March 2025

imha
independent
mental health
advocacy

SELF-ADVOCACY FOR THE NDIS (MENTAL HEALTH)

Resource booklet

Free access to interpreter
Phone 131 450 and ask them to call us

The changing NDIS landscape

The NDIS was first legislated in 2013, and was eventually rolled out nationwide by July 2020. More changes are taking place since updates to the NDIS Act were passed in 2024.

You can read a summary of the changes on the NDIA website, or an Easy Read version here, and this workbook will discuss them further in the relevant sections.

It will take time for some of these changes to take effect. As a result of the law changing, there will also be changes to the NDIS Rules, which set out how the NDIS operates in detail.

This workbook has been updated between October 2024–March 2025 to reflect the new legislation, but some changes to processes are still yet to occur. You may need to refer directly to the NDIA website to confirm the accuracy of information following March 2025.

Language used in this booklet

Each person identifies differently and will use different language and terminology to describe their experiences. Your identity is personal to you.

Throughout this booklet, the term 'mental health issues' is used for consistency to refer to lived experience. Some people prefer to use terms like 'mental health challenges', 'mental illness', or 'mental/emotional/psychological distress'. The term 'consumer' is used to refer to users of mental health services, and the term 'participant' is used to refer to people who have an NDIS plan.

This language was chosen through a co-design process with people with lived experience.

The information in this booklet should be applicable no matter which terms you use. You are encouraged to use your preferred terms in your self-advocacy.

Written requests should be directed to Victoria Legal Aid, Level 9, 570 Bourke Street, Melbourne Vic 3000.

ACKNOWLEDGEMENTS

The Independent Mental Health Advocacy (IMHA) acknowledges the traditional Aboriginal owners of country, recognises their continuing connection to land, water and community and pays respect to Elders past, present and emerging.

IMHA would like to acknowledge and thank all the people who contributed to the co-design of the modules. Your generosity in sharing your experiences, expertise and time through the numerous co-design workshops, Operations working group and Steering Committee have provided an extensive *Self-advocacy for the NDIS* resource book for people experiencing mental health issues.

A special mention needs to be given to the following people who have gone above and beyond in their commitment to this project:

Katherine Crook
Andrea Arnaud
Jeremy LeRoux
Sue Robertson
Helen Gerrard
Amaya Alvarez
Charles Manila
Jamie Collins
Fiona Nguyen
Cat Van Remmen

The Department Health and Human Services (DHHS) was funded by the Commonwealth Government to deliver this resource as part of Information, Linkages and Capacity Building (ILC), which is an integral component of the NDIS. IMHA worked in partnership with DHHS, the Victorian Mental Illness Awareness Council (VMIAC) and Tandem Carers who supported the development and delivery of the *Peer Facilitated Self-Advocacy Project* from where this resource emerged. Thank you to Julia Colcott (DHHS), Neil Turton-Lane (VMIAC) and Tania Curlis (Tandem) for your support.

Thank you to Helen Makregiorgos (IMHA Manager) for your unwavering support, Steph Headon for all your practical support and Simon Katterl who worked in collaboration with the author to produce the Self-advocacy module.

Jenny Bretnall

Peer Facilitated Self-Advocacy Project Coordinator, Author

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MODULE 1: LEARNING HOW TO SELF-ADVOCATE

What is the purpose of this document?

To provide self-advocacy information and identify rights and strategies that support people to speak up for themselves.

Self-advocacy involves speaking up for yourself and knowing your rights about the things that matter to you. Independent Mental Health Advocacy (IMHA) have developed a self-advocacy model to assist you to be able to speak up for yourself. The model was co-produced with people who have experienced compulsory mental health treatment or have used mental health services.

When do we need to advocate for ourselves?

When there is something in your life that you want to change, you may need to do some advocacy. You can ask someone to do this advocacy for you, or you can do it yourself. If you do it yourself, we call this self-advocacy.

What are some of the things affecting your life that you wish you could speak up about? They may be big things or even small things.

Start writing your ideas down on the bricks…

What are the steps I take to advocate for myself?

There are many ways that you can do self-advocacy. IMHA's self-advocacy model suggests 6 steps:

1. Identify the issue
2. Know your rights
3. Identify your solutions
4. Make a plan
5. Enact the plan
6. Review what happened

We can go through these below.

Step 1: Identifying the issue

To identify an issue, you will need to describe it and look over it. Think about an issue you may have, it might even be something from your list above.

Defining the issue

What is the issue? Describe it.

The following questions will help define the issue:

- Why is it an issue to me?
- Is it part of a bigger issue?
- What is causing the issue for me right now?

How urgent is the issue?

Now think about the urgency of the issue. Is it something that will need a solution straight away or is it something that can wait?

What do I want to change?

Part of identifying an issue is also knowing what you want instead.

- What do you want to change?
- If there are a few things you want to change, what is the most important to you?

Who is the decision-maker and who can help me?

Think about who is the decision-maker. That is, who is the person you will need to speak to who can make the changes? The answers to these questions will help in identifying and being clear about the issue.

Step 2: Knowing your rights

Rights can protect you against unfair treatment. Knowing your rights can help you to speak up when you are concerned about unfair treatment.

Finding your rights

The easiest way to find information on specific rights is to ask someone from an advocacy organisation or to look for their resources. These can include their website, videos, fact sheets or resources that relate to your issue. If they are unable to help, they will give you the contact for someone that can.

See the 'Resources' section at the end of this module for a list of useful contacts.

The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

In 2008 the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) stated that people with a disability (including psychosocial disability) were able to make decisions about their life and had the right to be an active member of society.

You have the right to make decisions about your own life.

Supported decision making and your rights

UNCRPD went on to say support must be provided to assist people in making their own decisions. This is known as supported decision making – having support if you need it, to make your own decisions.

The underpinning principles of supported decision making are:

- Everyone has the right to make decisions about the things that affect them.
- Every effort should be made to support people to make their own decisions.
- People have the right to learn from experience and to take risks.
- People have the right to change their mind.
- People have the right to make decisions others might not agree with.

(Supported Decision Making fact sheet endorsed by Victorian Mental Illness Awareness Council (VMIAC), Independent Mental Health Advocacy (IMHA) and the Centre for Psychiatric Nursing (CPN).)

You have the right to be given support to make your own decisions.

Supported decision making ensures that you can make choices about your life and have access to support. What does ***support*** look like in practice? It includes:

Gathering the information	• your supports helping you get the information needed • having the information explained to you in a way that makes sense • having the time to think about the information • having the chance to get other information and ask further questions.
Looking at your choices	• being informed of all your options, not just some • using this information as well as your past experiences and what you like and don't like, to make your decision • you being aware of the consequences and being responsible for the decision you make.
Making a decision	• you making the decision • it may not be the decision others would have made but it is still yours to make • having time to reflect on your decision and learn from the decision you made and the outcomes.

Did you know?

Some Acts recognise your rights to nominate a support person.
Some decision-making forms to nominate a support person are:

- Nominated person
- Plan Nominee
- Correspondence Nominee
- Medical Support Person
- Supportive Attorney.

See the 'Resources' section at the end of this module for further information.

Activity: Making decisions

Think about a time you had to make difficult decision. How did it go, and what did you need to make that decision? Ask yourself…

What was the choice I had to make?

Did I know I had options? How did I find out my options?

Did I need support? If so, what kind of support?

Did I need to make the decision immediately, or did I have some time?

Did I reflect on my decision?

Step 3: Identifying solutions

Now you know what you want to change, you need to think of what you want it to change ***to***. You can start by writing down all your ideas. You can even ask someone you trust for their ideas.

To help identify a solution, you will need to think about:

- What solution will solve the issue I have?
- Do I need more information to find a solution?
- Do I have the pros and cons of the solution/s I am considering?
- Do I have an ideal solution?
- Am I willing to compromise? If so, where and how?

Step 4: Develop a plan

This next step looks at developing a plan of action using the information you have gathered. You know what the issue is, who the decision-maker is, you know your rights and you know what your preferred solution will be.

Your message

You will need to think about developing a message to express your views. In other words – how will you communicate your point? Your message can include:

- what your issue is
- what is causing the issue
- *(you may include an example if you want)*
- what your rights are
- what you want instead (what you want to achieve)
- your preferred solution.

Write your message down and read over it a number of times. Practice what you will say aloud. You may even ask another person if they could help you practice, like a role-play.

Delivering your message

Think about the person you will need to talk to – the decision-maker. What you have to say is important and you want the decision-maker to give you their full attention. The best way to get a person's full attention is to make a specific time with them to meet. If you already have a meeting time planned, that can work too.

If you are taking someone with you as a support to the meeting, if possible, let the 'decision-maker' know that you will be doing this.

Developing your self-advocacy skills

Self-advocacy requires some skills. Things you need to consider are:

- negotiating and compromising on the issue and solutions
- identifying and overcoming the barriers to your self-advocacy and solutions
- managing conflict.

In the 'Resources' section, we provide information and advice on how you can do these. You can read up on these now, or you can read through once you have gone through the steps.

Step 5: Enact the plan

This is the meeting where you express your concerns and hopefully reach an outcome you are able to accept.

Remember:

- To take your notes (written plan) with you – use them as a guide or ask a support person to read them out.
- You can ask someone to advocate for you, this means they can speak on your behalf to help – express what you want to communicate.
- You can take notes of what is said and agreed.
- You can ask your support person to take notes on your behalf.
- You can ask for copy of what has been agreed (*make sure you read it and question anything that doesn't seem right*).
- You can ask for the agreement to be signed.

If you feel like it is all becoming too much, you can ask for a break or to end the conversation and make another time.

If you disagree with the outcome, you can ask for a second opinion; or a review and/or make a complaint.

Did you know?

Asking another person to advocate on your behalf is also an act of self-advocacy.

Step 6: Review

Part of advocating for yourself includes reflecting on what has happened. This means thinking about what you did well and what you could do differently next time. If there were things that didn't go so well, talk it over with someone you trust for suggestions on what you could try next time.

Self-care

The self-advocacy process may bring difficult feelings and thoughts. You can put things in place to support you with this. Speak to someone you trust, be gentle on yourself and take care. For example, you could organise to debrief with someone you trust, schedule in an activity you find relaxing, or make sure not to have other commitments afterwards.

IMHA's 6-Step Guide to Self-Advocacy and a blank Advocacy Plan is located in the 'Resources' section at the end of the module.

Self-advocacy does not guarantee that you will get what you want but it will let people know what you need and how you feel and give you the best chance of getting what you need to achieve your goal.

Remember: You can make a complaint

If you are unhappy or concerned about something that has happened to you, you can make a complaint. Complaints are an opportunity to address your concerns and improve the service more broadly. This is your right, and you should not be treated unfairly for making a complaint.

It is up to you how you make a complaint, but some things you might consider are:

- What is the issue I am complaining about?
- What are my rights?
- What are the details of what happened?
- What does a resolution look like for me – what do I want?

Different services will have different complaints processes, so you may need to ask them. Sometimes there are organisations that handle complaints and regulate mental health services. You can make complaints to them too. A list of these organisations is located in the 'Resources' section at the end of this module.

Tips for making complaints

- Say what has happened, why you are not happy and what would you like to happen instead.
- **Decide whether the complaint should be formal or informal, depending upon how you may be feeling or how serious the situation is to you.**
- Make the complaint to the service or an external complaint body – this is your decision.
- Keep a diary or record of your complaint if you make it to the service. This will be important if you want to take your complaint further. It will show that you have tried to sort out the issue:
  - Include who you spoke to.
  - Write down the date (and time) you spoke to the person.
  - Photocopy any letters you sent and the date you sent them.
  - Write down what your complaint was.
  - Make notes about what they said to you (their response).
  - Keep a copy of any letters (and envelopes)/emails they send to you.

If you want to write a complaint letter, an outline is included in the 'Resources' section.

RESOURCES

1. IMHA's 6-Step Guide to Self-Advocacy including a blank advocacy plan
2. Description of decision-making forms to nominate a support person
3. Advocacy organisations
4. Organisations that handle complaints
5. Complaint letter outline
6. Self-advocacy skills
   - Negotiating and compromising
   - Managing conflict
   - Practicing self-advocacy
   - Barriers
7. Barrier breakthrough: Worksheet

Know your rights: Self-advocacy plan

IMHA's 6-Step Guide to Self-Advocacy may assist you in developing a self-advocacy plan. This 6-step guide provides a great foundation to build your plan in preparation for self-advocacy. Remember, self-advocacy can be used before there is an issue (as a preventative measure) or once an issue has arisen. A blank self-advocacy plan follows this 6-step guide for your personal use.

STEP 01	**Identify the issue**	a. Write down the issues – What do you want to change about your treatment? Make a list if there is more than one. b. Which is most important? c. Who is the decision-maker? Remember, staff have specific roles.
STEP 02	**Know your rights**	a. What rights do you have? b. What do you need to advocate for yourself? c. Who is able to help if you want?
STEP 03	**Identify solutions**	a. What is your preferred solution? It's OK not to know – you might ask someone you trust about your options. b. Are you willing to compromise? Where? c. How will you know when you have achieved what you want?
STEP 04	**Develop plan**	a. How will you communicate your point? To whom, and when? b. Write it down & practice what you will say. c. Who will support you (if you wish)? d. What are the next steps if you do not get what you wanted?
STEP 05	**Enact Plan**	a. Communicate your concerns. b. Take notes. c. Have the meeting. d. Continue with your plan.
STEP 06	**Review**	a. What happened? b. What went well? What didn't go well? c. What would you like to be different? d. Follow the next steps in your plan if necessary.

1. Identify the problem

Write the problem – what do you want to change?

Who is the decision-maker?

2. Know your rights

What resources and who could help? A resource might be a fact sheet, video, or a conversation with a support person. This can also include evidence such as documentation

Your rights – learn about your rights and write them below

3. Think about solutions

Write down your ideal solution – you may want to talk with a peer, family, staff or an advocate about your options

Your (possible) alternative solutions

How you measure success

4. Make a plan

How will you express your views?

To who and when?

Who may support (if needed)?

What are the next steps if you don’t achieve your goal?

5. Enact the plan

(Here you may want to write your notes about what happens during the meeting)

6. Review

What happened?

What went well?

What didn’t go well?

What would you like to be different?

What next?

Decision-making forms to nominate a support person

A description of what each of these supports mean and links to some great resources follows:

Supportive Attorney	Can support you to make decisions in financial and personal matters. For example: • paying bills • services you need • where you live. Can get personal information about you from utility companies or banks (if you have given permission for these things) and can be a representative of your decisions. You decide which areas you would like the support in (it may be some and not others if you choose).	The Office of the Public Advocate have a downloadable guide titled *Supported Decision Making in Victoria* which provides further details Please see their website for more information about supported personal and financial decisions. www.publicadvocate.vic.gov.au/your-rights/your-supported-personal-and-financial-decisions
Medical Support Person	Has authority to access your health information if needed. Helps you talk with health practitioners about what you want or don't want. Can represent your views to health professionals if you are unable to do so. They cannot make any medical treatment decisions for you.	The Office of the Public Advocate have a downloadable guide titled *Supported Decision Making in Victoria* which provides further details. Please see their website for more information about supported medical decisions. www.publicadvocate.vic.gov.au/your-rights/your-healthcare/your-supported-medical-decisions
Nominated Person	Can receive information and support you while you are receiving compulsory medical treatment. Can help represent your views and preferences. Can be consulted about their own views regarding your treatment. Can help you to exercise any of your rights under the *Mental Health and Wellbeing Act 2022*.	The Independent Mental Health Advocacy have loads of information about nominating a person to support you. A Nominated Person template is also available to download from the IMHA website. www.imha.vic.gov.au/i-want-nominate-person-support-me

Plan Nominee	Once you have been accepted into the NDIS (become a participant), the Plan Nominee can do all the things that you would have to do in preparing for your plan (such as a statement of goals and aspirations), request a review or replacement of a plan. Can manage the funding for the supports in your plan. Can only do the things you nominate them for when requesting a Plan Nominee (specific functions).	You would need to contact the NDIA and request for your support person to become a Plan Nominee. www.ndis.gov.au/about-us/operational-guidelines/nominees-operational-guideline
Correspondence Nominee	Can only manage paperwork regarding your NDIS plan including making requests on your behalf and receiving any letters and notices from the NDIA (agency which oversees the NDIS).	You would need to contact the NDIA and request for your support person to become a Correspondence Nominee. ourguidelines.ndis.gov.au/home/having-someone-represent-you/appointing-nominee/what-types-nominees-are-there#what-is-a-correspondence-nominee-and-what-do-they-do

Advocacy organisations

Independent Mental Health Advocacy (IMHA)

Supports people who are receiving or at risk of compulsory mental health treatment to make decisions and have as much say as possible about their assessment, treatment and recovery.

Advocates are based in Melbourne, Geelong, Bendigo and Dandenong, but support people across Victoria.

The service is independent, free and confidential.

Tel: 1300 947 820
Monday to Friday, 9.30 am to 4.30 pm

Email: contact@imha.vic.gov.au

Website: www.imha.vic.gov.au

Victorian Mental Illness Awareness Council (VMIAC)

The peak Victorian non-government organisation for people with lived experience of mental health or emotional issues.

Services include:

- advocacy – general
- NDIS information and support
- NDIS appeals and review advocacy.

Tel: 9380 3900
Monday to Friday, 9.30 am to 4.00 pm

Website: www.vmiac.org.au

Tandem Inc.

Tandem is the Victorian peak body representing family and friends supporting people living with mental health issues.

Services include:

- advocacy
- NDIS information and support.

Tel: 8803 5555

Carer Advocate: (03) 8803 5501

Website: www.tandemcarers.org.au

Office of the Public Advocate

The Office of the Public Advocate offers an information service and advocacy for people with disabilities.

Tel: 1300 309 337
Monday to Friday

Website: www.publicadvocate.vic.gov.au

AskIzzy Disability Advocacy Finder

Website: askizzy.org.au/disability-advocacy-finder

Organisations that handle complaints

The Victorian Equal Opportunities And Human Rights Commission

Handles complaints about discrimination, sexual harassment, victimisation and vilification.

Enquiry line: 1300 292 153
9.00 am to 12.30 pm, 1.30 pm to 4.30 pm

Website: www.humanrightscommission.vic.gov.au/home/the-law

Mental Health and Wellbeing Commission (MHWC)

Handles complaints about publicly funded mental health services.

Tel: 1800 246 054 or (03) 9032 3328

Website: www.mhwc.vic.gov.au

Health Complaints Commissioner

Handles complaints about private health services including private mental health services.

Tel: 1300 582 113

Website: hcc.vic.gov.au

Australian Health Practitioner Regulation Agency (AHPRA)

Handles complaints about individual clinicians and their actions.

Tel: 1300 419 495

Website: www.ahpra.gov.au

The NDIS Quality and Safeguards Commission

Handles complaints about the quality of service they receive from an NDIS provider.

Tel: 1800 035 544

Website: www.ndiscommission.gov.au

The NDIA Fraud Reporting

For NDIS participants with concerns about potential fraudulent activity and price gouging.

Hotline: 1800 650 717

Email: fraudreporting@ndis.gov.au

Complaint letter outline – Writing a complaint for the first time

(Your name)
(Your address)
(Your best contact details)

(Who you are writing to)
(Program/Service name)
(Service address)

(Date you wrote the letter)

Dear …… *(who you address the letter to (if you know their name – use it))* ……

(A sentence saying you are writing to complain)

(Write down what you are not happy with and what you have done to try and 'fix' it. This may include:

- *what arrangements are meant to be happening*
- *what has/has not happened*
- *who you have spoken with from the service about the complaint (informal complaint)*
- *when you spoke with that person and what they said they would do*
- *what has happened since they said they would do something)*

(Write down how this has made you feel and how it is affecting you. Write what you want to have happen)

(Ask them to follow up this complaint and let you know the results. Let them know how to contact you (your best method of contact))

Yours sincerely *(or regards)*

(Sign your name)

Self-advocacy skills

When a person is advocating for change, they may be faced with questions, differences of opinions and barriers. Being able to compromise is needed at times also. You will need to think about and plan how you will respond to these situations:

Negotiating and compromising

Negotiation is an important skill in order to reach agreements. It's about looking at all the different suggestions and ideas raised, by both the other person and you, and looking for the similarities or even common solutions raised that you can both agree upon.

Sometimes compromise may be needed, this means both people giving up some things. An example of this could be Geoff needing to be picked up from a party that finishes at 1 am. Geoff asks Jane to pick him up. The issue is that Jane has work at 7 am the next morning and needs to get a good sleep. A good outcome from negotiation could be Jane agreeing to pick up Geoff at no later than 11 pm. In this case, Geoff still gets to go to the party and leave a bit earlier while Jane will do the pick-up and still get enough sleep.

There will be times when some really important needs and decisions are non-negotiable. This means you are not willing to make any changes to what you want. Let people know what these are.

Managing conflict

Conflict means there is a difference in ideas and opinions. If you are doing self-advocacy, this is probably what is happening. Conflict is common and many people find it difficult to know what to do. It is okay to have different views and ideas, to listen to each other and learn from each other. It can also provide a wonderful opportunity for learning and understanding differences. The best solution is often to try and resolve conflict, here are some suggestions:

- **Listening** – Listen to what the other person says without interrupting. It helps to understand what their concerns are. You can then respond to their concerns and they will feel that they have been heard.
- **Clarify** – You can ask the person if they understand what you are saying and get them to explain back to you what they think you said. Sometimes people interpret things differently
- **Focus** – Focus on the issue (what it is that you want) rather than how you think it 'should' happen. There may be more than one way to get what you want.
- **Accept and respect** – Accept and respect that individual opinions may differ. Look at the areas that you can both agree on instead of the areas that you disagree about.
- **Be aware** – A raised voice or angry body language can come across as aggressive and this will stop the other person from listening to what you are actually saying.
- **Ownership** – Use the word 'I' rather than 'you' when talking about how you feel, what you think will work for you and what you want.

Practicing self-advocacy

Start practicing on smaller things so that you can notice what works and doesn't work. Notice how people respond to you – you can even ask for their feedback on what they were thinking when you were negotiating. This will assist you to make changes to how you might say things to achieve what you want.

Barriers

Examples of common barriers that can make self-advocacy difficult include:

This barrier…	Can lead to…	But you have these options…
Don't know your rights (and choices)	Believing you don't have any rights in situations Not questioning decisions being made about you Believing you have no say in what happens to you	Find out what your rights and choices are because you will have them. You can: • ask directly • research • ring an advocacy service. Ask another person to help you find the information.
Feeling confused	Thinking it's all too hard and 'giving-up' Letting others make decisions for you	**Ask questions** – remember, there are no silly questions. It is OK to keep asking until you get answers that make sense to you.
Things affecting your memory	Forgetting information that can help with decision making Missing opportunities to have your say and speak up for yourself	Write down information. Use a diary or calendar for dates and times so you can remember them later.
Finding it hard to express yourself	Just agreeing with the other persons story of what you were really trying to say Not giving your views or thoughts due to past experiences of not being listened to Feelings of frustration	**Remind yourself** – what you have to say is important because you are the expert on your life. Your input is valuable. **Prepare** – prepare for meetings and appointments by writing things down. **Practice** – spend some time with someone you trust working out what message you want to get out. **Explain you are having difficulties** – if you are in a situation that you haven't been able to prepare for and the other person really isn't understanding what you are trying to say, let them know that isn't what you meant and that you are struggling to find the right words to say. **Take some time and a breath** – if you feel yourself starting to get upset, you can take some time to breathe, refocus your message, ask for a break, and if you need, ask for another time to have the meeting.
Being treated unfairly because of your mental health issues	Feeling they disregard anything you might say	Explain what you need, why you need it and how this connects to your rights.

This barrier...	Can lead to...	But you have these options...
Not being listened to	Feeling that you are not being listened to	**Repeating back** – you can repeat back to the person what they are saying. This shows you are listening to them and trying to understand what they are saying. **Clarify** – if you are being misunderstood, you can explain that it is not what you were saying and repeat what you said (you may even point out the differences if you choose). **Ask for another time** – if you believe they are still not listening – tell them. Let them know, that you don't feel like they are listening to you and ask them if they would like to meet at another time when they are able to listen. **Ask them for solutions** – if they don't want to do this, ask them what would help them to listen to what you are saying.
Staff say they do not have the resources or are not the decision-maker	Feeling dismissed Not having your needs or concerns addressed	**Ask for the decision-maker** – if the person is unable to make the decision on what you are needing, ask them who the best person to talk with would be. **Be clear with the decision-maker** – when meeting with the 'decision maker', let them know that you were told they could make the decision/s. **Ask them to help** – if the organisation/program doesn't provide what you need, ask what they can do to help you. You could also ask them for ideas and contacts to organisations that may be of assistance to you.
There is a power-imbalance	Feel like you have no rights Feel powerless to do anything	This is where it is really important to know your rights, particularly in regards to decision making. • **Rights and consequences** – you can begin by stating what you need and what you understand you have a right to. You can also add what you believe the consequences of your decision will be. (This shows you have thought through your choice and will accept responsibility for your choice). • You could also take a support person to any appointment or meeting. • If the other person refuses to consider what you are saying, you have a choice to make a complaint. You might even ask the person what the complaint process is for the service.

This list isn't complete, so you can start making your own list on the worksheet below:

Barrier breakthrough: Worksheet

1. Write down something that has stopped you from speaking up for yourself (Barrier)
2. How has this 'barrier' affected your thoughts and behaviour? (Can lead to)
3. Brainstorm things that may help you get around the barriers (Options)

Barrier	Can lead to	Options

MODULE 2: MENTAL HEALTH SERVICES, THE NATIONAL DISABILITY INSURANCE SCHEME (NDIS) AND ME

What is the purpose of this document?

This module was originally written to help people understand changes to mental health services with the introduction of the NDIS, and how it effects people experiencing mental health issues.

The introduction of the NDIS changed the way certain mental health services are delivered. Many people with a lived experience of mental health issues have been affected by this change. Since the NDIS started rolling out in 2016, there has been confusion and uncertainty felt by both people who use mental health services and by mental health service providers.

Updates to the NDIS Act came into effect in October 2024. You can read a summary of the changes on the NDIA website, see this easy read guide or look at DSC's summary timeline to get an idea of when these changes might take place. This workbook will also discuss the changes further in the relevant sections. It will take time for some of these changes to take effect. As a result of the law changing, there may also be changes to the NDIS Rules, which set out how the NDIS operates in detail.

The NDIS continues to evolve, and this can increase the uncertainty. It's okay if you feel this way. Keep in mind that people who can advocate for themselves have a greater chance at getting the supports they need.

You are the expert of your life, you know what will work for you and what you need. This resource module is designed to assist you in working your way through the NDIS and to advocate for what you need. It was co-designed which means that the topics and content were identified by family and friends supporting people living with mental health issues and people who have a lived experience of mental health issues or emotional distress.

How did mental health services change with the introduction of the NDIS?

Before the NDIS, community organisations who provided services to people with mental health issues were funded directly by both the state and federal governments. This meant that they were given money from the government to provide support for people who needed it.

Some people with mental health issues were referred to these organisations (also known as service providers) for support. They had to meet certain conditions before they were accepted into a program. Based on these conditions the organisations decided who received support, what the support was and how often that person received support.

The Australian government decided that the way services were provided to people with disabilities and mental health issues was 'hit and miss'. Sometimes people got the supports they needed and sometimes they didn't. There was also some worry about the limited range of services and support offered.

A fairer way of providing useful supports was needed.

The NDIS was introduced as a new way of funding and providing services.

Funding was then transferred from state and federal programs to the NDIS. People who are accepted into the NDIS now receive an individual support package (NDIS plan).

This means that a person who has an NDIS plan will be able to choose which services they want, who they want to provide them and when they want them. The NDIS calls this 'choice and control'.

This is a list of some things that changed with the introduction of the NDIS:

What the changes mean for service providers	What the changes might have meant for you
They have had to become more like businesses.	You can no longer access some services and supports if you are not a participant of the NDIS.
Some service providers have closed down.	If you have a plan with the NDIS, you will be employing/hiring the service to provide support for you.
Some have changed what services and supports they offer.	You will need to understand about the NDIS and what is needed to be accepted as a participant.
Some people who have been employed by service providers will lose their jobs.	You will need to do some work to demonstrate you meet the NDIS eligibility requirements and prepare for the planning meeting.
	You will need to be able to self-advocate to get the supports and services you need.

Why is this important for me?

The NDIS may be able to provide you with supports on your recovery journey. It is one part of many things that you can use as you navigate your way. Friends, family and your local community may also have a part to play in providing you with support, along with other government services. If you are eligible to become a participant of the NDIS, the NDIS will fund supports that may help to increase your participation into your community.

Understanding the NDIS, its eligibility requirements and support planning has been a bit tricky for many people with mental health issues and at times it's hard to understand how the NDIS fits with your recovery journey. Your health and wellbeing are what is important, and you will need to decide if the NDIS is something that could help.

How does the NDIS fit in with my recovery journey?

My recovery journey

- Hope and possibilities can provide the inspiration and drive to begin the journey.
- Each person's journey will be unique (no better or worse – just different).
- There will be ups and downs, times when things go fast and go slow and this is OK, it's all an experience to build upon and celebrate.
- Recovery is about '***the adventure you undertake***' to reach a point where you feel good about your life and have a sense of purpose in all areas; personal, social and emotional wellbeing – despite the impact of your mental health condition.

Did you know?

In Victoria, there were also some changes to the law in 2022 with the introduction of a new Mental Health and Wellbeing Act. It sets out principles for mental health services, including the autonomy principle that says people receiving treatment at mental health services in Victoria should have their views and wishes respected as much as possible – this could include decisions about supports like applying for the NDIS.

My recovery and the NDIS

The NDIS eligibility criteria initially focuses on whether there is a 'remedy' to your mental health condition, that is if your mental health condition is permanent, and on how the things you can't do impacts on your life.

