

What evidence do you need to give us before we create or change your plan?

To create your NDIS plan, we use evidence to help us decide what supports meet the NDIS funding criteria for you.

When you experience a change in circumstances that may impact the funding in your NDIS plan, you can ask us to change your plan. We also use evidence to help us make these decisions. We need different types of evidence for different types of supports.

We could get this information before you become a participant, during a check-in, or anytime you talk to us. For other supports we might need a report, assessment, or quote, such as an occupational therapist report. The reports you give us should be written within the last 12 months to accurately reflect your current needs or situation. For some supports the only evidence we need will be the information you give us about your lived experience.

You might request a change to your plan if your situation changes. We also use evidence to help us decide whether your plan needs to be changed and which supports meet the NDIS funding criteria for you. If you're still gathering evidence, it's best to wait until you have it before making the request for a plan change.

Use the list below to learn more about the types of evidence we'll need. This helps us to decide whether we can include a support in your plan or change your plan before your scheduled plan reassessment date. You can also use this list to learn who can provide this evidence.

Assistance animals including dog guides

Assistance animals, including dog guides, are animals specially trained to help you do things you can't do because of your disability. Learn more in [Our Guideline – Assistance animals including dog guides](#).

Table 1 – Assistance animals including dog guides

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk to you about:</p> <ul style="list-style-type: none">• what tasks you need the assistance animal to help you do because of your disability• how the assistance animal will help you pursue your goals• how the assistance animal will work with your other supports• whether you've had an assistance animal before.
What evidence do we need?	<p>We need information and evidence from:</p> <ul style="list-style-type: none">• your allied health professionals which explains how an assistance animal will allow you to be, or help you remain independent• an accredited assistance animal provider to confirm the assistance animal can be matched to you and is qualified or is being trained for you. For example, if you've used an assistance animal before. <p>We'll also need a quote for the cost of getting your assistance animal from your accredited assistance animal provider.</p>
Who can provide it?	<p>Your occupational therapist (OT) or psychologist depending on what type of assistance animal you are asking for.</p>

	A suitability assessment needs to be completed by an accredited assistance animal provider.
How do you provide it?	<p>An accredited assistance animal provider can use the relevant template you may need:</p> <ul style="list-style-type: none"> • assessment template – Assistance Animal • assessment template – Dog Guide.

Assistive technology

When we talk about assistive technology, we mean equipment, technology and devices that help you do things you can't do because of your disability. Or things that help you do something more easily or safely. Assistive technology involves things designed to improve your daily life and help you do everyday things.

We need different evidence from you to help us decide if the assistive technology [NDIS funding criteria](#), depending on the cost of the item.

Use this fact sheet to understand what [evidence](#) we need from you to help us decide if the assistive technology meets the [NDIS funding criteria](#).

Learn more about [Assistive Technology](#)

Table 1 – Assistive technology

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll check what assistive technology you currently have. We'll also talk with you about any assistive technology (AT) you may need.
What evidence do we need?	Low cost AT is less than \$1,500 per item. You can tell us what you need and there is no specific written evidence needed.

	<p>Some low cost AT items that may be high risk, a day-to-day living cost or don't relate to your disability are excluded for purchase under our flexible low cost AT policy. These may need written evidence from an AT advisor. To learn more about what low cost AT we may fund go to Assistive technology – Guide for low cost support funding.</p> <p>Mid cost AT is between \$1,500 and \$15,000 per item. You'll need to provide written evidence from an AT advisor that includes:</p> <ul style="list-style-type: none"> • what item you need • how the item helps with your disability support needs • why the item is the best value way to help you pursue your goals • how much the item might cost. <p>High cost AT is more than \$15,000 per item. You'll need to provide us with an assessment from an AT assessor and a quote for the item. In some cases we may need two quotes to check the item is value for money. We'll let you know if we need this information.</p> <p>We recommend you get advice from an AT assessor to make sure you get AT that's right for you.</p>
<p>Who can provide it?</p>	<p>Your qualified AT advisor will talk to you about the most appropriate solution for you. Your AT advisor might be an allied health practitioner, continence nurse or other qualified practitioner.</p> <p>For example, an occupational therapist would provide a report for a wheelchair or specialised bed. A speech pathologist would provide a report for a communication device.</p> <p>Your AT advisor can also help you to get a quote from a supplier if you need one.</p>

<p>How do you provide it?</p>	<p>Your qualified health professional can use the relevant template (if needed):</p> <ul style="list-style-type: none"> • General Assistive Technology assessment template • Hearing Devices and Hearing Technology assessment template • Prosthetics and Orthotics Assistive Technology assessments template. <p>You only need to give us a quote if we ask for one. Learn more about providing quotes.</p>
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Assistive technology repairs and rental

Supports to repair and maintain assistive technology. This also includes short-term rental and trial of your assistive technology supports.

