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 NDIS 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 need to 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 . If you're still gathering evidence, it's best to wait until you have it before making a plan change request.

Use the list below to learn more about the types of evidence we'll need. This helps us decide whether we can include an NDIS 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.

Things we fund are called NDIS supports. You can use the funding in your plan to buy NDIS supports if they are related to your disability and are in-line with your plan.

Contents

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 about assistance animals and dog guides.

Table 1 – Assistance animals including dog guides

Question	Answer
What will we ask you about?	We'll talk to you about: • 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 • whether the assistance animal will be effective and beneficial for you • how the assistance animal will work with your other supports • whether you've had an assistance animal before.
What evidence do we need?	We need information and evidence from: • your allied health professionals which explain 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. We'll also need a quote for the cost of getting your assistance animal from your accredited assistance animal provider.
Who can provide it?	Your occupational therapist (OT) or psychologist depending on what type of assistance animal you're asking for. A suitability assessment needs to be completed by an accredited assistance animal provider.

How do you provide it?	An accredited assistance animal provider can use the relevant template you may need: • Assistance Animals assessment template • Dog Guide assessment template.

Assistive technology (AT)

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 made to improve your daily life and help you do everyday things.

Depending on the cost of the item, we need different evidence from you to help us decide if the assistive technology meets NDIS funding criteria.

Learn more about Assistive Technology

Table 2 – Assistive technology (AT)

Question	Answer
What will we ask you about?	We'll check what assistive technology you currently have. We'll also talk with you about any assistive technology you may need.
What evidence do we need?	**Low cost assistive technology** Low cost assistive technology is less than $1,500 per item. You can tell us what you need without giving us specific written evidence. Some low-cost assistive technology items that may be high risk, may need written evidence from an assistive technology advisor. Learn more about low cost assistive technology. **Mid cost assistive technology**

	Mid cost assistive technology is between $1,500 and $15,000 per item. You'll need to provide written evidence from an assistive technology advisor that includes: • what item you need • how the item helps with your disability support needs • if the item is safe for you • why the item is the best value way to help you pursue your goals • a reliable cost estimate of how much the item might cost. Learn more about mid cost assistive technology. **High cost assistive technology** High cost assistive technology is more than $15,000 per item. You'll need to provide us with an assessment from an assistive technology 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. We recommend you get advice from an assistive technology assessor to make sure you get assistive technology that's right for you. Learn more about high cost assistive technology.
Who can provide it?	Your qualified assistive technology advisor will talk to you about the most appropriate solution for you. They might be an allied health practitioner, continence nurse or other qualified practitioner. 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. Your assistive technology advisor can also help you to get a quote from a supplier if you need one.

How do you provide it?	Your qualified health professional can use the relevant templates (if needed): • General Assistive Technology assessment template • Hearing Devices and Hearing Technology assessment template • Prosthetics and Orthotics Assistive Technology assessment template. You only need to give us a quote if we ask for one. Learn more about assistive technology assessments and quotes.

Assistive technology – Maintenance, repairs and rental

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

Table 3 – Assistive technology – Maintenance, repairs and rental

Question	Answer
What will we ask you about?	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.
What evidence do we need?	We'll usually include funding for assistive technology - maintenance, repairs or rental when we include assistive technology in your plan. You only need to give us a quote if we ask for one. 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.
Who can provide it?	We'll get information about your assistive technology repair needs from your assistive technology advisor.

	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 life

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

Table 4 – Assistance with daily life

Question	Answer
What will we ask you about?	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 support for day-to-day tasks, you may need to give us reports or assessments. If you need a high level of support for day-to-day tasks or an increase in your support hours, you may need to give us a greater amount of detail to understand why those supports are needed. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high level 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.

Assistance with social, economic and community participation

Assistance or supervision for you to take part in work, social and community life. You can use these NDIS supports in a range of environments, such as in the community or a centre.

Learn more about Social and recreation supports. You may also be interested in work and study supports.

Table 5 – Assistance with social, economic and community participation

Question	Answer
What will we ask you about?	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 these activities. We'll talk to you about your goals and work out who is best to provide support for this. We'll also ask: • 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 • what has recently changed.
What evidence do we need?	If you need support for day-to-day tasks, you may need to give us reports or assessments.

	If you need high levels of support for day-to-day tasks, you may need to give us a greater amount of detail to understand why those supports are needed. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high level 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

These are NDIS supports to help you develop behavioural management strategies to reduce behaviours of concern. This includes specialist positive behaviour supports provided by professionals with specialist skills in positive behaviour support.