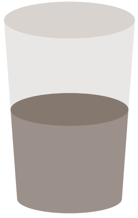
The NDIS eligibility criteria initially focuses on whether there is a 'remedy' to your mental health 'impairments', that is if your mental health impairments are permanent, and on how the things you can't do impact on your life.

NDIS

Is your glass half empty?

The NDIS requires you to look at all the things you can't do...

This can be retraumatising, so take good care of yourself.



Personal recovery

Is your glass half full?

Recovery focuses on all the things you can do.

If it feels slightly confusing, don't worry – you are not alone. Health practitioners and support workers are still trying to understand the NDIS and learning to write reports the 'NDIS way'.

So where do the NDIS and Recovery Focus join paths?

When it comes to your goals, dreams and plans...

Life changing opportunities can happen when you least expect it. We all experience feelings of insecurity and vulnerability and it takes great strength to identify and acknowledge them. Sometimes we need support to reach our goals and the NDIS may be the avenue which allows you to gather the supports you need. The NDIS provides a lifetime commitment and as you experience different life changes, the NDIS funded supports can also change to meet your needs.

> 'Recovery is about being resourceful and patient and having the right supports in place that provide you with the impetus and support to take on the great journeys in life.'
>
> *Neil Turton-Lane*

Working with change and uncertainty

When change happens, it can make people feel uncomfortable and uncertain. When new large systems are introduced or changed, like the NDIS – it affects many people and in many different ways. We can't stop the change from happening, we have no control over this – but what we can have control over is how we respond to the change. The following are some tips you may want to think about when deciding how you are going to respond to changes to mental health systems and the NDIS, such as new ways of understanding what is an NDIS support.

Be gentle on yourself

Change can bring on many feelings, thoughts and a sense of loss. Each person will deal with this in their own way and in their own time. Take extra care of yourself and let those close to you know that you may need some understanding and support.

Don't fight it

Try to learn as much as possible about what the change is and what your options are.

Rethink what change can mean to you

Does it set up the opportunity for you to make decisions for yourself, such as deciding what supports you need and where to get the supports? In other-words, does it increase your self-determination? Is it an opportunity to set new challenges for yourself? One change can lead to another opening new possibilities.

You would have faced changes in the past. Reflecting back can sometimes help you face the challenge of new changes:

Think of a time you had to face a change?

How did you feel?

What were your thoughts?

How did you move through it?

What worked well for you?

Would you have done anything differently? If so, what?

MODULE 3: BEGINNING WITH THE NATIONAL DISABILITY INSURANCE SCHEME (NDIS)

What is the purpose of this document?

To provide an overview of the NDIS and its eligibility criteria.

What is the NDIS?

The NDIS is a government run scheme which provides support to eligible people with intellectual, physical, sensory, cognitive, neurological and psychosocial disability.

What does this mean for you?

- The NDIS is a voluntary scheme

  It is worth noting that the NDIS is an insurance scheme with the aim to 'invest' in your life now in the hope of minimising the need for long-term, ongoing services.

  IF the NDIS were to have disclaimers – as do insurance schemes, they may look something like this:

  It is not a pension or a welfare payment and it will not affect your pension if you get one although your transport allowance will be removed.

  It will not replace services and support you receive from other service areas such as medical, schools, community groups or even from friends or family who may assist at times.

- The National Disability Insurance Agency (NDIA) is the government body that is responsible for the NDIS

  The NDIA are the decision-makers. When dealing with government departments, people have often found that there are layers of things they have to do in order to get something with long waiting times. Be prepared – dealing with the NDIA is no different.

- It has strict eligibility criteria

  Government agencies sometimes use specific language, labels and criteria in assessments as this makes it easier for them to make decisions. The problem is, for many of us, we don't fit the box they are trying to squeeze us into. This can result in some of us giving up on applying for something as it is too confusing, or maybe even thinking that what is being offered isn't meant for us. We will look at eligibility criteria and evidence in more detail later in this module because if you are eligible, being an NDIS participant could assist you.

- NDIS participants receive an individual support plan package (NDIS plan) that is linked to their goals

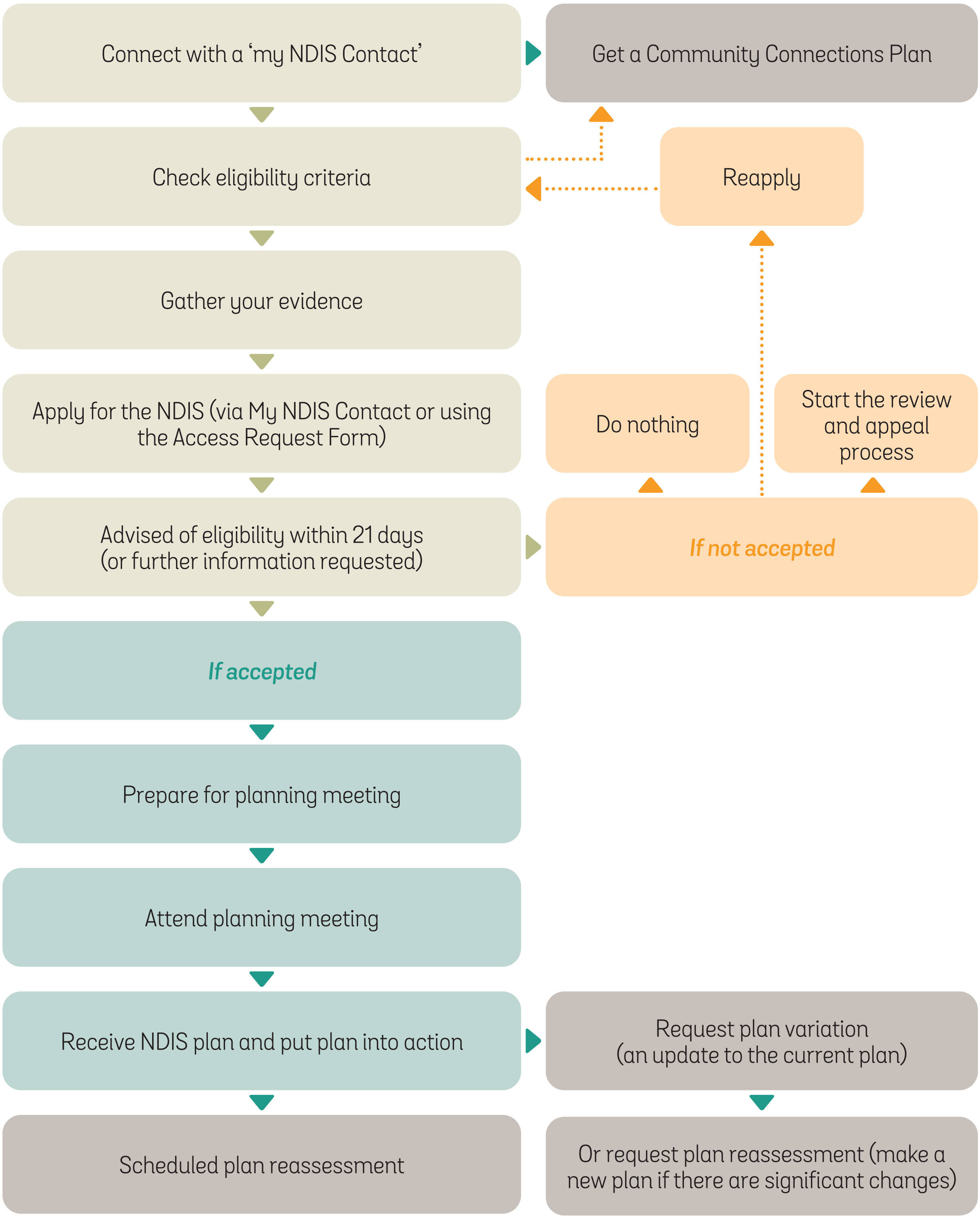
  If accepted, you get to say what is important for you and what supports you would need to work towards your goals. There will be a case plan, or what the NDIS refers to as a NDIS plan, developed with you and this will be relooked at periodically to see if your goals have changed or you need different sorts of support. This is quite involved so we have developed a couple of modules specifically looking at plans. The NDIA will have the final say on what supports you can have and have guidelines that need to be met when spending the funding in your plan. If approved, you get to choose who will provide the supports.

- If accepted, it is likely to be ongoing (if you choose)

  You will likely not need to reapply if you remain living in Australia. When you turn 65 years old, you will have the choice of remaining in the NDIS or you can transfer over to the My Aged Care scheme. In some cases, the NDIA can revoke a person's participant status if they no longer fit the eligibility criteria.

The NDIS process overview

There are a number of stages involved in the NDIS and we will explore each one throughout the modules. Below is a basic overview from beginning to end so you can see where everything fits:



My NDIS Contact

To begin the process of applying for the NDIS, you can call the NDIA National Contact Centre. They will refer you to an NDIS local area coordinator (for people aged 9–64) or early childhood partner (for people under 9). NDIS partners are community-based organisations the NDIA funds and works with to help deliver the NDIS in some parts of Australia.

NDIS local area coordinators or early childhood partners can help you learn about the kinds of services and supports available to you. This person will be your main point of contact throughout your NDIS journey. They are called 'my NDIS contact.'

If you are in a remote or very remote area, have complex support needs, are a young person in residential aged care, or are in a hospital or justice setting, you will instead be contacted by NDIA, who will act as your NDIS contact.

Your NDIS contact can help you make connections to supports in your community, even if you are not eligible for the NDIS. They can help you find the supports you need to be more independent and do more of the things you enjoy.

If you think you might be eligible for the NDIS, your NDIS contact can help you apply.

You can call the NDIA National Contact Centre on 1800 800 110, or you can also directly connect with an NDIS partner near you **to get an NDIS contact**.

Your NDIS contact will help you to gather information and evidence for your NDIS application. Once your NDIS contact has your information and evidence, they will support you to complete your application.

Am I eligible?

The NDIS has certain eligibility requirements which you must meet in order to be accepted into the scheme. You will need evidence (or proof) of these requirements when you put in your Access Request Form.

The NDIS eligibility criteria is as follows:

Eligibility criteria	Tips
You need to be **under** the age of 65 years old	If it is close to your birthday and you are turning 65 years of age, make sure you apply quickly. If you are under 65 years old at the date of the initial application this means that you have started the process and met this criterion – it then won't matter if you turn 65 years old during the process. If you are 65 years of age or over, look at the packages provided by My Aged Care – Home Care Packages by the Australian government.
You need to be an Australian citizen or Hold a Visa to live in Australia permanently or A New Zealand citizen who is a Protected Special Category Visa (SCV) holder	You will need to live in Australia and remain an Australian resident. The NDIS will be stopped if you are no longer living in Australia and you will no longer be able to access supports. You are a protected SCV holder if you arrived in Australia on a New Zealand passport and were either: • in Australia on 26 February 2001 • in Australia for 12 months in the 2 years immediately before this date, or • assessed as a protected SCV holder before 26 February 2004.
You must meet either the disability requirements, the early intervention requirements, or both.	

NDIS Disability Requirements

You may meet the disability requirements if:

- Your disability is caused by an impairment (described further below) and
- Your impairment is likely to be permanent (described further below) and
- Your permanent impairment substantially reduces your functional capacity to undertake one or more of the following activities: moving around, communicating, socialising, learning, or undertaking self-care or self-management tasks and
- Your permanent impairment affects your ability to work, study or take part in economic and social life and
- You'll likely need support under the NDIS for your whole life.

NDIS Early Intervention Requirements

If an impairment is permanent but its functional impact fluctuates and/or is still in its early stages but there's a possibility that the impact on you could get worse over time (for example, a condition like MS) you may not meet the disability requirements. However, you may meet the early intervention requirements instead.

You may be eligible for early intervention supports if getting them means you'll likely need fewer disability supports in the future. The requirements are:

1. You have an impairment that is likely to be permanent and

   Early intervention supports will likely benefit you (explained further below) and

   The early intervention supports you need are NDIS supports.

2. The NDIA will need to know that early intervention supports will help you with at least one of the following:
   - addressing the impact of your impairment on your ability to move around, communicate, socialise, learn, look after yourself and organise your life
   - preventing your functional capacity from getting worse
   - improving your functional capacity
   - supporting your informal supports (carers), which includes building their skills to help you

3. To help the NDIA decide if the early intervention will help you in these ways, they look at:
   - how your impairment might change over time
   - how long you've had your impairment
   - if there's been a significant change to your impairment
   - if your needs are likely to change soon, such as if you're finishing school

Generally speaking, the early intervention pathway is mostly used for children, but can be used to support adults if the impact of your disability fluctuates, for example if you sometimes have less ability to do daily life activities due to your mental health. When you apply, you can tick that you are applying under both the disability and early intervention requirements, so that they are both assessed at once and you don't have to put in another application if it is found that you don't meet the disability requirements.

What does the NDIA mean by 'permanent impairment'?

The NDIA use their own language to describe things. The NDIS says that for a person to be eligible, they must have a disability that is caused by a permanent impairment.

The NDIS uses the term 'disability'. People with a disability experience long-term restrictions on their physical, mental, intellectual or sensory abilities.

These restrictions mean people with a disability might face barriers that stop them from taking part in society in the same way as people with no disability. Removing these barriers creates equality and offers people with disability more independence, choice and control.

The social model of disability is the understanding that disability is something that is created by society. It can be helpful to think about how society and your environment could change to support you. The NDIS is designed to help you overcome the barriers you experience.

Some people won't identify with the term 'disability', and that's okay. It can be helpful to know that you can use this term without accepting it as part of your identity. Some of the language that the NDIS uses might make you feel like you don't have something that others have, and this might not feel good. Remember, this is the language the NDIS uses, and it does not have to be how you see yourself.

It is important to look beyond the language and the labels and instead focus on what they mean. Here is an explanation of keywords to assist you in this process:

NDIS language...	What they mean...
Disability	This is something that impacts and restricts your ability to do everyday things. The NDIS is for people who experience severe and long-term disability.
Impairment	For the NDIA, an impairment is a loss or significant change in at least one of: your body's functions, your body's structure, or how you think and learn. This impairment must be: Intellectual – how you speak and listen, read and write, solve problems and process and remember information or Cognitive – how you think, learn new things, use judgment to make decisions and pay attention or Neurological – how your body's nervous system functions or Sensory – how you see or hear or Physical – the ability to move parts of your body or Psychosocial – this is related to your mental health.
Permanent	This means something that is likely to be with you for your entire life. To show the NDIS that your disability is permanent, you will have to give evidence that you have explored any treatment likely to remedy (resolve or remove) the impairment.
No remedy	This means 'no cure'. Medical practitioners can misunderstand what the NDIA mean by 'remedy'. They sometimes think it means a treatment that helps you get through and deal with the effects of your impairment. It is important that you let them know that according to the NDIS, 'remedy' means the same thing as 'cure' – for example, is there something your doctor can give you right now to completely remove the impairment? If the answer is no, then there is 'no remedy'.

Note: *'Psychosocial disability'* is the term the NDIS mostly uses to refer to mental health issues. The use of this term throughout the modules is a reflection of that. Further information on *'what is psychosocial disability?'* is looked at later on in this module.

Did you know?

You can still apply for the NDIS if you need assistance in only one of the activity domains.

How do I apply for the NDIS?

If you believe you meet the eligibility criteria and want to apply for the NDIS you can:

- call **1800 800 110** and ask to apply; you will be referred to a my NDIS Contact or you can ask for an NDIS Access Request Form to be sent to you
- download the Access Request Form at www.ndis.gov.au/media/2323/download
- contact your local NDIA office
- visit your NDIS Local Area Coordinator.

If you need help with English, call the Translating and Interpreting Service (TIS) on **131 450**.

If you have hearing or speech loss, call a TTY service on **1800 555 677**. For Speak and Listen, call **1800 555 727**, or for Internet relay services, visit the Relay Service webpage (www.communications.gov.au/what-we-do/phone/services-people-disability/accesshub/national-relay-service).

A web link to the contact details is given in the 'Resources' section of this module.

Once the my NDIS contact has your information and evidence, they will complete your application. If you prefer, it is okay to say you want the Access Request Form sent out to you instead.

> Some people find that phone interviews don't give them a lot of time to think about what they want to say, and it can feel rushed. Some questions may even be a bit confusing and often people will give automatic answers to them without understanding what the question really means. For example:
>
> 'Do you need assistance to shower?' or 'Can you shower without assistance?'
> 'Do you need assistance to cook?' or 'Can you cook without assistance?'
> 'Do you need assistance to clean the house?' or 'Can you clean without assistance?'
>
> These questions are more targeted at physical disabilities and yet they can also apply to people with psychosocial disability. Many people with mental health issues would answer these questions by saying they can shower, cook and clean. And they can! But do they? While people know how to do these things, sometimes the psychosocial disability prevents them from doing these things – they just can't.

You are allowed to ask for the Access Request Form so you can think about these things in advance and put your answers in writing yourself.

You may have received your Access Request Form via post, by downloading the form, or being handed the form by the NDIA or a Local Area Coordinator. When you have completed all the relevant sections, signed and dated the form, and gathered your supporting information, you can return the form via post or email. For more information, see www.ndis.gov.au/how-apply-ndis/what-access-request-form#returning-your-arf-and-supporting-information.

What is included in the Access Request Form?

You will need to complete some sections of the Access Request Form (ARF) and get your health practitioner (doctor, psychiatrist, occupational therapist, social worker, psychologist) to complete some sections.

The best health practitioner to fill out the ARF with you is one who knows you well and that you feel comfortable with. Some health practitioners also have more experience with the NDIS than others. For example, OTs tend to write reports in a way that works well for the NDIA. It is also important to remember that there are differences between health disciplines that could be relevant when it comes to filling out official forms – for example, clinical psychologists, psychologists, and counsellors have different qualifications to each other.

It can be expensive to see lots of doctors – if you don't have a regular doctor like a GP, you can look at HotDoc to help find bulk-billing clinics near you, which means Medicare will cover the cost of your appointments. If you want to see a psychiatrist privately, you will need a GP referral. You can use this tool to help find a psychiatrist you would like to work with.

The ARF includes:

- your personal details (full name, date of birth, gender, country of birth, citizenship, and residence). *If you are currently homeless, there are some community organisations that will let you use their postal address. For example, some drop-in centres and homelessness services will support you with this.* Use AskIzzy to search for local options for you.
- your permission for them to collect your personal information from third parties (other people, organisations)
- your consent to obtain information regarding your personal details from Centrelink (if you are receiving a Centrelink benefit)

  This is probably the easiest way to 'prove' your personal details. Another way is to provide 'certified copies' of paperwork; proof of citizenship, proof of age, proof of residence.

  A 'certified copy' is a photocopy of a document (for example: your birth certificate) that has been stamped as a 'true copy of the original', signed and dated by an authorised person. (Pharmacists, police and Justice of the Peace officers can all sign the copy). When getting a certified copy – you will need to take the original document and a photocopy of the original document so they can be compared.

- best contact details
- parent, legal guardian, representative details (if applicable)
- your carers and family members (if applicable)
- information about your disability.

Collecting evidence about your disability and/or early intervention requirements can take some time. You will also need to make sure the evidence demonstrates the impact on your 'functional capacity'. Apart from giving their details, there are 4 main sections that your health practitioner will need to fill out:

Part B – Evidence of disability

Part C – Early intervention (this part can be skipped if your health practitioner agrees that early intervention supports are unlikely to reduce your future support needs

Part D – Existing assessments (this is where you can nominate if you have had any previous assessments done)

Part E – Evidence of functional capacity (your health practitioner can answer these questions themselves, or submit additional reports from other professionals).

Evidence (and supporting evidence) can include...

- The completed Access Request Form.
- Medical reports, tests and assessments.
- Functional assessments (there is a list available in the Access Request Form) – within 6 months prior to applying.
- The Life Skill Profile (LSP) 16.
- HoNOS.
- Care and Needs Scale (CANS).
- Letter from your GP or psychiatrist stating your disability is permanent or likely to be permanent.
- Supporting letters from schools, service providers etc.
- Psychologist reports.
- Occupational therapy reports.
- Social work reports.
- Hospital reports (including admission dates).
- Mental Health Plan.
- Carer/impact statements can also be used as supporting evidence. Tandem Carers have some great online tips for writing carer evidence.
- You can also use the NDIS ‘evidence of a psychosocial disability form’. This can be found on their webpage Applying to the NDIS for people with psychosocial disability. Remember that if you choose to use this form, you might have to use some of the self-advocacy skills you learnt in Module 1 to make sure your doctor fills it out correctly. This form says that Part 2A is optional, but it is not really optional if you want to have the best chance of getting onto the NDIS.

Tip: Start gathering your evidence before you apply.

Be aware...

The information will need to be written with an NDIS focus, looking at the things you find difficult to do. Some of the language that the NDIS uses for things like the ‘evidence of a psychosocial disability form’ might make you feel like you don't have something that others have, and this might not feel good. Remember, this is the language the NDIS uses, and it does not have to be how you see yourself. Documentation before the NDIS may have been written from a ‘recovery’ perspective focussing on your strengths. The difference in focus can be distressing to people at times. Sometimes reading over the information can bring up past trauma and emotions can resurface. Keep this in mind when collecting evidence. Give yourself as much time as you need, let people who support you know that this may be a difficult time for you and put things in place that will provide you with support. Be gentle with yourself.

Possible emotional barriers to think about...

The Victorian Mental Illness Awareness Council (VMIAC) has identified a number of emotional barriers that people may experience when applying for the NDIS. These include:

> ‘**Anxiety and fearfulness** Many people are fearful of being rejected, of losing supports they’ve had in the past, or of being judged by assessors. Some people liken the NDIS assessment experience to past experiences with Centrelink, where highly personal information has to be shared with strangers, and the power rests with a big bureaucracy. Some people are already fearful of using the telephone or opening mail–and this can present a very practical barrier to the NDIS application process.
>
> **Frustration and anger** Some people may feel frustrated at having to go through a lengthy process to get support, especially if they are used to older service models where there was little, if any, bureaucracy. Others may feel frustrated about having to focus on deficits and disability, or having to justify their needs, or having to repeat their very personal struggles over and over again.
>
> **Shame and self-criticism** Many people with a psychosocial disability struggle with feelings of shame, and this can lead to low self-esteem, self-criticism, and feeling unworthy of assistance... These feelings can all create barriers to expressing what the person needs.

Despair and hopelessness Many people already feel a sense of hopelessness, which may be a part of their mental health experiences, or of having been given poor prognoses, or of having spent many years already in distress, isolation and poverty. People with these feelings may find it difficult to imagine the better life that could come from having disability supports, or they may find it difficult to believe that they will be approved for the NDIS.

Feeling overwhelmed Some people can feel overwhelmed by the many steps, detail and time involved in applying for the NDIS. This is a more complicated process than many people are used to, and people's ability to cope with the complexity can be impacted by mental health symptoms and by medication side effects...'

There are lots of , however you will have a better chance if you **understand** what they are and **prepare**.

Tips for gathering evidence for your disability

- Use the self-advocacy model.

  You will need to self-advocate during this stage to let people know what it is that you want.
- Make sure you book in longer appointments with your health practitioner/s to complete the Access Request Form.
- You may need to inform your practitioner of the NDIS eligibility requirements, what information is needed and that it does include mental health issues. *Some doctors, like many others, do not see mental health issues as a disability.*
- Let your health practitioner know that the question about 'primary and secondary disabilities' is relating to you being impacted as a result of a mental health issue or your diagnosis (or likely diagnosis).

  They may want to write something like:

  > '...... *(your name)* ...... lives with a diagnosis of ...... *(diagnosis)* .... There is a substantial impact to ...... *(what it is you find difficult to do; i.e. to perform tasks)* ...... on a daily basis and it is likely to be permanent.'

  This only needs to be a statement focussing on the impairment that impacts your life the most on a daily basis.
- You will need to let your health practitioner know that when responding to the Access Request Form question about 'current treatment' that they will also need to **write about previous treatment tried and that other treatment options had been looked at but were deemed unsuitable** *(if that is the case)*.
- The NDIA view refusal or irregular taking of medication to be 'not all treatment has been tried'. They do not understand that sometimes medication can create further difficulties or that irregular taking of medication can be a result of a psychosocial disability. It is better to not even mention it.
- You will need to let your health practitioner know that the word 'remedy' means cure to the NDIA. *If your doctor says there is a remedy – fantastic. Ask them to provide it for you.*
- There are questions on the ARF about the 6 areas of activity domains that the NDIS includes; mobility, communication, social interaction, learning, self-care and self-management.

  These questions are related to your 'functional capacity'. Make sure that the person filling out the form **focuses on what you are unable to do or need assistance to do rather that the emotional or psychological reason**.

  The response might be written like this (*example only*):

  > '...... *(your name)* ...... requires assistance to perform daily living tasks, prompting to manage personal finances, and supervision to self-manage medications.'

  Note: The 'mobility' domain now applies specifically to physical needs. If you need assistance to leave the house due to your psychosocial disability, catch public transport, etc., you will need to include this in the self-management activity section.
- You will need to let your health practitioner know how your life is impacted.

  We will look at what this means further on in this module.

- Think about getting supporting evidence from an Occupational Therapist. They write their assessments in a way that the NDIA like.

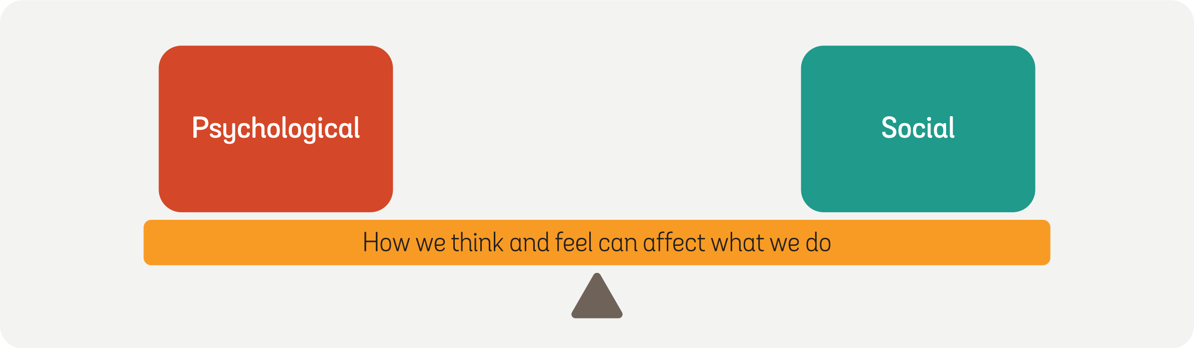
  Ask your doctor about getting a *Chronic Disease Management Plan*, this may cover the cost of an Occupational Therapist appointment.
- You can use past reports from health professionals, hospitals, schools, community service providers that support and demonstrate your psychosocial disability. Read over them and make sure they don't include phrases like 'on a good day'. These phrases can be misinterpreted by the NDIA as meaning you are not substantially impacted by your mental health issues on a daily basis. Don't use them if they have been written from a 'recovery' focus. Remember, the focus is on 'substantial functional impairment'; the things you struggle to do or need support to do.
- The NDIA do not recognise drug and alcohol addiction as a mental health issue. If you mention drug and alcohol addiction, the NDIA may require you to be drug/alcohol free for some months and then undergo tests to see if you are still requiring assistance to do some things or struggle to do some things. If you are able to gather evidence from a neuropsychiatrist or neuropsychologist to show that the support you need is because of your mental health issues and not drug and alcohol addiction.
- Keep copies of everything you send to the NDIA and also keep any mail (including the envelopes) you receive from the NDIA.
- Let your health professionals know that the Mental Health Professional Online Development (MHPOD) learning portal has a section called NDIS for Mental Health Clinicians. It has loads of information, resources and templates that they can use to support you in applying for the NDIS.

  Report templates for clinicians and psychiatrist and a link to this website are located in the 'Resources' section of this module.

Tandem tip: Focusing on your strengths will not be really helpful.

What is psychosocial disability and how does it affect me?

Psychosocial disabilities are the limitations and restrictions impacting someone's activities due to their mental health issues. When someone is talking about psychosocial – they are talking about the combination of psychological and social behaviours. An example of this may be someone who experiences significant social anxiety and feels that everyone is looking at them and judging them when out in public, so they aren't able to leave their house.



The NDIS has a series of fact sheets about psychosocial disability that may help you to understand the language they use. These include:

Psychosocial Disability Access Factsheet 2: Impairment and psychosocial disability in the NDIS

Psychosocial Disability Access Factsheet 1: General Information

Psychosocial Disability Access Factsheet 3: Lifetime support and recovery for psychosocial disability in the NDIS

Psychosocial Disability Access Factsheet 4: Functional capacity and mental health conditions

Psychosocial Disability Access Factsheet 5: NDIS and other services supporting your mental health

Psychosocial Disability Access Factsheet 6: Providing evidence for NDIS eligibility

These can all be found on the NDIS website: Psychosocial disability | NDIS

Look at the reimagine today website: Mental Health, My Recovery and the NDIS. They have a workbook that will help you prepare for the NDIS (details in 'Resources' section).

Psychosocial disability is often considered to be a 'hidden' disability. To other people, it can look as if everything is okay. They don't see the thoughts racing through our minds, the anxiety we may be feeling, the distress or confusion we experience, the weight of depression and so on. They don't know that it might have taken two weeks of self-talk and pushing through anxiety just to make a phone call or open the mail. Sometimes the effects of living with a psychosocial disability become so normal to us that we don't even realise the limitations and restrictions it places on activities, and as a result we just can't do the activities.

To access the NDIS and identify the supports that can assist you, you will need to think about how your life is impacted by your mental health issues on a daily basis. A good way to do this is to keep a record of what you do, find difficult to do and what support you need to do things on a day-to-day basis, over a period of time.

Some of the things the NDIA might be interested in include:

- Whether you can express your needs and wants.
- Can you remember to do things?
- Do you take care of yourself (personal care, physical health, managing medication etc.)?
- Are you able to manage household responsibilities (like cooking, cleaning, shopping, laundry)?
- Are you able to manage a budget and problem solve?
- Can you make and keep friends?
- Do you have social contact?
- Can you follow and respond to a conversation?
- Is your interaction with others affected by your behaviours?
- Do you have a sense of purpose in life?
- Can you plan?

