Achievable

Does more evidence = better outcomes in NDIS Plans?

Presentation by Megan Moyle Lead Support Coordinator at Achievable



ARE YOUR PATIENTS AT RISK?

... They are if your NDIS reports don't meet the mark.



Megan Moyle

Support Coordinator
NDIS Coach/Educator
Parent Advocate for Disabilities

- Mum of 3 kids 13, 10 & 10 (yep, twins!)
- Specialising in neuro-developmental disabilities like ASD, ID, GDD, ABI.
- Passionate about making the NDIS easier for families to navigate



About Achievable

We work with neuro-diverse families to help them understand and navigate the NDIS.

EDUCATING FAMILIES

We create resources and templates for families to get direct and clear answers about the NDIS and templates to make gathering evidence easier.

SUPPORT COORDINATION

We assist families to best utilise their NDIS funding and understand disability related supports on a 1:1 level.

About the NDIS

PURPOSE: To help individuals living with disabilities to live an "ordinary life", through being independent and engaging with the community.

"ORDINARY LIFE"

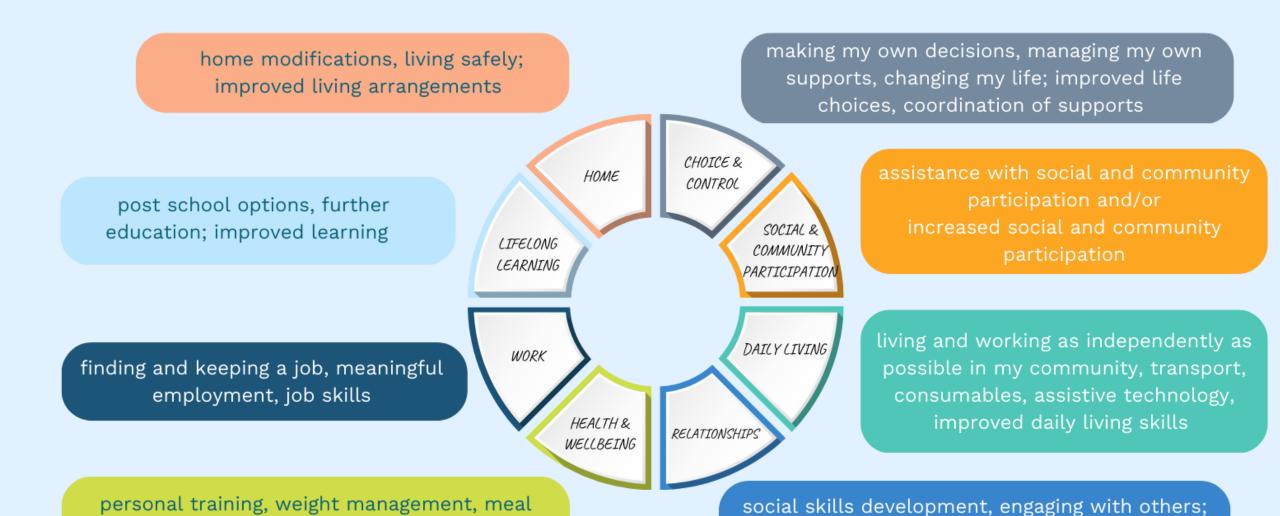
- A life where you have the same opportunities as people without a disability.
- It's a life where you can pursue your potential and participate in society on an equal basis with others.

An ordinary life will be different for different people. We are all different, and come from different cultures and backgrounds. We each have our own values, experiences, beliefs and goals.

NDIS IS BASED ON A DEFICIT MODEL

This means you need to provide evidence what they haven't learnt or are able to do YET in your reports.

AN "ORDINARY LIFE" IN THE CONTEXT OF THE NDIS



improved relationships

preparation and healthy cooking

AN OVERVIEW OF REPORTS







WHEN

Plan Reassessment (usually at end of a plan or when significant changes occur in the participant's life). Funding will be reviewed.

WHAT

A document to communicate the <u>impact</u> of the <u>disability</u> on their life - including living independently and accessing the community.

WHY

Health Professionals are deemed a trustworthy source of information for the NDIS to base their decisions about an individual.

