



SGP Knowledge Article Template

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Add or update capacity building assistive technology (AT) supports in a plan approval case

This article provides guidance for a **planner delegate** to:

- add funding for capacity building low-cost, mid-cost and high-cost assistive technology (AT) supports
- update funding for capacity building low-cost, mid-cost and high-cost assistive technology (AT) supports.

Recent updates

October 2023

Current guidance

Before you start

You have:

- read and understood [Our Guideline – Assistive technology \(external\)](#)
- read and understood [Our Guideline – Reasonable and necessary \(external\)](#)
- referred to the [Fact Sheet – Assistive Technology – Guide for low cost support funding \(external\)](#)
- referred to the [NDIS Pricing Arrangements and Price Limits \(external\)](#)
- received advice from the Technical Advisory Branch (TAB) using a PACE internal referral, if needed
- read and understood article [Understand the product catalogue](#)
- read and understood article [Support Categories](#).

Add capacity building low-cost, mid-cost and high-cost AT supports



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Capacity building AT support is to assess, source and set up all the participant's AT supports. The amount of reasonable and necessary capacity building supports will be different for each participant based on their individual needs.

You must include a minimum of \$500.00 of capacity building support for low-cost AT supports. For participants living in remote or very remote areas, the amount you must include will be \$700.00 for capacity building support for low-cost AT.

Add capacity building AT funding

To add capacity building AT funding to a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **New Support Category**.
3. Enter **Improved Daily Living Skills** into the **Support Category** field.

Note: The support budget will be locked to **Capacity Building**.

4. The **Budget Type** for this support will default to **Stated**.
5. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

6. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount. Use the **Plan Conversation Support Tool**. Find the **Plan Conversation Support Tool** in the [Tasmania Resource library](#).

7. Record the **TSP Variance Reason** from the drop-down list.
8. Record **Additional Description** about why this support is needed.

Note: These comments will not display on a participant's plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

9. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.

10. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into



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PACE. If you see the characters |%, you will need to remove these before you can select save.

11. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
12. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
13. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
14. Enter the **Evidence Explanation** into the free text field.
15. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
16. Select **Save**.

Update capacity building low-cost, mid-cost and high-cost AT supports

Update capacity building AT funding

To update capacity building AT funding in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Improved Daily Living Skills** from the **Stated Budget** items.
3. The **Budget Type** for this support will default to **Stated**.
4. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

5. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount. Use the **Plan Conversation Support Tool**. Find the **Plan Conversation Support Tool** in the [Tasmania Resource library](#).

6. Record the **TSP Variance Reason** from the drop-down list.



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- Record **Additional Description** about why this support is needed.

Note: These comments will not display on a participant's plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

- If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.

- Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article **Add budget justifications**.

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.

- If you're using evidence to support your justification, select the **Evidence Used** checkbox.
- Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 12
 - if the **Evidence Type** is **Other**, go to step 13.
- Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
- Enter the **Evidence Explanation** into the free text field.
- If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 11.
- Select **Save**.

Remove capacity building AT funding

To remove capacity building AT funding in a draft budget, complete the following PACE steps:

- In the **Plan Approval** case, select the **Draft Budget** tab.
- Select **Improved Daily Living Skills** from the **Stated Budget** items.
- If removing the support item, scroll to bottom and select **Remove Support from Budget**.
- Select **Yes** to **Are you sure you want to remove?**
- Select **Save**.



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Next steps

1. If you have added or updated capacity building AT supports, you will need to make a fund management decision. Refer to article [Make fund management decision](#).
2. If you need to add further supports, refer to article [Change the draft budget](#).
3. If you are ready for the plan meeting, refer to article [Prepare for the plan meeting](#).

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- **Add:** t_assistivetechology
- **Add:** t_createaplan
- **Add:** t_hearing
- **Add:** t_planchanges
- **Add:** t_reasonableandnecessary

Case names

You can use this guidance for the:

- **Add:** case_planapproval
- **Add:** case_planchange
- **Add:** case_technicaladvice

Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CS0074	Class 1 approval	APPROVED	2022-11-02



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Version	Amended by	Brief Description of Change	Status	Date
1.1	MSM312	Article aligned to SOP Create or update a knowledge article during CI. Added before you start section. Article aligned to current PACE language and system steps.	DRAFT	2023-08-08
1.2	BTM847	Included update and remove support steps. All system steps updated to align with PACE. Next steps section included.	DRAFT	2023-08-16
1.3	MSM312	Peer review	DRAFT	2023-08-22
1.4	BTM847	Action peer review Sent for VT VT results: Long sentences 2.92% Passive voice 3.65% Readability 55/100 Grade level 7.2	DRAFT	2023-08-22
1.5	EJW711	EL1 review Updates of justification and adding evidence steps per Daniel and Hayley's steps.	DRAFT	2023-08-22
1.6	JS0082	EL2 review for BiL endorsement	DRAFT	2023-08-31
1.7	BTM847	Transferred BIL feedback Action BIL feedback.	DRAFT	2023-09-22
2.0	JS0082	Class 1 Approval	APPROVED	2023-09-25



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Add or update disability-related health supports and meal preparation supports

This article provides guidance for a **planner** to:

- add disability-related health supports
- update disability-related health supports.