These are just some things to think about as you start to explore the effects of psychosocial disability in your life.

How do those that support me understand my psychosocial disability?

As you start to spend some time thinking about how your life is impacted by your mental health issues, it would be a good time to ask people you trust, what they notice. Whether these people are family members, people that support you or friends – they will see things that you don't. They can be little things or big things but it will help to create the picture of your day-to-day life.

Think about the support you get from them...

- Do they cook your meals and make sure you eat healthy?
- Do they clean the house and do your laundry for you?
- Do they prompt you to have a shower?
- Do they take you to appointments?
- Do they sit in on appointments and help explain what is being said?
- Do they remind you to do things, like take your medication and pay bills?
- Do they help you manage your budget and money?
- Do they fill out all your forms for you?

Think about whether you could do these things without their support…

What they have to say can be important information to include in your NDIS evidence and it will be useful when it comes time for preparing for your NDIS plan. There may be some things they do that you would prefer someone else to do. In an NDIS psychosocial information session, a 40-year-old man spoke about his aging mother still coming to his home and doing the housework. He didn't want his mum to come and clean his house, he would rather spend time with her as a son. Under the NDIS, he could ask for support to clean his house and pay for someone else to do it.

We will expand upon this in Module 5: NDIS planning meeting and also look at some things you can ask for to assist your support people.

Let your health practitioners know how psychosocial disability impacts your life

It is really important to let your health practitioners know how your psychosocial disability is affecting your life so they can support you in accessing the NDIS.

VMIAC developed a booklet and pamphlet for people to give their health practitioners explaining how they can support someone applying for the NDIS (**see** 'Resources' section for website details).

> 'Some people will be very clear about their issues and needs, but others may not disclose much information.
>
> Here are some considerations:
>
> **'I don't deserve anything better.'** Some people with psychosocial disability have very low self-esteem, and this may have been reinforced by experiencing many challenges in life.
>
> **'But I'm so used to that.'** Some people may take impairments for granted, particularly if they have lived with them for many years. However, the NDIS was established because people with disability are entitled to supports that help them to fully participate in life.
>
> **Not realising that impairments can be overcome.** Some people may not realise that there are strategies to overcome or adapt to impairments, particularly if they've never accessed disability support services before.
>
> **'Others are worse off than me.'** Some people may worry that others deserve help more than they do and may think that others will miss out if they apply for support.
>
> **Memory or cognitive impairments.** Some people, particularly those on long-term antipsychotic medication or long term electroconvulsive therapy, may have cognitive impairments, including memory loss. This might make it difficult to recall impairments in their day-to-day life, or to think of types of assistance that might be helpful. Cognitive impairments may make it more difficult to complete paperwork as well.'
>
> *Supporting people with mental health needs to access the NDIS: Detailed information for medical and allied health professionals, VMIAC, 2018.*

Receiving your NDIS eligibility decision

After you have sent off your Access Request Form and supporting evidence to the NDIA, they are required to provide you with their decision within 21 days.

They may contact you earlier than this to say they need more evidence. Ask them what sort of evidence they would need to help them make the decision. Write it down or ask them to send you an email or text with the information they need.

The NDIA may contact you by phone to let you know the outcome and they have to send you a written decision of the outcome as well.

If you have been accepted into the NDIS, you will now be referred to as a 'participant'.

If your application to the NDIS was denied, it may be because there was not enough evidence for them to make their decision. All their decisions need to be made in accordance with the *National Disability Insurance Scheme Act 2013* (*NDIS Act 2013*).

Please read Module 7: Appeals and reviews to inform your decision about your next step.

RESOURCES

1. NDIS: What is considered permanent and significant?
2. Online resources
3. Clinician report template
4. Psychiatrist letter template

What is considered permanent and significant?

Excerpts taken and summarised from: National Disability Insurance Scheme (Becoming a Participant) Rules 2016 www.legislation.gov.au/Details/F2018C00165

A new law was introduced in 2024, called the National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Act 2024. Because of this, some of the accompanying NDIS Rules may also change over the next few years. You will be able to find up to date information about the NDIS laws on this page: https://www.ndis.gov.au/about-us/governance/legislation

Part 5 When does a person meet the disability requirements?

Section 24 of the Act sets out when a person meets the disability requirements. The requirements are met if:

(a) the person has a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments, or to one or more impairments attributable to a psychiatric condition; and

(b) the person's impairment or impairments are, or are likely to be, permanent; and

(c) the impairment or impairments result in substantially reduced functional capacity to undertake, or psychosocial functioning in undertaking, one or more of the following activities: communication, social interaction, learning, mobility, self-care, self-management; and

(d) the impairment or impairments affect the person's capacity for social and economic participation; and

(e) the person is likely to require NDIS supports under the National Disability Insurance Scheme for the person's lifetime.

These next sections set out Rules relating to some of the elements in paragraph 5.1 above, however, in order to meet the disability requirements, all of the requirements in that paragraph need to be satisfied.When is an impairment permanent or likely to be permanent for the disability requirements?

Your impairment may be permanent or likely to be permanent for the disability requirements:If there are no known, available and appropriate treatments that would likely remedy your impairment.

Even if the severity of its impact on your functional capacity changes.

If your impairment does not need further medical treatment or review for its permanency or likely permanency to be shown. If your impairment worsens over time, and treatment would unlikely improve the condition.When does an impairment result in substantially reduced functional capacity to undertake relevant activities (communication, social interaction, learning, mobility, self- care, self management)?

Your impairment will substantially reduce your ability to carry out relevant activities if:

You are unable to fully participate in the activity without assistive technology, equipment, or home modifications; or

You usually require help from other people to take part in the activity or

You are unable to take part in the activity even with assistive technology, equipment, home modifications or help from other people.

If your impairment doesn't quite meet the above dot points, you may still be eligible based on a practical assessment of your functional capacity.

Online resources

Apply to the NDIS

improvements.ndis.gov.au/how-we-can-help/apply-ndis

NDIS and Psychosocial Disability

www.ndis.gov.au/understanding/how-ndis-works/psychosocial-disability/applying-ndis-people-psychosocial-disability

What is an Access Request Form

www.ndis.gov.au/how-apply-ndis/what-access-request-form

NDIA office locations and Local Area Coordinator offices and contact numbers

www.ndis.gov.au/contact/locations

Mental Health, My Recovery and the NDIS

reimagine.today

Tandem Carers

www.tandemcarers.org.au/Web/Web/Support/NDIS/Pathway-to-access-the-NDIS.aspx

VMIAC NDIS resources

www.vmiac.org.au/services/ndis

Clinician report template

Sourced from the NDIS for Mental Health Clinicians Resources page in the Mental Health Professional Online Development (MHPOD) Learning Portal

(insert letterhead)

(insert date)

To: National Disability Insurance Agency (NDIA)
Re: *(insert name and date of birth)* of *(insert address)*

This report is in support of the above-named person's application for the National Disability Insurance Scheme (NDIS).

(insert name) is diagnosed with *(insert diagnosis)*, has been a registered client of *(treating service)* since *(insert date)* and is currently treated by;

Consultant Psychiatrist: *(insert name)*
Psychiatric Registrar: *(insert name)*
Key Clinician: *(insert name)*

(Provide brief context to clinical service delivery e.g. bed-based, community, outreach and, if appropriate, frequency of contact.)

I can confirm *(insert name)*, experiences significant impairments in the following life areas as a result of his/her mental illness. Although the impact of the mental illness and impairments can vary over time the following assessment reflects functional capacity on an average day.

1. Mobility *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

   Due to

   - side effects of treatment (dizziness, tremor, weight gain, shortness of breath involuntary movements affecting trunk, arms or legs, impaired balance, coordination and/or physical health)
   - slowed movements or reaction time due to symptoms

   ***(insert name)* is unable or has difficulty**

   - transferring in and out of bed or chair
   - using public transport
   - shopping
   - preparing meals – walking with hot food or drink, using knives/food preparation equipment, cutlery
   - using more than *(indicate maximum number)* stairs
   - standing more than 30 minutes
   - walking more than 100 metres
   - crossing roads

   and requires this type of assistance to independently mobilise

   - aids/equipment to overcome movement difficulties
   - Mobility Allowance (current recipient)
   - equipment to assist meal preparation
   - adapted cutlery.

2. Communication *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

   Due to

   - side effects of treatment (slurred speech, involuntary movements affecting the mouth and tongue)
   - difficulties interpreting communication, concentrating, reading nuances of verbal and non-verbal cues

(insert name) **is unable or has difficulty**

- being understood
- following instructions, conversations and/or directions
- asking for help when needed
- understanding others
- expressing needs
- communicating with various professionals regarding health and social support needs
- using phone, email, mail

and requires this type of assistance

- support to attend appointments, assist with interactions, to help communicate everyday activity needs
- support to develop skills, implement strategies to organise thinking and behaviour and provide coaching and feedback/behavioural support
- aids equipment to overcome communication difficulties.

3. Social interaction *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

Due to

- difficulties initiating and responding to conversations, establishing, trust
- social avoidance, withdrawal or isolation
- sensitivity to particular environments and stimulus (e.g. crowds, excessive noise)
- unusual behaviours, intrusiveness, thoughts or conversation that may attract negative attention or be inappropriate to the situation
- severely disturbed behaviour which may include unprovoked aggression towards others
- side effects of treatment (extreme restlessness, hypersensitivity to light)

(insert name) **is unable or has difficulty**

- accessing the community *(e.g. does not leave house, cannot drive/use public transport)*
- talking to strangers or particular people
- making and keeping friendships
- sustaining relationships (including family)
- coping with feelings and emotions, interacting with other people – friction, avoidance
- connecting with faith/spirituality/volunteering/community
- attending social or recreational activities *(no social contacts and involvement unless these are organised for the person)*
- with vulnerability to the influence of others
- attending work, education or training *(provide details of last work/training if relevant)*
- engaging when attending social or recreational activities
- using public transport
- travelling alone to unfamiliar environments
- feeling safe
- engaging with support providers and/health professionals

and requires this type of assistance

- community access and transport assistance. Support to accompany when attending social activities for a period of time/until trust and relationships established
- encouragement through guided supervision and promoting participation in social and community activities and to build natural/informal supports
- support to engage in social interactions and provide feedback
- support to develop skills, provide motivation, accompany to build confidence, provide feedback

- behavioural support, weekly relationship coaching or mentoring
- equipment to assist person to cope with symptoms
- provision of assisted transport/low stimulus options.

4. Self-management *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

Due to

- impaired concentration, organisation, memory, motivation, judgement
- mood disturbances
- difficulty coping with situations involving stress, pressure or performance demands
- impulsivity
- slowed or racing thoughts
- side effects of treatment (lethargy, restlessness, sedation/drowsiness)

(insert name) **is unable or has difficulty** *(areas of need)*

- organising, planning
- making decisions
- managing emotional health – including use of joint wellness plan, coping strategies, recognising when becoming unwell, implementing strategies when becoming unwell
- concentrating for 10 minutes or more
- managing day to day activities
- having a regular routine – getting done what was planned
- attending appointments
- solving problems that arise
- attending to responsibilities
  - household responsibilities (e.g. laundry, paying bills, housecleaning)
  - managing money (include history of bankruptcy if relevant)
  - shopping/cooking
- behaving safely/responsibly
- keeping safe in home environment (food storage, use of stove etc.)
- maintaining tenancy/managing tenancy issues
- self-advocacy
- with vulnerability to exploitation

and requires this type of assistance

- support to supervise, prompt, support with care of house, managing money, getting services, problem solving, develop new skills, support coordination
- support to make decisions (Guardianship order in place)
- support with managing finances (Administration order in place), financial counselling
- support to develop and implement budget
- support to develop skills to maintain tenancy
- devices that can assist with cognitive problems.

5. Self-care *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

Due to

- side effects of treatment (sedation, dizziness, tremor, weight gain, shortness of breath involuntary movements affecting trunk, arms or legs, impaired balance, coordination and/or physical health)
- impaired concentration, organisation, memory, motivation, judgement
- cognitive impairments impacting on skill development and maintenance

(insert name) **is unable or has difficulty**

- maintaining adequate diet/nutrition
- showering/bathing regularly
- grooming, toileting, dental hygiene
- caring for own health needs – including maintaining physical health, dental health, sexual health and wellbeing
- managing medication
- shopping, cooking, cleaning and laundry
- learning new tasks
- exercising regularly
- identifying and implementing activities promote health and wellbeing
- establishing a routine that supports health and wellbeing – including a balance of 'work, rest and play'

and requires this type of assistance

- assistive equipment to enable self-care activities (see also 'Mobility')
- access to healthy lifestyle/health promoting activities including nutritionist/dietitian, exercise physiologist/personal trainer, food preparation/cooking lessons
- support to provide prompts/cues, supervise (e.g. for safety), assist (e.g. work alongside), encourage and provide feedback
- devices to assist with cognitive problems e.g. electronic reminders, monitors/feedback devices, visual cues and prompts

6. Learning *(delete section or text if not applicable. Provide examples to illustrate where relevant)*

Due to

- impaired concentration, organisation, memory, motivation, judgement
- difficulty coping with situations involving stress, pressure or performance demands
- impulsivity
- slowed or racing thoughts
- side effects of treatment (lethargy, restlessness, sedation/drowsiness)

(insert name) **is unable or has difficulty**

- learning new things
- understanding and remembering information
- practicing, mastering and using new skills
- following instructions and paying attention
- completing tasks

and requires this type of assistance

- equipment that assists with recording and organising
- support to assist with learning and engaging in new activities, develop required skill and provide feedback/behavioural support
- devices that can assist with cognitive problems.

If you wish to contact me about *(insert name)*'s application for the NDIS please do not hesitate to contact me on *(insert phone number/email)*.

Yours sincerely,

(Full name)
(Professional qualification)

Psychiatrist letter template

Sourced from the NDIS for Mental Health Clinicians Resources page in the Mental Health Professional Online Development (MHPOD) Learning Portal

(insert letterhead)

(insert date)

To: National Disability Insurance Agency (NDIA)
Re: *(insert name and date of birth)* of *(insert address)*

This letter is in support of the above-named person's application for the National Disability Insurance Scheme (NDIS).

I am the Doctor currently treating them for a psychiatric condition. I can confirm that *(insert name)* has impairments resulting from their psychiatric condition that result in substantially reduced capacity to carry out daily activities. They have been diagnosed with *(insert psychiatric diagnosis)* which they have had for approximately *(number of years)*. This condition was first diagnosed in *(year)*. They also have a secondary diagnosis of *(secondary diagnosis if available)*.

They have had *(insert number)* of psychiatric inpatient admission/s between *(years i.e. 2010–2016)*. Their most recent admission was *(insert date)* at *(name of hospital)* lasting approximately *(length of stay)*.

Past treatments/interventions undertaken: *(insert type of treatment i.e. medication name and/or psychological treatment, and summary of outcomes)*.

They are currently receiving treatment in the form of *(insert type of treatment, i.e. such as medication name/pharmacotherapy and/or psychological treatment)*.

(delete this sentence if not applicable) Although *(insert type of treatment)* is a commonly known treatment for this condition this has not been undertaken due to *(insert clinical rationale)*.

I can confirm that

- all appropriate and available treatment/intervention options have been explored and the impairment is likely to be permanent
- the impairment is assessed as permanent because, although it may vary in intensity due to the episodic nature of their psychiatric condition, *(insert clinical rationale to support likeliness of impairment remaining across the person's lifetime e.g. clinical course that has been lengthy or chronic; no known, available and appropriate evidence-based clinical, medical or other treatments that would remedy the impairment)*
- ongoing treatment and intervention is aimed at maintenance and personal recovery i.e. the impairment is likely to remain regardless of ongoing treatment/interventions.

If you wish to contact me about this person's application for the NDIS please do not hesitate to contact me on *(insert phone number/email)*.

Yours sincerely,

(Insert name)
(Consultant Psychiatrist/Psychiatry Registrar)
(Insert name of service)
Provider No: *(Provider number)*

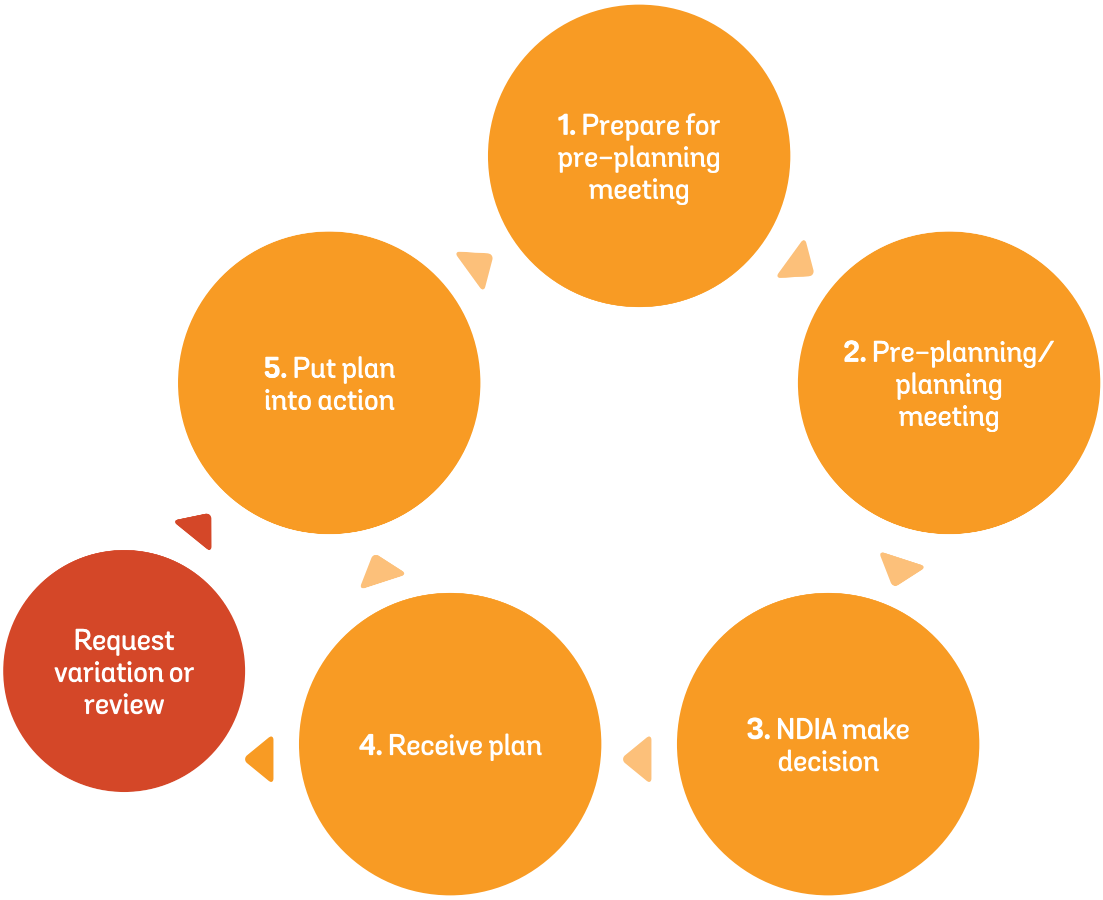
MODULE 4: NDIS PLAN PREPARATION: WHAT'S IMPORTANT TO ME?

What is the purpose of this document?

To provide information to assist in the preparation of NDIS plans.

Congratulations. If you are ready to look at preparing for your planning meeting, you have been accepted as an NDIS participant. The next few modules will be looking at NDIS planning. This stage of your NDIS journey is one that will keep repeating over and over. Plans have a finishing date and will need to be relooked at to see if they still suit you. Your plans can be changed to reflect what it is that you want to do. An overview of NDIS planning are presented in a circle to show how one thing will lead to another.

Overview of NDIS plan stages



1. Prepare for pre-planning meeting

2. Pre-planning/ planning meeting

3. NDIA make decision

4. Receive plan

5. Put plan into action

Request variation or review

What things do I need to do to prepare for a planning meeting?

Your individual plan will include information about you, your goals and your supports. The information you provide about yourself and your goals are sometimes called a 'Participant Statement'. The information you give about yourself along with your goals will help the planner decide what supports you can get. The NDIS have released a work booklet to help with preparing for a planning meeting. (See 'Resources' section of this module for the link.)

What information about me do I give?

The information you provide tells the story about what your life is currently like and what supports you have. The information the planner will be wanting includes:

- **Your personal details**

  This includes your name and age. You will also need to say what your condition or disability is and how it affects your life day-to-day.

  Tips:

  - You don't have to provide them with your diagnosis – you can say mental health condition or psychosocial disability – they are not asking for anything more than that.
  - You can keep your answers simple and short, just remember to include if you need any help or support to do things currently.
  - Keep the focus of your answer on 'how' it affects your life and not on 'why'.

    For example:

Instead of saying:	'I get anxious, so I don't leave the house'
Say:	'I can't leave the house unless I have someone supporting me', or 'I need help to leave the house'.

- **Your current support network**

  This includes all people who help you that are not paid support workers. You will be asked what their relationship is to you and how they help you.

- **Information about yourself such as where you live, who you live with and what people or things are important to you**

  Tips:

  - What you say is important to you, is the beginning of letting the NDIA know why you will want certain supports.
  - Think about your previous answer on your support network. Is someone doing something to support you that makes you feel 'dependent' on them? If being 'independent' is important to you, then you may be able to get your own supports instead of having to rely on someone (like a family member).
  - When thinking about 'what things are important to you', it doesn't have to be about possessions or items. It can include things such as activities, personal needs and personal values.
  - Write down all the things that are important to you. A 'What is important to me?' worksheet can be found in the 'Resources' section of this module. You can continue to add to the list as you think about things.

- **Your daily life such as what you do each day and what your interests are**

  Be honest. If you go to work a couple of days a week, or catch-up with friends on the weekend – that's fantastic. For some people with mental health issues, this question might be uncomfortable:

  - It's okay to say you spend a lot of the day in bed, or that you don't leave the house. It's okay to say you avoid answering the phone. It's okay to say you do 'nothing'. There can be a temptation to try and make our daily life appear more 'active' than it is and this can be for a number of reasons resulting from being judged; such as feeling guilty 'that we aren't doing more' to 'pretending that things are good' so that we are not a 'burden' on anyone – you won't be judged on your answers.
  - It's okay not to know what your interests are – perhaps that can become a 'goal'; to find out what might interest you.

- **Information about your involvement with any other government or community groups and how they provide support**

There are many different ways you can gather and present your information…

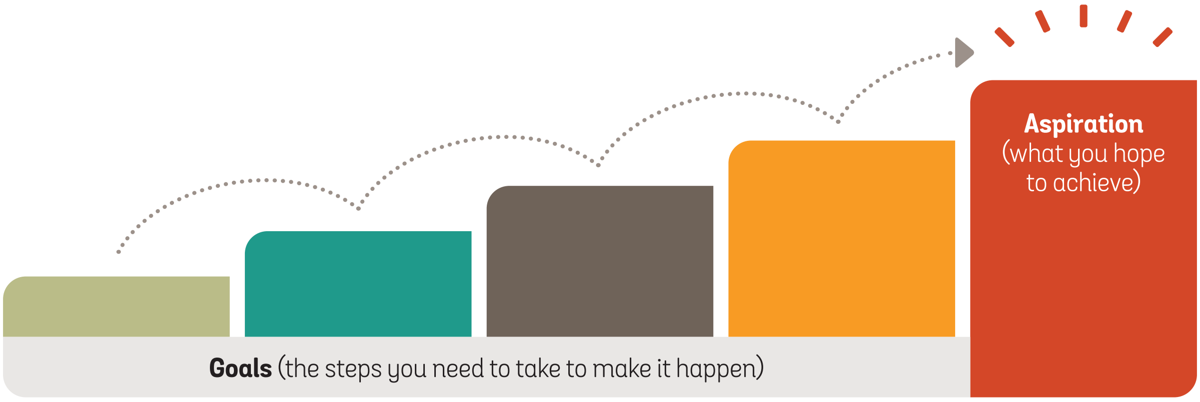
- workbooks
- guides
- worksheets
- Participant statement.

See 'Resources' section for examples.

Choose what works best for you.

Goals and aspirations

NDIS supports are directly linked to a person's 'goals and aspirations'. The NDIS uses the words 'goals and aspirations' so it's important to understand what they mean. An 'aspiration' is basically something you want to achieve and a goal is the way to make it happen. For example, perhaps my 'aspiration' was to open a door – the goals may include; walking to the door, turning the doorknob and pulling the door towards me.



For some people, the thought of 'goals' reminds them of times they have tried to do something different and it produced some unwanted emotion and reactions; others may come up totally blank.

Change, no matter what it is, can make a person feel a bit uncomfortable and even anxious. Trying new things can also be considered 'change'. Experiencing new things can also be exciting for some people. Having a go at doing new things or working towards something may open up new future possibilities and grow your confidence in what you are able to achieve.

Start with hopes and dreams…

Start thinking about things that may interest you. It's okay if nothing comes to your mind immediately. As you go about your day, be on the lookout for things that could possibly interest you. It may be something you have heard on the radio or television; it may be something you overheard someone talking about; it might be something you read about; it may be something you have dreamed of doing or it may be something you hope to do:

- Write them down (or cut out a picture).
- Start gathering them together as a collection.
- You might want to display them on something like your bathroom mirror, a big sheet of paper, a corkboard or even your refrigerator.

At this stage you are just looking for possibilities. It is sort of like your very own personal 'brainstorm session'. Nothing is right or wrong and they can be big or small.

Look over the collection of interests, hopes and dreams you have put together. Think about each one and if there is something that no longer interests you, remove it.

What would I like to achieve?

With the list of remaining hopes, dreams and interests you have identified, choose the top four that mean the most to you.

Now decide whether they are long-term plans, short-term plans or things you want to achieve now – write them down:

Now	Short-term (One year)	Long-term (Five years)

These four things are your personal aspirations (using NDIS speak).

Making goals to achieve your personal aspirations

Remember, goals are the steps you need to take that lead you to what you want to achieve. The goals become the things you want to achieve in the short-term. There will be some things that you can do by yourself, some with the help of others and some may need specific supports provided by the NDIS.

Look at each thing you want to achieve separately and start to write down what you will need to do to make it happen. It's sort of like following a road map to reach your destination.

Tips for making goals:

- Try and be as clear as you can about what you will need to do.
- What timelines are needed?
  - Is it something you need to do every day or week-to-week?
- Think about your immediate needs.
- How are you going to do these things?
  - Do you need to get more information?
  - Will you need money to do this?
  - What resources will you need?
- Think about what supports you already have in place.
- Think about what supports you might need.
- Who can provide these supports?
  - Personal network (family and friends)?
  - Are the supports your family provide 'reasonable' or is it 'beyond reasonable expectation'?

    Things to think about include do they work full time, have responsibilities for others, their age, what sort of support they are providing, and can they continue to provide support?
  - Your local community services?
  - Other government departments?
  - The NDIS?
- Some bigger goals can be broken down into smaller goals (steps).

Talk it over with someone you trust. Do they have any other ideas that could help?

There are many ways you can write down and present the information. An example of one way to write down your goals is...

Goal 1:

My goal is:

I want to do this because:

I want to be able to do this by (give a date):

The supports I will need are:

	Type of support:	Support can be provided by:	How often?
1.			
2.			
3.			
4.			
5.			

Note: Does your support person need any assistance to support you? Let the NDIS planner know so this can also be included. Ask your support person what supports they need.

What supports will the NDIS provide?

The supports the NDIS provides have very strict criteria attached to them.

Participants are only able to use their NDIS funds for items on the 'NDIS Supports List'.

There is also a list of things NDIS funding cannot be used for, so you are aware of what you cannot ask for.

In some circumstances you may be able to request a substitution from a 'replacement support list.'

You can find the lists on this page: https://ourguidelines.ndis.gov.au/would-we-fund-it/what-does-ndis-fund/. Here you will find the:

Supports that are NDIS supports – There are 37 categories of goods and services that are 'NDIS supports'.

Supports that are not NDIS supports

Replacement supports list

The NDIS typically will fund supports that meet all the following criteria:

- it is for your impairments that meet the disability or early intervention requirements, or both
- it will help with your individual goals and aspirations
- it will help your social and/or economic participation
- it is value for money, which means that:
- the cost of the support is similar to or cheaper than alternative options that can provide you with the same outcome
- purchasing the support is likely to reduce the costs of funding for other supports in the long term

- it is effective and beneficial for you
- it helps to maintain your informal supports
- it is an NDIS support (on the approved Support List)

These criteria are referred to as the 'reasonable and necessary' criteria. Read more about them here: https://ourguidelines.ndis.gov.au/how-ndis-supports-work-menu/reasonable-and-necessary-supports/how-do-we-make-decisions-about-what-reasonable-and-necessary/does-support-meet-reasonable-and-necessary-criteria

It is important to note that the NDIS will not fund certain things:

- things considered to be day-to-day living supports (for example, groceries)
- things that are not considered to be 'evidence based' (for example, some alternative therapies)
- things that are illegal (such as illicit drugs)
- alcohol, cigarettes or vapes, legal cannabis, or sex work

NDIS supports lists and easy read versions can be downloaded from the NDIS website: What does NDIS fund?

Check the supports you identify against the support lists in advance of your planning meeting.

To assist you further in understanding what supports the NDIS may provide, look in the 'Resources' section of this module to find:

- an overview of the types of services and supports that are included in the NDIS (**see** NDIS Quality and Safeguards Commission List of specified services and supports)
- a 'Table of guidance on whether a support is most appropriately funded by the NDIS' (taken from the NDIS *Operational Guidelines*).

Tip: If you are interested in anything specifically – do a web search to see which organisations provide an NDIS service. For example; NDIS holidays, NDIS driving lessons, NDIS art therapy – just put an 'NDIS' in front of the activity.

You can contact the provider to get information on how to include the service/activity in your plan – at this stage you are just getting information – don't sign up or agree to anything.