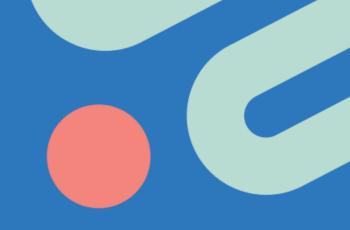
Who can provide supporting evidence of the disability

What is the impact of their disability?

How does the disability affect their ability to live independently and access mainstream services and the community?

General Practitioner (GP) Paediatrician Orthopaedic Surgeon Occupational Therapist Speech Pathologist (Therapist) Neurologist Psychologist Psychiatrist Physiotherapist Gastroenterologist **Dentist**

Which is correct?



The longer the report for the NDIS, the better! They won't read reports that are under 2 pages.

OR

Reports for the NDIS need specific language and information that meets the NDIS criteria.



Reports for the NDIS need specific language and information that meets the NDIS criteria.

Remember writing assignments back in your uni days? You could craft the most wonderful 5 page report, but if it didn't address the marking criteria, you'd get a ZERO!

The same goes for NDIS Reports.

Consider these the "Marking Guides" for NDIS Report Writing



OPERATIONAL GUIDELINES

GUIDELINES THAT UNDERPIN EVERY AREA OF THE SCHEME



REASONABLE & NECESSARY CRITERIA

BENCHMARKS TO IDENTIFY WHETHER A SUPPORT SHOULD BE FUNDED BY NDIS

FACILITATES SOCIAL AND ECONOMIC PARTICIPATION

will the support help to get the person out, make friends and be in the community?

FOR THE PARTICIPANT

does it meet best practice guidelines? is there evidence to prove it will 'work'?

VALUE FOR MONEY

when compared to the cost of the supports to any available alternatives.

"The R&N Criteria"

Reasonable & Necessary Criteria

NDIS WILL ONLY FUND SUPPORTS THAT MEET ALL OF THESE CRITERIA

REASONABLE EXPECTATIONS OF INFORMAL NETWORKS

should the support be provided by parents, carers, friends or the community?

ASSISTS TO PURSUE GOALS AND ASPIRATIONS

does the support link to the About Me and Goal section of this plan?

MOST APPROPRIATELY FUNDED BY THE NDIS

or, is it 'best funded' by another organisation or a mainstream support?

THE CONNECTION BETWEEN NDIS SUPPORT BUDGETS & FUNCTIONAL DOMAINS

'AREAS' OF LIFE

FUNDING POTS SUPPORT PURPOSE **OUTCOMES FRAMEWORK DOMAIN** SUPPORT CATEGORY (Plan Budgets) CORE Daily Living Assistance with Daily Life Daily Living Transport Consumables Daily Living Social & Community Participation Assistance with Social & Community Participation CAPITAL Daily Living Assistive Technology Home 6. Home CAPACITY BUILDING Choice & Control Coordination of Supports Improved Living Arrangements Home Increased Social and Community Participation Social and Community Participation Work Finding and Keeping a Job Improved Relationships Relationships Improved Health and Wellbeing Health & Wellbeing Lifelong Learning Improved Learning Choice and Control Improved Life Choices Improved Daily Living Skills Daily Living

ITEMS LISTED IN PLAN

Functional Capacity

Your reports MUST address how the participant's functional capacity is impacted due to their disability. Then, how does this impact their daily life?

COMMUNICATION SOCIALISING

LEARNING MOBILITY

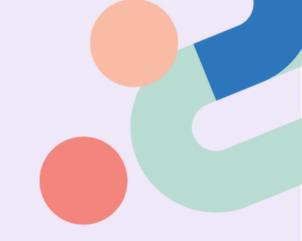
SELF-CARE SELF-MANAGEMENT

*When discussing these domains, consider what's typically expected of peers the same age, who do not have a disability.

QUICK TIPS FOR WRITING REPORTS FOR THE NDIS

Be Cohesive & Collaborate

For the participant to get the best outcome for their NDIS plan, all reports need to be cohesive and not counteract each other.