Table 2 – Assistive technology repairs and rental.

Question	Answer
<p>What will we ask you about?</p>	<p>Before we create or change your plan, we'll check what assistive technology you currently have and talk with you about any assistive technology you may need. We'll ask if any of the equipment you have needs any maintenance.</p>
<p>What evidence do we need?</p>	<p>We'll include funding for assistive technology repairs and maintenance when we include assistive technology in your plan. You only need to give us a quote if we ask for one.</p> <p>If you need a trial, we can use the Assistive Technology – Guide for minor trial and rental funding for any item under \$1,500. For items over \$1,500 we'll need a quote.</p>
<p>Who can provide it?</p>	<p>We'll get information about your assistive technology repair needs when we include assistive technology in your plan.</p>

	If we need a quote for a trial, we'll get this information from you or a quote from a provider.
How do you provide it?	You only need to give us a quote if we ask for one. Learn more about providing quotes .

Assistance with daily living

Assistance with daily living supports provide assistance or supervision during your personal day-to-day tasks. These supports help you live as independently as possible in a range of environments, including your own home.

Table 3 – Assistance with daily living

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about your current daily living goals and what type of supports you need. We'll talk with you about any other help you may need with your day-to-day tasks.
What evidence do we need?	If you need high level of support for day-to-day tasks or an increase in your support hours, you may need to give us reports or assessments from your allied health professionals about your support needs. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high ratio of support. We'll let you know if we need this information.
Who can provide it?	An allied health professional. This could be an occupational therapist, speech pathologist or physiotherapist. If we ask for them, your allied health professional can provide reports or assessments.
How do you provide it?	You give us this information when you talk about your lived experience.

	You can give us written evidence from your allied health professional in the form of reports, letters, or assessments about your support needs.
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Assistance with social, economic and community participation

Assistance or supervision for you to engage in community, social, recreational, or economic activities. You can use these supports in a range of environments, such as in the community or a centre.

Learn more about social and recreational support [Social and recreation support](#).

Table 4 – Assistance with social, economic and community participation.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk to you about what activities you do in the community and for recreation. We'll talk to you about any work or study you do or plan to do. We'll talk with you about the barriers you face when taking part in social and recreational activities.</p> <p>We'll talk to you about your goals about taking part in the community and work out who is best to provide support for this.</p> <p>We'll also ask:</p> <ul style="list-style-type: none"> • if you need help to get out of the house so you can do these activities • about what help you currently get and if these supports meet your needs • what activities you already do in the community • if these supports can continue • and what has recently changed.

What evidence do we need?	If you need high levels of support for day-to-day tasks, you may need to give us reports or assessments. Your allied health professionals can provide a report or assessment about your support needs. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high ratio of support. We'll let you know if we need this information.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian. If we ask for them, your allied health professional can provide reports or assessments.
How do you provide it?	You give us this information when you talk about your lived experience. Your allied health professional can provide reports or assessments about your support needs.

Behaviour support

Behaviour support are supports your carers may need to understand the nature and function of behaviours that may cause harm or distress, and to respond appropriately to those behaviours. The aim of behaviour support is to understand the reasons for the behaviour and implement strategies that will help find other ways to meet the best outcome for you.

Table 5 – Behaviour support.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you, your family, guardian, or nominee about how your disability affects your ability to manage your behaviours. We'll also ask about what supports you might need to improve your relationships.

<p>What evidence do we need?</p>	<p>If you are requesting behaviour support for the first time, we'll need to confirm you need positive behaviour support strategies. This information can come from your:</p> <ul style="list-style-type: none"> • parents or informal carer • school or day centre provider • general practitioner or other treating medical practitioner • treating allied health practitioner • SIL provider or NDIS support provider. <p>If you already have a behaviour support practitioner, you'll also need to provide us with a report to confirm you need a behaviour support plan and the supports are:</p> <ul style="list-style-type: none"> • appropriate to your needs • evidence-based practices • comply with relevant Commonwealth, State and Territory laws and policies. <p>We'll need a copy of either your interim or comprehensive behaviour support plan when your behaviour support practitioner has completed it.</p>
<p>Who can provide it?</p>	<p>Your parent or informal carer, school or day centre provider, general practitioner or other treating medical or allied health practitioner or NDIS support provider can provide information for behaviour support to be included for the first time.</p> <p>Your behaviour support practitioner will need to create a behaviour support plan with you and your family.</p>
<p>How do you provide it?</p>	<p>Your parent or informal carer, school or day centre provider, general practitioner or other treating medical or allied health practitioner or NDIS support provider can provide a letter or other information describing the type of behaviours of concerns that occur.</p>

	<p>Your behaviour support practitioner can create a behaviour support plan with you and your family using any of the below:</p> <ul style="list-style-type: none"> • their own behaviour support plan report • Interim behaviour support plan • Comprehensive behaviour support plan.
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Choice and control

Supports to help you manage your plan and pay for services using a registered plan manager.