Examples of what the NDIS may fund

The NDIS will look at providing funds for supports that focus on things you have difficulty doing as a result of your psychosocial disability. Some examples from the NDIS Support List include:

- Supports that help you to do activities for finding or keeping appropriate accommodation
- Supports that provide assistance with essential household tasks that you can't do by yourself because of your disability (like cooking, cleaning, and laundry)
- Supports to help you to take part in community, social, cultural and civic activities

The full NDIS Support List is available here:
https://ourguidelines.ndis.gov.au/would-we-fund-it/what-does-ndis-fund#what-does-the-ndis-fund

The NDIS can also fund:

- a Support Coordinator – can assist you to find services that can meet your goals and needs
- a Plan Manager – to help 'keep the books' for you; making the claims for services and paying the bills for the supports agreed in your NDIS plan.

These supports do not need to be linked to your goals. They are additional and extra funds are provided for these services. These will be discussed further in Module 5: NDIS Planning Meeting 'NDIS planning meeting' module.

Tips for my plan preparation

- Make sure all your information is written down. It will make it easier for you and the Planner and will also ensure that nothing gets left out. Use a guide or workbook to assist you with this (**see** 'Resources' section).
- Take any assessments and reports (evidence) that can back up your request for support (remember to keep copies for yourself):
  - If you are already receiving support from a service provider and you want to continue receiving their support – get them to write a letter explaining how their supports are benefiting you. Make sure to remind them that the letter will need to be written to the NDIS criteria of 'reasonable and necessary'.
  - Look at the different sorts of evidence in the 'Beginning with the NDIS' module – they can be used and updated for your planning meeting.
  - A Carer's Statement can also be used as supporting evidence.
- Think about including supports that can help you prepare for your following plan. For example, you may want to request an Occupational Therapist assessment to help identify future supports.
- Identify someone you trust and ask if they could attend the planning meeting with you. Explain your goals and what you need them to do so they can support you in the meeting.
- Think about how you will 'tell your story' to the Planner:
  - Your story is the information you have put together.
  - When talking about your information, keep your focus on why the supports you want are needed – link the supports to functional needs rather than emotional.
- Link your supports to the relevant NDIS activity domains:
  - Communication
  - Social interaction
  - Mobility
  - Self-care
  - Self-management
  - Learning.

  If possible, link a support to more than one domain, for example:

If you have identified a fitness class as a support you need – it could be linked in with increasing your opportunity to practice your communication skills, providing an opportunity for you to be involved in the community and to make friends (social interaction) and also to build up your strength and resilience (self-care) to start working towards whatever your goal is… such as 'getting a job, doing a course'.

- Keep your request for different supports fairly general as this will give you more options when you receive your plan.
- If you do want something specific, talk to the service provider to find out the best way to include your request for support.
- If you are requesting therapy, such as psychology, make sure it is for a specific reason, is time limited and linked to one of your goals.
- Look at the type of supports and services the NDIS funds and see how they can fit in with your goals.
- Think creatively when looking at supports to meet your goals.
- Remember to think about your personal needs and include them in your supports, such as culture, sexuality and identity.
- Be aware that some NDIS supports will require a co-contribution from you. For example, they may provide someone to accompany you on a holiday however you may have to pay for your own holiday, or they may pay for your holiday but you will need to pay any personal expenses. You can contact the service provider to find out what the NDIS covers and what you would be expected to pay for.
- Make sure you work out how many hours a week you will need various supports. It's safer to over-estimate than under-estimate. Some services will charge for administration time, like phone calls with you – allow extra hours for the administration time.
- You can contact your Local Area Coordinator if you have any queries or need further guidance.

'The role of the Local Area Coordinator (LAC) is to assist people to navigate the NDIS

Get ready for your plan:

- Pre-planning packs – can be sent out prior to the planning conversation meeting.

Develop your plan:

Help you to work out your goals and identify the supports you need to help reach those goals. The information gathered will help to develop a plan that meets your needs based on your identified goals.

Get your plan going:

Once your plan has been approved, your Local Area Coordinator will work with you to help you get your supports set up and working. They might help you to set up your myGov and NDIA portal account and show you how to set up a service booking.

Keep in touch with you, if you need help with your plan:

Your LAC will keep in touch with you and check in to see how things are going once your plan is implemented.

For further information on how your Local Area Coordinator can assist you, visit the NDIS website:
https://www.ndis.gov.au/understanding/what-ndis/whos-delivering-ndis/local-area-coordination-partners#what-is-the-role-of-a-local-area-coordinator

Information from the Brotherhood of St Laurence
ndis.bsl.org.au/local-area-coordination/what-is-local-area-coordination/

- Think about whether you want to request a meeting with an NDIA planner instead of a Local Area Coordinator – the planner can make decisions on the spot.

An NDIS planner will explore your needs, goals and aspirations, make decisions on what supports you will be funded for based on legislated principles of 'reasonable and necessary' and develop your plan.

- Make sure you have a face-to-face planning meeting.
- Think about where you want the planning meeting to be held – it can even be in your home.
- Read the 'NDIS Planning Meeting' module to find out about planning meetings and things you will need to know.
- Think about alternate supports available to you other than the NDIS.
- You can start looking for a Support Coordinator.

You will need to self-advocate for your plan. Use the IMHA Self-Advocacy Plan. found in Module 1 to guide you.

RESOURCES

1. Worksheet – What is important to me?
2. Online resources
    - Clickability: Australian Disability Services: rated, reviewed and reliable
    - NDIS Quality and Safeguards Commission
    - NDIS Pricing Arrangements and Price Limits
    - Support Calculator – identifying supports
    - NDIS Participant Booklets – Look for NDIS Fact sheet – *Creating your plan*
    - Reimagine Planning Workbook
    - VMIAC Annual Plan Review Guide
    - Supports and services funded by the NDIS
    - Examples of NDIS Mental Health supports
3. Pre-planning template

Worksheet – What is important to me?

Write down some things that are important to you under each heading. They may be things you have or do already, things that you value and things you cannot do unless you have support.

Activities

Relationships

Values

Personal needs

Online resources

Clickability. Australian Disability Services: rated, reviewed and reliable

clickability.com.au

NDIS Quality and Safeguards Commission – List of specified services and supports

www.ndiscommission.gov.au/document/891

NDIS Pricing Arrangements and Price Limits

www.ndis.gov.au/providers/pricing-arrangements

Support Calculator – identifying supports

www.supportcalculator.com.au

NDIS Participant Booklets – Look for Fact Sheets under – *Creating your NDIS Plan*

www.ndis.gov.au/about-us/publications/booklets-and-factsheets#participant-booklets

VMIAC Annual Plan Review Guide

www.vmiac.org.au/wp-content/uploads/Scheduled-Plan-Review-Guide.pdf

Reimagine Planning Workbook – *Reimagine My Life*

reimagine.today/resources

Supports and services funded by the NDIS

www.ndis.gov.au/providers/becoming-ndis-provider/am-i-ready/supports-and-services-funded-ndis

Examples of NDIS Mental Health supports

ourguidelines.ndis.gov.au/would-we-fund-it/improved-health-and-wellbeing/mental-health-supports

Pre–planning template

Source: Mental Health Professional Online Development (MHPOD) Learning Portal, NDIS for Mental Health Clinicians Resources.

Name:

Date of birth:

Home life

Where you live.

I live in (type of home)	Who I live with	To make things easier at home I need

Support network

Important people in your life and how they support you.

Important person* Family, friends, paid support people	Relationship to me	How they help or support me	How often they help me

* Include formal guardians, carers, persons responsible, or other nominated representatives.

Equipment

Special equipment you have or need e.g. home/vehicle modifications, wheelchair, special clothing, walking frame, assistance dog, equipment repairs, assistive technology.

Aid, equipment or modification I have	Aid, equipment or modification I need

Everyday life

What you do now.

Social/community	**Work/study**

Future life

Things you would like to do but are not doing yet.

Social/community (e.g. supported holidays, recreation activities, sporting clubs, social groups, supported outings)	**Work/study** (e.g. TAFE, Uni, Independent Living Skills program, Study skills training, cooking classes)

Other activities

I am particularly good at or enjoy:

Weekly routine

Regular and occasional activities.

	Morning	Afternoon	Evening/overnight
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Important information about me *(Only complete this section if needed, otherwise delete)*

What must people supporting you know to help you stay safe and well?

Other health or medical concerns	Safety	I require behaviour support for:	I have the following plans that help me stay safe and well:
		☐ Aggression to self ☐ Aggression to others ☐ Damaging property ☐ General impulsivity ☐ Verbal outbursts ☐ Problems starting or completing things ☐ Sexual impulsivity ☐ Social impulsivity ☐ Wandering/ absconding ☐ Other:	☐ Epilepsy Management Plan ☐ Nutrition and Swallowing Plan ☐ Mental Health Care Plan ☐ Restrictive Practice Authorisation ☐ Positive Behaviour Support Plan ☐ Safety Plan (violence, suicide, self-harm) ☐ Anger Management Plan ☐ Other health plan:

Current supports

What type of supports do you receive now or need?

Type of support	**Hours per day/week/ month/year**	**Service provider**	**Don’t have it but need it**
Assistance with daily personal activities or personal care			☐
Assistance with domestic or household tasks			☐
Assistance with community access			☐
Case management or support coordination			☐
Behaviour support e.g. ABI Behaviour Consultancy			☐
Therapeutic/allied health supports e.g. neuropsychology, OT, speech			☐
Mental health care e.g. psychologist, psychiatrist, nurse			☐
Health e.g. exercise program, sports, yoga, dietary controlled meals			☐
Employment agency or supported employment			☐
Assistance to communicate (in essential activities) e.g. interpreting, translation, alternative communication, signers			☐
Transport/travel e.g. PT, taxi vouchers			☐
Supported group activities			☐
Centre based activities/day program			☐
Respite e.g. home, community, residential, holiday			☐
Culturally specific services			☐
Alcohol and other drug services			☐
Other:			☐

Reflection

What is working and what is not working in your life right now.

Activity	What's working	What's not working	How I would like things to change
Daily living			
Relationships			
Living arrangements and home			
Social and community participation			
Work			
Lifelong learning			
Health and wellbeing			
Choice and control			

Therapeutic supports recommended (optional)

To be completed or informed by current therapists if available.

Therapy	Support need	Hours per week/ fortnight/month/year
Neuropsychology/ behaviour support		
Speech Pathology		
Occupational Therapy		
Physiotherapy/ exercise physiology		
Other:		

Goals

Three to four things you want to achieve in the short and longer term (these need to link to NDIS supports).

	Goals	Main steps to take and required supports	What stops me or could stop me achieving my goals*
Social participation e.g. would you like to be more able to attend events, see your friends or make new friends?			
Independence e.g. would you like to get around the house or community on your own or with less assistance?			
Employment e.g. would you like to get a job, volunteer or change your work hours?			
Education e.g. would you like to attend school, university or a course?			
Health and wellbeing e.g. would you like to be more active or take up a sport?			
Living arrangements e.g. would you like to modify your home or live somewhere different?			

* e.g. anger management problems, difficulty remembering things, anxiety, seizure risk, reduced initiation, social difficulties, impulsivity, communication issues etc.

Planning meeting date:

The following classes of supports and services are specified in part only with effect from 1 July 2018:

Table 2

Item number	Descriptor
8[2] (in part)	assistance with travel/transport arrangements, but only if the services are with respect to specialised transport to school/educational facility/employment/community

Note 1: *The services specified in Table 2 would include things like a bus service which is available only to children with disability on a school route.*

Note 2: *The services specified in Table 2 do not include things like taxi, bus and train services available to the public at large, even if they involve vehicles, which have specific modifications to better facilitate their use by people with disability.*

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[1] Item number refers to the Item number for the class of supports in the table at subsection 20(3) of the *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018.*

MODULE 5: NDIS PLANNING MEETING

What is the purpose of this document?

To provide information on the planning meeting, what to expect and the review of plans.

To provide information about the planning meeting, what to expect, and the reassessment of plans.

Once you have been informed that you have been accepted onto the NDIS and are now a participant of the scheme, the NDIA or Local Area Coordinator will contact you by phone to organise a planning meeting. The NDIS Participant Service Guarantee (see Module 5: Resources) says that the NDIA should commence facilitating the preparation of a plan within 21 days. Give the NDIA a ring if you haven't heard from them within this time frame to find out what is happening.

Organising a planning meeting

When contacted by the NDIA to organise a planning meeting, there are a couple of things to be aware of and requests you can make. These are:

NDIS speak

The NDIA might refer to the planning meeting as a pre-planning meeting. They mean the same thing to you – this will be your opportunity to present your story, goals and aspirations and request supports (as detailed in Module 4). The differences are:

Planning meeting

Includes:

- NDIA planner
- you
- support person (if you choose).

And may also include:

- Local Area Coordinator (LAC).

Outcome:

Plan decision – a plan is developed.

Pre-planning meeting

Includes:

- Local Area Coordinator (LAC)
- you
- support person (if you choose).

Outcome:

A ***proposed*** plan is developed.

▼

Plan decision

The NDIA planner will develop the plan taking into account your proposed plan.

The plan ***may*** be different from the one you and the LAC proposed – generally with less supports.

Be aware…

You may be told that you can have a pre-planning meeting with your Local Area Coordinator and you don't need to do any preparation as they will assist you in the preparation.

- This is your planning meeting, you will not have another one – this is the only opportunity to give your input.
- If they offer to do it over the phone with you, request a face-to-face meeting.
- Some LACs and NDIA planners are great and really helpful – others do not understand mental health issues and you may find yourself needing to inform them.
- It is your choice, you don't need to prepare if you don't want, however keep in mind – experiences from others who have gone through this suggest a better outcome if you do your preparation. Some people have gone to their pre-planning meeting and come away with a $1 plan. This means that they have not been given any NDIS support.

What requests can I make?

You can request:

- to have a LAC with mental health experience
- to have an NDIS planner with mental health experience at your meeting
- to have a face-to-face meeting
- to have the meeting at a location that you feel most comfortable with (for example; your home, a coffee shop, LAC office, NDIA office…).

Keep a record of:

- any requests made
- who you spoke with (including the date and time)
- who you will be meeting with
- the contact details of the person you are meeting with
- when the meeting will be
- where the meeting will be.

Gather together all your prepared information and go over your self-advocacy plan. You will also need to take your myGov login and password, and your bank account details.

What happens at the planning meeting?

The planning meeting can be quite casual, like having a chat with someone. You will be able to give the LAC or NDIA Planner the information you have prepared and present the message you want to give them. They will ask specific questions and record them in their own words. You can ask the LAC or NDIA Planner to repeat back to you what you have said so you can know if they have really understood what you were saying.

For a list of questions you may be asked, **see** the 'Resources' section at the end of this module.

You can also ask them questions. If something they say doesn't make sense to you or you don't understand something they say – let them know and ask them to explain it a different way. You can also request an interpreter.

Even though the feel of the meeting can be casual, it is an **assessment**. The planning meeting is about your goals and the supports you need. The LAC or NDIA Planner will be trying to gather the information they need to identify if the supports are directly linked to your goals and aspirations and whether they meet the 'reasonable and necessary' criteria (**see** 'Module 4: NDIS plan preparation'). They will also be working out which category the supports fit in. The meeting is a practical administrative process for the NDIA and LAC.

The meeting will last for approximately 1.5 hours. If at any stage you are feeling overwhelmed and need a break, you can ask for the meeting to be rescheduled or to have a break. If this happens, talk with someone you trust to help with processing the information and emotions – sort of like a debrief. If the LAC or NDIA Planner finish the meeting quickly and you feel that there are more things to be said and discussed, let them know that you think this. Request a continuation of the meeting at a later date. If your meeting is with a LAC, you can ask them for a copy of the plan before it is submitted to the NDIA. It is up to them whether they want to do this, they can if they choose to.

A handy tip to prepare for your planning meeting could be to contact service providers prior to your meeting and ask for quotes for services. If you bring these quotes to your planning meeting, the LAC will have a better understanding of what funds you might need in your plan

What are the support categories?

The NDIS has 15 support categories that they will look at when developing your plan. Only the support categories that relate to your goals will end up being included in the plan. The support categories included will then be put under one of the NDIS support budget areas. These budget areas have different purposes and rules attached as to how they can be managed and will be explained in more detail in 'Module 6: Making your plan work for you'. They are also sometimes referred to as 'Support Purpose Areas'.

NDIS support budget areas	Purpose
Capital	Investment in assistive technology and home modifications
Core	Ongoing long term supports with everyday life
Capacity	Gaining new skills, resources and confidence so that as your capacity (skill set) grows, it will slowly reduce your need for assistance in these areas

It can seem confusing as there has been a shift from looking at your goals and the supports you need to achieve them, to looking at how they will be funded. The support categories and support budget areas are used for the purposes of funding; how funds can be spent and how to identify what the funds are being spent on within the NDIS funding categories.

This is an overview of how it all fits together:

Your goals and the supports you need to achieve them

These have been linked to the 8 NDIS outcome domains:

Choice & Control, Lifelong Learning, Daily Living, Relationships, Health & Wellbeing, Work, Social & Community Participation, Home

The supports you need to achieve your goals will be put into **15 NDIS support categories**

The support categories will then be put in an allocated **support budget (purpose) area**

Core

1. Assistance with daily living
2. Transport
3. Consumables
4. Assistance with social and community participation

Capital

5. Assistive Technology
6. Home modifications and Specialised Disability Accommodation (SDA)

Capacity

7. Coordination of Supports
8. Improved Living Arrangements
9. Increased Social and Community Participation
10. Finding and Keeping a Job
11. Improved Relationships
12. Improved Health and Wellbeing
13. Improved Learning
14. Improved Life Choices
15. Improved Daily Living

You will be asked how you want your plan managed

There are three different ways your plan can be managed:

- Agency Managed
- Plan-Managed
- Self-Managed

You decide at your planning meeting how you want to manage your plan. You can even decide to have a plan where different supports are managed in different ways. For example, you may decide to self-manage some of your supports and have the others be plan-managed. The NDIS Fact Sheet Managing your funding covers this in more depth (see 'Module 5: Resources' section of this module for website link). Your choices are:

Agency Managed

This means that the NDIA will manage your plan and that only NDIS registered providers will be able to provide the supports you need.

If you choose an Agency Managed plan, the NDIA will have complete control and responsibility for your plan.

Read about Agency Managed plans:
https://www.ndis.gov.au/participants/creating-your-plan/ways-manage-your-funding/ndia-managed-funding .

Plan-Managed

Your plan manager will basically help 'keep the books' for you; making the claims for services and paying the bills for the supports agreed in your NDIS plan. A plan manager can be chosen from a list of registered Plan Management Providers (list is available from the NDIS) or it may be a 'financial intermediary' such as you nominating a trusted person (third party). If you want to choose a registered plan management provider, make sure that the cost of this support is also included in your plan.

The plan managed option allows you much more flexibility; as you can choose your support providers from all that are available, not just NDIS registered providers.

Note there are some NDIS supports you can only access from a provider registered with the NDIS Quality and Safeguards Commission. This includes specialist disability accommodation, behaviour support services, and any support where the provider is using or likely to use a restrictive practice. This means any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability.

Read more about Plan Management:
https://www.ndis.gov.au/participants/creating-your-plan/ways-manage-your-funding/plan-management

Self-Managed

This means that you will manage the funds for your NDIS plan. You will need to understand budgeting and record keeping. If you have a Plan Nominee (as discussed in 'Module 1: Learning How To Self-Advocate'), they can also manage the funds with you. The NDIS has a great guide and information on Self-Management (web links to this guide are provided in the 'Module 5: Resources' section of this module).

A self-managed plan offers the greatest flexibility but more responsibility. To do this, you will need a myGov account set up to manage your plan.

It is important to note that the NDIA can change how your plan is managed, even if you decide you want to be self-managed. The NDIA will consider if you or your nominee have been convicted of an offence punishable by 2 years or more or involving fraud or dishonesty before they allow you to self-manage your plan.

If you are plan-managed or agency-managed, the NDIA can decide to make your plan agency-managed in certain circumstances, including if they think:

- you
- your nominee
- your plan manager
- a child representative

Are unlikely to spend your NDIS funds properly relating to:

- NDIS supports and
- in line with your plan.

Read more about Self-Managed plans:
https://www.ndis.gov.au/participants/using-your-plan/self-management

Read more about circumstances where the NDIA might say you can't self-manage your plan:
https://ourguidelines.ndis.gov.au/your-plan-menu/creating-your-plan/what-are-your-options-managing-your-funding/what-does-it-mean-self-manage-your-funding/when-cant-you-self-manage-your-funding

The plan-managed or self-managed options make it easier to obtain services;especially if you are living in a regional area.

What are some extra supports that you can discuss at the Planning Meeting?

Support Coordination

A Support Coordinator can help with finding services and supports that can help you to achieve your goals. They can engage the providers and develop service agreements, help you to use the participant portal that you will need for your plan (discussed in 'Module 6: Making your plan work for you'), link you in with community activities and help to resolve any issues or queries that come up. They can even help you with preparing for your next plan.

Tip: If you have already identified a support coordinator, you can provide the details in the meeting. If you haven't identified a support coordinator – you can ask the LAC to help you find one.

Support Coordination is allocated to the 'Capacity' budget area. This means the NDIA will expect that the Support Coordinator will be able to demonstrate to you how to do all these things for yourself in the future, so eventually you will not need this type of support. Starting your NDIS plan can be really confusing the first few times and support coordination can help with this. This doesn't mean that support coordination will be removed from subsequent plans automatically, it will depend on whether you have been able to build these skills yet.

Funding for support coordination is provided in your budget in addition to the supports you are requesting to meet your goals.

There are three different levels of support coordination:

Level 1: Support connection

Level 2: Coordination of supports

Level 3: Specialist support coordination

Specialist support coordination is a higher level of support. The focus is on reducing complexity in the participant's support environment and helping the participant overcome immediate and/or significant barriers in plan implementation. (Taken from: https://www.ndis.gov.au/providers/working-provider/support-coordinators/specialist-support-coordination)

If you are involved with any other governments service systems or believe your circumstances are complex, such as being homeless – speak with the LAC or NDIA Planner about this.

Information on Support Coordination is provided in the 'Module 5: Resources' section of this module.

You will need to request Support Coordination and explain why you need it.

Plan Management

If you want a Plan Manager to take responsibility for the budget side of your plan, it will be of no extra cost to you. The funds for a Plan Manager will be in addition to your plan and will not take away from any funds from your plan budget.

Specialist Disability Accommodation

Some people may require Specialist Disability Accommodation (this is also known as SDA). If you have very high support needs or an extreme functional impairment (using NDIS language), then this may be something you could request.

The NDIS law regulates who is eligible for SDA. To be eligible, a person must have an extreme functional impairment which impacts their ability to do daily tasks or must have very high support needs which family or friends can't meet. The NDIA will also need to be satisfied that the SDA will meet the NDIS funding criteria which means that you will need to tell the NDIA how the SDA:

- will help you pursue your goals
- is effective and beneficial for you
- is value for money
- is an NDIS support for you
- won't likely cause harm to you or other people

Housing Victoria provides further information on this. The website link is provided in the 'Module 5: Resources' section of this module.

The NDIS (Specialist Disability Accommodation) Rules 2021 (SDA Rules) sets out the eligibility for this type of support.

Supports for your carer (Support People)

The NDIS will look at funding some supports that maintain a family member's (carer) health and wellbeing. These may be direct supports for them but more often will be supports for you which in turn supports your carer. A Carer's Statement would be good to demonstrate both their needs and yours (see Carer's NDIS comprehensive checklist website link in the 'Resources' section of this module).

You will need to ask for these supports to be included in your plan. Read more from the NDIS: https://www.ndis.gov.au/understanding/families-and-carers/how-we-can-help-carers.

Supports for preparing you for your next plan

You can ask for supports to be included that will assist you with future goal and support planning, such as an occupational therapy assessment.

Did you know?

Your LAC will also meet with you to help you start your plan. This is called a **plan implementation meeting**. Let your LAC know that you want a plan implementation meeting.

Making changes to your plan

A plan cannot be varied or amended unless it is reviewed by the NDIA. Whenever a review takes place and the plan is changed, it will be considered a new plan.

The NDIS has 4 different ways to change a plan:

1. Scheduled reassessment

   This is a normal part of the planning cycle and will take place before the end date given on your plan. It is generally every 12 months however can be shorter or longer depending upon what is discussed at your planning meeting.

The NDIA sometimes conducts 'eligibility reassessments' which are different to your scheduled reassessment.

They are supposed to send you a letter to say if this is happening. If you get an unexpected call from someone with the NDIA, make sure you ask them if they are intending to assess your eligibility over the phone. It is important to be prepared for this kind of assessment because it can result in your funding being withdrawn if you are found to no longer be eligible.

You can request an in-person meeting with your support person/people present instead.

You can also ask them to call back at a scheduled time when someone can be there with you, or to call back when you have had an opportunity to gather evidence about your ongoing eligibility.

If they decide you are no longer eligible, you can request an internal review of that decision and, if you are still not satisfied with the outcome, you can go to the Administrative Review Tribunal.

There is more information here:
https://ourguidelines.ndis.gov.au/home/becoming-participant/leaving-ndis/are-you-still-eligible-ndis/what-happens-if-we-check-your-ndis-eligibility

DSC also has some information you may find helpful:
https://teamdsc.com.au/resources/ndis-act-explained:-eligibility-reassessments

2. Unscheduled reassessment
    - You can request an unscheduled reassessment if your circumstances change or you want to change your plan management. If your circumstances have changed, you will need to complete a 'Change of Circumstances Form' (**see** 'Module 5: Resources' section for web link to a Change of Circumstances Form and additional information). The NDIA have 21 days to decide if they will hold an unscheduled reassessment and 28 days to commence the reassessment from the time of their decision. (**See** 'Module 7: Appeals and Reviews' if you want to take this further). Look in the 'Module 5: Resources' section at the list of reasons that will not be accepted as a reason for a plan review.
    - The NDIA can decide to conduct their own unscheduled reassessment of your plan, which is called a CEO initiated plan change. This may be because they have been told your circumstances have changed and you haven't asked for a reassessment.

3. Plan variation

   You can request a minor variation to your plan, and you won't have to have another meeting. For example, it could be to change the reassessment date of your plan. Another example is if you want to change something about a particular support, such as for the support to be provided in a different way. You can request a variation for these reasons:

   - Plan length
   - Plan management
   - Change to supports
   - Crisis and emergencies
   - New supports
   - Small variations
   - Minor errors

   The NDIA can decide to do a variation of your plan themselves, which is another kind of CEO initiated plan change, for example if there is an emergency that requires funding or there is a mistake they need to fix.

4. Review of Decisions

   This is a formal review of a decision you are unhappy with.

   Look at 'Module 7: Appeals and Review'.

RESOURCES

1. Online resources
   - NDIA and LAC contacts
   - NDIS Booklets (*Planning* and *Using your Plan*)
   - NDIS Guide to Self-Management
   - Support Coordination information
   - Specialist Disability Accommodation information
   - NDIS Rules for Specialist Disability Accommodation
   - NDIS Carer Planning Checklist
   - NDIS Change of circumstances form and information
   - NDIS Planning Review Guidelines
2. Participant Service Guarantee
3. Questions that may be asked at a Planning Meeting
4. Support Coordination
5. Reviewing and changing a participant's plan

Online resources

NDIA office locations and Local Area Coordinator offices and contact numbers

www.ndis.gov.au/contact/locations

NDIS Fact Sheets – *Creating your NDIS Plan* and *Using your NDIS Plan*

www.ndis.gov.au/about-us/publications/booklets-and-factsheets

NDIS *Guide to Self-Management*

www.ndis.gov.au/participants/using-your-plan/self-management

Support Coordination information

www.ndis.gov.au/participants/using-your-plan/who-can-help-start-your-plan/support-coordination

Specialist Disability Accommodation information

www.housing.vic.gov.au/supported-accommodation

National Disability Insurance Scheme (Specialist Disability Accommodation) Rules 2021

www.legislation.gov.au/latest/F2020L00769

Carer NDIS Planning Checklist

www.carersaustralia.com.au/wp-content/uploads/2020/07/carer-checklist-may-2018.pdf

NDIS Change of circumstances form and information

www.ndis.gov.au/participants/using-your-plan/changing-your-plan/change-circumstances

NDIS Planning Review Guidelines

www.ndis.gov.au/about-us/operational-guidelines/planning-operational-guideline/planning-operational-guideline-reviewing-and-changing-participants-plan

Participant Service Guarantee

The information in this section outlines the timeframes for NDIS processes as at October 2024. The information can be found at https://www.ndis.gov.au/about-us/policies/service-charter/participant-service-guarantee

The timeframes set out below are the standards the NDIA aim to meet. However, there may be cases where the NDIA take longer to make a decision.

Getting started with the NDIS

What we will do	The most days it will take us
Decide who can use the NDIS	21 days
Make a decision about who can use the NDIS after we've been given more information	14 days

Getting a plan

What we will do	The most days it will take us
Approve a plan	56 days
Approve a plan for a child under 9 years	90 days
Make a time to have a meeting to start your plan if you want to	7 days

Reviewing or changing a plan

What we will do	The most days it will take us
Start setting up a plan reassessment	56 days before the reassessment date
Decide whether to do a plan reassessment, if you ask us to	21 days
Do a plan reassessment we have agreed to	28 days
Make small changes to a plan	28 days
Review our decisions if we need to	60 days

Making a complaint

What we will do	The most days it will take us
Fix your complaint if we can	21 days

Questions that may be asked at a Planning Meeting

Taken from 'Practice advice for mental health clinicians. What is asked in an NDIS planning meeting?'

Sourced from the NDIS for Mental Health Clinicians Resources page in the Mental Health Professional Online Development (MHPOD) Learning Portal

The questions outlined in this document are examples drawn from the NDIS *Outcomes Framework Pilot Study: summary report* (www.ndis.gov.au/about-us/publications/outcomes-framework-pilot-study-summary-report-2015#what-is-the-ndis-outcomes-framework) and the experiences of consumers and staff who have participated in NDIS planning meetings.

