for participants at risk of or experiencing homelessness● Support coordination	<ul style="list-style-type: none">● Social housing● Tenancy support● Homelessness-specific services● Accessible community infrastructure● Social housing providers have a duty to make reasonable adjustment in providing accessible housing stock for people with a disability● Intensive case coordination for homelessness

⁵³ UNCRPD **Article 19 - Living independently and being included in the community**

⁵⁴ **SDA Rules 2020**

⁵⁵ **SDA Rules 2020**

Case Study







Meet: Matilda is a 57 year old woman with an intellectual disability, vision impairment and hearing impairment.

Situation: Matilda has lived in her public housing flat for 33 years. She also has vertigo and a host of other health conditions and cannot access the shower in her bathroom, as it is over the bath and she can't safely step in and out. As a result, she has been having her hair washed at a local hairdresser once a week, and washing herself at the basin. Her goal is to be able to access her bathroom.

Outcome: Matilda's support coordinator liaised with the Department of Housing to request an OT assess the property to determine the modifications required. There was no certainty around when or if this might occur. Matilda's support coordinator assisted to engage an NDIS funded OT. The OT assessed and developed a proposal for the Department of Housing to fund major bathroom modifications, with a proportion to be funded by the NDIS, that fell beyond the reasonable expectations of public housing to modify.

After scoping the works, the Department of Health rejected the proposed modifications. Special accommodation requirements had been approved and Matilda's cousin and her support coordinator put pressure on the Department of Housing, due to the inappropriate and unsafe living environment. Matilda's cousin lodged numerous complaints with the Department of Housing to escalate the request and a Senior Housing Officer was assigned to source a suitable home. The department found 2 suitable homes with accessible bathrooms for Matilda to move to. Additional NDIS supports were engaged to work through the idea of moving with Matilda and support her to visit the transfer options. Matilda then chose a new home and was supported to move.

RESOURCES

-  **NDIS Act 2013** Section 34 Reasonable and Necessary Supports (legislation)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 – Table of guidance on whether a support is most appropriately funded by the NDIS** – (NDIS guideline)
-  **Best practice series Episode 1: Supporting a person whose housing isn't working for them**
– UpSkill, Summer Foundation (podcast)
-  **Specialist Disability Accommodation Rules 2020** (legislation)
-  **Article 19 – Living independently and being included in the community** (UNCPRD)

Justice

"People with disabilities do not enjoy equality before the law when they come into contact with the criminal justice system in Australia. Whether a person with disability is the victim of a crime, accused of a crime or a witness, they are at increased risk of being disrespected and disbelieved. If a victim, their disability may be seen to mitigate the offender's guilt, if a perpetrator, their disability makes incarceration more likely."⁵⁶

Support coordinators working with people who come into contact with the justice system might be involved in connecting with legal aid and correctional services.

Early engagement with a person with disability involved in the justice system will assist the person's journey and, if required, preparation for release. To access assessments that discuss the individual support needs of the person and support to implement recommendations, are vital. Working with the NDIA to ensure adequate understanding of the person's impairment and support needs is key, and collaboration with other agencies is vital.⁵⁷

NDIS	Other parties
<ul style="list-style-type: none">● Support coordination● Supports to address behaviours of concern (offence related causes) and reduce the risk of offending and reoffending such as social, assistance with planning, decision making, scheduling, communication, self-regulation and community living communication and self-regulation skills● Personal care and social and community● Aids and equipment● Support to understand and comply with supervision orders	<ul style="list-style-type: none">● Support for victims and witnesses of crime● Court-based support programs and specialist lists, including bail support● Management of offenders to ensure compliance with supervised orders or conditions● Personal and day-to-day care while in custody● Services in the justice system are expected to be accessible: environmental, physical, communication and information

Justice Liaison Officer

- Connect with prisons and correctional facilities
- Promote understanding of the NDIS within the justice interface
- Support prison entry, discharge and community transition
- Promote awareness of the scope of supports and services provided through the NDIS with key justice staff and stakeholders
- Build connections between existing government and community services and the NDIA to ensure the right information is available for the planning process
- Work collaboratively with LACs and Planners
- Provide detailed handover to LACs and Planners and support plan implementation
- Provide rapid response as required⁵⁸