Table 6 – Choice and control.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk with you about whether you might need help to improve your life choices and to:</p> <ul style="list-style-type: none"> • increase your financial and plan management skills • pay providers • increase your choice of providers • increase your financial and plan management skills. <p>We'll discuss whether you want to use a Registered Plan Manager.</p>
What evidence do we need?	We use information we learn from talking with you to decide whether we can include this type of support.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	You give us this information when you talk about your lived experience.

Consumables

Consumables support you to purchase items you use every day. This may include Home Enteral Nutrition (HEN) products or continence products. To learn more about the information we need for specific consumable products search for the topic you want on this page. For example, for information on continence consumables, go to [continence supports](#).

Table 7 – Consumables.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about what consumable products you currently use, and how often you use them.
What evidence do we need?	We'll ask for any reports or assessments you have from your allied health professionals about your support needs.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	You give us this information when you talk about your lived experience. Your allied health professional can provide reports or assessments about your support needs.

Disability-related health supports

Disability-related health supports are health supports that relate directly to the functional impact of your disability. If you need help to manage a health condition because of your disability, we may fund disability-related health supports to help you manage that condition. Learn more in [Our Guideline – Disability-related health supports](#).

Disability-related health supports can include:

- [Dysphagia supports](#)

- [Nutrition supports](#)
- [Continence supports](#)
- [Diabetes management supports](#)
- [Epilepsy supports](#)
- [Wound and pressure care supports](#)
- [Podiatry and foot care supports.](#)

Dysphagia supports

Table 8 – Dysphagia supports.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about what dysphagia supports you currently get, who you get them from and how often you use them.
What evidence do we need?	We'll need reports or evidence from your speech pathologist to confirm you need: <ul style="list-style-type: none"> • thickener products • assistive technology to help you eat or drink • support to prepare meals or help you eat and drink safely.
Who can provide it?	Your speech pathologist.
How do you provide it?	Your speech pathologist can: <ul style="list-style-type: none"> • use our nutrition and dysphagia assistive technology supports assessment template for assistive technology or their own report • create for you a Mealtime management plan which describes the support you need to eat and drink safely during mealtimes. This is sometimes called an oral eating and drinking care plan.

Nutrition supports

Table 9 – Nutrition supports.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about what nutrition supports you currently get, who you get them from and how often you use them. We'll also check if you are expecting any changes in who provides these supports.
What evidence do we need?	We'll need evidence from your allied health professional to confirm you need: <ul style="list-style-type: none"> • support to help you follow a meal plan • products to help you eat safely • HEN and PEG equipment.
Who can provide it?	Your doctor or allied health professional, such as a dietician.
How do you provide it?	Your doctor or allied health professional can: <ul style="list-style-type: none"> • write a report which describes the nutrition supports you need • use our nutrition and dysphagia assistive technology supports assessment template for assistive technology or their own report • create a nutritional plan which shows how the supports will meet your nutritional needs.

Continence supports

Table 10 – Continence supports.

Question	Answer
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What will we ask you about?	Before we create or change your plan, we'll talk to you about what continence supports you currently use, and how often you use them. We'll ask who helps you with these supports and check if you would like someone else to provide this support instead.
What evidence do we need?	We'll need reports or information from a qualified health professional or continence nurse. The evidence will need to confirm you need continence supports such as products or help from someone to manage your incontinence.
Who can provide it?	Your continence nurse or qualified health professional.
How do you provide it?	Your continence nurse or qualified health professional can: <ul style="list-style-type: none"> • create a continence assessment or report about your continence support needs • use our continence related assistive technology assessment template for assistive technology or write their own report.

Diabetes management supports

Table 11 – Diabetes management supports.

Question	Answer
What will we ask you about?	Before we create or change your plan we'll ask you how your disability affects your ability to manage your diabetes by yourself and ask if your diabetes is stable. We'll talk with you about the diabetes management supports you currently get, who you get them from and how often.