Table 6 – Behaviour support

Question	Answer
What will we ask you about?	We'll talk to you about how your disability affects your ability to manage behaviours of concern. We'll also ask about what supports you might need to improve your relationships.
What evidence do we need?	If you're requesting behaviour support for the first time, we'll need to confirm you need positive behaviour support strategies. This information can come from your: • parents or informal carer

	• school or day centre provider • general practitioner or other treating medical practitioner • treating allied health practitioner • supported independent living (SIL) provider or NDIS support provider. 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. The report will also need to confirm the supports: • are appropriate for your needs • have evidence they will work for you • comply with relevant Commonwealth, State and Territory laws and policies. We'll need a copy of either your interim or comprehensive behaviour support plan when your behaviour support practitioner has completed it.
Who can provide it?	The information we need can come from your: • 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. Your behaviour support practitioner will need to create a behaviour support plan with you and your family.
How do you provide it?	Information can be provided in a letter, email or report describing the behaviours of concern that occur. Your behaviour support practitioner can create a behaviour support plan with you and your family using any of the below: • their own behaviour support plan report • interim behaviour support plan

	• comprehensive behaviour support plan.

Choice and control

These are supports to help you manage your plan and pay for services using a registered plan manager.

Table 7 – Choice and control

Question	Answer
What will we ask you about?	We'll talk with you about whether you might need help to improve your life choices and to: • increase your financial and plan management skills • pay providers • increase your choice of providers. We'll discuss whether you want to use a Registered Plan Manager.
What evidence do we need?	We use the information you share with us to decide whether we can include this type of NDIS 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

This support helps you purchase consumable items you use every day. This may include modified eating or drinking products, or continence consumables. To learn more, go to consumables.

Table 8 – Consumables

Question	Answer
What will we ask you about?	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 to the things you can and can't do because of your disability. If you need help to manage a health condition because of your disability, we may provide you with funding for disability-related health supports. Learn more in Our Guideline – Disability-related health supports.

Disability-related health supports can include:

- Dysphagia supports
- Nutrition supports
- Continence supports
- Diabetes management supports
- Seizure supports
- Wound and pressure care supports
- Podiatry and foot care supports.

Dysphagia supports

Table 9 – Dysphagia supports

Question	Answer
What will we ask you about?	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: • 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: • use our Nutrition and Dysphagia Assistive Technology Supports assessment template for assistive technology or their own report • create a mealtime management plan for you 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 10 – Nutrition supports

Question	Answer
What will we ask you about?	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're 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: • support to help you follow a meal plan • products to help you eat safely • Enteral feeding and Percutaneous Endoscopic Gastrostomy (PEG) equipment.
Who can provide it?	Your doctor or allied health professional, such as a dietitian.
How do you provide it?	Your doctor or suitably qualified allied health professional can: • write a report which describes the nutrition supports you need • use our Nutrition and Dysphagia Assistive Technology 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 11 – Continence supports

Question	Answer
What will we ask you about?	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'd 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: • 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 12 – Diabetes management supports

Question	Answer
What will we ask you about?	We'll ask you how your disability affects your ability to manage your diabetes by yourself. We'll also 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?	We need reports or information from your doctor, nurse or endocrinologist which confirm that due to your disability you need: • support to manage your diabetes. This could include testing blood sugar levels, support to eat regular balanced meals or help to follow your Diabetes Care Plan • a nurse or trained support worker to help you manage your diabetes, or • support to manage your diabetes that could be delegated to someone else, like a family member or friend.

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.

Seizure supports

Table 13 – Seizure supports

Question	Answer
What will we ask you about?	We'll ask how your disability affects your ability to manage your seizures yourself. We'll ask what seizure 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?	We'll need evidence from your qualified health professional to confirm you need: • training for support workers to help you follow your Epilepsy Management Plan (EMP) or Emergency Medication Management Plan (EMMP) • support to monitor your seizures • assistive technology to help manage your seizures • 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: • provide your Epilepsy Management Plan (EMP) or Emergency Medication Management Plan (EMMP) • use our General Assistive Technology assessment template or write their own report.

Wound and pressure care supports

Table 14 – Wound and pressure care supports

Question	Answer
What will we ask you about?	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 other 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. These will need to confirm that due to your disability you need: • 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. We'll also need quotes for wound care consumables and prevention supports. If you're diagnosed with lymphoedema, 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 15 – Podiatry and foot care supports

Question	Answer
What will we ask you about?	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 it 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. This is to confirm that due to your disability you need: • 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?	A podiatrist or a qualified health professional.
How do you provide it?	Your podiatrist can: • 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 9. Our early childhood approach is for children younger than 6 with developmental delay or younger than 9

with disability. These NDIS supports are evidence-based early childhood intervention supports to help families achieve better long-term outcomes for their child.

Learn more about our early childhood approach.