COLLABORATE/CHAT WITH:

PARTICIPANT

NOMINEE/PARENT

ALLIED HEALTH PROFESSIONALS

OTHER HEALTH PROFESSIONALS

TEACHER

EMPLOYER

- What would the participant/nominee like to be funded?
- Find out what Mainstream Supports is the participant already accessing
- What skills are Allied Health Professionals working on with the participant?
- What other supports would help the individual live a more "ordinary life" - i.e. increase independence and social community participation?

Be Cohesive & Collaborate!

For the participant to get the best outcome for their NDIS plan, all reports need to be cohesive and not counteract each other.



CONSIDER THIS SITUATION:

REPORT #1 (i.e. OT) says:

Participant communicates needs/wants clearly

REPORT #2 (i.e. Speech Therapist) says:

Participant struggles to communicate needs/wants without assistance



Very confused NDIS Planner, trying to determine correct funding amount.

Incorrect (low) funding could be given for Speech Therapy, as planner could think the Speech Therapist is just trying to write a report to get more \$\$ for their services.

Keep it consise!

Longer is not necessarily better in the instance of NDIS reports. Be clear, direct and ensure to address the criteria.



- Don't include EVERYTHING, only include what's important
- Continue to ask yourself as you write: Does this meet R&N criteria and is it impactful?
- Avoid unnecessary repetition
- Organise your thoughts and follow a structure with your writing

NDIS Planners/Delegates are busy people - they will likely only skim read your report, so make it easy for them to know what you're saying and/or requesting.

Include Risks/Barriers

It's common for people with disabilities to face a multitude of barriers and risks, due to their disability. These are important to include in your report.



What is preventing the participant from living an "ordinary life"?

"Factors in a person's environment that, through their absence or presence, limit functioning and create disability.

Most barriers are related to attitudes, communication, physical and policy.

- Health inequities faced by people with disabilities eg, structural and social challenges and communicating their needs.
- a physical environment that is not accessible,
- lack of relevant assistive technology (assistive, adaptive, and rehabilitative devices)
- services, systems and policies that are either nonexistent or that hinder the involvement of all people with a health condition in all areas of life.

Include Risks/Barriers

It's common for people with disabilities to face a multitude of barriers and risks, due to their disability. These are important to include in your report.



What's at stake if funding isn't provided or isn't adequate?

- Risk to self (self-harm) and to others
- Social isolation
- Vunerable/easily influenced or coerced into doing things
- Poor peer and social support networks
- Functional decline
- Behaviours of concern developing and/or increasing
- Not able to recognise danger
- Not able to protect themselves
- The wellbeing of the Informal supports at risk

ACCESS REQUEST REPORTS

REPORTS FOR INDIVIDUALS TO GET ONTO THE NDIS

- RECENT (WITHIN 2 YEARS)
- CONFIRMS PRIMARY DISABILITY & LISTS
 ALL CO-OCCURING CONDITIONS
- DISCUSSES THE COMPLEXITY OF THE
 INDIVIDUAL'S LIFE IN RELATION TO THEIR
 FUNCTIONAL CAPACITY (HOW IT
 IMPACTS THE INDIVIDUAL'S LIFE
- DESCRIBES PREVIOUS <u>TREATMENTS</u> AND OUTCOMES (WHAT WORKED AND WHAT DIDN'T)
- DESCRIBES FUTURE <u>TREATMENT</u>
 OPTIONS AND EXPECTED OUTCOMES OF
 THOSE TREATMENTS

PROGRESS REPORTS

REPORTS FOR PLAN REVIEW
DETAIL ABOUT THERAPY PROGRESS

- IMPACT OF THE DISABILITY ON FUNCTIONAL CAPACITY
- SUMMARY OF THE SUPPORTS PROVIDED
- PROGRESS TOWARDS THEIR NDIS GOALS
- DETAILS ABOUT (RELEVANT)
 MAINSTREAM SUPPORTS
- SUGGESTIONS/REQUESTS FOR FUTURE PLAN

If you are making suggestions in your reports you MUST use R&N Criteria to justify why these are best funded by NDIS.

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THANK YOU FOR ATTENDING

We hope you found the session informative and helpful.



We'd love to hear from you!

Connect with Megan on LinkedIn