⁵⁶ *Disability Justice Strategies - an introduction*, www.humanrights.gov.au April 2013, cited in [Marathon Health ECSNP Newsletter](#)

⁵⁷ [Marathon Health ECSNP Newsletter](#)

⁵⁸ David Coyne, Branch Manager NDIS Complex support needs [NDIS EXPERIENCING COMPLEX SUPPORT NEEDS](#) November 2019

Case Study

Meet: Alex is a 27 year old Aboriginal man who has an intellectual disability and psychosocial disability. His goal is to reconnect with his community and find work.











Situation: Alex was recently released from jail following 3 months on remand for drug-related charges. He is on community orders requiring him to take methadone and medication to manage schizophrenia.

Outcome: Alex's support coordinator helped Alex understand the legal process. She connected Alex with a disability rights service and she worked with a legal aid lawyer, gathering information so that the Court understood and considered Alex's disability. Before leaving jail, his support coordinator found stable housing for him through a community housing service.

Since leaving jail, Alex's support coordinator has helped him connect with local mental healthcare and drug and alcohol services. She has also connected him with a local Aboriginal organisation for mentoring, to build relationships and informal support networks.

Alex is working with a positive behaviour support practitioner and speech pathologist. He also has support workers who assist him with a range of tasks, including understanding and meeting his community orders obligations. He is currently undertaking training with a local DES provider and hopes to get paid work soon.

RESOURCES

-  **NDIS Act 2013** Section 34 Reasonable and Necessary Supports (legislation)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 - Table of guidance on whether a support is most appropriately funded by the NDIS** (NDIS guideline)
-  **Planning Operational Guideline Appendix 1 - Table of guidance** (NDIS guideline)
-  **Intellectual Disability Rights Service** (IDRS) NSW (website)
-  **Council for Intellectual Disability NSW** (website)
-  **Vic Legal Aid** (website)
-  **Villamanta Disability Rights Legal Service** (website)
-  **NADA Complex Needs Capable - a practice resource for drug and alcohol services** (resource)
-  **"I Needed Help, Instead I Was Punished"**: Abuse and Neglect of Prisoners with Disabilities in Australia, Human Rights Watch February 6, 2018 (article)

Family supports, out-of-home care and child protection

Family supports, out-of-home care and child protections cross over a number of family and support situations, including support for parents who have disability, children with disability who are in out-of-home care (including voluntary out-of-home care), and child safety and protection.

This continues to be a highly contested area; however, the COAG principles state ‘the NDIS will fund supports required due to the impact of the child’s impairment/s on their functional capacity where a child with disability is in out-of-home care and has support needs that are above the needs of children of a similar age’. In relation to parents who have disability COAG principles state ‘supports that enable families and carers to sustainably maintain their caring role’.⁵⁹

NDIS	Other parties
<ul style="list-style-type: none">● Disability-specific family supports, which are required due to the impact of the person’s impairment/s● Assistance for children with disability, or parents with disability, to build daily living and life skills● Social and community support● Disability-specific training programs● Disability-specific support needs in out-of-home care● The coordination of NDIS supports, child protection, family supports and other relevant service systems	<ul style="list-style-type: none">● Reporting and responding to child protection● Out-of-home care arrangements● Family support● Guardianship arrangement - children under 18● Community awareness



59 COAG Principles of responsibility page 8

Case Study

Meet: Adam is 16 years old and has an intellectual disability and Autism. Adam has limited verbal communication, heightened sensory needs and communicates and expresses his frustration through behaviours of concern. Adam has complex support needs and requires 2:1 support to keep him and others safe.

Situation: Adam was transitioned into a Voluntary out of Home Care placement at the age of 15. Adam's goal is to reduce his 2:1 supports over time. This will enable him to be more actively involved in his community and increase his independent living skills.