Table 16 – Early childhood supports

Question	Answer
What will we ask you about?	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. 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 9, we will talk to you about: • leaving the NDIS and maintaining connections with mainstream and community services • continuing support through a local area coordinator or planner when your child turns 9.
What evidence do we need?	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 evidence about: • your child and family's progress towards their goals • the things your child can and can't do because of their disability • their 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?	We'll ask you for this information. Your doctor, child health nurse, paediatrician or other health professional can provide reports and letters.

How do you provide it?	You can give us this information when we talk to you. Your doctor, child health nurse, paediatrician or other health professional can provide the reports and letters we'll ask for.

Exercise physiology and personal wellbeing activities

These are NDIS supports that help manage the impact of your disability on your physical mobility or wellbeing. Learn about improved health and wellbeing supports we may or may not fund.

Table 17 – Exercise physiology and personal wellbeing activities

Question	Answer
What will we ask you about?	We'll ask you about any help you may need to improve your physical mobility and wellbeing. We'll also ask you about any support you currently get and if this meets your needs. We'll talk with you about what supports you have and what supports could help you reach your mobility and personal wellbeing goals. We'll also discuss with you whether you need referral to other services.
What evidence do we need?	We'll use information we learn from talking with you to decide whether we can include this type of support. We'll also ask you for an allied health report describing how the support will meet your disability-related support needs.
Who can provide it?	You or a person acting on your behalf, like a family member, friend, or guardian. Allied health professionals can provide reports on your support needs. This could be a dietitian or exercise physiologist.

How do you provide it?	You give us this information when you talk about your lived experience. Your allied health professionals can provide the reports or assessments we'll ask for.

Home and living

There are several different types of NDIS 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 NDIS supports that will help you live as independently as possible.

Individualised living options

An 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.
- Stage 2 is when we add your ILO supports to your NDIS plan.

Learn more about Individualised Living Options.

Table 18 – Individualised Living Options

Question	Answer
What will we ask you about?	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: • 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 ILO. We'll use this information to help you explore and design ILO supports and add these to your plan.
What evidence do we need?	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. During the explore and design stage, we'll ask you to complete an ILO service proposal which tells us: • about your current living arrangements • if you have worked out where you want to live, who with and what support you'll 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.
Who can provide it?	To explore and design ILO supports you can work with family, friends and service providers. 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?	We'll need an ILO service proposal to include ILO supports in your plan.

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 19 – 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?	When we talk to you about your home and living supports, we'll also ask for any reports from your allied health professionals which tell us your daily support and accommodation needs. We need to make sure: • 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. We can include funding for assessments in your plan.
Who can provide it?	You or a person acting on your behalf, like a family member, friend or guardian can request home and living supports. Your allied health professionals can complete reports about your daily support and accommodation needs.
How do you provide it?	Your allied health professionals can provide the reports or assessments we'll ask for.

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 20 – Supported independent living

Question	Answer

What will we ask you about?	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: • 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?	You'll need to give us: • any assessments of your disability support and housing needs • allied health professional reports • reports about your daily support needs • your roster of care from your supported independent living provider if you have one. 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 professionals or behaviour support practitioner can provide reports about your support needs. A SIL provider can complete your roster of care.
How do you provide it?	We'll talk to you to understand what supports you'll need. You give us this information when you talk about your lived experience. Your allied health professional or behaviour support practitioner can provide reports or assessments we ask for.

	Your SIL provider can complete the SIL Roster of Care Submission Template

Home modifications

Home modifications are changes to your home to help you safely access or move around 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 21 – Home modifications

Question	Answer
What will we ask you about?	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: • 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.
What evidence do we need?	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. • 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. Learn more about how you can get home modifications in your plan.
Who can provide it?	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. An occupational therapist or a home modification assessor can provide an assessment. 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?	You're responsible for getting approvals for home modifications and giving them to us. A qualified occupational therapist or home modification assessor can complete the assessment template based on your needs: • Minor home modifications assessment template • Complex home modifications assessment template.

Improved daily living skills

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

Table 22 – Improved daily living skills

Question	Answer

What will we ask you about?	We'll talk to you about your current daily living goals and what type of supports you need. We'll ask you about any help you may need to improve you daily living skills.
What evidence do we need?	We'll ask for any reports or assessments you have from your allied health professionals about your support needs. This may include: • evidence of current supports • how the support has helped you pursue your goals • how the support helps you maintain your independence • evidence that the support will work for you.
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

These are NDIS supports to help you find and keep an appropriate place to live.

Table 23 – Improved living arrangements

Question	Answer
What will we ask you about?	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 to pay for these assessments if we ask you for them.
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. Your allied health professionals can provide the reports or assessments we'll ask for.

Increased social and community participation

These are NDIS supports to help you take part in skills-based learning to develop independence in accessing social and community activities. Learn more about social and recreation support.