What evidence do we need?	<p>We need reports or information from your doctor, nurse or endocrinologist which confirms that due to your disability you need:</p> <ul style="list-style-type: none"> • support to manage your diabetes which could include testing blood sugar levels, eating regular balanced meals or help to follow your Diabetes Care Plan • a nurse to help you manage your diabetes and why this can't be delegated to someone else.
Who can provide it?	Your doctor, diabetics nurse or an endocrinologist.
How do you provide it?	We'll need reports or your diabetes care plan from your doctor, diabetics nurse or endocrinologist.

Epilepsy supports

Table 12 – Epilepsy supports.

Question	Answer
What will we ask you about?	Before we create or change your plan we'll ask how your disability affects your ability to manage your epilepsy yourself. We'll ask what epilepsy supports you currently have, who you get supports from and how often. We'll also talk to you about what supports you might need.
What evidence do we need?	<p>We'll need evidence from your qualified health professional to confirm you need:</p> <ul style="list-style-type: none"> • training for support workers to help you follow your Epilepsy Management Plan or Emergency Medication Management Plan • support to monitor your seizures • assistive technology to help manage your epilepsy • support coordination to link you with epilepsy support services.

Who can provide it?	Your qualified health professional. This may be your doctor or a specialist.
How do you provide it?	Your qualified health professional can: <ul style="list-style-type: none"> • provide your Epilepsy Management Plan (EMP) or Emergency Medication Management Plan (EMMP) • use our assistive technology assessment template or write their own report.

Wound and pressure care supports

Table 13 – Wound and pressure care supports.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about how your disability affects your ability to manage your wound and pressure care by yourself. We'll ask what wound and pressure care supports you currently have, who you get them from and how often. We'll also talk with you about what supports you might need.
What evidence do we need?	We'll need your pressure care plan, wound management plan or reports from your qualified health professional to confirm that due to your disability you need: <ul style="list-style-type: none"> • wound consumables like gauze, bandages, or dressings • support to help you with a wound management plan • items to prevent wounds like pressure relief cushions, moisturiser, and barrier creams. <p>We'll also need quotes for wound care consumables and prevention supports.</p>

	We may also need a lymphoedema management plan prepared by your physiotherapist or occupational therapist to confirm you need repositioning supports or drainage massages.
Who can provide it?	A qualified health professional. This could be a doctor, registered nurse, specialist, clinical nurse consultant, physiotherapist, or occupational therapist.
How do you provide it?	Your qualified health professional can provide your pressure care plan or wound management plan. They can also write their own report about your wound care. Your physiotherapist or occupational therapist can provide your lymphoedema management plan.

Podiatry and foot care supports

Table 14 – Podiatry and foot care supports.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk with you about how your disability affects your ability to manage your foot care. We'll ask what podiatry and foot care support you currently get, who you get them from and how often. We'll also talk to you about supports you might need but don't currently have.
What evidence do we need?	We'll need information and evidence from a podiatrist or other appropriately qualified professional to confirm that due to your disability you need: <ul style="list-style-type: none"> • foot care, such as toenail cutting or callus removal to prevent foot-related problems • regular reassessment and the development of a podiatry care plan • assistive technology including orthoses such as a brace or splint or medical grade or custom footwear.

Who can provide it?	Podiatrist or a qualified health professional.
How do you provide it?	Your podiatrist can: <ul style="list-style-type: none"> • provide a podiatry care plan • write other reports and assessments about your foot care supports.

Early childhood supports

Early childhood supports are for children younger than 7. These supports are about giving children with developmental delay or disability, and their families, supports to enable the child to have the best possible start in life. Learn more about [early childhood approach](#).

Table 15 – Early childhood supports.

Question	Answer
What will we ask you about?	<p>Before we create or change your child’s plan, we’ll ask you about your child’s development and goals. We’ll talk about the information, tools and help you need for your child’s development and participation.</p> <p>We’ll regularly check-in to understand your child’s progress and talk about transitions that will happen during your child’s early years. Before your child turns 7, we will talk to you about:</p> <ul style="list-style-type: none"> • leaving the NDIS and maintaining linkages with mainstream and community services • continuing support through a local area coordinator or planner when your child turns 7.
What evidence do we need?	<p>We’ll ask for reports or letters from your doctor, child health nurse, paediatrician or other health professional about your child’s developmental delay or disability. For example, we’ll ask for this evidence about:</p>

	<ul style="list-style-type: none"> • your child and family’s progress towards their goals • your child’s functional capacity, independence, and ability to take part in day-to-day life • the support needed for your child’s independence • your future goals and recommendations.
Who can provide it?	<p>We’ll ask you for this information.</p> <p>Your doctor, child health nurse, paediatrician or other health professional can provide reports and letters.</p>
How do you provide it?	<p>You can give us this information when we talk to you.</p> <p>Your doctor, child health nurse, paediatrician or other health professional can provide reports and letters.</p> <p>We have a template we use to collect this information.</p>

Health and wellbeing

Health and wellbeing supports help manage the impact of your disability to improve your health and wellbeing. Learn about [improved health and wellbeing](#) supports we may or may not fund.