Recent updates

October 2023

Current guidance.

Before you start

You have read and understood the relevant guidance:

- [Our Guideline – Disability-related health supports \(external\)](#)
- [Our Guideline – Continence \(external\)](#)
- [Our Guideline – Diabetes management supports \(external\)](#)
- [Our Guideline – Dysphagia supports \(external\)](#)
- [Our Guideline – Epilepsy supports \(external\)](#)
- [Our Guideline – Nutrition supports including meal preparation \(external\)](#)
- [Our Guideline – Podiatry and foot care supports \(external\)](#)
- [Our Guideline – Wound and pressure care supports \(external\)](#)
- [Our Guideline – Creating your plan \(external\)](#)
- [Our Guideline – Justice system \(external\)](#)
- [Our Guideline – Plan reviews \(external\)](#)
- article [Guide – Respiratory supports](#).

You have also read and understood articles:

- [Calculate disability-related health supports and meal preparation supports](#)



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- [Add or update disability-related health supports Appendix A – Guide to core supports](#)
- [Add or update disability-related health supports Appendix B – Guide to capacity building supports](#)
- [Add or update disability-related health supports Appendix C – Guide to capital supports.](#)

You have:

- checked if the disability-related health support needs advice from the Technical Advisory Branch (TAB) or Childrens Taskforce (CT)
- received TAB or CT advice, if needed, before you include the disability-related health support in the participant's plan.

Refer to TAB intranet page [Requesting Advice](#).

Add disability-related health supports

To add disability-related health supports (DRHS) to a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **New Support Category**.
3. Enter the appropriate category into the **Support Category** field. For
 - Core supports, go to section 'Add or update Core DRHS'
 - Capacity building supports, go to section 'Add or update Capacity Building DRHS'
 - Capital supports, go to section 'Add or update Capital DRHS'.
4. The **Budget Type** will default based on the **Support Category**.
5. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

6. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount. You can use the **Plan Conversation Support Tool** to guide your decision making. Find the **Plan Conversation Support Tool** in the [Tasmania Resource library](#).



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7. Record the **TSP Variance Reason** from the drop-down list.
8. Record **Additional Description** about why this support is needed. Use the relevant description for the support category. For
 - Core supports, go to section 'Add or update Core DRHS'
 - Capacity building supports, go to section 'Add or update Capacity Building DRHS'
 - Capital supports, go to section 'Add or update Capital DRHS'.

Note: These comments will not display on a participant's plan. You can use these comments to discuss funded supports during a plan implementation meeting.

9. If the support meets all of the NDIS funding criteria select the checkbox under the **Justifications** heading.
10. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: The free text field has a 3000 character limit. Some special characters in this field may cause an error. If you see the characters |%, you will need to remove these before you can select **Save**. The most common cause of this error is copying justifications from SAP CRM into PACE.

11. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
12. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
13. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
14. Enter the **Evidence Explanation** into the free text field.
15. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
16. Select **Save**.

Add or update Core DRHS



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Review article [Add or update disability-related health supports Appendix A – Guide to core supports](#) before you add funding in the **Consumables** or **Assistance with daily life** support categories.

If the participant needs:

- low cost DRHS assistive technology, refer to article [Add or update low cost assistive technology \(AT\) in a plan approval case](#).
- health consumables, go to section 'Add health consumables'.
- personal care or meal preparation, go to section 'Add personal care hours for assistance with health-related tasks or meal preparation'.

Add health consumables

1. Select **Consumables** in the **Support Category** field.
2. Record why this support is needed in the **Additional Description**. For example:
 - Personal care hours for a support worker to administer the proper use of medical equipment under the guidance of a nurse.
 - Includes \$1500 to ensure continuity of support while waiting for a consumables assessment.

Where funding is included for respiratory consumables, include:

- Respiratory consumables must be compatible and fit for purpose with my prescribed respiratory equipment.

Note: These comments will not display on a participant's plan. You can use these comments to discuss funded supports as part of a plan implementation meeting.

3. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add personal care hours for assistance with health-related tasks or meal preparation

1. Select **Assistance with daily life** in the **Support Category** field.
2. Record why this support is needed in the **Additional Description**. For example, where the funding is for meal preparation support, include:
 - Includes [amount] for support with preparing meals.

Note: Meal preparation supports should not be stated and doesn't need a quote. This will allow participants to use this support flexibly.



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3. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add or update Capacity Building DRHS

Review articles [Add or update disability-related health supports Appendix B – Guide to capacity building supports](#) and [Calculate disability-related health supports and meal preparation supports](#) before you add funding in **Improved daily living skills** or **Health and Wellbeing** support categories.

If the participant needs support from a:

- nurse, go to section 'Add nursing supports'
- podiatrist, go to section 'Add podiatry supports'
- speech pathologist, go to section 'Add speech pathology supports'
- dietician, go to section 'Add dietician supports'.

Add nursing supports

Make sure there's sufficient supports that meet the NDIS funding criteria in the plan to cover the participant's nursing support needs. The service provider is responsible for assigning the most appropriately qualified nurse to provide disability-related health support.

1. Select **Improved daily living skills** in the **Support Category** field.
2. Record why this support is needed in the **Additional Description**.
3. If you include supports that relate to delegation of care, upload supporting information to PACE.
4. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add podiatry supports

1. Select **Improved daily living skills** in the **Support Category** field.
2. Record why this support is needed in the **Additional Description**. For example:
 - Includes podiatry assessment, care plan and selection or manufacture of customisable or wearable technology.
3. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add speech pathology supports

1. Select **Improved daily living skills** in the **Support Category** field.



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2. Record why this support is needed in the **Additional Description**.
3. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add dietician supports

1. Select **Health and wellbeing** in the **Support Category** field.
2. Record why this support is needed in the **Additional Description**. For example:
 - Funding for a nutrition plan consultation, assessment and report.
3. Return to section 'Add disability-related health supports' or 'Update disability-related health supports'.

Add or update Capital DRHS

Review articles [Add or update disability-related health supports Appendix C – Guide to capital supports](#) before you add funding in the **Assistive technology** support category.

Only include mid-cost or high-cost disability-related health supports in the **Assistive Technology** budget.

Note: You can include low-cost assistive technology in the core consumables budget. For more information, refer to [Add or update disability-related health supports Appendix A – Guide to core supports](#).

1. Use article [Add or update mid-cost for assistive technology \(AT\) in a plan approval case](#) and [Add or update high-cost for assistive technology \(AT\) in a plan approval case](#) to add funding in the **Assistive technology** support category.
2. Record an **Additional Description** so the participant knows what the funding is for. For example:
 - Funding for a cough assist machine.
 - Funding for the purchase of an air humidifier and cough assist machine.

If you have completed a technical advice case from TAB, follow any directions about how to record the support in the plan.

Update disability-related health supports

To update DRHS in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select the appropriate category from the **Support Category** field. For



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- Core supports, go to section 'Add or update Core DRHS'
- Capacity building supports, go to section 'Add or update Capacity Building DRHS'
- Capital supports, go to section 'Add or update Capital DRHS'.

3. The **Budget Type** for this support will default based on **Support Category**

4. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

5. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount. You can use the **Plan Conversation Support Tool** to help develop a budget that meets the participant's disability-related support needs. Find the **Plan Conversation Support Tool** in the [Tasmania Resource library](#).

6. Record the **TSP Variance Reason** from the drop-down list.

7. Record **Additional Description** about why this support is needed. Use the relevant description for the support category. For

- Core supports, go to section 'Add or update Core DRHS'
- Capacity building supports, go to section 'Add or update Capacity Building DRHS'
- Capital supports, go to section 'Add or update Capital DRHS'.

Note: These comments will not display on a participants plan. You can use these comments to discuss funded supports as part of a plan implementation meeting.

8. If the support meets all of the NDIS funding criteria select the checkbox under the **Justifications** heading.

9. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a 3000 character limit. Certain special characters in this field may cause an error. If you see the characters |%, you will need to remove these before you can select **Save**. This error is generally caused when copying justifications from SAP CRM into PACE.

10. If you're using evidence to support your justification, select the **Evidence Used** checkbox.

11. Select the **Evidence Type** from the drop-down list.



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- if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
12. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
 13. Enter the **Evidence Explanation** into the free text field.
 14. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
 15. Select **Save**.

Remove disability-related health supports

To remove DRHS in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Support Category** from either the **Flexible Budget** or **Stated Budget** items.
3. If removing the support item, scroll to bottom and select **Remove Support from Budget**.
4. Select **Yes** to **Are you sure you want to remove?**
5. Select **Save**.