By understanding the types of questions that may be asked, and their relevance to the NDIS Outcome Domains clinicians will be able to:

- help consumers prepare for what may be covered in the planning meeting discussion; and
- identify and justify consumers' support needs in a language that aligns with the Outcome Domains and Planners' questions.

Domain 1: Choice and control

Exercising choice, decision making, and whether the participant would like to have more choice and control in their life. Questions that address this domain and could be asked in a planning meeting include:

- Are you able to choose who helps you?
- Are you able to choose what you want to do?
- Do you choose who supports you?
- Do you choose what you do each day?
- Who makes most decisions in/about your life?
- Do you feel able to advocate (stand-up) for yourself? i.e. do you feel able to speak up if you have issues or problems accessing supports?
- Have you ever participated in a self-advocacy group meeting, conference or event?
- Do you want more choice and control over your life?
- Has the NDIS helped you have more choices and more control over your life?

Domain 2: Daily living

Level of independence in the activities of daily living listed below. Questions that could be asked in a planning meeting include do you need support; do you get support and does the support you receive enable you to be as ***independent as possible***?

1. Domestic and community tasks: shopping, cooking, cleaning and meal preparation
2. Personal care: washing yourself, dressing
3. Problem solving
4. Travel and transport
5. Communicating with others
6. Getting out of the house
7. Finances or money
8. Reading or writing
9. Accessing and using technology
10. Self-advocacy and participation
11. Increasing activities of daily living

Domain 3: Relationships

Contact with family and friends, caring roles and support networks. Questions that could be asked in a planning meeting include:

- Do you have someone to call on for practical or emotional assistance, or in a crisis?
- Do you provide care/support for others?
- Do you have friends other than family or paid staff?
- Are you happy with how often you see family/friends?
- Do you feel lonely?

Domain 4: Home

Questions that could be asked in a planning meeting to address this domain include:

- Are you happy with your home environment?
- Where do you see yourself living in 5 years' time?
- Do you feel safe where you currently live?

Domain 5: Health and wellbeing

Questions that could be asked in a planning meeting to address this domain include:

- How would you describe your health? *(Excellent/Good/Fair/Poor)*
- Do you have a regular GP?
- Do you experience problems accessing health care services?
- Reasons for problems accessing services *(Access issues/The attitudes and/or expertise of health professionals/I don't have transport/I can't afford it/I don't have support)*
- Have you been in hospital in the last 12 months? How often?
- Thinking about my life in general now and in the future I feel *(delighted/pleased/mostly satisfied/mixed/mostly dissatisfied/unhappy/terrible/don't know)*.

Domain 6: Lifelong learning

School, learning and training. Questions that could be asked in a planning meeting to address this domain include:

- Do you get the opportunity to learn new things? *(Yes/No but I would like to learn new things/No and that's OK)*
- Do you currently participate in education, training or skill development?
- Are you in a class for students with a disability?
- Is it what you want?
- In the last 12 months, is there any course or training that you wanted to do but couldn't? Do you have the opportunities to learn new things?
- Do you want to access education, training or develop new skills?

Domain 7: Work

Experiences in the workforce and goals for employment. Questions that could be asked in a planning meeting include:

- Are you currently working in an unpaid job?
- Are you currently working in a paid job? *(Yes/No but I would like one/No and I don't want one)*
- What type of employment is it? *(Open employment/Australian Disability Enterprise/Supported Wage System)*
- Do you get the support you need to do your job?
- What is the main reason you do not have a job? *(Can't find one/Don't have support/Travel was difficult)*
- Has your involvement with the NDIS helped you find a job that's right for you?

Domain 8: Social and community participation

Hobbies, volunteering, involvement in community groups, feelings of safety, voting, leisure activities, feeling able to have a say. Questions that could be asked in a planning meeting include:

- Do you spend your free time doing the things you want?
- Do you volunteer anywhere or have any community connections (cultural, religious, disability)?
- In the past 12 months, is there anything that you wanted to do but couldn't?
- Have you been actively involved with a community cultural or religious group in the past 12 months?
- Do you know people in your community?
- How often do you feel you are able to have a say with the service that provide support for you?
- Have you had negative experiences in the community in the last 12 months?
- Has the NDIS helped you to become more involved?

In addition to these Outcome Domain questions, planners may also ask general questions about the participants' background, risks, safety, decision making and financial management.

Background information questions

Education level, type of housing, living arrangements, current/past employment, income, daily routine. Questions that could be asked in a planning meeting include:

- What time do you get up? Do you go out? Where do you go? With whom? How do you get there?
- Do you have any trouble
  - standing for 30 minutes
  - attending to house responsibilities
  - learning new tasks
  - attending community activities
  - with your emotional health
  - concentrating for 10 minutes or more
  - walking 1km or more
  - washing/bathing yourself
  - speaking with people you don't know
  - maintaining friends
  - managing day to day activities
  - managing day to day activities in the last 30 days (how many)?
- Are you receiving help now? Who are you receiving it from?
- Is there anything you couldn't do in the last 30 days?
- Is your current disability the result of an accident or event?
- When did you first notice your disability started to effect activities you do in your everyday life?
- Do you currently use aids or equipment?
- Do you think you might need assistance aids in the future?
- Do you use any continence products?
- Are you a recent school leaver?

Risks, safety, decision making and financial management questions

Questions that could be asked in a planning meeting include:

- Are there times when you don't feel safe?
- What do you do when you don't feel safe? *(Call someone/Manage it myself)*
- Does that usually solve the problem?
- Do you have any concerns about any area in your life about disability?
- What areas of your life do you have concerns about? *(Health/Home and/or where I live/Safety when I'm out/Money)*
- Do you have any worries with anger?
- If you need help in an emergency, do you have anyone you can depend on for help?
- How many people do you think you could contact for help in an emergency?
- Do you make your own decisions? Do you have a Guardian?
- Are you able to make decisions about things, like what you like to do or which companies you want to help you?
- Who helps you with this? *(Family and/or friends/Guardian and/or Nominee/Unsure)*
- Do you need help with your planning and getting your supports? Who would you like to help you? *(Support coordination and plan management options)*
- On a scale of 1 to 5, where 1 is low and 5 is high, what level of help do you think you need?
- Do you worry about people taking money from you?
- Has this ever happened?
- Do you feel you have enough help with your day to day finances?
- Who helps you with your finances? *(Family/Friends/No one/Unsure)*
- Do you want some help with your finances?
- Do you need help managing money?
- Do you receive a mobility allowance?
- Have you ever declared bankruptcy?
- If you choose to self-manage can you anticipate any problems that may arise?
- Do you agree to sharing your plan online with providers (personal details, NDIS number)?
- Who would you like to share it with?

Support Coordination

Taken from the NDIS website:

www.ndis.gov.au/participants/using-your-plan/who-can-help-start-your-plan/support-coordination

What is support coordination?

Support coordination helps you to make the best use of your supports in plan. Support coordination is a capacity building support which helps you to:

- Understand and use you NDIS plan to pursue your goals
- Connect you with NDIS providers, community, mainstream and other government services
- Build your confidence and skills to use and coordinate your supports.

A support coordinator or specialist support coordinator delivers support coordination services.

There are three levels of support coordination that can be included in your plan:

1. Support connection – This support is to build your ability to connect with informal, community and funded supports enabling you to get the most out of your plan and pursue your goals.
1. Support coordination – coordination of supports: This support will assist you to build the skills you need to understand and use your plan. A support coordinator will work with you to ensure a mix of supports are used to increase your capacity to maintain relationships, manage service delivery tasks, live more independently and be included in your community.
1. 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 you to manage challenges in your support environment and ensuring consistent delivery of service.

You may also wish to focus on a specific goal in your NDIS plan, such as those related to finding suitable home and living supports. You can use your support coordination funding to work with a support coordinator who has the skills, knowledge and experience to meet your specific needs.

How support coordination gets included in a plan

- Your funding is based on what support is 'reasonable and necessary' to pursue your goals, is a type of support recognised as an 'NDIS support' and is a support that is most appropriately funded by through the NDIS and not through other support services.
- Funding for supports also takes into account what support may be provide to you by your family, friends and other community services.
- Where reasonable and necessary, support coordination will be included in the Capacity Building budget. This is a fixed amount for a support coordinator to help you use your plan.
- If your plan describes (or 'states') the level of support coordination funded, you can only purchase this level of support coordination.
- If your plan does not describe the level of support coordination funded, you can choose to purchase the level of support coordination that suits your needs.
- Your planner can help you find and connect with a support coordinator.

Reassessing and changing a participant's plan

Summarised from the NDIS Operational Guidelines:

https://ourguidelines.ndis.gov.au/your-plan-menu/changing-your-plan

Your participant plan may need to be changed for many reasons. For example, you might need more supports, fewer supports, or different supports.

From 3 October 2024 the NDIS law dealing with participant plans changed to require that plans created after that date must not spend NDIS funding on any support included in their plan which is not also an ‘NDIS support’. This means that participants who want to change the supports in their plan will need to be aware that any new supports that they would like the NDIS to fund will need to be supports listed as ‘NDIS supports’.

The below guidance comes directly from the NDIA.

When would the NDIAdecide not to do a plan reassessment?

- If you ask the NDIA to do a plan reassessment, it needd to think about whether your current plan can meet your support needs. It also thinks about the reason you are asking for a plan reassessment.

Reasons the NDIA would decide to not do a plan reassessment include:

- if you don’t have any new information or evidence
- if your request is only about wanting more funding, or NDIS supports that other participants have
- if informal, community or mainstream supports can meet your needs
- if your plan is suspended.

What if you don’t have any new information or evidence?

- The NDIA generally won’t change your funding if there’s no new information about how your support needs have changed.

For example, it generally won’t do a plan change if:

- you changed your mind about the NDIS supports you want after it approved your plan
- there’s no evidence your support needs have changed. That is, you can still do the same things you could do when we approved your plan
- there’s not enough evidence to show you need changes to your NDIS supports, such as more therapy.

You can give the NDIA new information or evidence anytime there is a change in your situation.

Learn more about what evidence do you need to give us before we create or change your plan?

What happens if you make a request for more funding or for supports that other participants have?

The NDIA won’t change your funding just because you want more NDIS supports or the same supports as another participant. You will need to provide the NDIA with new evidence and information as to why the funding is required for you to access the specific support.

If you do not provide the NDIA with evidence that specifically addresses why the support you seek will assist you to meet your goals the NDIS will be unlikely to add that support to your plan.

The evidence you provide to the NDIA must relate to the impairment that you were granted access to the NDIS for.

What happens if the supports you request can be provided through informal, community or mainstream services?

The NDIA generally won't change your funding if friends, family or other services can meet your needs.

The NDIA will not fund supports that are not 'NDIS supports' (you can find a list of the types of supports that are 'NDIS supports' here: What does NDIS fund? | NDIS).

If the type of support you seek funding for is something that you would reasonable expect family or friends to do for you, such as short-term care, the NDIS will generally not fund this as a support.

What happens if your plan is suspended?

- The NDIA cannot change your plan if your plan has been suspended.
- A plan suspension happens if:
  - You have been overseas for more than 6 weeks (however, there are some situations where the NDIA can extend the 6-week period of your plan); or
  - You do not claim compensation that you are entitled to after the NDIA asks you to, for example, after you have had an injury.

You can read more about plan suspensions here: When can't you use your plan? | NDIS

When would the NDIA decide not to do a plan variation?

The NDIS laws sets out when the NDIA can do a plan variation.

The law says that a plan cannot be varied if the requested support does not meet the NDIS funding criteria (of being an NDIS listed support and being 'reasonable and necessary') or for the following reasons:

- Your plan has been suspended or has ceased
- You have flexible funding left in your plan that can be used to fund your requested support
- Your situation has changed significantly and a reassessment of your plan is now required
- You need more funding to help with a new or changed goal and the request is not minor
- Your request for a variation is to avoid or replace an existing review of appeal pathway
- You do not have enough evidence to support a variation to your plan
- Your plan has been varied several times and still does not meet your goals. In this case a reassessment of your plan is needed.
- Your needs can be met by informal, community or mainstream supports
- You have used all the funds in your plan quicker than the specified timeframe and have not provided and have not provided evidence to tell the NDIA why this was the case.

How can the NDIS support you if the NDIA are not able to vary your plan?

If the NDIA decide not to change your plan, it can link you with other services who may be able to help you.

Talk to your 'my NDIS contact', support coordinator or recovery coach about how they can help you get other supports you may need.

If you don't agree with the NDIA's decision not to change your plan, **you can ask us for an internal review of that decision.** This means another one of the NDIA's staff, who wasn't involved in the original decision, will look at whether we made the right decision.

Learn more about **reviewing our decisions.**

MODULE 6: MAKING YOUR PLAN WORK FOR YOU

What is the purpose of this document?

To provide information on your NDIS plan and how to use it.

What does an NDIS plan look like?

When you receive your approved NDIS plan, it will have a letter with it saying that your plan has been approved. It should have a date when the letter was written (keep the envelope – the postdate stamp may be important if the date on the letter is weeks earlier than you received it) and will include information such as:

- How long your plan goes for
- The total amount of funding in your plan
- How the funding is allocated between core supports, capacity building supports, and capital supports
- How your plan was developed
- How the funding will be managed
- How to request a review if you disagree with the decision
- What to do if your circumstances change
- Contact details

An example of the approval letter template is available for you to view on the NDIS website.

Reminder: Plan management was discussed in 'Module 5: NDIS Planning Meeting'.

Your actual NDIS Plan follows the letter and looks like this:

Note: The NDIA can change the plan format, however the structure (what the plan is made up of) will be similar.

You can see the most recent version of an NDIS Plan (as at October 2024) on the NDIS website. All wording is what the NDIA write – anything in 'italics' has been added. For more information about NDIS plans, visit:
https://improvements.ndis.gov.au/participants/understand-your-plan/your-next-plan

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(Your name) NDIS plan

Your plan has personal information about you. You can share it with anyone you choose, including your providers. You can also choose not to share your information.

NDIS number:

How you like to be contacted:

My NDIS contact:

NDIS plan start date:

NDIS plan reassessment date:

We will check-in with you before your plan reassessment date.

Your NDIS funded supports

Total budget amount:

Your NDIS plan includes:

For example, core supports, capacity building supports, capital supports, recurring supports.

Core supports

Core supports help with your everyday activities, like help to take part in activities in the community.

Usually, Core supports are flexible. If your Core supports are flexible, you will have lots of choice over the Core supports you buy under your plan.

Sometimes your Core supports will be stated in the plan. If your Core supports are stated, you can only use the funding to buy the approved supports in the Core supports budget. It cannot be used to pay for anything else.

Total Core supports funding: $ *amount given*

There will then be a list of these supports as well as a description of how they will help you to meet your goals, and how much is budgeted for each of them.

Capacity Building supports

Capacity Building supports help you build your skills and increase your independence.

We will talk with you about your progress and outcomes from these supports at your plan reassessment. Your Capacity Building supports budget is stated. This means you can only use this funding to buy the supports described in the Capacity Building budget. It cannot be used to pay for anything else.

Total Capacity Building supports funding: $ *amount given*

There will then be a list of these supports as well as a description of how they will help you to meet your goals, and how much is budgeted for each of them.

Capital supports

Capital supports include high-cost assistive technology, equipment, home or vehicle modifications, or Specialist Disability Accommodation.

Your Capital supports funding is stated. This means you can only use this funding to buy the supports described in the Capital supports budget. It cannot be used to pay for anything else.

Total Capital supports funding: $ *amount given*

There will then be a list of these supports as well as a description of how they will help you to meet your goals, and how much is budgeted for each of them.

Recurring supports

This is funding the NDIS pays you that you don't need to claim for.

Your recurring supports funding will be paid regularly to your nominated bank account. The amount shown below is not included anywhere else in your NDIS funded supports.

Total Recurring support funding: $ *amount given*

There will then be a list of these supports as well as a description of how they will help you to meet your goals, and how much is budgeted for each of them.

(Your first name) Information about you

Your strengths

This will be a few paragraphs about you and your usual activities and things you like to do.

Your living arrangements, relationships and supports

This will be a few paragraphs about where you live and with whom, and any care you receive currently.

Your daily life

This will be a few paragraphs about your routine.

Notes

This is where you can add notes you'd like to talk about with your My NDIS Contact.

Your goals

Your goals are set by you and written in your own words. They help the people supporting you to know what you want to work towards and the things that are important to you. Your goals can be big or small, short term or long term, broad or specific. They can be about anything you want to work towards. You can change or update your goals at any time.

There will then be a list of the goals you have chosen, with a description of how you would like to work towards that goal.

Your supports

Your current informal, community and mainstream supports

There will then be a list of all your supports, including a description of the support (whether it is informal, community, or mainstream), who provides it, and how often you receive it, and the type of support provided.

New informal, community and mainstream supports

There will then be a list of all the supports you would like to access, including a description of the support (whether it is informal, community, or mainstream), how you will find It, and further information you feel you need to know to participate.

What to do if something changes

Has your situation changed?

If so, this may change your NDIS plan or supports. It is important that you contact us about any change in your circumstances.

A change could include:

- compensation you are applying for or have received
- significant changes to your disability support needs
- starting school
- changes to your home and living situation
- looking for work
- no longer wanting to be a part of the NDIS.

We're here to help:

Online

- NDIS website www.ndis.gov.au
- Internet Relay Users www.relayservice.gov.au
- NDIS mailbox enquiries@ndis.gov.au

Phone

- NDIS National Contact Centre **1800 800 110**
- TTY Users **1800 555 677**
- Speak and Listen Users **1800 555 727**
- If you need help with English **131 450**

In Person

You can find your closest local area coordinator, early childhood partner or NDIS office on our website. Go to ndis.gov.au, select Contact, then under Offices and contacts in your area you can search your area.

There will then be some general information about the NDIS attached to your plan to help you start to use your plan. This section is called 'Welcome to your NDIS plan' and it covers:

- Who can help you start your plan
- Managing my NDIS funding
- Using your plan to buy supports
- Support claim types
- Protecting your plan from fraud
- NDIS glossary

If you would like to see what the 'Welcome to your NDIS plan' section covers, you can see an example here.

I have my plan, what now?

You now have a physical copy of your plan and there are a few things you will have to do. We will look at each one separately, but before we do, this is an overview of the steps you will take:

1. Receive your plan

If you are not happy with a decision, you can ask for a review of the decision.
See the Appeals and review module.

2. Activate your myplace portal

3. Gather information
   - length of plan
   - what budget areas and support categories are included.

4. Relook at your goals…
   What goals have been funded and for how much?

If some of your goals have not been given funds – ask your Local Area Coordinator where you can get the supports from.

5. Make a budget

6. Choose your supports

7. Hire a service to provide your supports

Accessing my plan on myGov account

Your plan will also be available on your myGov account. There is a specific NDIS portal called the 'myplace portal'.

An activation code should be sent to you with your letter and plan. If it isn't, you will need to get the activation code for this portal from your NDIS contact, which will be your Local Area Coordinator (LAC). Your LAC will explain what you need to do. Once you receive the activation code, you will only have a number of days to set up the portal. It is similar to other government portals you may have on your myGov account, such as Centrelink and Medicare. It will be a place where your NDIS information is kept, you can upload new information and you can receive notifications from the NDIA.

If you have chosen to self-manage your NDIS budget, you will need to use the portal to create and manage service bookings and put in payment claims. There is also a 'provider finder' application available for use. An NDIS myplace Step-by-Step Guide is available, (**see** the link to the website in the 'Resources' section).

If you are having problems with the myplace portal, some troubleshooting tips are available in the 'Resources' section.

How do I read my plan – what does it mean?

Look for the date when your plan starts and finishes. The time length of your plan is how long your budget is for. For instance, if you have a 12-month plan, the funds in your plan are meant to cover the full 12 months.

Look at what budget areas are included in your plan:

- Core
- Capital
- Capacity.

Under the heading of each budget area will be money allocated to a specific NDIS Support Category (remember the 15 different NDIS Support Categories in 'Module 5: NDIS Planning Meeting'?)

The support categories in your plan are the ones that are linked to your goals.

Your plan will tell you what each budget area means and how you can spend your funds for each budget area. For example:

- Funds in the **Core** budget can be used for any one of the four support categories in that budget.
- Funds in the **Capacity** budget can only be used for the support category it is attached to.

Your plan will tell you if you have a:

- **'Stated' support** – meaning the funds can only be used for that specific thing
- **'In-kind' support** – meaning the service has already been paid for.

Tip: The NDIS has produced a couple of guides that will really help you to understand and use your plan:

- *Fact sheet: using your NDIS Plan*
- NDIS *Guide to Self-Management*

These can be downloaded from the NDIS website (web links provided in 'Resources' section – 'Module 5: NDIS Planning Meeting') or you can ask your LAC for paper copies.

Think about what supports or services you need

Your plan will say what your goals are and what the funding in your plan can help you achieve. They may even make suggestions about what the funding can be used for.

Make a list:

- on what goals you have
- what your immediate needs are
- what sort of support you want, to achieve the goals and meet your needs
- how often you will need the support and for how long.

Tip: If you prepared written goals for the Planning Meeting ('Module 4: NDIS plan preparation'), you can use those.

Ask your LAC for suggestions on how to get supports for your goals that have not been given funding through your NDIS plan…

Make a budget for each support

Before you start ‘shopping’ around for your supports, you will need to know how much the supports will cost (approximately) and if your funds will cover the costs of your support. When it is written down, it becomes your budget. This budget is a guide for you. If there is something you really want, but will cost more than you have available, you can:

- if the funding for your support is self-managed or plan-managed you can try and negotiate a better price for the service/support
- use some of the funds from another support that isn’t as important (***remember:*** *if it is in your Capacity Budget – the funds can only be used within the same support category)*
- rethink how often you will need the support
- think about other ways you might be able to get different supports to free up more funds.

A simple way of working out support costs is to use the Support Calculator: www.supportcalculator.com.au

To use the Support Calculator:

1. Choose the support category (that is in your plan).
2. Choose the type of support you want (click on ‘select support item’ and a list of supports will be shown with how much they cost per hour).
3. Select how many hours a week you want the support for (you can also select how many hours every fortnight or month).
4. Press ‘add row’.
5. This creates a list that will be added to for each support you select.

   The list will provide information on each support:
   - Item name
   - Item number (NDIS code which links a support to the NDIS funding)
   - Unit price (how much it costs per hour)
   - Hours per week
   - Total cost for the support for a year.

This list can be printed off and be used as your budget. The NDIA also has a budget calculator you can use. This calculator can help you understand how much support you have available in your plan. It is based on how much funding you have available and how long you have left in your plan:
https://www.ndis.gov.au/participants/plan-implementation-directory/budget-calculators

The Australian Foundation of Disability Organisations has put together some resource videos and fact sheets on financial literacy for people who self-manage their NDIS plan.

Thinking creatively with the NDIS 'support item'

A 'support item' is like a title or a heading for a support that comes under a support category. For example:

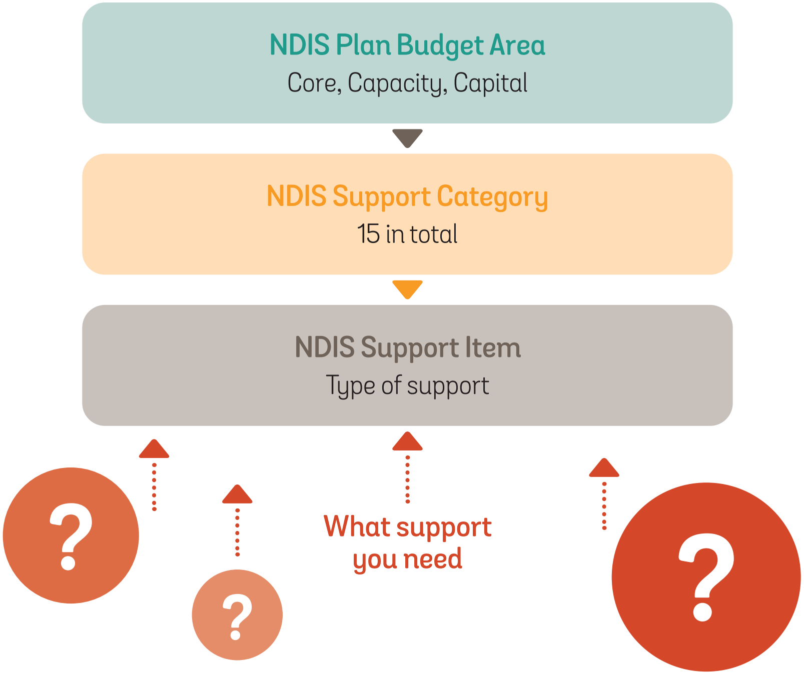
Support Category Name:	*Increased social and community participation*
Type of support (Support Item):	*Skills development in a group*

There is also an item number attached to each 'support item'. This item number is often called a 'line item'. It is what service providers and the NDIS use to identify the support against the funding the NDIS provides. For example:

Skills development in a group 09_007_0117_6_3 (line item number)

Remember the 15 Support Categories in 'Module 5: NDIS Planning Meeting'? Each one was numbered 1–15. The first 2 numbers of a line item represent the support category it comes under.

Not all types of supports are listed as a 'support item' and given a 'line item number'. If there is a type of support you identify and it is not listed – think about which 'support item' it is most like. The NDIA call this a 'best-fit' approach.



Getting started with your plan

You know what supports you want, you have an idea of your budget – now you can start searching for services or people that can provide you support. The NDIS have a fact sheet called 'working with providers' that could help in identifying providers that you can interview, to see if they can help in identifying providers that you can interview, to see if they can provide the support you want. That's right – you get to interview them because you will be employing them to provide you with support.

You can speak with your LAC, use your myplace portal, do an internet search, contact your local council and ask people around you about what services are out there that could provide the supports you need. If you need some assistance in doing a web search, you could ask at your local library. You could also go to your local community neighbourhood house to see if they can help. If you get stuck, you can always ring the Victorian Mental Illness Awareness Council NDIS team and they may be able to help you. (Refer to contact details in the 'Resources' section.) When you start interviewing and engaging services (hiring them), you will need to be clear about what you want and need them to do. If you have a Support Coordinator, they will be able to do all these things for you and show you how to do it as well.

Use the IMHA self-advocacy plan.

Interviewing support services

The NDIS provides a list of questions you may want to ask your chosen support service. When 'interviewing' the support services keep in mind what your preferences are and what support you want provided.

> **'How do you choose providers to deliver your services?**
>
> You may already have used some service providers before you joined the NDIS and you may choose to work with them again. You may also want to try new providers when you become an NDIS participant. When considering a service provider, talk to them about your goals and discuss how they can help you work towards them. Here are some questions you may ask:
>
> > Are you an NDIS registered provider?
> >
> > How will you help me achieve my goals?
> >
> > How much does your service cost?
> >
> > Can I choose which staff will work with me?
> >
> > Can you provide the service at a time that suits me? How can I make a complaint or resolve a payment issue?'

You may also want to ask questions such as:

- Are you willing to sign a service agreement?
- Will you be able to provide me with a progress report? *(This will be useful for your next planning meeting)*
- Do you charge administration fees? If so, what are they? *(This will need to be taken into consideration as it will mean less funds for the support)*
- Do you charge a 'sign-up' fee and a 'exit' fee? If so, how much? *(Service providers should not charge exit fees)*
- Are these extra fees (if any) negotiable? *In other words, can they be removed or reduced*
- Will the staff member be experienced in mental health issues? *(What training have they had, are they provided with ongoing training?)*
- What happens when the staff member is sick or goes on holidays?
- Do you have an ABN? (Australian Business Number). *All services and people you employ must have an ABN*

Remember, it is your choice who will be providing you services. You are interviewing them to provide you support, not the other way around. You might like to provide the service provider with a scenario and see how they respond. For example you might say, 'If I was feeling anxious on a day of support how would you as my support worker help me during our time together?'

Note: *A Service Provider Interview Sheet is provided in the 'Resources' section of this module.*

The questions you ask might be different for different supports. For example, if you are hiring a person to do your housework or mow your lawn – you wouldn't need to ask them how they could help you achieve your goals or if they would sign a service agreement. You would just need to find out if they had an ABN number, how much they charge, how they want to be paid and when they could do it. (Just make sure your keep all receipts from them).

Look at 'Clickability' to see if they have had any reviews.
Australian Disability Services: rated, reviewed and reliable
clickability.com.au

Hiring a service

When you have decided which service provider you want to use (it might be more than one depending on what supports you are wanting), you can ask them to develop a Service Agreement with you.

A Service Agreement is like a contract between the service provider and you. It sets out what your obligations are to each other. For example, it might include:

- what supports they'll provide
- how long they'll provide the supports
- how much the supports will cost
- how you can change or end your service agreement.

Remember to read the service agreement before you sign. You can ask for changes and additional information to be included if you want. When you are happy with the agreement, then you can sign. Make sure you keep a copy of the agreement.

The next thing you will need to do depends on how your plan is being managed.

Beware

There are lots of service providers – some will be great, some not so great. Like anything you want to purchase, feel free to 'shop around' to make sure it will suit you.

There are two types of providers:

Registered providers are registered with and regulated by the NDIS Quality and Safeguards Commission. They must meet strict conditions for the quality and safety of their services. They can't charge more than the NDIS Pricing Arrangements and Price Limits.

Unregistered providers aren't registered with the NDIS Quality and Safeguards Commission. They can choose to charge prices below or above the price limits. There are some supports they are not allowed to provide (in the list below.)

All providers must follow the NDIS Code of Conduct and have a complaints process. The NDIS Code of Conduct requires both registered and unregistered providers to not charge you more than they would charge anyone else for the same support.

You must use registered providers for:

- any parts of your funding that are Agency-managed
- some specific supports, including plan management, supports that will likely involve a regulated restricted practice, behaviour support and Specialist Disability Accommodation (SDA).

For other supports, if your funding is self-managed or you use a registered plan manager, you can choose either registered or unregistered providers.