Outcome: Adam is supported by the Department of Families, Fairness and Housing (DFFH), who work in consultation with the family, the support coordinator and the care provider to help source, manage and maintain the voluntary out of homecare placement. DFFH work with the care team to source appropriate accommodation during the out-of-home placement and are responsible for funding the rent, board and lodgings (including groceries) for this property (up to a maximum amount per year).

Adam and his family continue to maintain responsibility for medication, clothing and personal items/ expenses. Adam currently resides in a DFFH-owned property with 24/7 supports, funded through the NDIS. Adam's support coordinator has supported him to engage a specialist team of allied health professionals (OT, speech, behaviour support) to assist with understanding Adam's needs, develop strategies to keep Adam and others safe, identify and build on opportunities for independence and community involvement, and decrease episodes of dangerous or harmful behaviour. The support coordinator assists Adam's family to be routinely involved in Adam's life and to be actively involved in the overall provision of care.

The allied health team have monthly care team meetings with direct involvement with a member of the NDIA complex support needs team to ensure there is a holistic and collaborative approach to Adam's care and supports. Adam's support coordinator is currently supporting Adam to apply for SDA funding in order to secure a suitable and long-term housing solution.

Case Study

Meet: Kira is a 24-year-old female who has an acquired brain injury and psychosocial disability as a result of severe childhood trauma, sexual abuse and domestic violence. Kira's GP suspects Kira might be suffering from Borderline Personality Disorder.

Kira requires a lot of prompting and support to complete daily tasks such as getting her daughter ready for school, cleaning the house, staying on top of her personal hygiene and attending appointments. Kira's literacy skills are weak and she often requires information to be repeated multiple times and to be kept simple.

Kira has 2 young daughters, the oldest is 8 years old and the youngest is 1½ years old. Kira does not have any contact with her daughters' father after escaping domestic violence nearly 2 years ago.

Situation: Since the birth of her second daughter, Child Protection has been heavily involved in Kira's life and there's an ongoing court case about the future living arrangements for both of Kira's daughters. Child Protection is concerned about Kira's ability to independently look after her daughters. Child Protection is especially worried about Kira's ability to provide her children with emotional support and regulation. Kira's youngest daughter is currently under an Interim Accommodation Order, which has placed her with her paternal aunt. Kira has access with her youngest daughter 4 times a week. Kira's oldest daughter continues to live with Kira, but Child Protection has attempted to remove her multiple times. A final court hearing is scheduled 3 months from now.

Outcome: Kira is working with her key worker from Cradle to Kinder to develop her parenting skills – she receives additional support from her support workers to help implement the strategies that have been suggested by Cradle to Kinder. Kira also receives support from Take Two to understand how to emotionally connect with her daughters and what it means to prioritise her children's needs over her own. Kira has been living in transitional housing since escaping domestic violence nearly 2 years ago. Kira's advocate from Safe Future is helping her to explore long-term suitable housing such as social housing or affordable private rental. Kira's support coordinator has been involved in the housing search and supported Kira to explore Individualised Living Options (ILO). Kira is nervous about her upcoming court hearing – she is receiving legal representation through Legal Aid. Kira's support coordinator has been supporting Kira's legal team to understand which NDIS supports she has available and how funding can be used flexibly to meet her support needs. Child Protection has allocated a Senior Case Manager who organises fortnightly care team meetings and goes to see Kira and the children every week.

Kira receives support from a small group of dedicated support workers – they help her stay organised and develop new routines, assist with meal prep and light house duties. In addition, Kira always has support for her medical appointments as she finds it difficult to retain the information and figure out what to do next. Kira is working with a speech pathologist to develop her receptive communication skills and improve her social communication skills. Kira's speech pathologist has been working with Child Protection, Cradle to Kinder and Take Two so they have a better understanding of how to effectively communicate with Kira.

Over the past 3 months, Kira has been working with an occupational therapist to learn about sensory regulation as it was identified as being a major barrier for her when meeting new people and participating in case conferences and court hearings. Kira has recently started animal assisted therapy to develop her emotional regulation skills – it was suggested that animal assisted therapy could be beneficial for Kira because it requires her to respond to body language and expression in the same way that she does with her daughters. Kira's support coordinator has supported Kira to establish and maintain all her mainstream and NDIS funded supports. Without a strong involvement from a support coordinator, Kira would be a high risk of disengaging from the majority of her supports. Support Coordination is currently funded at 180 hours per year.