Next steps

1. Make a fund management decision, refer to article [Make fund management decision](#).
2. If you:
 - need to add further supports, refer to article [Change the draft budget](#)
 - are ready for the plan meeting, refer to article [Prepare for the plan meeting](#).

Article topics and case names – internal use only

User roles

- **Add:** dc_users_plannerdelegate

Topics

This article relates to the following topics:



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- **Add:** t_continence
- **Add:** t_diabetes
- **Add:** t_disabilityrelatedhealthsupports
- **Add:** t_dysphagia
- **Add:** t_epilepsy
- **Add:** t_motorneuronedisease
- **Add:** t_nutrition
- **Add:** t_podiatryandfootcare
- **Add:** t_respiratorysupports
- **Add:** t_therapysupports
- **Add:** t_woundandpressurecare

Case names

You can use this guidance for the:

- **Add:** dc_case_technicaladvice

Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CS0074	Class 1 approval	APPROVED	2022-11-18
1.1	MSM312	Article aligned to SOP Create or update a knowledge article during CI. Added before you start and next steps sections. Aligned to PACE system steps and language.	DRAFT	2023-08-04



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Version	Amended by	Brief Description of Change	Status	Date
1.2	MGC723	Changes applied following consultation with TAB during amendments of SOP. Including update to guidance for training for delegated disability-related health support tasks to cover all skill areas and support staff.	DRAFT	2023-08-14
1.3	BTM847	Peer review	DRAFT	2023-09-22
1.4	MGC723	Action peer review	DRAFT	2023-09-22
1.5	CTM829	EL1 review	DRAFT	2023-09-22
1.6	JS0082	Class 1 review to send to BiLs for endorsement	DRAFT	2023-09-25
1.7	MGC723	Action EL2 review	DRAFT	2023-09-26
1.8	MGC723	Collation BIL feedback	DRAFT	2023-10-06
1.9	MGC723	Action BIL feedback	DRAFT	2023-10-06
2.0	JS0082	Class 1 Approval	APPROVED	2023-10-09



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Add or update disability-related health supports

Appendix C – Guide to capital supports

This article provides guidance for a **planner** to understand:

- capital supports for disability-related health needs.

Recent updates

October 2023

Current guidance.

Before you start

You have read and understood relevant guidance from:

- [Our Guideline – Disability-related health supports \(external\)](#)
- [Our Guideline – Continence \(external\)](#)
- [Our Guideline – Diabetes management supports \(external\)](#)
- [Our Guideline – Dysphagia supports \(external\)](#)
- [Our Guideline – Epilepsy supports \(external\)](#)
- [Our Guideline – Nutrition supports including meal preparation \(external\)](#)
- [Our Guideline – Podiatry and foot care supports \(external\)](#)
- [Our Guideline – Wound and pressure care supports \(external\)](#)
- [Our Guideline – Creating your plan \(external\)](#)
- [Our Guideline – Justice system \(external\)](#)
- [Our Guideline – Plan reviews \(external\)](#)
- article [Guide – Respiratory supports](#).

You have also read and understood articles:

- [Add or update disability-related health supports and meal preparation supports](#)
- [Calculate disability-related health supports and meal preparation supports](#)



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- [Add or update disability-related health supports Appendix A – Guide to core supports](#)
- [Add or update disability-related health supports Appendix B – Guide to capacity building supports.](#)

You have:

- checked if the disability-related health support needs advice from the Technical Advisory Branch (TAB) or Children’s Taskforce (CT)
- received TAB or CT advice, if needed, before you include the disability-related health support in the participant’s plan.

Refer to TAB intranet page [Requesting Advice](#).

Capital supports for disability-related health needs

Use the relevant disability-related health support (DRHS) Our Guideline and article [Add or update disability-related health supports and meal preparation supports](#) to work out if capital supports meet the NDIS funding criteria.

The list below outlines the broad type of support and the estimated cost for each of the relevant support categories to include in the participant’s plan.

Wound and pressure care

Assistive technology (AT)

Purchase or lease of pressure-support AT over \$1500 per item, including:

- pressure cushions
- mattress
- air-filled garments and compression units for managing circulation problems and lymphoedema
- lymphoedema machine if needed for maintenance
- negative pressure wound therapy including vacuum assisted closure (VAC).

General

Assistive Technology

We may fund DRHS for air conditioning or heating if the participant has a disability that affects their ability to regulate their body temperature. You must create a technical advice case for any



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request for air conditioning or heating. Refer to article [Mandatory and non-mandatory technical advice](#).