Who is managing my plan?

Look to see if your plan is being self-managed, plan-managed or NDIA managed. It may even be a combination of management.

Booking a service is done differently depending on how your plan is managed. To book a service:

- Self-Managed: You can make the arrangements straight away. When you need to pay them, you can either:
  1. Use your own money and claim it back from the NDIA through your myplace portal.
  2. Send a payment request to the NDIA through your myplace portal and wait for the money to be put in your bank account. If you are doing this, let the service provider know it might be a few days before you can pay them.

- NDIA managed: You will need to give your NDIS Registered Provider:
  - your NDIS number
  - date of birth
  - the support categories that you have been funded for.

  They will make a 'Service Booking' on your behalf in their myplace portal.
- Plan-Managed: Your Plan Manager will organise any payments that need to be made for you. You will need to send a copy of all invoices or receipts to your Plan Manager.

  A 'Service Booking' is the way the NDIS pays for services and supports you receive if you are Plan-Managed or NDIA Managed.

These steps are looked at in:
- *Using your NDIS Plan*
- NDIS *Guide to Self-Management*.

What happens if I want to change a service provider?

There might be a reason that you need to change from your current service provider to another one. It's okay to do this – remember, the NDIS is about giving you choice and control.

This is another stage where you will need to self-advocate.

Some reasons you might want to change providers could include:

- your needs are not being met by the support being provided
- you are not happy with services provided, such as:
  - not turning up
  - cutting your hours short
  - not responding to your requests
  - never returning your phone calls
  - not providing you with information you may need
  - charging you for things you don't get
  - not doing the things they said they would do
- you are not happy with the way your supports are being delivered.

You can:

- make a complaint to the service provider
- make a complaint to the NDIS Quality and Safeguards Commission (contact details in 'Resources' section)
- change service providers.

Or if you think that the service provider is conducting fraudulent activity (cheating) or price gouging (raising the **price** of services to an unreasonable or unfair level), you can contact the NDIA Fraud Reporting line (contact details in 'Resources' section).

Relook at 'Making Complaints' in 'Module 1: Learning how to self-advocate'. Contact numbers are in the 'Resources' section, module 1.

If you do need to change service providers...

- let the NDIA know
- let your Plan Manager know (if you have one)
- be aware that there might be a gap in time before you start receiving supports from the new service
- be aware of hidden costs – such as start-up fees and exit fees
- If your plan says you need to use a particular service provider, you can request a variation to your plan to change service providers.

Make sure you keep records...

It is really important that you keep records of everything. Keeping records can:

- be used for evidence in future planning
- be used for evidence in making complaints
- will be needed for accountability and are requirements of the NDIS funding provided to you (you may get audited if you are self-managing).

What sort of things can I keep as records?

- service contracts and agreements
- invoices for services
- receipts for services (including services like lawn mowing, house cleaning etc.)
- reports from services (such as progress reports and recommendations)
- assessments (such as an Occupational Therapy assessment)
- record of when services are provided (you might want to write this on a calendar or diary)
- record of phone contact (include date, length of time, who you spoke with and what the call was about). *Some services charge for phone calls... this will be handy to check that you are not being overcharged*
- write down any blocks of time you were unable to use your NDIS supports (it may be because you were in hospital or you were on a holiday)
- keep any supporting documents for the reason you did not use NDIS supports during a particular time (such as hospital discharge papers). These can be used as evidence in your future planning meeting.

Tips for record keeping:

- take copies of anything that has to be sent in to the NDIS
- keep all your records together – make a file
- keep your invoices and receipts for 5 years (this is the law under the Australian Tax Office)
- write everything in a diary.

RESOURCES

1. Online resources
    - Fact sheets: *Using your NDIS Plan, Managing your funding, and Working with providers*
    - NDIS myplace portal step-by-step guide
    - NDIS Change of circumstances form and information
    - NDIS Price Guides
    - Support Calculator
    - Clickability
2. Contact numbers
    - VMIAC
    - NDIS Quality and Safeguards Commission
    - NDIA Fraud Reporting Line
3. Troubleshooting the NDIS 'myplace' portal
4. Service Provider Interview Sheet

Online resources

Factsheets: *Using your NDIS Plan, Managing your funding, and Working with providers*
www.ndis.gov.au/about-us/publications/booklets-and-factsheets

NDIS myplace portal step-by-step guide
www.ndis.gov.au/participants/using-your-plan/managing-your-plan/how-use-myplace-portal

NDIS Change of circumstances form and information
www.ndis.gov.au/participants/using-your-plan/changing-your-plan/change-circumstances

NDIS Price Guides
www.ndis.gov.au/providers/pricing-arrangements

Support Calculator
www.supportcalculator.com.au

Clickability. Australian Disability Services: rated, reviewed and reliable
clickability.com.au

Contact numbers

VMIAC
Tel: 9380 3900

NDIS Quality and Safeguards Commission
Tel: 1800 035 544

NDIA Fraud Reporting Line
Hotline: 1800 650 717

Troubleshooting the NDIS 'myplace' portal

I can't get myplace to work!

If you have been having trouble accessing the online portal, request a new activation code, as this seems to have worked for many people. You have to sign into myGov, click on the services button, click the red 'unlink' button next to NDIS. A screen should then pop up asking for the new activation code. Make sure you do this as soon as possible after receiving your new activation code, as they only last a week.

If you are still receiving error messages, it might be because your bank details have not been recorded. Apparently, all participants have to have their bank details recorded, even if they are agency managed. If you haven't put your bank details in through the portal, ask your LAC for a Bank Detail form and where to email it.

One last thing to try is a different browser, for example Internet Explorer, Mozilla Firefox or Google Chrome.

If none of these are working, then you are left with only one option: to harass NDIS until someone is able to fix it. First contact your LAC and ask for IT support, and if that does not provide a solution then they will probably suggest a plan review, as that should resolve all the issues.

I can only link one child!

It is often the case that people with multiple children accessing NDIS have trouble linking their myGov account to two or more NDIS accounts. The best thing to do is link one child, and once that is working successfully, unlink that child and link the next child. Then unlink that child and link the first child, then link the second child.

I can get into the portal, but then...

If your online portal is working, but when you go to 'provider finder' you are having issues, ensure you do not have a 'pop-up blocker' installed. A window should pop up asking you to set your location. If this does not work, send NDIS an email via their portal feedback form. Meanwhile try using some of the new search engines for service providers out there now like espyconnect, and carenavigator.

Written by Sophie Luiker
www.ein.net.au/troubleshooting-the-ndis-myplace-portal

Service Provider Interview Sheet: questions you can ask possible Service Providers

1. Are you an NDIS registered provider?
2. Tell them your goals. How will you help me achieve my goals?
3. How much does your service cost?
4. Can I choose which staff will work with me?
5. Will the staff member be experienced in mental health issues?
6. What happens when the staff member is sick or goes on holidays?
7. Can you provide the service at a time that suits me? Give some times that you would want the service/support.
8. How can I make a complaint or resolve a payment issue?
9. Are you willing to sign a service agreement?
10. Will you be able to provide me with a progress report? How often?
11. Do you charge administration fees? If so, what are they?
12. Do you charge a 'sign-up' fee and a 'exit' fee? If so, how much? *(Service providers should not charge exit fees)*
13. Are these extra fees (if any) negotiable? *In other words, can they be removed or made less*
14. Do you have an ABN?

Add any other questions you want to ask...

MODULE 7: APPEALS AND REVIEWS

What is the purpose of this document?

To provide information to guide a person through the NDIS appeals and review process.

The National Disability Insurance Agency (NDIA) recognises that there may be some decisions they make that you will not agree with. There are a number of decisions they make that can be reviewed (see 'Module 7: Resources' section at end of module for reviewable decisions). The NDIS law sets out a pathway for you to disagree with the NDIA's decision and ask for it to be relooked at. It is like getting a second opinion.

The appeals and review process is the pathway for you to officially request that the decision made by the NDIA to be relooked at by a different person.

What is the 'appeals and review' pathway?

An overview of the appeals and review pathway looks like this:

1. You receive a decision from the NDIA that you don't like.
2. You ask the NDIA to conduct an internal review within a 60 days timeframe.
   This is called a 'Review of a Reviewable Decision'.
3. You receive an outcome of the Internal Review.
   If you still do not agree with outcome…
4. Ask the Administrative Review Tribunal (ART) for a review within 28 days.

Now let's look at this step-by-step because while this may look fairly simple, there are many things you need to know and do to prepare for this process. It is a very long process and there are things that need to be done within a certain time, however you will have choices at each stage. The most important thing in this whole process is you and your wellbeing – it can be an extremely distressing time for you. If you have supports, use them. Let people know that you are starting this process and will need assistance along the way. You can also speak to an NDIS Appeals and Review Advocate for advice and support.

Note: *A list of NDIS Appeals and Review Advocates can be found at the end of this module.*

Keeping records

A record of your contact with the NDIA and Local Area Coordinator (LAC) will show what has been said and done in relation to your NDIS journey; it basically tells the story of what has happened. Records can also be used as 'evidence' to back up your story. Here are some suggestions of things you can keep as records:

- **Any written material you have received from the NDIA or LAC** including letters and NDIS plans.
- **Envelopes that the letters came in.**

  The NDIA sometimes puts a date on your letter that is much earlier than when you received it. The date stamp on the envelope can show when you finally got the correspondence (letter). The difference in time can be an important factor in the Appeals and Review process as there are strict timelines for when things need to be done.
- **Copies of documents you have sent or given to the NDIA or LAC** such as reports prepared by Allied Health professionals and your Access Request Form.

  The NDIA will not always give you back copies of anything you have sent off to them so make sure you keep a copy of everything you send.
- **Phone conversation records.**

  Write down any conversations you have with the NDIA or LAC, whether you rang or visited them or they rang you. It may be useful to have a diary or an exercise book to keep everything together. Things to include are:
  - date and time
  - who you spoke with
  - what the call was about
  - what the outcome was – what had been decided or requested.
- **Attempts to contact the NDIA or LAC.**

  There may be times where you have rung up the NDIA or LAC and not been able to get through or have left a message. Write down the date and time you made these attempts because it will show you have tried to make contact.
- **Any correspondence you receive from the Administrative Review Tribunal (ART) or lawyers (if you have them).**

Tip: Start a file to keep all your information together.

Appeals and Review Pathway

Step 1: You receive a decision from the NDIA you don't like

Most people decide to go down the review and appeals pathway because of the NDIA's decision about their eligibility to access the NDIS (for example, they made a decision that you do not meet the access requirements) or a decision about their NDIS plan (for example, they made a decision not to approve funding for a support you requested in your plan).

What to do if you don't like the NDIA decision on your eligibility…

If you have been refused access to the NDIS, the NDIA must send you written notification of this decision. They will send you a letter saying you have been denied access (not accepted into the NDIS) and they must provide reasons for why they made this decision.

When people receive a letter saying they haven't been accepted, they can have feelings of helplessness and confusion. If this happens to you, know that it can be a normal response to a rejection of help. You know what you experience each day and how your mental health issues impact your life. The evidence you have collected from health practitioners such as doctors, psychiatrists and occupational therapists has highlighted your psychosocial disability. It has been a time where you have had to focus on all the things you find difficult to do. It is amongst all this emotional upheaval that you receive the NDIS letter denying access and it can feel so wrong.

The decision makers at the NDIA haven't walked in your shoes or experienced the emotions you have been dealing with. The only way they can make their decision is on the written information you have provided them with and most decisions to deny access result from a lack of evidence or the evidence hasn't been worded in a way that the NDIA need. The letter can seem incredibly impersonal and cold as it focuses on facts only.

The letter will say that you (meaning your evidence) have not met the requirements of NDIS eligibility. The NDIA will reference their decision making to the:

- *NDIS Act 2013*
- *NDIS (Becoming a participant) Rules 2016*
- *NDIS Operational Guidelines.*

Put on your detective hat… The reasons given in the letter will provide clues as to what you will do next.

Remember, most decisions are made because:

1. there has not been enough evidence provided
2. the evidence provided has not been written in a way that demonstrates that your psychosocial disability is permanent and significant
3. there is no evidence to suggest that you have tried all treatment options that are likely to remedy the impact your disability has on your life.

This stage is important as the NDIA will allow further information (also known as evidence) to be provided before you request a formal internal review. It's like getting a second chance and hopefully, with new evidence provided, you will not have to go down the path of a review and appeal. If this is what you are going to do, then you need to let them know and act quickly.

What to do next…

- look at the reasons the NDIA have given for denying access
- look at the evidence you had already provided them.

Did your health practitioner write that there was no 'remedy' (meaning cure)?

This used to be a question on the Access Request Form but it has now been removed. The NDIA still assess against it though, so your health practitioner will need to physically write it.

Did your health practitioner write that you will require NDIS supports for your lifetime?

This means that your health practitioner will need to tell the NDIS whether your impairments are enduring so that you will require NDIS supports on an ongoing basis. You may not be deemed to be eligible to access the NDIS if the medical evidence you have provided states that your impairment is temporary, or that you may not require support in the future.

Did your health practitioner write that you have substantially reduced functional capacity?

This means that your psychosocial disability affects you being able to do things on a daily basis.

Did your health practitioner give examples of how your functional capacity is substantially reduced on a daily basis?

It is more important to focus on your functional capacity rather than your emotional state.

When your health practitioner wrote about your treatment, did they also say that this was the most appropriate treatment for you and that other treatments were not appropriate?

They could even write why other treatments were not appropriate for you.

Was there any mention of you having a 'good' day or 'when you are well'?

If these sorts of phrases have been used in your reports, the NDIA may believe that your functional capacity is not substantially reduced. Health professionals and service providers are still getting used to NDIS speak; focussing on what you can't do rather than what you can do. This is where 'recovery' language and the NDIS clash. However, the NDIA now accounts for 'episodic and fluctuating impairments', and recognise that disabilities that have these features can still be considered permanent.

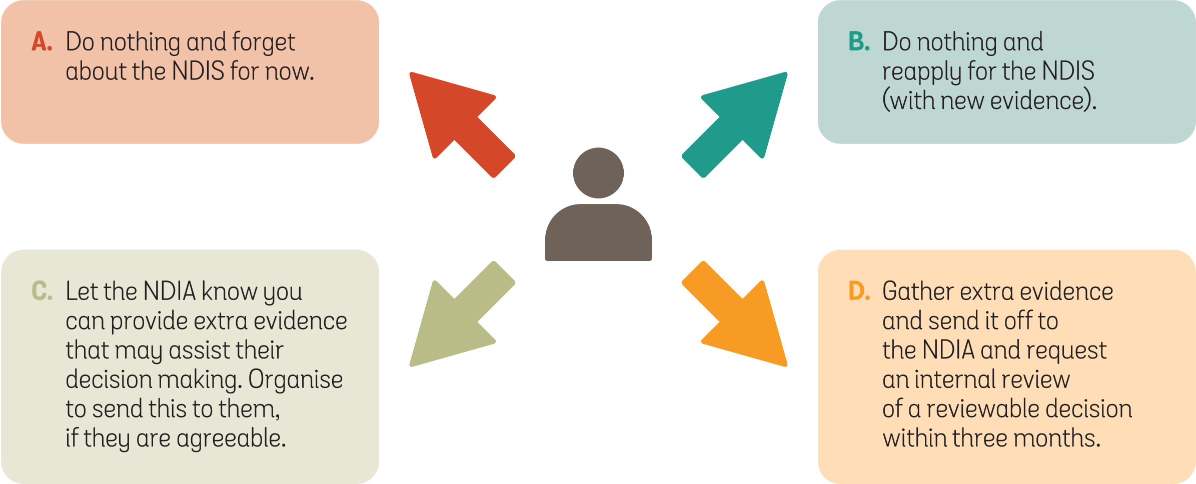
Was there any mention of not taking your medication on a regular basis?

The NDIA views this as 'not all treatment being explored'. They do not take into consideration the many reasons this may be happening.

Was there any mention of drug or alcohol addiction?

The NDIA does not recognise alcohol or drug addiction as being a mental health issue by itself. They want to make sure your 'disability' is not due to alcohol or drugs. This might mean that you would have to stop taking drugs and alcohol for some months and then be tested for functional impairment. If the NDIA takes this approach about your situation, you have rights to review and appeal the decision. You might be able to show that you have a mental health issue separate to alcohol or drug addiction

You've received your letter, looked at the evidence and **now you have a choice to make**:



A. Do nothing and forget about the NDIS for now.

B. Do nothing and reapply for the NDIS (with new evidence).

C. Let the NDIA know you can provide extra evidence that may assist their decision making. Organise to send this to them, if they are agreeable.

D. Gather extra evidence and send it off to the NDIA and request an internal review of a reviewable decision within three months.

What to do if you don't like the NDIA decision on your NDIS plan...

There are different sorts of reviews that can be requested for your NDIS plan. These are covered in 'Module 5: NDIS Planning Meeting'. You have the option to request an Internal Review of decisions made on your NDIS Plan. You can even request an Internal Review if your request for a different type of plan review was denied.

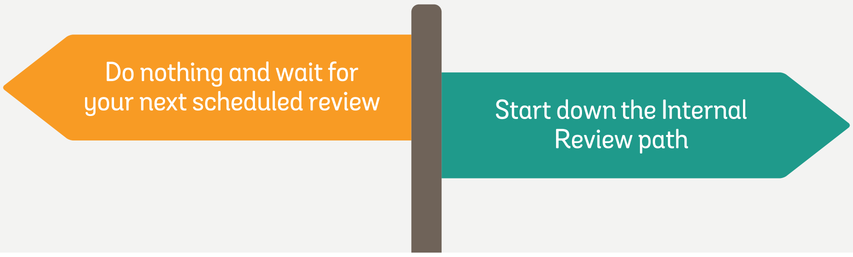
Most Internal Reviews for an NDIS Plan are around the lack of supports being given. When the NDIA planners make decisions on what supports to provide, they will complete a 'Support Needs Assessment' for you and then will look at what is 'reasonable and necessary' as described by the NDIS Act 2013. To approve a support the law requires that each support:

- must be related to a participant's disability
- must not include day-to-day living costs not related to your disability support needs, such as groceries
- should represent value for money
- must be likely to be effective and be beneficial for the participant, and
- should take into account support given to you by other government services, your family, carers, networks and the community.

In identifying your support needs, the NDIA will have looked over any information they already had (like your Access Request Form and any reports previously provided). They will have also looked at your 'Statement of Goals and Aspirations'.

If you didn't get the funding for the supports you requested, it was because the NDIA did not have evidence for it to satisfy the 'reasonable and necessary' requirements that your requested support must meet.

The choice is yours:



Step 2: The Internal Review (a review of a reviewable decision)

Requesting an internal review of the NDIA's decision asks the Agency to relook at the decision they made. In other words, a different reviewer will re-look at your request. They will be given the job of looking over the decision-making process and deciding whether a different decision needs to be made or whether the same decision still stands.

The NDIA has to provide reasons for whatever decision they make. You can withdraw your application for an Internal Review at any stage by letting the NDIA know in writing.

Do I need to get additional evidence?

You can request an Internal Review without providing additional evidence. The reviewer will look at the decisions made against the evidence the NDIA had been given. Without additional evidence, the result may be the same. Providing extra information will increase your chance of getting a different result.

Tip: You can always talk with an NDIS Appeals and Review Advocate regarding your evidence.

NDIS Appeals and Review Advocates provide free information, advocacy and support for self-advocacy for people. A list of organisations that have been funded to provide this support to you for free, are listed in the 'Resources' section of this module.

Preparing for an Internal Review

This is a good opportunity to use the Independent Mental Health Advocacy (IMHA) Self-Advocacy model. Some ideas and prompts have been provided, however it is up to you what to include:

1. Identify the problem
    - Write down what the problem is.
    - What NDIA decision are you not happy about?
    - Why is this a problem to you?
    - What do you want to change?
    - Who is the person that can make the decision?
    - Is it part of a bigger problem for you?

2. Know your rights
    - Right to choose what you want to do *(i.e. accept the decision or request an internal review).*
    - Right to get support to help your decision making.
3. Identify solutions
    - The NDIA will have identified the areas that didn't have enough evidence. You will need to focus on these areas and think about what sort of evidence would satisfy their decision-making criteria.
    - Who can help you with identifying what type of evidence you may need? (Advocate, support person, health professional?)
    - Can you get the support you need anywhere else?
    - Are there any barriers?
    - Are you willing to compromise on anything?
4. Develop the IMHA self-advocacy plan
    - Develop your 'message' – complete the Application form for a reviewable decision following the prompts (this is discussed under 'Requesting an Internal Review of a Decision' below).
    - Gather your evidence – make sure it demonstrates what is needed against the NDIS criteria. Documents could be from people such as your doctor, psychologist or an occupational therapist.

Did you know?

Occupational Therapists are really good at writing in NDIS style. Their reports are often the most helpful for making your case to the NDIA that you meet the access requirements or that you are eligible for a certain type of support.

- What resources will you need to assist?
- Do you want someone to advocate for you?
- How can you take care of yourself during this process?

5. Enact the IMHA self-advocacy plan
    - Make the request for an Internal Review *(if that's what you had decided).*
    - Provide extra evidence.
    - Be ready to answer phone calls from the NDIA reviewer *(have your written self-advocacy plan easily available).*
6. Review
    - What worked?
    - What could have you done differently?
    - Did you get the result you wanted? If not – what are your options?

Requesting an Internal Review of a decision

To request an Internal Review (also known as a Review of a Reviewable Decision) you will need to:

- contact the NDIA to tell them you want them to review a decision they made
- tell them why you think their decision is wrong
- make the request within 3 months of receiving the NDIA decision you disagree with (remember to mark the deadline date in your diary or on a calendar). If time is running out, you can always ask for an internal review, but ask for further time to provide information or evidence within this process
- provide the NDIA with any extra written information (evidence) that you have put together to support your request.

The NDIA prioritises Internal Review cases

To prioritise cases, they consider the following information:

- risk of harm to the health or well-being of a person
- instability in the accommodation arrangements of a person, including the risk of homelessness
- instability in the care arrangements of a person, including the risk of a primary carer not being able to provide care; and
- risk associated with the nature of the person's disability, including the risk of rapid deterioration or progression.

Let them know if this applies to you.

The NDIA have an 'Application for a review of a reviewable decision' form which can be completed. You do not have to use this application form to ask for a review of a decision however it does provide a good guide for what information will be needed. If you do use it, remember to keep a copy – it will provide a record of your request.

Note: *The application form and a link to downloading the form are included in the 'Resources' section at the end of this module.*

VMIAC tip: When asked the question **'Why do you want the decision reviewed?'** in the application form, you can just make a statement like: 'Decision-maker did not take due consideration of medical evidence', or even 'The decision is incorrect'.

You can make your request by:

- calling **1800 800 110**
- talking to someone at an NDIA office
- sending an email to enquiries@ndis.gov.au
- mail – send your written request (Application Form or letter) to:

  Chief Executive Officer
  National Disability Insurance Agency
  GPO Box 700
  Canberra ACT 2601

Sometimes the NDIA change their focus and requirements on evidence. Speak to an NDIS Appeals and Review Advocate to find out the most recent trends...

What happens after I request an Internal Review?

The NDIA will get a different person to look over the decision that had been made. They will look at the information that was used to make the decision. They will also look at any new information that you provide.

The reviewer may contact you to give you the opportunity to say why you think there should be a review and why you think a different decision should be made. You can also let them know about additional evidence you have got that will support your viewpoint. They may even schedule a meeting with you to discuss the Internal Review application. You are able to bring along a support person or even ask an advocate to represent you at this meeting.

The Participant Service Guarantee says that the maximum amount of time for an internal review to take is 60 days.

The reviewer may contact you again, nearing the end of the process, to let you know what the decision will likely be. This is another opportunity for you to add any extra information you may have.

Step 3: Receiving the outcome of the Internal Review

You will be notified by mail about the result of the Internal Review. This letter will include the decision made, how the decision was made (for example, looking at the evidence provided) and why the decision was made. The decision will either:

1. confirm the reviewable decision (the original decision is not changed)
2. vary the reviewable decision (part of the decision has been changed)
3. set aside the reviewable decision and substitute a new decision (remove the original decision and make a new decision).

If you do not like the decision made from the Internal Review, you will now have the option to either do nothing and accept the outcome or take it further by requesting an external review of the decision. This will be conducted by the Administrative Review Tribunal (ART).

Note: ***If you were not happy with the decision-making process or the way you were dealt with during the process, you can make a complaint*** *(complaint links are provided in the 'Resources' section at the end of the module). You can complain to the NDIA, the Commonwealth Ombudsman and even your local Member of Parliament. You can even complain to all three.*

You will only have 28 days to apply for an Administrative Appeals Review from the time you first receive notification of the Internal Review outcome (remember to keep your envelope). Extensions of time are possible in limited circumstances.

Step 4: The External Review (External Merits Review)

When you apply to the ART, the ART undertakes what is called an 'External Merits Review' of the decision the NDIA made. This means that the ART looks at your request independently from the NDIA and from the NDIA's decision (they look at it with fresh eyes). The ART will not carry out an independent review until the NDIA has completed the Internal Review. The ART is not a court but is a decision making body. Its decisions can be reviewed by the Federal Court of Australia.

How do I apply for an ART External Merit Review?

You can apply for the ART External Review one of 3 ways:

- online: www.art.gov.au/applying-review/national-disability-insurance-scheme (link also in 'Module 7: Resources' section)
- by filling out an **'Application for review of decision (individual)'** form and delivering it personally to a registry office or sending it by post or email
- by writing a letter and delivering it personally to a registry office or sending it by post, email or fax.

Contact details for the ART are:

Deliver by hand: Melbourne Registry Office
Level 4
15 William Street
Melbourne VIC 3000

Email: reviews@art.gov.au

Fax: (03) 9454 6998

Postal address: Administrative Review Tribunal
GPO Box 9955
Melbourne VIC 3000

Tel: 1800 228 333

Non-English speakers can call the Translating and Interpreting Service on 131 450 and ask them to call the ART.

If you are deaf or have a hearing or speech impairment, contact the ART through the National Relay Service. For more information visit www.accesshub.gov.au/about-the-nrs

A 'Guide To Applying For Review' is attached to the application form which will help when you fill it out.

What happens after I apply for an External Review?

- You will be contacted by an ART officer within 3 days of receiving your application to talk about your application. If you have any questions, ask the ART officer.
- The ART will let the NDIA know that you have put in an application.
- The NDIA will need to send copies of all the documents they have that are relevant to your application to the ART and to you. **They have 28 days to do this from the time they are notified. These documents are known as T-documents.**

When you get the documents from the NDIA, look over them. See if all the evidence that you provided them with has been included. The T-documents that you (and the ART) receive will be the ones the NDIA used to make their decision. Think about what other evidence you can provide – remember, you can always discuss your case with an NDIS Appeals and Review Advocate for their ideas. The ART can review plans that have been varied or replaced by new plans even if this has happened during the period of time that you've applied to the ART. This is to make sure that they make a decision based on your current circumstances.

The ART should contact you when they receive the T-documents from the NDIA – let them know if you haven't received your copies of the T-documents

Basic overview of the ART External Merit Review

Case conference	• 2–4 weeks after receiving the T-documents. • Informal meeting to discuss your case and try to reach an agreement. • There will usually be a number of case conferences to try and reach an agreement • If no agreement is reached, a case plan will be developed.
Conciliation	• Approximately 4 weeks after case conference. • Informal meeting to try and reach an agreement.
Hearing	• Conducted by a Tribunal Member. • Where information and arguments are presented.

In some cases, the ART might decide to miss the Conciliation step and go straight to a Hearing.

In other cases, your matter may resolve at a case conference by agreement between you and the NDIA.

If an agreement hasn't been reached between you and the NDIA before the Hearing, the ART will make a decision based on the information and arguments presented at the Hearing. You may be given the decision at the end of a Hearing or you may be notified by mail in the following weeks.

Things to consider for supporting your self-advocacy are...

Watching out for 'legal speak'

While the ART is not part of a Court system, much of the language you hear will be 'legal talk'. It may seem like people are talking in a different language. You are not expected to know this language and it is okay to ask for things to be put in a way that you will understand.

If evidence is requested, question why the evidence is needed. For example: you may be asked to provide all of your medical records. You can query this request as it could be considered a breach of privacy. You can ask what information the NDIA lawyers are specifically looking for and offer to provide that information only.

If you don't understand something – let them know. Keep asking until it is put in a way that makes sense to you.

You may find that people will refer to, and quote from, The *National Disability Insurance Scheme Act 2013* (*NDIS Act 2013*). You don't have to know everything written in the Act, but if you are interested in knowing how to access and read the *NDIS Act 2013*, information is provided in the 'Resources' section.

The *National Disability Insurance Scheme (Becoming a Participant) Rules 2016* may also be referred to – a link to these are also available in the 'Resources' section.

Lawyers

The NDIA uses lawyers to represent them in the ART External Reviews. Their aim is to prove that the decision made by the NDIA was right. The person facilitating the case conference and conciliation meetings is an independent person appointed by the ART. They know that you are not a lawyer and should take this into account during the mediation.

You do not need to have a lawyer but can choose to have one represent you if you want.

If you want to talk with someone about this, links to Victoria Legal Aid, Justice Connect and Community Legal Centres websites are provided in the 'Module 7: Resources' section.

Advocates

NDIS Appeals and Review Advocates can provide support free of charge to:

- help you understand the process
- assist with preparing review documents
- attend conferences and hearings with you
- help you put your case forward
- assist you to apply for legal assistance if the review raises complex or new issues.

A list of all Victorian Appeals and Review Advocates is provided in the 'Resources' section.

Did you know?

If you engage a lawyer and advocate to represent you, they will both take their instructions from you. If you want your lawyer to provide all information to your advocate, let them know.