Table 16 – Health and wellbeing.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we’ll ask you about any help you may need to improve your health and wellbeing. We’ll also ask you about any support you currently get and if this meets your needs.</p> <p>We’ll talk with you about what supports you have for this support and whether you need referral to other services.</p> <p>We also discuss with you what supports could help you reach your health and wellbeing goals.</p>

<p>What evidence do we need?</p>	<p>We use information we learn from talking with you to decide whether we can include this type of support.</p> <p>We'll also ask you for an allied health report describing how the support will meet your disability related support needs.</p>
<p>Who can provide it?</p>	<p>You or a person acting on your behalf like a family member, friend, or guardian.</p> <p>Allied health professionals can provide reports on your support needs. This could be a dietitian or exercise physiologist.</p>
<p>How do you provide it?</p>	<p>You give us this information when you talk about your lived experience.</p> <p>Your allied health professionals can provide the reports or assessments we'll ask for.</p>

Home and living

There are several different types of supports we might include in your plan under home and living.

Different types of home and living supports will suit different people. We want to provide the best option for support in your home, now and in the longer term. We can help explain the different home and living supports available. We'll work with you to find the best mix of supports that will help you live as independently as possible.

Individualised living options

Individualised Living Option (ILO) helps you use your funded supports to live the way that suits you. Individualised Living Option supports are typically added to your plan in 2 stages.

- Stage 1 is all about exploring and designing your support package.
- In stage 2 we add your ILO supports to your plan. We only do this once stage 1 is complete.

Learn more about [Individualised Living Options](#).

Table 17 – Individualised Living Options.

Question	Answer
<p>What will we ask you about?</p>	<p>Before we create or change your plan, we'll talk with you about your home and living goals to see if they include exploring an ILO. We'll talk with you about:</p> <ul style="list-style-type: none"> • your home and living needs • how much formal or informal support you need each day • if you're willing to invest time and energy towards creating your future home • who else might be part of your individualised living option. <p>We'll use this information to help us work out supports to include in your plan to help you explore and design ILO supports.</p>
<p>What evidence do we need?</p>	<p>When you explore and design ILO supports you, your family and friends may work with a support provider. You'll work out where you want to live and how you want to be supported.</p> <p>Once you've completed the explore and design stage, we'll ask you to complete an ILO service proposal which tells us:</p> <ul style="list-style-type: none"> • about your current living arrangements • if you have worked out where you want to live, who with and what support you will need • how this support will be organised and delivered and by who • how much ILO will cost to deliver and monitor • how ILO supports will work with your other supports.
<p>Who can provide it?</p>	<p>To explore and design ILO supports you can work with family friends and service providers.</p>

	To include ILO supports in your plan you'll need to complete an ILO service proposal with help from an ILO Provider.
How do you provide it?	<p>We'll talk with you and the people acting on your behalf to work out what supports to include to help you explore and design ILO supports.</p> <p>We'll need an ILO service proposal to include ILO supports in your plan.</p>

Medium term accommodation

Medium term accommodation is funding for somewhere to live if you can't move into a long-term home because your disability supports aren't ready. Learn more about [medium term accommodation](#).

Table 18 – Medium term accommodation.

Question	Answer
What will we ask you about?	Before we include medium term accommodation in your plan we'll talk with you about your other home and living support needs.
What evidence do we need?	<p>When we talk to you about your home and living supports we'll also ask for any reports from your allied health professionals which confirms your daily support and accommodation needs.</p> <p>We need to confirm:</p> <ul style="list-style-type: none"> • you have a long-term home to move into after medium term accommodation • you can't move into your long-term home yet because your disability supports aren't ready • you can't stay in your current accommodation while you wait for your long-term home. <p>We can include funding for assessments in your plan.</p>

Who can provide it?	<p>You or a person acting on your behalf like a family member, friend or guardian can request home and living supports.</p> <p>Your allied health professionals can complete reports about your daily support and accommodation needs.</p>
How do you provide it?	<p>We'll talk to you about your accommodation needs. Your allied health professionals can provide the reports or assessments we'll ask for.</p>

Supported independent living

[Supported independent living](#) (SIL) is one type of support to help you live in your home. It includes help or supervision with daily tasks, like personal care or cooking meals. It helps you live as independently as possible, while building your skills.