Next steps

1. Add disability-related health supports to the participant plan, refer to article [Add or update disability-related health supports and meal preparation supports](#).

Article topics and case names – internal use only

User roles

- **Add:** dc_users_plannerdelegate

Topics

This article relates to the following topics:

- **Add:** t_continence
- **Add:** t_diabetes
- **Add:** t_disabilityrelatedhealthsupports
- **Add:** t_dysphagia
- **Add:** t_epilepsy
- **Add:** t_motorneuronedisease
- **Add:** t_nutrition
- **Add:** t_podiatryandfootcare
- **Add:** t_respiratorysupports
- **Add:** t_therapysupports
- **Add:** t_woundandpressurecare

Case names

You can use this guidance for the:

- **Add:** dc_case_technicaladvice

Version control



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Version	Amended by	Brief Description of Change	Status	Date
1.1	MGC723	<p>Article aligned to SOP Create or update a knowledge article during CI. Changes also applied following consultation with TAB during amendments of SOP. Including:</p> <ul style="list-style-type: none"> • update to guidance for training for delegated disability-related health support tasks to cover all skill areas and support staff. • new before you start and next steps sections. • Aligning to PACE system steps and language • renamed from Add or update disability-related health supports Appendix C - Core supports to Add or update disability-related health supports Appendix C – Guide to capital supports. 	DRAFT	2023-09-14
1.2	BTM847	Peer review	DRAFT	2023-09-21
1.3	MGC723	Action peer review	DRAFT	2023-09-22
1.4	CTM829	EL1 review	DRAFT	2023-09-22
1.5	JS0082	Class 1 review to progress to BiLs for endorsement	DRAFT	2023-09-25
1.6	MGC723	Collate BIL feedback	DRAFT	2023-10-06
1.7	MGC723	Action feedback	DRAFT	2023-10-06



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Version	Amended by	Brief Description of Change	Status	Date
2.0	JS0082	Class 1 Approval	APPROVED	2023-10-09



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Add or update funding for assistive technology (AT) maintenance, repairs, rentals and trials in a plan approval case

This article provides guidance for a **planner delegate** to:

- understand types of AT repairs, maintenance, rental and trials
- add funding for repairs, maintenance, rental and trials
- update funding for repairs, maintenance, rental and trials.

Recent updates

October 2023

Current guidance

Before you start

You have:

- read and understood [Our Guideline – Reasonable and necessary supports \(external\)](#)
- read and understood [Our Guideline – Assistive Technology \(external\)](#)
- referred to the [Fact Sheet - Assistive Technology - Guide for funding of annual repairs and maintenance funding \(external\)](#)
- referred to the [NDIS Pricing Arrangements and Price Limits \(external\)](#)
- read and understood article [Understand the product catalogue](#)
- read and understood article [Support Categories](#)
- received Technical Advisory Branch (TAB) advice using a PACE internal referral, if needed
- considered rental and trial of AT for participants with a diagnosis of a degenerative condition such as Motor Neuron Disease (MND), Multiple Sclerosis or Huntington's disease



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- checked the request for AT does not relate to a participant requested reassessment (s48 request), a review of a reviewable decision (s100 request) or a complaint about AT supports.

Note: If the request relates to one of the above, you will need to make sure the right business area actions the request. Talk with your team leader if you need further advice.

Types of repairs, maintenance, rental and trials

Minor repair and maintenance (up to \$1500.00)

You should check the participant's record for information about minor repairs and maintenance they may need for their AT equipment. You can use their past experience as a guide for the amount of funding they may need. If you are unsure you can discuss with your team leader.

Identify all the participant's AT supports.

Calculate the annual cost of any minor repairs and maintenance for all their AT supports. Make sure you consider the support the participant needs if they have more than one AT support.

When adding funding for minor repairs and maintenance up to \$1500.00 use the following template in the **Additional Description** section:

- Funding of \$xx is for repairs and maintenance of <equipment types>. An assessment and quote are not required for this support.

Major repairs – quote required

Requests for major repairs require a quote. Review the quote for the cost of the major repairs. If there is no quote, you can do either of the following:

- Wait for the quote before you add the funding; or
- Approve the plan without the quote-required support.

When you get the quote, create a plan change case and complete the plan change request.

Refer to article [Create a plan change request](#).

When adding funding for major repairs, use the following template in the **Additional Description** section:

- \$xx funding for repairs to your <equipment type>.

Short term rental

Requests for short-term rental may come from the participant, or from evidence provided by their assistive technology advisor or assessor.



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Use the evidence they provide to decide the amount of funding needed. If you do not have evidence you should discuss with your team leader.