RESOURCES

1. NDIS Appeals and Review Support Advocates in Victoria
2. Online resources
   - General advocacy
   - NDIA material
   - Complaints
   - Administrative Reviews Tribunal information
   - Legal assistance
3. How to read the *NDIS Act 2013*

NDIS Appeals and Review Support Advocates in Victoria

Victorian Mental Illness Awareness Council

1/22 Aintree Street
Brunswick East VIC 3057
Tel: (03) 9380 3900
Website: www.vmiac.org.au
Email: reception@vmiac.org.au

The remaining Appeals and Review Support Advocates may be able to assist you depending upon your dual disabilities and/or circumstance.

AMIDA (Action for More Independence & Dignity in Accommodation)

1st floor, Suite 1.11, Ross House
247 Flinders Lane
Melbourne VIC 3000
Tel: (03) 9650 2722
Website: www.amida.org.au
Email: appeals@amida.org.au

ADEC (Action on Disability within Ethnic Communities)

175 Plenty Road
Preston VIC 3072
Tel: (03) 9480 7000 or 1800 626 078
Website: www.adec.org.au
Email: info@adec.org.au

AED Legal

Suite 4, Level 9, 276 Flinders Street
Melbourne VIC 3000
Tel: (03) 9639 4333
Website: www.aed.org.au
Email: noni.lord@aed.org.au

Disability Justice Australia
Unit 2, 28A Albert Street
Preston VIC 3072
Tel: (03) 9474 0077 or 1800 808 126
Website: www.justadvocacy.com
Email: info@justadvocacy.com

Grampians Disability Advocacy
Shop 2, 32 Tuson Street
Ararat VIC 3377
Tel: 1800 552 272
Website: grampiansadvocacy.org.au
Email: asas@netconnect.com.au

Leadership Plus
Level 4 Anzac House
4 Collins Street
Melbourne VIC 3000
Tel: (03) 9489 2999
Website: www.leadershipplus.com
Email: admin@leadershipplus.com

riac (Rights Information and Advocacy Centre)
Tel: (03) 5822 1944 or 1800 221 944
Website: www.riac.org.au
Email: enquiry@riac.org.au

Villamanta Disability Rights Legal Service
Deakin University, Waurn Ponds Campus
Building IB, Level 3, 75 Pigdons Road
Waurn Ponds VIC 3216
Tel: (03) 5227 3338 or 1800 014 111
Website: www.villamanta.org.au
Email: legal@villamanta.org.au

Online resources

General advocacy

Ask Izzy – Disability Advocacy Finder
askizzy.org.au/advice-and-advocacy/3000-VIC

NDIA material

NDIS Application for Review of a Reviewable Decision
www.ndis.gov.au/applying-access-ndis/how-apply/receiving-your-access-decision/internal-review-decision

NDIS Planning – How do we decide what supports to include?
ourguidelines.ndis.gov.au/your-plan-menu/creating-your-plan/how-do-we-decide-what-ndis-supports-include-your-plan

NDIS Act 2013

www.legislation.gov.au/Details/C2013A00020

National Disability Insurance Scheme (Becoming a Participant) Rules 2016

www.legislation.gov.au/F2016L00544/latest/text

Complaints

NDIS Complaint Form and Instructions

www.ndis.gov.au/contact/feedback-and-complaints

Commonwealth Ombudsman Complaint Form and Instructions

www.ombudsman.gov.au/complaints/how-to-make-a-complaint

Administrative Review Tribunal information

ART NDIS Application page

www.art.gov.au/applying-review/national-disability-insurance-scheme

ART Practice Directions and Guides

www.art.gov.au/help-and-resources/professionals-and-practitioners/practice-directions-guides-and-guidelines

ART Resources

www.art.gov.au/help-and-resources

Legal assistance

Victoria Legal Aid

Legal services and advice

www.legalaid.vic.gov.au/get-legal-services-and-advice

NDIS Appeals Legal Services form and Guidelines for Assessment

www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-appeals-information

Justice Connect

justiceconnect.org.au

Community Legal Centres

Mental Health Legal Centre

mhlc.org.au

Villamanta Disability Rights Legal Service Inc.

www.villamanta.org.au

Disability Discrimination Legal Service

www.ddls.org.au

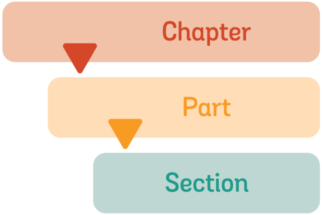
Attorney General Department – *Legal Financial Assistance Information Sheet*

www.ag.gov.au/LegalSystem/Legalaidprogrammes/Commonwealthlegalfinancialassistance/Documents/Legalfinancialassistanceinformationsheet.pdf

Attorney General Department – Disbursement Support information

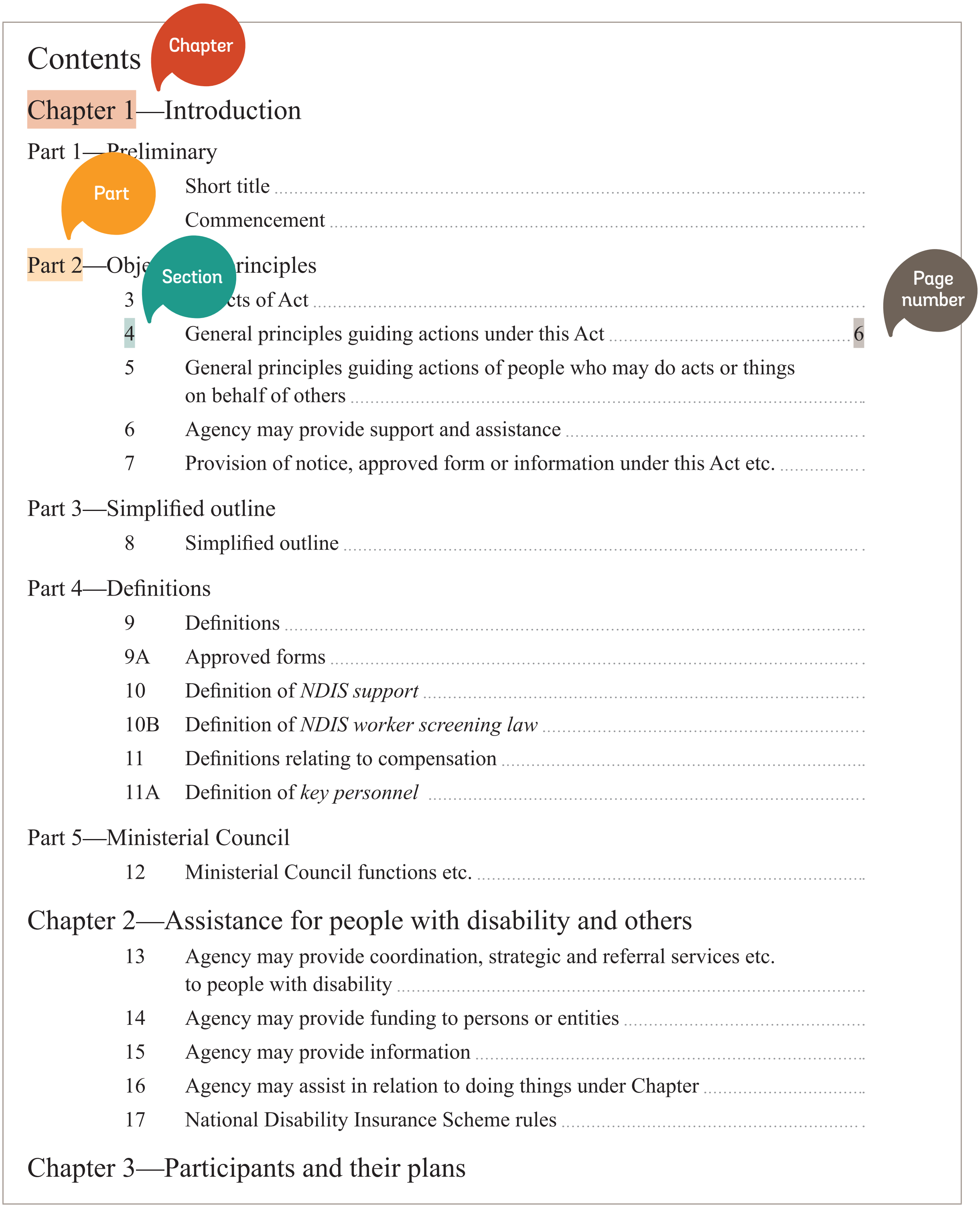
www.ag.gov.au/legal-system/legal-assistance/commonwealth-legal-financial-assistance/disbursement-support-scheme

How to read the *NDIS Act 2013*



The NDIS Act is set out in a certain way and just in case you wanted to look at the Act for yourself, you will need to know how it is organised. The Act has a contents at the beginning which helps you to find the section you may want to look up and it gives you the page number. There are Chapters (like in a book) and each chapter can then be broken down further into 'Parts' – these are like sub-headings. Each Part is then broken down into specific sections and these sections are recognised by a number.

Look for the 💬 in the example following. They will point out the Chapter, Part and Section and where you can find the page number. The following is an example taken from the *NDIS Act 2013*:



Contents

Chapter 1—Introduction

Part 1—Preliminary

Short title

Commencement

Part 2—Obje [illegible] rinciples

3 [illegible]cts of Act

4 General principles guiding actions under this Act 6

5 General principles guiding actions of people who may do acts or things on behalf of others

6 Agency may provide support and assistance

7 Provision of notice, approved form or information under this Act etc.

Part 3—Simplified outline

8 Simplified outline

Part 4—Definitions

9 Definitions

9A Approved forms

10 Definition of *NDIS support*

10B Definition of *NDIS worker screening law*

11 Definitions relating to compensation

11A Definition of *key personnel*

Part 5—Ministerial Council

12 Ministerial Council functions etc.

Chapter 2—Assistance for people with disability and others

13 Agency may provide coordination, strategic and referral services etc. to people with disability

14 Agency may provide funding to persons or entities

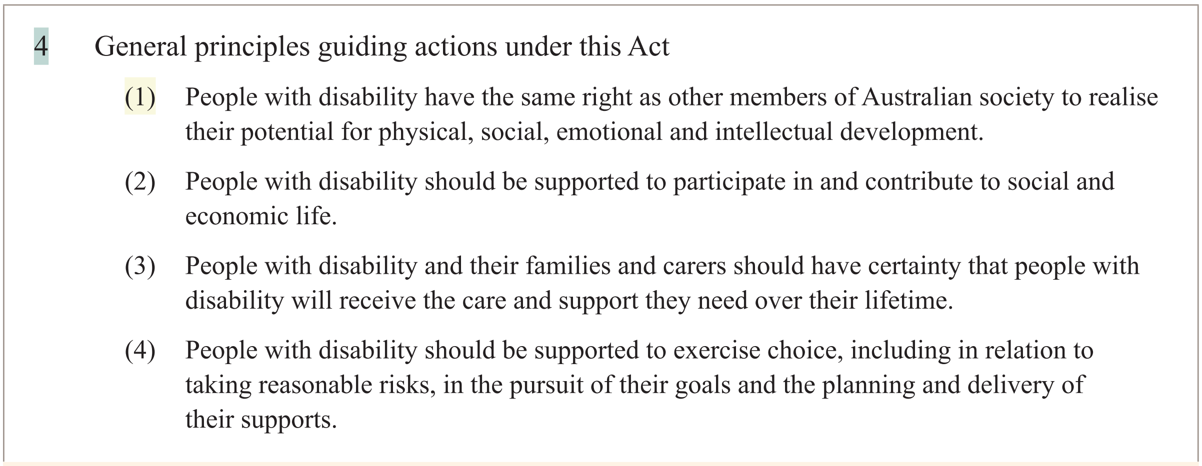
15 Agency may provide information

16 Agency may assist in relation to doing things under Chapter

17 National Disability Insurance Scheme rules

Chapter 3—Participants and their plans

Let's say for instance you wanted to know more about the 'principles guiding the actions' under this Act. You would find it under Chapter 1, Part 2, Section 4 which is found on page 6 (look for the highlights in the example above). When you open page 6, it would look like this:



4 General principles guiding actions under this Act

(1) People with disability have the same right as other members of Australian society to realise their potential for physical, social, emotional and intellectual development.

(2) People with disability should be supported to participate in and contribute to social and economic life.

(3) People with disability and their families and carers should have certainty that people with disability will receive the care and support they need over their lifetime.

(4) People with disability should be supported to exercise choice, including in relation to taking reasonable risks, in the pursuit of their goals and the planning and delivery of their supports.

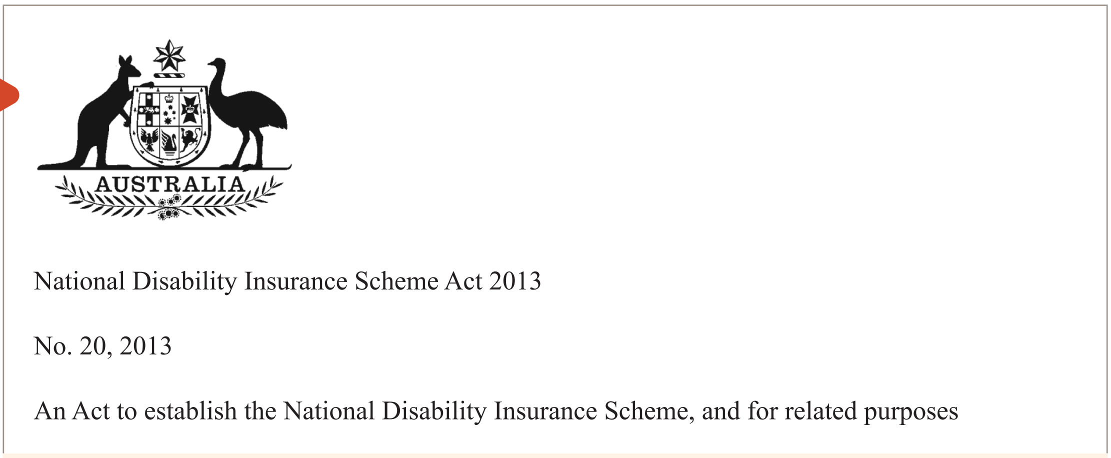
This is only a sample of the principles – there are many more. You will notice each statement (it can be either a sentence or a paragraph) has a number beside it. These are known as 'points'.

When people quote from an Act, they don't worry about the Chapter or Part – they just say the Section and the point that is relevant.

In this instance it would be Sec 4 (1).

Below is a step-by-step guide for looking at the *NDIS Act 2013*. Perhaps you want to know more about the disability requirements for the NDIS. This is how you would do it:

1



AUSTRALIA

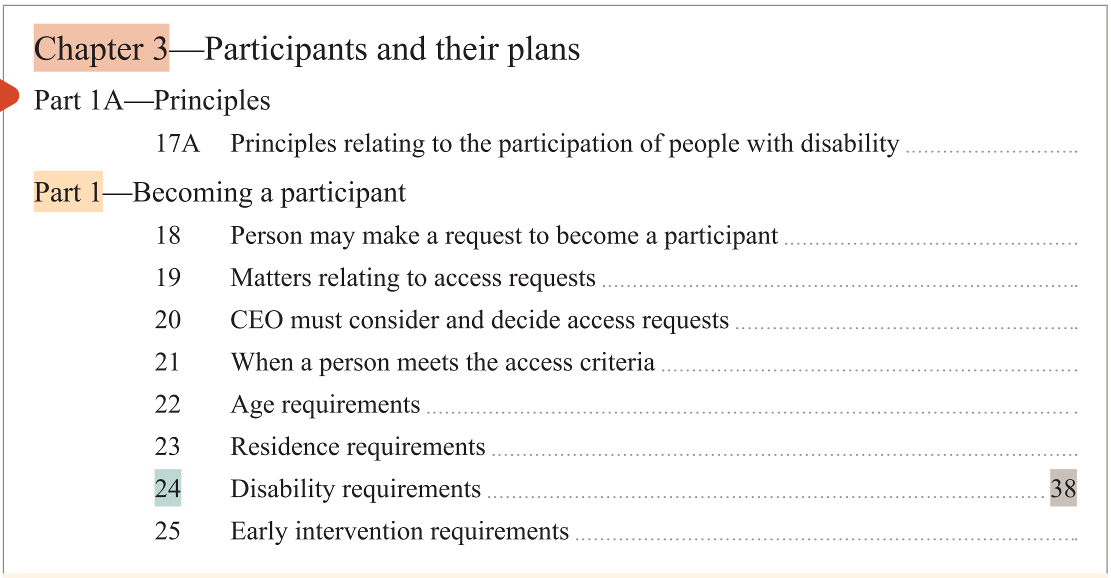
National Disability Insurance Scheme Act 2013

No. 20, 2013

An Act to establish the National Disability Insurance Scheme, and for related purposes

You would **look at the relevant Act**.

2



Chapter 3—Participants and their plans

Part 1A—Principles

17A Principles relating to the participation of people with disability

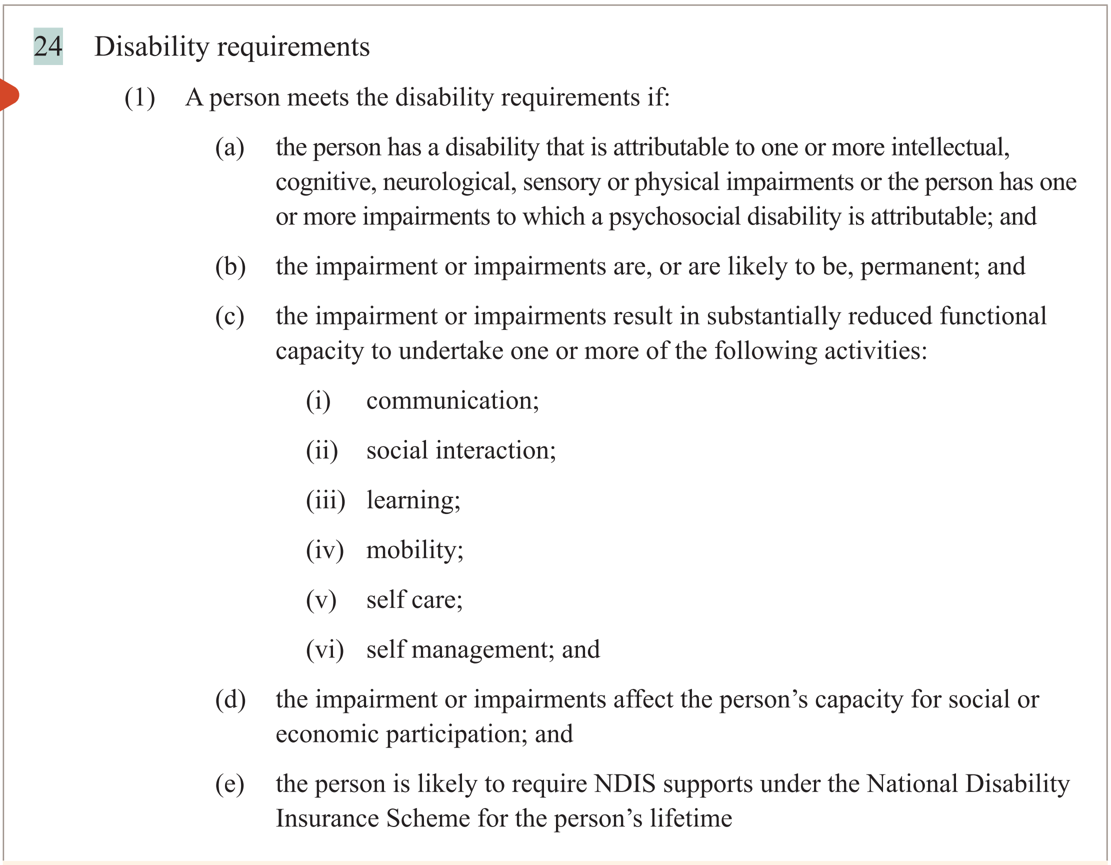
Part 1—Becoming a participant

18 Person may make a request to become a participant
19 Matters relating to access requests
20 CEO must consider and decide access requests
21 When a person meets the access criteria
22 Age requirements
23 Residence requirements
24 Disability requirements 38
25 Early intervention requirements

Look at the contents to find which section you are looking for.

In this example, disability requirements can be found under Chapter 3, Part 1, Section 24 – on page 38.

3



24 Disability requirements

(1) A person meets the disability requirements if:

(a) the person has a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or the person has one or more impairments to which a psychosocial disability is attributable; and

(b) the impairment or impairments are, or are likely to be, permanent; and

(c) the impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities:

(i) communication;

(ii) social interaction;

(iii) learning;

(iv) mobility;

(v) self care;

(vi) self management; and

(d) the impairment or impairments affect the person's capacity for social or economic participation; and

(e) the person is likely to require NDIS supports under the National Disability Insurance Scheme for the person's lifetime

Turn to the page and read what the law says.

MODULE 8: BEYOND THE NDIS

What is the purpose of this document?

To provide information on different supports available for those not with the NDIS.

If you have found yourself ineligible for the NDIS or you are uncertain about applying, you might want to think of some other ways you can find supports.

Community Connections

Community connections is a service available through the NDIS.

It is available to people with disability aged 9 to 64, and their families.

You don't have to apply to the NDIS to get community connections. Both people with disability and NDIS participants can access this service through our NDIS local area coordinators. This helps people know about and access the supports available in their community.

Community connections can include things like help to access information, talking about how to access mainstream and community supports, or help to apply to the NDIS.More information is available on the NDIS website: ourguidelines.ndis.gov.au/home/community-connections

Victorian State Government

The Victorian State Government provides services for people who are clients of clinical area mental health services who have not obtained supports and assistance from the NDIS. This means people who have a key clinician (sometimes referred to as a case manager) through a public mental health service or hospital. The name of this initiative is the 'Early Intervention Psychosocial Support Response' (EIPSR).

Clinical mental health services run EIPSR programs with community mental health providers, and they sometimes have different names depending on who is running them.

In Victoria, there are ten NGOs delivering the EIPSR program: Mind Australia, Wellways Australia, EACH, Cohealth, Mallee Family Care, ERMHA, Star Health, Sacred Heart Mission, Mentis Assist and Uniting Vic Tas. You can contact your key clinician to find out if you are eligible: https://www.health.vic.gov.au/mental-health-services/area-based-services

The services provides short to medium term support in building skills to better manage your mental health issues, such as:

- developing practical life skills for independent living
- developing skills to help you connect with people and your community
- support to achieve a healthy and functional life
- assisting you to transition to the NDIS.
- Basically, these services will help you work towards your own recovery goals.

If you are not currently linked in with an area mental health service, you can also call or visit a Victorian Mental Health and Wellbeing Local, a free initiative in Victoria that does not require a referral. Find a list here: www.betterhealth.vic.gov.au/mhwlocal

Local councils and other organisations

You can ring and speak to someone in your local council and ask for someone who works in their mental health or disability section or the community services section. There are people who may be able to assist you and let you know what services and supports your local council offers. They will all have different titles so it's better to ask for a particular section – they will transfer you to the person you need to be speaking with. You can also look up their website to give you some ideas.

- Services such as your local library offer much more than just borrowing books. Drop in there and see what else they offer.
- Some councils run pools and gyms – many of these will provide very cheap fees for people with disabilities or mental health issues. Ask.
- Check out your local neighbourhood house. They also offer a range of things and some have a place where you can just come in and have a coffee. Some even have free meditation and yoga sessions and some even offer free psychology sessions.

If there is something you think they could be running that could be helpful for you and many others in the community – speak to the manager or coordinator from the centre and suggest it.

Community Information and Support Services

Most council areas have a Community Information and Support Service. They are independent services that can provide a range of supports. Many people go to them when they are experiencing financial stress and may need assistance with food and paying bills. They are also a wealth of information about what services are out in the community and they can help you to fill out forms and advocate on your behalf. They all have different names. Community Information and Support (Victoria) is the peak body for all these support services. You can look at their website to find the closest one to you and find out what they offer: www.cisvic.org.au

Thinking outside the box...

It's time to get creative and search the web and ask people you know.

- There are loads of different types of support groups that meet.
- TAFEs are offering free Certificate IV courses in a wide range of subjects (and they will provide educational support if you need it – ***you just need to let them know you have mental health issues and will need the special consideration and support***).
- Check out different Facebook groups – you will be amazed at how many specific groups there are.
- There are University level courses (and short courses) that you can do for free online. They are often called MOOCs – 'Massive Open Online Courses'. You can also just google 'free university courses'.
- Think about your interests – are there any clubs in your community that you can join?
- You may be interested in using your lived experience of mental health issues to work with others. These roles have different names. They get paid to give their thoughts on different things from a mental health consumer perspective. You can speak with someone at Victorian Mental Illness Awareness Council (VMIAC) and ask about doing this.
- Join VMIAC, it's free. They run events and provide free information on Wednesdays and a writing group on Mondays. They provide free information and training sessions on a range of topics and will keep you up to date on what's happening in the mental health space.

If you are not an NDIS participant, you might find that sometimes when you approach an organisation to ask about disability supports, they tell you that these supports have to be funded through the NDIS. For example, if you are enrolled at TAFE and ask for accommodations to study, or if you have a job and you ask for reasonable adjustments to do your work. In reality, these things are not NDIS supports, and it is the responsibility of your employer or educational institution. So, you may need to do some self-advocacy to services you want to access by using the self-advocacy plan and the NDIS Support Lists contained in this booklet.

MODULE 9: SUPPORTING SOMEONE TO SELF-ADVOCATE

SUPPORT PERSON MODULE

What is the purpose of this document?

To provide information on supporting a family member or friend to self-advocate through the National Disability Insurance Scheme (NDIS) process and identify information that a support person may need to think about.

> ‘Tell me and I forget. Teach me and I remember. Involve me and I learn.’
>
> *Benjamin Franklin*

With the changing landscape of the National Disability Insurance Scheme (NDIS), now more than ever, your family member or friend needs to have a voice and be heard to make a difference in their life. The way to do this is through self-advocacy.

Why is self-advocacy needed for the NDIS?

The NDIS operates from a consumer-directed support model. This means that the NDIS and any resulting supports will target the consumer specifically. This model type is aimed at giving choice and control to the consumer over what services and supports they want. The flip side of this model is that the onus is on the consumer (the recipient of the NDIS funds and supports) to navigate their way through the process. As support people, you will need to find effective ways to assist those you support to be able to identify their own needs, goals and aspirations and be able to communicate these to the NDIA and Local Area Coordinators.

The NDIS is a complex, bureaucratic system that people sometimes find difficult to understand; this also includes health professionals and service providers. Many of the NDIS requirements and processes were originally aimed at other disability types, making it even trickier for people with psychosocial disabilities. It has been highlighted that people who are able to advocate for themselves in this process are more likely to get better outcomes.

There are specific points throughout the process where your family member or friend will need to self-advocate:

- gathering evidence for eligibility for the NDIS
- the planning meeting
- engaging services and supports
- maintaining/changing services and supports (if not meeting their needs)
- appeals and review process (if needed).

Why is a program on self-advocacy important?

The NDIS deals directly with the person experiencing mental health issues. They are the ones that need to apply for access, they are the ones that need to identify their goals and what supports they need, and they are the ones that attend planning meetings. The focus is on them. For people experiencing mental health issues, the ability to self-advocate is a valuable skill that will not only help them with the NDIS, but with life. The more they do it, the easier it will become and their confidence will grow.

More than anyone, as a support person for your family member or friend, you have walked by their side, been there for them when every 'professional support' has left and when they have experienced anguish or despair – you hurt for them. You have experienced joy over their achievements and want the very best for them. You probably know them better than anyone else but remember, you don't know them better than they know themselves.

A person living with mental health issues will not always tell you everything they are thinking or feeling. Sometimes they will just settle for, or agree to things because they don't want to cause 'any more problems'. They can experience shame and feelings of failure when things need to be done for them. They can lose their 'voice' because they think they don't deserve one. They have often experienced having their ideas, thoughts and wishes ignored in society and been treated as being incapable of making decisions and choices affecting their lives – particularly in the mental health field. For some, keeping quiet and being told what to do has become a learned behaviour.

As their support person, you can encourage them to speak up and start reinforcing with them that what they say matters. You can ask their preferences, give them choices, explain the likely outcome of each choice and accept their decisions. This is something that can be practiced and reinforced on a daily basis – it can be a very time consuming and slow process. It is something you will need to consciously do and be committed to, accepting that we all learn from the decisions we make and even the ones others don't agree with may be in our best interests. Generally, support people are time-poor, have a multitude of competing needs, they are exhausted, and many suffer their own mental health issues. Consider it as an 'investment' – supporting them now to make choices (valuing what they have said) and to self-advocate (speaking up for themselves and knowing their rights) will lead to better outcomes for them. Supporting your family member or friend to self-advocate can also be seen as an 'investment' in your life. How many times have your tried to advocate on their behalf only to be questioned regarding your motives? How many times have unrealistic responsibilities and expectations been dumped on you by government agencies and mental health practitioners?

If a person is able to self-advocate through the NDIS process, the supports funded could result in new opportunities for them – funding linked to achieving their goals and aspirations. The supports provided can increase their independence, meet their changing needs, help with life transitions, provide age appropriate activities and socialisation.

There can also be some positive ripple effects of these new opportunities – as your family member or friend grows more in confidence and gains more independence, there may be less reliance on you to support them. One participant of the NDIS explained that his relationship with his mother improved because she no longer had to check up on him and clean his house. This shift of support responsibility removed feelings of powerlessness and a sense of debt towards his mum which allowed him to just enjoy time with her (without her doing things).

How can I support my family member or friend to self-advocate?

Generally

- If they haven't thought about self-advocacy, you can talk to them about their right to make decisions for themselves in things relating to them and there will be times in their life where they will need to be able to self-advocate.
- You can let them know about supported decision making and what that means for them (see 'Module 1: Learning how to self-advocate' for information and helpful web links).
- You can suggest using the supported decision-making process together.
- You can give them the module on self-advocacy (Module 1) to read and perhaps go over it with them.
- You can help them practice self-advocacy on little things; listening to their 'messaging' – how they ask for what they need.
- You can give them feedback on their 'messaging'.
- If they have a decision to make and ask you for information, provide it to them or let them know where they can find it.
- When looking at options, include all related options (even the ones that you might disagree with).
- Explain to them the likely consequence of each option and support them to identify them.
- Practice negotiating with them and how to reach a compromise.
- Support them to prepare for self-advocacy.