Table 19 – Supported independent living.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk to you about your goals and if they include home and living supports. To help us understand your needs, we'll talk with you about:</p> <ul style="list-style-type: none"> • your current living arrangements and supports • what supports you might need in the future • what home and living supports you have looked at before • your independent living skills and how you might build on these • information about your day-to-day support needs • if other home and living options better suit your needs.
What evidence do we need?	<p>You'll need to give us:</p> <ul style="list-style-type: none"> • any assessments of your disability support and housing needs • allied health professional reports

	<ul style="list-style-type: none"> • reports about your daily support needs • your roster of care from your supported independent living provider if you have one. <p>In some cases, we may ask for other assessments of your home and living needs if we need more information to make a decision. We'll generally include funding in your plan if we ask for these assessments.</p>
Who can provide it?	<p>Your allied health professionals or behavioural support practitioner can provide reports about your support needs.</p> <p>A SIL provider can complete your roster of care.</p>
How do you provide it?	<p>We'll talk to you to understand what supports you'll need. You give us this information when you talk about your lived experience.</p> <p>Your allied health professional or behaviour support practitioner can provide reports or assessments we ask for.</p> <p>Your SIL provider can complete the SIL roster of care submission.</p>

Home modifications

Home modifications are custom-built changes to your home to help you access and use areas of your home. Home modifications can be minor changes like widening a doorway. They may be more complex, like combining your bathroom and toilet to give you more room to use a hoist or shower chair. Learn more about [home modifications](#).

Table 20 – Home modifications.

Question	Answer
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<p>What will we ask you about?</p>	<p>Before we create or change your plan, we'll talk with you about your home and living needs. This could be in a check-in or you might contact us to tell us you think you need home modifications. We'll talk with you about:</p> <ul style="list-style-type: none"> • how home modifications may help you do things you find difficult because of your disability • your home and living goals • if you're happy where you currently live • if you have any difficulties getting around your current home.
<p>What evidence do we need?</p>	<p>We'll need written approval from the homeowner or relevant bodies before we can include home modifications in your plan. This could include your landlord or your mortgage provider.</p> <ul style="list-style-type: none"> • For category A minor home modifications - any occupational therapist can do your assessment, including your usual occupational therapist. • For category B minor home modifications - we need a home modification assessor to do your assessment. • For complex home modifications, you need to give us an assessment from a home modification assessor. We'll need 2 itemised quotes from a licensed builder. <p>Learn more about how you can get home modifications in your plan.</p>
<p>Who can provide it?</p>	<p>Written approval for home modifications may need to come from the homeowner, landlord, mortgage provider or relevant bodies if in a building with shared ownership.</p> <p>An occupational therapist or a home modification assessor can provide an assessment.</p>

	Your qualified allied health practitioner can refer to the Home modifications guidance for builders and designers for guidance on what information is needed for complex home modifications.
How do you provide it?	<p>You are responsible for getting approvals for home modifications and giving them to us.</p> <p>A qualified occupational therapist or home modification assessor can complete the assessment template based on your needs:</p> <ul style="list-style-type: none"> • assessment template – minor home modifications • assessment template – complex home modifications.

Improved daily living skills

This support category includes supports to help you learn or build your skills for independence and community participation. These services can be delivered in groups or individually.

Table 21 – Improved daily living skills.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about your current daily living goals, what type of supports you need. We'll ask you about any help you may need to improve your daily living skills.
What evidence do we need?	<p>We'll ask for any reports or assessments you have from your allied health professionals about your support needs. This may include:</p> <ul style="list-style-type: none"> • evidence of current supports • how the support has helped you pursue your goals • how the support helps you maintain your independence • evidence based recommendations.

Who can provide it?	An allied health professional. This could be an occupational therapist, speech pathologist or physiotherapist.
How do you provide it?	Your allied health professionals can provide the reports or assessments we'll ask for.

Improved living arrangements

Supports to help you find and maintain an appropriate place to live.

Learn more about [individualised living options](#).

Table 22 – Improved living arrangements.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about your current living arrangements and if this meets your needs. We'll talk to you about your home and living goals, where you live now and would like to live in the future. For plan changes, we'll also ask you what has recently changed with your living arrangements.
What evidence do we need?	In some cases, we may ask for other assessments of your home and living needs if we need more information to make a decision. We'll generally include funding in your plan if we ask for these assessments.
Who can provide it?	Your allied health professional can provide reports or assessments. You or a person acting on your behalf like a family member, friend, or guardian. If we ask for further assessments, we'll let you know who can provide them.
How do you provide it?	You give us this information when you talk about your lived experience.