You need to include funding for short term rental for all participants with AT with a value of more than \$1,500. This is so they can access temporary rental if their AT is not available because of repair, or to rent AT on a holiday. There is no quote required.

When adding funding for short term rental use the following template in the **Additional Description** section:

- Funding of \$xx is for short term rental of assistive technology equipment.

Major rental

For all major rentals, you need evidence from an assistive technology advisor or assessor. AT rental costing over \$15,000 needs a quote. Add funding for the reasonable and necessary amount.

When adding funding for major rental use the following template in the **Additional Description** section:

- Funding of \$xx is for rental of <equipment types>.

Minor trials

You may receive requests for minor trials of equipment from participants to help them and their assistive technology advisors or assessors prepare evidence to request mid and high-cost AT supports. Use the evidence they provide to decide the amount of funding they need for the trial. If you do not receive this information refer to [Fact Sheet - Assistive Technology - Guide for minor trial and rental funding \(external\)](#).

When adding funding for minor trials use the following template in the **Additional Description** section:

- Funding of \$xx is for minor trial of <equipment types>.

Longer trials

For all trials, other than short term trials, you need evidence from assistive technology advisors or assessors. For AT items costing more than \$15,000 refer to the quote to add funding for the reasonable and necessary amount.

When adding funding for longer trials use the following template in the **Additional Description** section:

- Funding of \$xx is for trial of <equipment types> as recommended by an assistive technology <advisor/assessor> to determine suitability.



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Add funding for AT repairs, maintenance, rental and trials

Add funding for repairs, maintenance, rental and trials

To add funding for AT repairs, maintenance, rental and trials to a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **New Support Category**.
3. Enter **Assistive Technology Maintenance, Repair and Rental** into the **Support Category** field.

Note: The support budget will be locked to **Capital**.

4. The **Budget Type** for this support will default to **Stated**.
5. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

6. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.

7. Record the **TSP Variance Reason** from the drop-down list.
8. Record **Additional Description** about why this support is needed. Use relevant template for type of repair, maintenance, rental and trial.

Note: These comments will not display on a participants plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

9. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.

10. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.

11. If you're using evidence to support your justification, select the **Evidence Used** checkbox.



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12. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
13. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
14. Enter the **Evidence Explanation** into the free text field.
15. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
16. Select **Save**.

Update funding for repairs, maintenance, rental and trials

Update funding for AT repairs, maintenance, rental and trials

To update funding for AT repairs, maintenance, rental and trials in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology Maintenance, Repair and Rental** from the **Stated Budget** items.
3. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).
4. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.
5. If the change to the amount is outside the threshold for the support category, PACE will display the **TSP Variance Reason**. Select the relevant **TSP Variance Reason** from drop-down list.
6. Record **Additional Description** about why this support is needed. Use relevant template for type of repair, maintenance, rental and trial.

Note: These comments will not display on a participants plan. Use these comments to discuss funded supports as part of a plan implementation meeting.



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7. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.
8. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).
Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.
9. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
10. Select the **Evidence Type** from the drop-down list.
 - if the Evidence Type is Document, go to step 11
 - if the Evidence Type is Other, go to step 12.
11. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
12. Enter the **Evidence Explanation** into the free text field.
13. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 10 and 11.
14. Select **Save**.

Remove funding for AT repairs, maintenance, rental and trials

To remove funding for AT repairs, maintenance, rental and trials in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology Maintenance, Repair and Rental** from the **Stated Budget** items.
3. If removing the support item, scroll to bottom and select **Remove Support from Budget**.
4. Select **Yes** to **Are you sure you want to remove?**
5. Select **Save**.

Next steps



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1. If you have added or updated funding for AT maintenance, repairs, rentals and trials, you will need to make a fund management decision. Refer to article [Make fund management decision](#).
2. If you need to add further supports, refer to article [Change the draft budget](#).
3. If you are ready for the plan meeting, refer to article [Prepare for the plan meeting](#).

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- **Add:** t_assistivetechnology
- **Add:** t_createaplan
- **Add:** t_planchanges
- **Add:** t_reasonableandnecessary

Case names

You can use this guidance for the:

- **Add:** case_planapproval
- **Add:** case_planchange
- **Add:** case_technicaladvice.

Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CSN0074	Class 1 approval	APPROVED	2022-11-02
1.1	JJP788	Add reference to MND article: Guide – MND. Removed need to look up major rental items using Support Catalogue. Use evidence/quote.	DRAFT	2022-11-10



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Version	Amended by	Brief Description of Change	Status	Date
1.2	MSM312	Article aligned to SOP Create or update a knowledge article during CI KA title updated Next steps section included Included system steps for update and remove support. Restructured KA to streamline process for users.	DRAFT	2023-08-08
1.3	THG520	Peer Review	DRAFT	2023-08-22
1.4	BTM847	Action peer review Sent for VT review VT results: Long sentences 5.85% Passive voice 3.19% Readability 57/100 Grade level 7.3	DRAFT	2023-08-22
1.5	EJW711	EL1 review	DRAFT	2023-08-22
1.6	MJB576	Action EL1 feedback Sent for EL2 review	DRAFT	2023-08-29
1.7	JS0082	EL1 review to progress to BiL endorsement	DRAFT	2023-09-14
1.8	BTM847	Transferred BIL feedback Action BIL feedback BIL endorsement received Sent for EL2 approval.	DRAFT	2023-09-22
2.0	JS0082	Class 1 Approval	APPROVED	2023-09-25

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Add or update high-cost assistive technology (AT) in a plan approval case

This article provides guidance for a **planner delegate** to:

- understand what to do if there is no quote
- check the provider is registered, if needed
- add high-cost assistive technology (AT), including replacement
- update and remove high-cost assistive technology (AT), including replacement
- add delivery and set up costs, if needed.

For low-cost and mid-cost assistive technology, go to articles [Add or update low-cost assistive technology in a plan approval case](#) and [Add or update mid-cost assistive technology in a plan approval case](#).

Recent updates

November 2023

Updated to include the need to seek mandatory Technical Advice and Practice Improvement Branch advice for all Dog Guide requests on the new assessment templates.

Before you start

You have:

- read and understood [Our Guideline – Reasonable and necessary supports \(external\)](#)
- read and understood [Our Guideline – Assistive Technology \(external\)](#)
- received Technical Advice and Practice Improvement Branch (TAPI) advice using a PACE internal referral, if needed
- referred to the [NDIS Pricing Arrangements and Price Limits \(external\)](#) if you need to
- determined if the participant has a diagnosis of Motor Neurone Disease (MND) and requires AT supports



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- an assessment and quote for the AT support, or determined the support meets the criteria for replacement AT process
- reviewed benchmark prices using AT Item Budget Tool in PANDA
- read and understood article [Understand the product catalogue](#)
- read and understood article [Support Categories](#)
- checked the request for AT does not relate to a participant requested review (s48 request), a review of a reviewable decision (s100 request) or a complaint about AT supports.

Note: If the request relates to one of the above, you will need to make sure the request is actioned by the relevant business area. Talk with your team leader if you need further advice.

Note: Any new or replacement Dog Guide requests from the new assessment templates being piloted require mandatory TAPI advice. Refer to the [Requesting Advice](#) TAPI intranet page for more information.

What if there is no quote?

You need a quote before you can add funding to the participant's plan. If there is no quote, you can do either of the following:

- wait for the quote before you add the funding; or
- approve the plan without the quote-required support. When you get the quote, you can commence a plan change to add the support if it meets the [NDIS funding criteria](#).

Check the provider is registered – (Agency managed only)

You must check if the provider is registered if the participants high-cost AT is Agency-managed. For plan-managed or self-managed high-cost AT you can disregard these steps. This is because the participant must use a registered provider if this support category budget is Agency-managed.

1. Check the support catalogue on our website to check the registration group for the support.
2. Search for the provider in PACE to check their registration group.
3. Check the provider is currently registered for the AT support.



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4. If the provider is not registered for the AT support, add a **Plan Meeting Note** with the following details:
 - The provider that quoted for the high-cost AT support <support name> is not registered for this support. The participant cannot request this support category be Agency-managed.

Add high-cost AT supports

Review the quote for the cost of the support and any delivery and set-up fees.

If the participant requests the high-cost AT be Agency-managed, you need to check the provider is registered for the support. To do this, go to section 'Check the provider is registered' in this article.

To add high-cost AT funding to a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **New Support Category**.
3. Enter **Assistive Technology** into the **Support Category** field.

Note: The support budget will be locked to **Capital**.

4. The **Budget Type** for this support will default to **Stated**.
5. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

6. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.

7. Record the **TSP Variance Reason** from the drop-down list.
8. Record **Additional Description** about why this support is needed.

Use template: \$xxxx funding for your <support>.

Note: These comments will not display on a participants plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

9. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.



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10. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.
11. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
12. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
13. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
14. Enter the **Evidence Explanation** into the free text field.
15. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
16. Select **Save**.

Update high-cost AT supports

Update high-cost AT funding

To update high-cost funding in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology** from the **Stated Budget** items.
3. The **Budget Type** for this support will default to **Capital**.
4. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

5. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.