Table 24 – Increased social and community participation

Question	Answer

What will we ask you about?	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 this support. We'll also ask: • 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?	Reports which detail the skills you need to develop to take part in activities in the community will help us decide what supports to include in your plan.
Who can provide it?	You or a person acting on your behalf, like a family member, friend, or guardian. 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 is to help you develop positive social skills and interact with others in the community. You might also need other NDIS supports to help you develop these skills. For example, you might also need specialist positive behaviour support.

Table 25 – Relationships

Question	Answer

What will we ask you about?	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'll 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 26 – Specialist disability accommodation

Question	Answer
What will we ask you about?	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: • 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.
What evidence do we need?	To confirm you're eligible for SDA we need evidence to work out if: • you have an extreme functional impairment or very high support needs • you have an SDA needs requirement • SDA meets the NDIS funding criteria for you. We'll need reports from your allied health professionals and reports which confirm your daily support and housing needs. 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 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

These are NDIS supports to help you understand your plan and connect with NDIS providers, community, mainstream and other government supports. They help you to build your confidence and coordinate your supports. Psychosocial recovery coaches also help by working with people with psychosocial disability to increase their independence and social and community participation.

Table 27 – Support coordination and psychosocial recovery coaches

Question	Answer
What will we ask you about?	We'll ask you if you need ongoing help to arrange and manage your NDIS 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: • 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.

Therapy supports

Therapy supports can also be called therapeutic supports. They are supports you may need because of your disability. These supports will help build your functional capacity and independence.

Table 28 – Therapy supports

Question	Answer
What will we ask you about?	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 and if it's a type of support we can fund. 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.
What evidence do we need?	We'll talk with you about the assessments and progress reports we need which describe: • the purpose of these supports • how long and how often you'll need the supports • the type of therapy • any progress you have made 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 with your everyday transport needs. For example, to help you travel to and from appointments or your place of work.

Table 29 – Transport

Question	Answer
What will we ask you about?	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.

What evidence do we need?	We need to make sure you need funding for transport because you can't travel or use public transport independently. 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.

Recurring transport

Recurring transport is a regular payment of transport funding which is made available to you over the course of your plan.

Table 30 – Recurring transport

Question	Answer
What will we ask you about?	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?	We need to make sure you need funding for transport because you can't travel or use public transport independently. 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 specialised driver training

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 NDIS supports that provide specialised driver training.

Learn more about vehicle modifications and specialised driver training.

Table 31 – Vehicle modifications and specialised driver training

Question	Answer
What will we ask you about?	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. We'll also talk to you about your support needs for driving a modified vehicle.
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, including any recommendations for specialised driver training. 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. We may also need a vehicle condition report for second-hand cars older than 5 years and no longer under warranty.
Who can provide it?	An allied health professional or medical practitioner. Driver trained occupational therapists for any assessments. Vehicle condition reports will need to be completed by a licensed vehicle modifier or certifier.

How do you provide it?	Your driver trained occupational therapist can provide reports or assessments about your specialised driver training needs. Your occupational therapist can complete our Vehicle Modification assessment template.

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 NDIS supports to help you find and keep a job.

Learn more about work and study supports.

Table 32 – Work and study supports

Question	Answer
What will we ask you about?	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 NDIS supports you might need. We'll also talk to you about what informal, mainstream and community supports you may be able to access. 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, you can give us: • letters from your place of work or study • work experience reports • Centrelink Job Capacity Assessments or Employment Services Assessments.
Who can provide it?	We'll ask you for this information. Your place of work or study can provide you with a letter or work experience report.

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 situations in which you might request a change to your plan. This could be to change 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. You can update your contact details on your myplace portal. Learn more at How to use the myplace portal | NDIS.

Table 33 – Other changes to your plan

Question	Answer
What will we ask you about?	Before we change your plan, we'll ask you about what changes you'd 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 has changed 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 can be shared with the Agency over the phone or in writing.
Who can provide it?	You, or a person with your consent, or authorisation to act on your behalf. If we ask for further information, we'll let you know what we need.
How do you provide it?	You can make this request in the same way you let us know about other changes to your plan, even though your plan won't need to be changed.

Where can you learn more?

- What does NDIS fund?
- Our Guideline – Reasonable and necessary supports
- Our Guideline – Creating your plan
- Our Guideline – Disability-related health supports
- Factsheet - Support categories

National Disability Insurance Scheme

ndis.gov.au

Telephone 1800 800 110

Webchat ndis.gov.au

Follow us on our social channels

Facebook, Twitter, Instagram, YouTube, LinkedIn

For people who need help with English

TIS: 131 450

For people who are deaf or hard of hearing

TTY: 1800 555 677

Voice relay: 1800 555 727

National Relay Service: accesshub.gov.au/