	<p>Your allied health professionals can provide the reports or assessments we'll ask for.</p> <p>You can use our Supporting evidence form - Home and living if your request is for Supported Independent Living, Independent Living Options and Specialist Disability Accommodation.</p>
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Increased social and community participation

Supports to allow you to take part in skills-based learning to develop independence in accessing the community. Learn more about [social and recreational support](#).

Table 23 – Increased social and community participation.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll ask you about any help you may need to improve your independence when completing activities in the community. We'll talk with you about the barriers you face to taking part in social and recreation activities. We'll discuss your goals about taking part in the community and work out who is best to provide support for this.</p> <p>We'll also ask:</p> <ul style="list-style-type: none"> • what activities you already do in the community • what support you currently get for these activities • who provides support • if these supports can continue.
What evidence do we need?	<p>Reports which detail the support you need to take part in activities in the community will help us decide what supports to include in your plan.</p>
Who can provide it?	<p>You or a person acting on your behalf like a family member, friend, or guardian.</p>

	Your allied health professional or psychologist can provide any reports about your support needs.
How do you provide it?	You give us this information when you talk about your lived experience. Your allied health professional or psychologist can provide any reports about your support needs.

Relationships

This support category will help you develop skills and interact with others in the community. You might need other supports to help you develop these skills. For example, you might also need behaviour support.

Table 24 – Relationships.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll talk to you about your current relationships and if you need help to improve your relationships. We'll ask what help you currently get and if this meets your needs. We'll also ask about any other help you may need to improve your relationships.
What evidence do we need?	We talk with you to work out what supports we can include. When we talk with you, we may identify other supports you may need. We'll let you know what these supports are and the evidence we need to include them in your plan.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	You give us this information when you talk about your lived experience.

Specialist disability accommodation

Some people living with disability have very high support needs. This could mean they need to live in a specially designed house. We call this [specialist disability accommodation](#) (SDA).

Table 25 – Specialist disability accommodation.

Question	Answer
<p>What will we ask you about?</p>	<p>Before we create or change your plan, we'll talk to you about your goals and if they include home and living supports. To help us understand your needs, we'll talk with you about whether the support will help you to:</p> <ul style="list-style-type: none"> • improve or maintain your ability to do things with less support • reduce or maintain your need for person-to-person supports • create better connections with your family, community, health services, education, and employment.
<p>What evidence do we need?</p>	<p>To confirm you're eligible for SDA we need evidence which helps us work out if:</p> <ul style="list-style-type: none"> • you have an extreme functional impairment or very high support needs • you have a specialist disability accommodation needs requirement • specialist disability accommodation meets the NDIS funding criteria for you. <p>We'll need reports from your allied health professionals and reports which confirm your daily support and housing needs.</p> <p>In some cases, we may ask for other assessments of your home and living needs if we need more information to make a decision. We'll generally include funding in your plan if we ask for these assessments.</p>

Who can provide it?	Your allied health professionals can complete reports about your daily support and housing needs.
How do you provide it?	Your allied health professional can provide us with reports.

Support coordination and psychosocial recovery coaches

Supports to help you understand your plan and connect with NDIS providers, community and mainstream and other government supports. These supports help you to build your confidence and coordinate your supports.

Table 26 – Support coordination and psychosocial recovery coaches.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll ask you if you need ongoing help to arrange and manage your supports. This includes how much help you may need. We'll also talk to you about any support you currently get and if this meets your needs.
What evidence do we need?	We'll ask for: <ul style="list-style-type: none"> • a report from your support coordinator or recovery coach about how your supports are working for you • any reports or assessments you have from your allied health professionals about your support needs.
Who can provide it?	Your support coordinator or recovery coach. You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	Your allied health professional can provide us with reports.

	Your support coordinator or recovery coach can use our reporting templates for support coordination and psychosocial recovery coaches.
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Therapy supports

These supports are provided by allied health professionals to help you manage everyday activities.

Table 27 – Therapy supports.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk with you about the type of therapy support you might need and why you need it. We'll discuss the type of allied health professional you're expecting to provide this support.</p> <p>We'll ask you whether therapy supports have helped you manage the impact of your disability in the past and whether they have helped you pursue your goals.</p>
What evidence do we need?	<p>Along with the information we talk with you about we'll also need assessments and progress reports which describe:</p> <ul style="list-style-type: none"> • the intended outcome of the supports • how long and how often you'll need the support for the intended outcome • the type of therapy approach • what outcomes you have achieved by participating in therapy supports to date.
Who can provide it?	Your treating allied health professional can provide reports and assessments.
How do you provide it?	Your allied health professionals can provide the reports or assessments we'll ask for.