NDIS:

- Support Coordination
- 1:1 support workers
- OT for sensory and organisational skills
- Speech for communication
- Psychologist for emotional capacity building

Mainstream:

- Child Protection for case management for daughters
- Cradle to Kinder for parenting skills
- Take Two for intense emotional parenting development
- Safe Futures for domestic violence
- Legal Aid for court

RESOURCES

-  **NDIS Act 2013** Section 34 Reasonable and Necessary Supports (legislation)
-  **Applied principles and tables of services** (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)
-  **Planning Operational Guideline Appendix 1 – Table of guidance on whether a support is most appropriately funded by the NDIS** (NDIS guideline)
-  **Child Protection and Family support** (NDIS guideline)
-  **Support for families and carers** – Independent Advisory Council to NDIS, 2020 (resource)
-  **Practices that support parenting by parents with intellectual disability** – Child Family Community Australia (resource)
-  **Article 23 – Respect for home and the family** (UNCPRD)



Section 4:

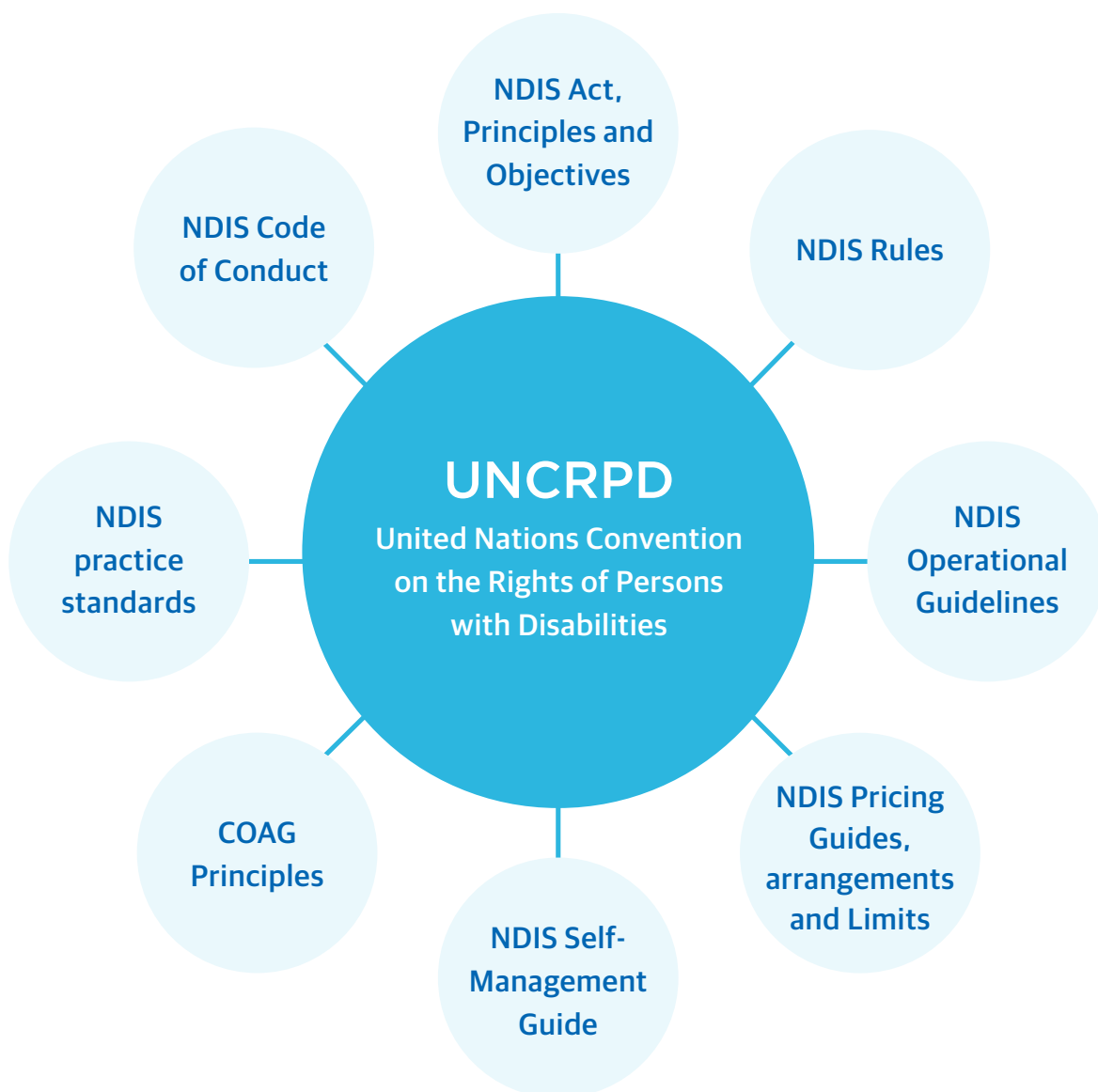
NDIS Toolkit

The NDIS has many layers. A lot of information is available through various platforms, and it's important to recognise that some shared/distributed information is not always correct, endorsed by the NDIA or in line with NDIS legislation. NDIS Planners, call centre staff and LACs do not always have correct information either. Because the NDIS is relatively new, some things are still being worked out. Some decisions about support are made at the Administrative Appeals Tribunal. These cases do not provide a precedent, but they do tell us there is still much to be worked out with the NDIS.




People with complex support needs will often find it difficult to navigate the NDIS. Very often their needs are complex because they are caught in the gaps between systems. Your role as support coordinator is vital here to help people with complex support needs navigate the NDIS and other systems.

You don't need to know everything about the NDIS - the NDIS Act, Rules and operational guidelines, but you need to know what they are, where to find them, what they cover, how they fit within the scheme, and how to interpret and apply them practically.

We call this section the NDIS Toolkit. The toolkit includes information and resources to help you understand the NDIS, understand how decisions are made, and how you can assist NDIS participants to make the most of their funded support. Learning how to interpret "NDIS-Speak" is not only vital for your own understanding, it is an essential skill for communicating effectively across multiple systems and platforms. Getting the language right can be an important factor in determining the service system responsible for a particular support.