For the NDIS

Gathering evidence of eligibility for the NDIS

- Be aware of the functional impairment focus of the NDIS, the shift away from recovery focus and the need for all information (evidence) to be written in a way that highlights what a person can't do, struggles to do, or can only do with assistance.
- Discuss the type of evidence that may be needed with your family member or friend and remind them that their health practitioner may need to be informed of how to write for the NDIS.
- Ask if they would like your support in attending appointments with them relating to requesting and gathering evidence from mental health practitioners.
- If they want you to attend meetings or appointments with them, discuss with them what sort of support they are after. Do they want you to speak on their behalf if they find themselves 'shutting down'?
- If they want you to be able to represent them, discuss with them what it is they want you to say – write it down with them.
- Ask if it's okay to share some past conversations you have had with them relating to the impact their mental health issues on their life and what they would like to happen – these could also be written down so your family member or friend can be informed of what will be said before giving their consent.
- If you need to present their information or requests, show the practitioner the written 'instructions' and say 'this is what your family member or friend' wanted you to say.
- Have a discussion with them about everyday supports you provide and that their health practitioner will need to know about these things to include them in the evidence being written on their behalf. Let them know it is not about who provides the support but rather they need the support to do things.
- You can write a Carers Statement to show the health practitioner and this can also be used as supporting evidence for NDIS eligibility (this will be looked at further in this module).
- In the appointment, clarify if your family member or friend understands what the health practitioner is saying. If they don't – ask the health practitioner to put it in another way or you can explain it to them in a way they will understand. You can insist on an interpreter.
- You can help gather information that can be used as evidence and keep it all together in a file. (This evidence can also be used in the Planning Meeting.)
- Make copies of anything sent to the NDIA.

Preparation for the Pre-planning Meeting/Planning Meeting

- Be a sounding board for their ideas for goals and aspirations, brainstorm with them around things they like, have talked about doing and preferences they have demonstrated.
- Assist them to identify any additional supports they may need to reach their goals.
- Have a conversation with them about immediate needs and look at the supports already in place.
- Look at the areas you provide support and go through each one asking if this is something they would prefer another paid support to do (can be linked with independence and transitions).
- Discuss what is considered as appropriate and reasonable expectations for the role of you as a support person (this will be looked at in the Is my support 'appropriate and reasonable?' section of this module).
- Assist in getting all the information required written down.
- Discuss the need for a Support Coordinator.

Tandem tip: Identify and make contact with the preferred Support Coordinator before the Planning Meeting (with your family member or friend's consent). Give the NDIA Planner their details. The Support Coordinator may also assist in plan preparation or attend the Planning Meeting.

- Relook at your Carer Statement – does it need to be altered to fit with your family member or friend's goals and aspirations?
- Discuss what type of plan management they want or can manage. If it is 'self-managed' and they require your support to do this – think about whether you are able to take on this extra role or whether they will need to identify a support that can teach them to self-manage their budget for the NDIS.
- Discuss whether they would like a Plan Nominee or a Correspondence Nominee (details Module 1: Learning how to self-advocate' and Module 1: Resources sections). If they do, ask is this something they would like you to be? They will need to complete the relevant form and give it to the NDIA planner or LAC. The NDIA will need to approve this.
- Role-play with them the 'message' they want to give in the planning meeting.
- Ask if they want you to attend the planning meeting with them and what role they want you to play.
- Ask if they would also like an advocate to attend the planning meeting or support them to self-advocate. (*Note: This is not always possible due to advocates limited time, but can happen.*)
- If needed, present their information in the Planning Meeting. Use words to the effect of, your family member or friend had discussed what they wanted to say with you and this is their information…

Engaging services and supports

- Help identify what services could provide supports they want.
- Go through the questions they will need to ask and think about when looking at hiring a service.
- If you are a Plan Nominee or a Correspondence Nominee, discuss everything with your family member or friend – you could use the supported decision-making process.
- Encourage having a Service Agreement and looking over it with them (if they want) to see if any alterations or inclusions need to be made.
- Help them draw up a schedule of supports so they can see visually when things are going to happen.

Maintaining/changing services and supports

- Naming when supports fall down – giving them your observations (i.e. difficulty in finding workers, support needs not being met, unprofessional practice).
- Going through their options when the supports are failing them (i.e. complaints process, changing services).
- Discussing the possibility of changing their Plan Management if things aren't working out well.

Appeals and Review process

- Helping to complete paperwork required.
- Brainstorming what extra evidence is needed.
- Linking them in with an advocate.

Download the Carer Checklist for NDIS Planning and fill it in. The comprehensive checklist will provide a great insight into:

- what you do
- time taken to provide support.

(**See** the link to Carer ACT in the 'Resources' section of this module.)

Is my support 'appropriate and reasonable'?

This question is a bit tricky and at the end of the day it is between you and your family member or friend to decide on the support you provide and the support they are happy for you to provide. There may be supports you provide that they are not even aware of, you may not even be aware of how much you do because it has just become a part of your everyday life. You do it because you care and you may even feel it's your responsibility. It's ok to check-in and reflect about the amount of care you provide periodically. What has suited in the past may not suit your family member or friend in the future, and the same goes for you. Everybody's health and well-being is important in this situation. At the end of the day, it is your relationship as a family member or friend that is important – care is additional to that and at times, better suited to be provided by someone else (if possible).

After filling out the Carer Checklist, there are some things you will need to think about. These include:

- Your competing needs; such as – employment, your health, other family member relationships and responsibilities, community involvement, friendships.
- Changing needs – many of these are the same as above and you will need to be aware that circumstances change and start planning for this. Think about your age and your needs. Also think about the age of your family member or friend – what types of support and who provides the support will benefit them the most? Are other supports more appropriate? One support person talked about it not being okay for their young adult child to get their 'socialisation' with their parent – they need to be socialising with people of a similar age.
- Which things you can support? The NDIS doesn't replace supports that are considered to be reasonably provided by family members. What are the supports you consider reasonable?
- If the person you are supporting doesn't want someone else to provide their support – how will you be able to make it work? These are discussions you will need to have with them and perhaps set up the idea of transitioning some supports.
- Explore setting up some supports for yourself to enable you to continue your support. The NDIS doesn't always provide respite care in packages. It is more about presenting 'respite' in a different way – from your family member or friend's perspective. Can they go on a holiday or to a camp? Can overnight support be offered in the home to give them a break from you or to develop skills in managing change, communication and socialisation? It could even be seen as a transition to independence. This would need to fit in with their goals.
- Expectations. When writing your Carer Statement, include your concerns about sustainability and changing/competing needs.
- Sustainability – how long can you keep doing this? You may be able to continue to provide some supports, if other supports are provided by someone else. Think about your age and the appropriateness.
- Take note of the level of NDIS administration that you may have to do by default or as a Plan/Correspondence Nominee. Think about if this is also something you can sustain and discuss options with your family member or friend before the next plan.

Note: The National Disability Insurance Scheme (Supports for Participants) Rules 2013 provide information on – Reasonable family, carer and other support. They use this when looking at what supports they fund. ***See*** *the 'Resources' section for a copy of these Rules.*

Carer Statements

Generally Carer Statements are a summary of your observations. This can include what you see, hear and notice in regards to what works for your family member or friend and what can hinder them. You can also include your concerns around the sustainability/appropriateness of your support and the detrimental impact this may have on your family member or friend. Ideally Carer Statements should be 1–1½ pages in length. Things you can include could be:

- identifying your family member or friend's achievements, what worked well for them
- identifying things that haven't gone so well and the reasons for this; for example – not enough time, unexpected change, unfamiliar environment, what you see, hear, notice regarding what works and hinders your family member or friend
- types of support you have been providing
- concerns about the sustainability/appropriateness of the supports.

Tandem have a great resource on Carer Statements and a sample statement as guidance. Carer ACT also cover this in their resources. **See** 'Resources' section for web links.

Where to go when I get stuck or need support

Any change in relationship dynamics can surface strong emotions. Many of these emotions can be attributed to grief and loss and both you and your family member or friend may experience this. These are normal emotions; remember that each person can express their grief and loss in different ways. It will help if you are aware that any changes taking place (such as role changes, support changes, accommodation changes) may bring on an emotional response and think about ways that you can take care of yourself and encourage your family member or friend to do the same. You may even find your family member or friend start to thrive with a new sense of independence. This can amplify your feelings of loss. Focus on the relationship you have with them rather than anything that has been 'lost'. It's an opportunity to build upon your relationship allowing it to evolve.

As a support person you may have been juggling the role of parent, friend and carer. Where does one role start and another finish? All the different roles may become blurred into one and typical developmental behaviours (young people) or life transition stages (adults) and responses from your family member or friend are seen as a by-product of their mental health issues. Sometimes it has nothing to do with their mental health issues and it is just normal for their developmental stage. It doesn't make the concern or worry (or even impact) any less, but it can help to take a step back and think about the stages they are at and their changing needs and desires.

If you get stuck or need support, you can:

- ccontact Tandem (you may want to think about becoming a Tandem member, it's free – and they can let you know when the new services become available)
- look at the Carers ACT website for ideas and information
- look at the Australian Government Carer Gateway website – information and support dedicated to carers (details in 'Resources' section)
- look at the list of resources, information and supports provided by Healthtalk Australia (complete list available in 'Resources' section).

The NDIS is a stressful and lengthy process. Make sure you implement strategies around your self-care.

> 'Self-care is not about self-indulgence, it's about self-preservation.'
>
> *Audre Lorde*

RESOURCES

1. Online resources
    - Tandem
    - Carers ACT
    - Australian Government Carer Gateway
2. NDIS (Rules) – Reasonable family, carer and other support
3. Healthtalk Australia – Carer resources and information
4. Downloadable resources on Mental Health and Supported Decision-Making
5. Carer support organisations and peak bodies
6. Government assistance for carers: Respite services, payments and allowances

Online resources

Tandem

www.tandemcarers.org.au

Carers ACT

Carers Gateway

www.carersact.org.au/carer-gateway

Australian Government Carer Gateway

Information website

www.carergateway.gov.au

National Disability Insurance Scheme (Supports for Participants) Rules 2013

Part 3 Assessing proposed supports

Reasonable family, carer and other support

When deciding if funding or support should be provided, the CEO will consider:

(a) for a participant who is a **child**:

- that it is normal for parents to provide substantial care and support for children; and
- whether the child's disability requires more care than other children their age; and
- any risks to the wellbeing of the child's family members or carers; and
- if the funding or support for a family would improve the child's capacity or would reduce any risk to the child's wellbeing.

(b) for other participants, the CEO will consider: the risks to the participant's wellbeing from relying on the support of family members, carers, informal networks and the community; and the suitability of supports, including: the age and ability of family members and carers; and (B) the intensity and type of support that is required and whether it is appropriate for a particular family member to be providing that care (due to age and gender); and (C) the extent of any risks to the long term wellbeing of any of the family members or carers; and

- how informal supports affect a participant's level of independence and other outcomes.

(c) for all participants—the benefits of supporting and developing potential contributions of informal supports and networks within their communities.

Healthtalk Australia – Carer resources and information

Website: www.healthtalkaustralia.org

On this page you can find links to resources relevant for carers of people diagnosed with severe mental health problems. The information includes telephone helplines, carer support organisations and peak bodies, information about government assistance available to carers (respite care, payments and allowances), therapy and counselling services, information about specific mental health problems, crisis and suicide support services, information about recovery, links to public services such as health and mental health complaints commissions and offices of the public advocate, and finally some information on supported decision making. Please note that while a number of the resources listed are specific to Victoria, we have included national resources wherever possible. Many of these include links to state and territory-specific services.

Telephone helplines

- Lifeline – 13 11 14
- Carers Australia – 1800 242 636
- Mind – Carer Helpline 1300 554 660
- Carer Gateway – 1800 422 737
- Centrelink – information for carers 13 27 17

Downloadable resources on Mental Health and Supported Decision-Making

Please find below some downloadable resources (in PDF format) on Mental Health and Supported Decision-Making that were developed as a result of the research underpinning this online resource.

For people with lived experience of mental illness, family carers and mental health practitioners:

- An introduction to the Supported Decision Making project and suite of resources
- Fact Sheet 1 – What is Supported Decision-Making?
- Fact Sheet 2 – Supported Decision-Making: Legal Mechanisms
- Fact Sheet 3 – Practices to Improve Supported Decision-Making in Mental Health Services
- Fact Sheet 4 – Resources for Supported Decision-Making

For mental health practitioners:

- Guidelines for Supported Decision-Making for Mental Health Services

Carer support organisations and peak bodies

Carer support organisations

Mind Australia

Website: www.mindaustralia.org.au

Carer helpline: 1300 554 660

Mind is a leading provider of community mental health services to support people with a mental illness, their carers and families in Victoria, South Australia and Queensland. Mind offers many resources including helplines, online forums, psychological counselling and therapy, group programs, workshops, and residential services.

Mental Health Carers Australia (MHCAA)

Website: www.mentalhealthcarersaustralia.org.au

Mental Health Carers Australia's mission is to represent at a national level the interests and concerns of families and others voluntarily caring for people with mental illness throughout Australia.

Tandem (Victoria)

Website: tandemcarers.org.au

Tandem is the peak Victorian organisation for carers of people with mental health problems. Its aim is to ensure that the importance of the contribution, expertise, experiences and needs of families and other carers is recognised and that these needs are addressed. Tandem offers its members training and education programs, information for carers, and carer forums.

Mental Illness Fellowship of Australia

Website: www.mifa.org.au

Tel: 1800 985 944

The Mental Illness Fellowship of Australia represents at the national level the interests of its member organisations and people affected by mental illness. MIFA offers support and information about mental illnesses with a holistic approach to people with mental illness, their carers and families. Its website hosts a carers' forum.

SANE Australia

Website: www.sane.org/families-carers

Tel: 1800 187 263

SANE is a major charity that aims to help all Australians affected by mental illness, as well as their families and friends. It offers information about mental health and illness, getting help for mental illness, how to improve wellbeing, and guides and resources for carers.

Grow

Website: grow.org.au/welcome-to-grow

Tel: 1800 558 268

Grow is a community-based organisation which aims to help people recover from mental illness through its program of mutual support and personal development. Its 'Grow Better Together' program encourages and supports caregivers of people experiencing mental illness.

Carer peak bodies

Carers Australia

Website: www.carersaustralia.com.au

Tel: (02) 6122 9900

Carers Australia is the national peak body representing Australia's carers, advocating on behalf of Australia's carers to influence policies and services at a national level. The program offers the opportunity for carers to talk to someone about the caring role with short term counselling, emotional and psychological support services for carers in need of support. NCCP is delivered through Carers Australia's network of Carer Associations in each state and territory.

Mental Health Australia

Website: www.mhaustralia.org

MHA is an Australian non-government organisation which represents and promotes the interests of the national mental health sector and is committed to improve mental health for Australians. It represents mental health consumers, carers, special needs groups, clinical service providers, public and private mental health service providers, researchers and state/territory community mental health peak bodies.

Mental Health in Multicultural Australia

Website: www.embracementalhealth.org.au

MHIMA is an organisation which aims to assist in building the capacity of Australia's multiculturally and linguistically diverse communities and to make strategic-level contributions to national, state and territory governments regarding mental health reform strategies and research and evaluation. Its website contains information and resources including mental health organisations and translated information and language services.

Government assistance for carers: Respite services, payments and allowances

Carer Gateway

Website: www.carergateway.gov.au

Tel: 1800 422 737

The Carer Gateway is an Australia-wide network of Carer Gateway service providers. They will talk through what you need and help you to find local services and support to help you. They can provide you with practical information and advice, free phone counselling, free coaching, opportunities to connect with other carers, as well as information about respite and financial assistance.

Centrelink

Tel: 132 717

- Carer Payment

  Website: www.servicesaustralia.gov.au/carer-payment

  Carer Payment provides income support to people who, because of the demands of their caring role, are unable to support themselves through substantial paid employment. Carer Payment is income and assets tested and paid at the same rate as other social security pensions.

- Carer Allowance

  Website: www.dss.gov.au/disability-and-carers/benefits-payments/carer-allowance
  or www.servicesaustralia.gov.au/carer-allowance

  Carer Allowance is an income supplement available to people who provide daily care and attention in a private home to a person with disability or a severe medical condition. Carer Allowance is not taxable or income and assets tested. It can be paid in addition to a social security income support payment.

- Carer Supplement

  Website: www.servicesaustralia.gov.au/carer-supplement

  Carer Supplement is an annual $600 payment and is paid in July each year to recipients of the Carer Allowance for each person being cared for.

OTHER RESOURCES

Therapy and Counselling

Relationships Australia

Website: www.relationships.org.au

Relationships Australia provides relationship support services across the nation to enhance human and family relationships. It provides counselling, family and relationship courses, and professional training and development. It offers relationship advice topics, publications and crisis help and support.

Australian Counselling Association

Website: www.theaca.net.au

ACA is Australia's largest single registration body for Counsellors and Psychotherapists with over 3,500 members. ACA serves a crucial role in advocating and advancing the profession of counselling and psychotherapy. Its website provides a search option for counsellors.

Australian Psychological Society

Website: www.psychology.org.au

APS is the leading organisation for psychologists in Australia and represents over 22,000 members. Its website offers a search option for psychology services.

MoodGYM Training Program

Website: www.moodgym.anu.edu.au

Mood GYM is an internet-based therapy program designed to enable people to learn cognitive behaviour therapy skills for preventing and coping with depression.

Resources about specific mental health problems or for specific groups

Australian Borderline Personality Disorder Foundation – Families and Carers

Website: www.bpdfoundation.org.au

ABPDF is a group of 'consumers', carers and clinicians who support, promote and advocate for people living with borderline personality disorder.

beyondblue – Supporting someone experiencing depression and/or anxiety

Website: www.beyondblue.org.au/get-support/support-someone

Tel: 1300 22 4636

beyondblue is an independent, not-for-profit organisation working to increase awareness and understanding of anxiety, depression and suicide in Australia. It offers information and support, a telephone helpline, and online forums.

Bipolar Australia

Website: www.bipolaraustralia.org.au

Bipolar Australia is an organisation created by people with bipolar disorder, their carers and family members which aims to assist people looking for support in the treatment and recovery from bipolar disorder.

Black Dog Institute

Website: www.blackdoginstitute.org.au

The Black Dog Institute is a not-for-profit, educational, research, clinical and community-oriented facility offering specialist expertise in depression, bipolar disorder and suicide in Australia, as well as support groups.

Ethnic Communities' Council of Victoria (ECCV)

The ECCT advocates and lobbies all levels of government on behalf of multicultural communities in areas like human rights, access and equity and improving services. As our core business, we advocate on any issue that is of concern to our members. The website has a directory of key multicultural NDIS, health and Disability Organisation and Resources.

Website: eccv.org.au/ and eccv.org.au/eccv-cald-ndis-directory

Tel: (03) 9354 9555

Intervoice: Hearing Voices Network Australia

Website: www.intervoiceonline.org/about-intervoice/national-networks-2/australia

Intervoice raises awareness and understanding about the phenomenon of hearing voices. It offers a number of resources including strategies for coping with voices, information about state-based hearing voices networks, and groups for voice hearers.

Orygen: The National Centre of Excellence in Youth Mental Health

Website: orygen.org.au/Training

An online community for everyone who works with or wants to help young people experiencing mental ill-health. It has news, expert advice, research bulletins, summaries and professional networks that form a national and international gateway to the latest evidence-informed resources, training and qualifications.

Orygen Campus

Website: orygen.org.au/Campus

Orygen Campus is an online community for everyone who works with or wants to help young people experiencing mental ill-health. It has news, expert advice, research bulletins, summaries and professional networks that form a national and international gateway to the latest evidence-informed resources, training and qualifications.

Queerspace

Queerspace provides counselling (including individual, relationship and family counselling), case management, individual advocacy and other support services to help you with a range of issues. Queerspace also provide family education, group support programs, and can help you access LGBTIQ+ friendly healthcare options and services. They also value peer and social connections. Queerspace organizes and supports regular community events and can refer you to LGBTIQ+ advocacy and community groups.

Website: www.queerspace.org.au/

Tel: (03) 9663 6733

Switchboard

Switchboard provide peer-driven support services for the lesbian, gay, bisexual, transgender and gender diverse, intersex, queer and asexual (LGBTIQA+) people, their families, allies and communities.

Website: www.switchboard.org.au/

Victorian Aboriginal Community controlled Health Organisation (VACCHO)

VACCHO is the peak Aboriginal health body representing 100% of Aboriginal Community Controlled Health Organisations (ACCOs) in Victoria. The role of VACCHO is to build the capacity of its Membership and to advocate for issues on their behalf.

Website: www.vaccho.org.au/

Tel: (03) 9411 9411

Victorian Aboriginal Health Services (VAHS)

VAHS provides a variety of medical services and is committed to supporting the well-being of the community through a variety of services, including a medical clinic, family counselling, community programs, and more.

Website: www.vahs.org.au/

Tel: 03 9419 3000

Crisis and suicide support

State crisis numbers

- NSW – 1800 011 511 – Mental Health Line
- VIC – 1300 651 251 – Suicide Helpline
- QLD – 13 43 25 84 – 13 HEALTH
- TAS – 1800 332 388 – Mental Health Services Helpline
- SA – 13 14 65 – Mental Health Assessment and Crisis Intervention Service
- WA – 1800 676 822 or 1300 555 788 – Mental Health Emergency Response Line
- NT – 08 8999 4988 – Top End Mental Health Service
- ACT – 1800 629 354 – Mental Health Triage Service

General crisis and suicide support

Lifeline

Website: www.lifeline.org.au

Tel: 13 11 14

Lifeline connects people in Australia with care by providing services in suicide prevention, 24-hour crisis support and mental health support. The website offers online chat and information resources.

Suicide Call Back Service

Website: www.suicidecallbackservice.org.au/resources/worried-about-someone

Tel: 1800 659 467

The Suicide Call Back Service provides crisis counselling across Australia 24 hours a day, seven days a week for people at risk of suicide, carers for someone who is suicidal, and those bereaved by suicide.

Living is For Everyone (LIFE)

Website: www.livingisforeveryone.com.au

LIFE is a resource designed to reduce the rate of suicide and self-harming through providing the best available evidence and resources to guide activities including community projects. It offers information and guides for individuals and health professionals.

Suicide Prevention Australia

Website: suicidepreventionaust.org

SPA provides national leadership for the suicide prevention sector in Australia. It builds and facilitates partnerships to reduce the stigma around mental illness and suicide, and to assist the healing for people with lived experience of suicide attempts and suicide.

Recovery resources

While there are no Australian websites specifically about recovery from a mental health problem, some Australian mental health community support services offer information about recovery and recovery-oriented practice. Also listed are two UK websites and an Australian government policy statement on recovery-oriented mental health services.

Mind Australia

Website: www.mindaustralia.org.au/resources/recovery

Mind supports recovery from mental health problems and has a number of recovery-related resources including its Recovery College, which offers courses run by people with lived experience of mental illness as well as offering professional learning and development skills, and has its own website: **www.recoverycollege.org.au**

Mind Australia *'Approach to Recovery Oriented Practice'*

www.mindaustralia.org.au/sites/default/files/publications/Minds_approach_to_recovery_oriented_practice_0.pdf

Neami National

Website: www.neaminational.org.au/about/

Mental Health Foundation (UK)

Website: www.mentalhealth.org.uk/a-to-z/r/recovery

This UK-based organisation offers information about recovery including the recovery process, supports for recovery, and tools to help service users and mental health services.

Rethink Mental Illness (UK)

Website: www.rethink.org/advice-and-information/living-with-mental-illness/treatment-and-support/recovery-and-mental-illness

Also a UK-based organisation, Rethink Mental Health (UK) provides information about recovery and the kind of challenges to recovery that people with mental health problems can face.

Australian Health Ministers' Advisory Council (2012) *'National Framework for Recovery Oriented Mental Health Services document: Guide for practitioners and providers'*

www.health.gov.au/resources/publications/a-national-framework-for-recovery-oriented-mental-health-services-guide-for-practitioners-and-providers

Complaints Commissions (Health and Mental Health) and Public Advocates

Complaints Commissions (Health and Mental Health)

Mental Health and Wellbeing Commission (Victoria)

Website: www.mhwc.vic.gov.au

Tel: 1800 246 054

If you, or someone you care for, has had a negative experience while receiving mental health assessment or treatment, you have the right to make a complaint. Every person has the right to be heard, including people experiencing mental health problems, carers, family members, friends, advocates, staff and any other person who has concerns about a person's experience with a public mental health service.

Health Complaints Commissions (all states and territories)

Website: www.mentalhealthcommission.gov.au

- ACT – Health Services Commissioner: (02) 6205 2222
- NSW – Health Care Complaints Commission: 1800 043 159
- NT – Health and Community Services Complaints Commission: 1800 004 474
- QLD – Office of the Health Ombudsman: 133 646
- SA – Health and Community Services Complaints Commissioner: (08) 8226 8666 or 1800 232 007
- TAS – Health Care Complaints Commission: 1800 001 170
- VIC – Health Complaints Commissioner: 1300 582 113
- WA – Health and Disability Services Complaints Office: contactus@mentalhealth.wa.gov.au

Offices of the Public Advocate (selected states and territories)

The Office of the Public Advocate is an organisation empowered by law to promote and protect the rights and interests of people in the community who suffer from a condition or situation that makes them potentially vulnerable to abuse, exploitation or neglect, and also aims to eliminate such abuse, exploitation and neglect. The Office offers an advice service, community education, opportunities to volunteer, and information about guardianship and administration, powers of attorney and medical consent.

- ACT – www.hrc.act.gov.au/advocacy
- QLD – www.justice.qld.gov.au/public-advocate
- SA – www.opa.sa.gov.au
- VIC – www.publicadvocate.vic.gov.au
- WA – www.publicadvocate.wa.gov.au

Supported Decision Making information

Following the introduction of the *Mental Health Act* in 2014, Victoria became the first jurisdiction in Australia to make supported decision making the centrepiece of its mental health legislation. In 2022, a new *Mental Health and Wellbeing Act* came into force, following the Royal Commission into Victoria's Mental Health System. As a result, the following resources on supported decision making are from Victoria, except for the last which comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency within the US Department of Health and Human Services.

Victorian Mental Health and Wellbeing Act (2022)

Department of Health and Human Services Victoria *'Mental Health and Wellbeing Act 2022 Handbook'*

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook

Supported decision making mechanisms and related agencies

Advance statement of preferences

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook/advance-statements-of-preferencesNominated support persons

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook/supported-decision-making/nominated-support-persons

Statement of rights

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook/statement-of-rights

Second psychiatric opinions

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook/second-psychiatric-opinions

Compulsory assessment and treatment

www.health.vic.gov.au/mental-health-and-wellbeing-act-handbook/compulsory-assessment-and-treament

Independent Mental Health Advocacy

Website: www.imha.vic.gov.au

Tel: 1300 947 820 (9:30 am – 4:30 pm, Mon – Fri except on public holidays)

IMHA is a free, independent and confidential advocacy service for people on compulsory treatment orders under the *Mental Health and Wellbeing Act 2022* (Vic). IMHA can assist people to make decisions about their mental health assessment, treatment and recovery and to express their views and preferences to their treating team or other services. IMHA advocates are guided by what a person wants rather than what others may consider to be in their best interests and will arrange a qualified interpreter to assist, if requested.

Mental Health Tribunal

Website: www.mht.vic.gov.au

The Mental Health Tribunal is an independent tribunal established by the *Mental Health and Wellbeing Act 2022*.

They decide whether patients need compulsory mental health treatment.

They protect patient rights by conducting hearings to identify the least restrictive way people can receive treatment they need.

NDIS Resources for Communities

Reimagine.today: Mental Health, My Recovery and the NDIS

reimagine.today is co-designed with people living with mental health conditions including psychosocial disability. Many of the people involved in reimagine.today have lived experience of the NDIS. They have used their experience to help you better understand the NDIS and the opportunities for people living with psychosocial disability.

Website: reimagine.today/

Aboriginal and Torres Strait Islander peoples Hub: This Hub was 'co-designed' (created and built) with Aboriginal and Torres Strait Islander people with lived experience of mental health concerns, and their mobs. A mob from the NT in Darwin and people from the Cherbourg community in Queensland worked on these resources over 18 months in 2019 – 2020.

Website: reimagine.today/aboriginal-and-torres-strait-islander-people-hub/

LGBTIQ+ Communities Hub: These resources were co-designed by people from within LGBTIQ+ communities, with lived experience of mental health concerns, their carers and chosen supports.

Website: reimagine.today/lgbtiq-communities-hub/

Multicultural Hub: This Hub was 'co-designed' (created and built) with people from culturally and linguistically diverse (CALD) backgrounds with lived experience of mental health concerns, as well as their carers and other supporters. Two groups, one in Sydney, NSW and one in Melbourne, VIC worked on these resources over 18 months in 2019 – 2020. The groups wanted to share stories of people's experiences of the NDIS, make resources in plain English and other languages, and look at some of the barriers to getting support.

Website: reimagine.today/multicultural-hub/

Rural and Remote Hub: This Hub was co-designed with people living in rural and remote areas with lived experience of mental health concerns, as well as their carers and other supporters. Two groups, one in Launceston, TAS and one in Ceduna, SA worked on these resources over 18 months in 2019 – 2020. The resources are in plain English, to simplify the NDIS, and address some of the barriers faced in rural and remote areas.

Website: reimagine.today/rural-remote-hub/

Independent Mental Health Advocacy

Call us on **1300 947 820** between 9.30 am and 4.30 pm, Monday to Friday
Call **1800 959 353** to hear a free recording of your rights

Email **contact@imha.vic.gov.au**
Visit our website **www.imha.vic.gov.au**