Transport

Transport supports are to help you pay your provider to transport you to an activity that is not a support, or to a support that you receive from a different provider. This enables you to travel to and from appointments or your place of work.

Table 28 – Transport.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll ask you about any help you may need with transport. We'll ask you if you're working or studying and how often you do this. We'll talk about what help you currently get and if this support meets your needs. We'll also talk to you about any other transport help you may need.
What evidence do we need?	We need to make sure you need funding for transport because you can't use public transport without substantial difficulty due to your disability. We'll talk with you and use your lived experience to work this out.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	You give us this information when you talk about your lived experience.

Transport recurring

Transport recurring is a regular payment of transport funding which is made available to you over your plan.

Table 29 – Transport recurring.

Question	Answer
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What will we ask you about?	Before we create or change your plan, we'll ask you about any help you may need with transport. We'll ask you if you're working or studying and how often you do this. We'll talk about setting up regular payments into your nominated bank account for transport.
What evidence do we need?	To set up regular payments for transport we'll need your bank account details.
Who can provide it?	You or a person acting on your behalf like a family member, friend, or guardian.
How do you provide it?	You give us this information when you talk about your lived experience.

Vehicle modifications and driving support

You may need changes made to a vehicle because of your disability so you can drive it or travel in it. We call these vehicle modifications. We may also fund other relevant disability supports linked to driving.

Learn more about [vehicle modifications and driving supports](#).

Table 30 – Vehicle modifications and driving support.

Question	Answer
What will we ask you about?	Before we create or change your plan, we'll ask you if you have any vehicle modification needs. We'll talk to you about your transport needs and if the vehicle modifications will help you pursue your goals.
What evidence do we need?	We need evidence from your allied health professional or medical practitioner outlining your need for modified transport. We also need an assessment from a driver trained occupational therapist.

	<p>The evidence and assessments need to tell us about any new modifications or how existing modifications to a second-hand car are safe for you and suit your needs.</p> <p>We may also need a vehicle condition report for second-hand cars older than 5 years and no longer under warranty.</p>
Who can provide it?	<p>Allied health professional or medical practitioner.</p> <p>Driver trained occupational therapists for any assessments.</p> <p>Vehicle condition reports will need to be completed by a licensed vehicle modifier or certifier.</p>
How do you provide it?	<p>Your occupational therapist can complete our assessment template – vehicle modifications.</p>

Work and study supports

Work and study supports can help you move from school to further education and include training and advice. They also include supports to help you find and keep a job. This may include employment-related support, training, and assessments. If you want to work or study and need extra support because of your disability, we may be able to fund supports for you.

Learn more about [work and study supports](#).

Table 31 – Work and study supports.

Question	Answer
What will we ask you about?	<p>Before we create or change your plan, we'll talk to you about your work and study goals. We'll look at the kind of things you are good at and what supports you might need. We'll also talk to you about what other supports you may be able to access.</p>

	We'll talk to you about the kind of things your good at what support other services can provide you. For example, a Disability Employment Service.
What evidence do we need?	To help us work out the work and study supports to include in your plan. give us: <ul style="list-style-type: none"> • letters from your place of work or study • work experience reports • Centrelink Job Capacity Assessments or Employments Services Assessments.
Who can provide it?	We'll ask you for this information.
How do you provide it?	You give us this information when you talk about your lived experience.

Other changes to your plan

There are a range of other circumstances in which you might request a change to your plan. This could be to change your participant statement and your goals in your plan. You should also tell us if your address or contact details have changed. We can make these changes for you without making a new plan.

Question	Answer
What will we ask you about?	Before we change your plan, we'll ask you about what changes you would like to make to your current plan or what personal information you'd like updated.
What evidence do we need?	We don't need specific evidence, but you'll need to tell us what you want to say in your participant statement and any changes to your goals. You'll need to provide us with the details of updates to your bank account or changes to your contact details. These details can be entered on the myplace portal or my NDIS app or can be shared with the Agency verbally or in writing.

<p>Who can provide it?</p>	<p>You, or a person with your consent, or authorisation to act on your behalf.</p> <p>If we ask for further information, we'll let you know what we need.</p>
<p>How do you provide it?</p>	<p>You can make this request in the same way you would let us know about other changes to your plan, even though your plan won't need to be changed.</p>

Where can you learn more?

- [Our Guideline – Reasonable and Necessary](#)
- [Our Guideline – Creating your plan](#)
- [Our Guideline – Disability Related health Supports](#)
- [Supports you can access](#)

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