RESOURCES

-  NDIS – [Glossary/Acronyms](#)
-  NDS – [Key Terms](#)
-  Summer Foundation – [Getting the Language Right](#)

United Nations Convention on the Rights of Persons with Disabilities - UNCRPD

- Human rights are codified in the National Disability Insurance Scheme (NDIS) Act 2013, and underpins all actions we take.
- The **Convention on the Rights of Persons with Disabilities** (2006) forms the basis of the NDIS Act: Important articles to remember when supporting people with complex needs
 - **Article 13 – Access to justice**
 - **Article 16 – Freedom from exploitation, violence and abuse**
 - **Article 19 – Living independently and being included in the community**
 - **Article 21 – Freedom of expression and opinion, and access to information**
 - **Article 22 – Respect for privacy**
 - **Article 23 – Respect for home and the family**

NDIS Act 2013

- The Act is the underpinning legislation that drives, frames and informs the NDIS
- All NDIA guidelines, actions and decisions must comply with the Act
- The Act is amended from time to time (latest in force from 27.11.2020) so it is important to always check status when referring to the Act

Reasonable and Necessary Supports

Importantly, this is the criteria for funding supports and points you toward the information and evidence the NDIA might need to fund a particular support



- The support is related to the person's disability
- The support will help the person with disability to pursue their goals and aspirations
- The support will help them undertake activities that will increase their social and economic participation
- The support is value for money:
 - when compared to the benefits to be achieved, for example, whether purchasing the support is likely to reduce the cost of funding other supports in the long term
 - when compared to alternative options that may provide the person with disability with the same outcome at a similar or cheaper cost

- The support is likely to be effective and beneficial for the person with disability, regarding good practice and evidence
- The support is required to complement the informal supports the person with disability have available, by taking into account what is reasonable for families, carers, informal networks and the community to provide
- The support is most appropriately funded or provided by the NDIS and not other service systems
- The support is not more appropriately funded by another service system, agency, person or body, such as the education system or the health (read section 4 -the interface)

A particularly difficult point with the NDIS is the final point above - other service systems. Reasonable and necessary criteria help you understand the evidence required when requesting a particular support.

It is important to note that support coordinators do not determine what is reasonable and necessary. The NDIS delegates this role; the NDIS Planner determines the reasonable and necessary supports. Participants have choice and control over how they use their funds and do not need to use funds prescriptively, as detailed in the participants plan. The only exception is for "STATED SUPPORTS" which must be used as stated.

RESOURCES

-  [NDIS – Guide to self management](#) (guide)
-  [NDIS Act 2013 Section 34 – Reasonable and Necessary Support](#) (legislation)

NDIS Rules

- The **NDIS Rules** are a set of 48 legislative instruments made under the NDIS Act, and should be read in conjunction with the Act
- Any Operational Guidelines, Pricing Arrangements and policies should (though don't always) align with these legislative instruments
- The NDIS Rules 2013 – **Supports for Participants** provides additional detail on reasonable and necessary support and supports that can and can't be funded
- The **SDA Rules** 2020 detail the criteria that must be met to be eligible for SDA

NDIS Quality and Safeguards Commission

The **Quality and Safeguards Commission** is an independent agency responsible for improving the quality and safety of NDIS supports and services by creating a national consistent approach and outcomes across all States and Territories:

- Regulating NDIS Providers, including Provider NDIS Registration, Service Delivery, Audits and compliance
- Outcomes and Reportable Incidents, Monitor Behaviour Management Plans and Restrictive Practices
- Respond to complaints, resolve problems and identify areas of improvement
- Worker screening

RESOURCES

NDIS Quality and Safeguards Commission (resource)

Refer to the NDIS Commission website for reporting requirements, incident management, worker orientation mandatory training module, NDIS Code of Conduct, Practice Standards, Rules, Guidelines and frameworks.

NDIS Code of Conduct (guide)

The guidance provides information and examples about what the Code of Conduct means in practice, and applies to all workers providing supports and services to NDIS Participants, regardless of whether the provider is registered.

NDIS Worker Orientation Module (online course)

This module is an interactive online course that explains the obligations of workers under the **NDIS Code of Conduct**, from the perspective of NDIS participants. It was developed in consultation with the sector, including NDIS providers and people with a disability. All Registered Providers and sector workers should undertake the 90 minute training modules.

NDIS Quality and Safeguards Commission Practice Standards (resource)

The NDIS Practice Standards specify the quality standards are to be met by registered NDIS providers to provide supports and services to NDIS participants. Audits for NDIS Providers (registering or renewing) measure against these standards. The Practice Standards consist of core and supplementary modules, applicable based on the business structure and supports being delivered.

Registered support coordinators must comply with core practice standards. Registered specialist support coordinators must comply with the core practice standard and specialist support coordination practice standards.

Applied Principles and Tables of Service

Applied Principles and Tables of Service are also known as the COAG principles to determine the responsibilities of the NDIS and other service systems are an important document for understanding the responsibilities of NDIS and other mainstream service systems.

Part of the NDIS Reasonable and Necessary criteria is considering if supports should reasonably be provided by mainstream support systems.

Mainstream services are Government services that all Australians have access to regardless of whether or not they have a disability.

- Health
- Mental health
- Child protection and family support
- Transport
- School Education
- Early childhood development
- Justice
- Employment
- Housing and community infrastructure
- Aged care
- Hearing services
- Higher education and VET

In the language of the NDIS, these are called mainstream interfaces.

The Council of Australian Governments (COAG) agreed to the principles to determine the responsibilities of the NDIS and other service systems. Importantly these principles recognise the Universal Service Guarantee that services are required to meet the needs of all Australians and may be obliged to make reasonable adjustments to meet the needs of people with disability.

The COAG Agreement outlines the roles and responsibilities of different sectors who deliver support to people with disability. This is an important tool for understanding the service systems and who is responsible for supports.

Support coordinators have an important role assisting people with complex needs to navigate these service systems. People with complex support needs may find themselves in the gap between service systems. It is important to understand the language of the NDIS and write or speak using NDIS terminology.


RESOURCES


 Summer Foundation – [Getting the language right](#) (resource)

In 2019 the Disability Reform Council agreed that the NDIS will fund specific disability-related health supports where the supports are a regular part of the participant's daily life, and result from the participant's disability. The [health related disability supports factsheet](#) provides further guidance on NDIS funded supports.

[Planning Operational Guideline Appendix 1 – Table of guidance](#) provides information on whether a support is most appropriately funded by the NDIS. This table with three columns identifies:

- Supports generally funded by NDIS
- Supports generally funded by other parties
- **Supports which, depending on their purpose, may be funded by the NDIS or other parties** – this middle column in the table provides a more nuanced and situation-specific response to NDIS or other systems responsibility for support.

 [Applied principles and tables of services](#) (COAG principles to determine the responsibilities of the NDIS and other service systems) (tool)

 [Planning Operational Guideline Appendix 1 – Table of guidance on whether a support is most appropriately funded by the NDIS](#) (guideline)

 [The health related disability supports factsheet](#) Disability Reform Council (resource)

 [NDIS and other government services](#) (resource)

NDIS Operational Guidelines

Operational Guidelines are not law, and they are often interpreted in different ways.

"The Operational Guidelines set out some of the NDIA's operational information. They are based on the NDIS Legislation and Rules. They explain what we need to consider and how we make decisions based on the legislation. We are working to update all of the Operational Guidelines to make them simple, clear and easy to use. We have created a new website [Our guidelines](#) where we add each rewritten guideline, more guidelines will be added as they are developed and released in logical groupings."

RESOURCE

 [NDIS Operational Guidelines](#) (NDIS guideline)

NDIS Price Guides, Arrangements and Limits

- The Pricing Arrangements (previously the price guides) set out price limits and other arrangements (e.g. travel claiming) that the NDIA have determined will apply to the NDIS supports. Price limits are the maximum that can be claimed when a Participant is Agency or Plan Managed. Self-Managed Participants aren't limited to this rule
- Pricing arrangements are generally updated and indexed each July; however, over the past 2-3 years there have been numerous versions and changes. A history of changes is included as a summary to help track adjustments
- Pricing arrangements are available in Word and PDF formats on the NDIS Website
- A support catalogue in CSV format is also published which sets out every active and recently decommissioned ("legacy") line item / supports. If there is a discrepancy, the Pricing arrangements document prevails
- There is a separate Pricing arrangements document for Assistive Technology, Home Modifications and Consumables Code Guide and Pricing Arrangements for Specialist Disability Accommodation

RESOURCE

 [NDIS Pricing arrangements](#) (resource)

NDIS Self-Management Guide

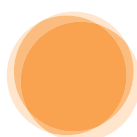
- The [Guide to self-management](#) was developed to guide participants who are self-managing or wanting to explore self-management of their funding. It can be a useful resource / reference for all participants and support coordinators, particularly in relation to funding and scheme flexibility, innovative utilisation/approach and considerations when spending. Page 8 of the NDIS Guide to Self Management has criteria for using NDIS funds

The more you learn, the more you'll discover there is to learn!

Learning is holistic – formal and informal, structured and incidental, and lifelong. Use your initiative, curiosity and access to tools to investigate and create opportunities. We are shaping the future of the scheme, and the lives of those within it. You don't need to know every single word of every operational guideline and legislative tool - but you need to know what they are, where to find them, what they cover, how they fit within the scheme, and how to interpret and apply them practically.

- Be familiar with your best way of learning and absorbing new information. Identify and reflect what makes you tick
- How do you need information presented? Do you learn best? Visually, by doing, or talking it through?
- Set your own operational framework, organisational and research processes to compliment your strengths/skills⁶⁰

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