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6. Record the **TSP Variance Reason** from the drop-down list.
7. Record **Additional Description** about why this support is needed.
Use template: \$xxxx funding for your <support>.
Note: These comments will not display on a participant's plan. Use these comments to discuss funded supports as part of a plan implementation meeting.
8. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.
9. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).
Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.
10. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
11. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 12
 - if the **Evidence Type** is **Other**, go to step 13.
12. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
13. Enter the **Evidence Explanation** into the free text field.
14. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 11.
15. Select **Save**.

Add delivery and set-up costs

Use this procedure when cost of delivery and set up is not included in the overall cost shown on the quote.

Use the AT Item Budget Tool in PANDA to determine funding.

1. Open the intranet and select **NDIS PANDA** and **PANDA live** under **My Links**.
2. Select **View PANDA**.



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3. Type **AT Budget** in the search bar and select **search**. Select **AT item budget tool**.
4. Search for the relevant delivery item for the high cost AT support. For example, Mobility Equipment Delivery – Set Up/Training.

When adding funding for delivery and set up costs, use the following template in the **Additional Description** section:

- \$xxxx funding for your delivery and set/up costs for <support>.

Remove high cost AT funding

To remove high-cost AT funding in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology** from the **Stated Budget** items.
3. If removing the support item, scroll to bottom and select **Remove Support from Budget**.
4. Select **Yes** to **Are you sure you want to remove?**
5. Select **Save**.

Next steps

Check if you need to include the following supports:

1. Repairs, maintenance and short term rental. To do this, go to article [Add or update assistive technology \(AT\), maintenance, repairs, rentals and trials in a plan approval case](#).
2. Capacity building budget for the AT advisor. To do this, go to article [Add or update capacity building assistive technology \(AT\) supports in a plan approval case](#).
3. If you have added or updated high-cost AT funding, you will need to make a fund management decision. Refer to article [Make fund management decision](#).
4. If you need to add further supports, refer to article [Change the draft budget](#).

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- t_assistivetechonology
- t_createaplan



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- t_planchanges
- t_reasonableandnecessary

Case names

You can use this guidance for the:

- case_planapproval
- case_planchange
- case_technicaladvice

Version control

Version	Amended by	Brief Description of Change	Status	Date
3.1	RWN540	Guidance updated for when to request mandatory TAPIB advice for dog guide requests on new assessment templates	DRAFT	2023-11-03
3.2	BCK161	Peer review	DRAFT	2023-11-03
3.3	RWN540	Peer review feedback actioned	DRAFT	2023-11-06
3.4	EJW711	EL1 review	DRAFT	2023-11-07
4.0	JS0082	Class 1 Approval	APPROVED	2023-11-07



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Add or update mid-cost assistive technology (AT) in a plan approval case

This article provides guidance for a **planner delegate** to:

- how to use the AT item budget tool
- add mid-cost AT in the participant's plan, including replacement of mid-cost AT
- update mid-cost AT in the participant's plan, including replacement of mid-cost AT.

For high-cost and low-cost assistive technology, go to articles [Add or update high-cost assistive technology in a plan approval case](#) and [Add low-cost assistive technology in a plan approval case](#).

Recent updates

October 2023

Current guidance

Before you start

You have:

- access to **PANDA**
- read and understood [Our Guideline – Reasonable and necessary supports \(external\)](#)
- read and understood [Our Guideline – Assistive Technology \(external\)](#)
- received Technical Advisory Branch (TAB) advice using a PACE internal referral, if needed
- referred to the [NDIS Pricing Arrangements and Price Limits \(external\)](#) if needed
- determined if the participant has a diagnosis of Motor Neurone Disease (MND) and requires AT supports
- read and understood article [Understand the product catalogue](#)
- read and understood article [Support Categories](#)



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- checked the request for AT does not relate to a participant requested review (s48 request), a review of a reviewable decision (s100 request) or a complaint about AT supports.

Note: If the request relates to one of the above, you will need to make sure the request is actioned by the right business area. Talk with your team leader if you need further advice.

How to use the AT Item Budget tool

1. Open the intranet and select **NDIS PANDA** and **PANDA live** under **My Links**.
2. Select **View PANDA**.
3. Type AT Budget in the search bar and select search. Select **AT item budget tool**.

Use the AT Item Budget Tool to find the correct mid-cost AT code. This will help you to determine the funding amount. You must consider all costs which may come with the AT item such as:

- delivery
- set-up/installation
- rental of a similar item due to maintenance, repairs or short-term rental. You need to add this funding as a separate item to the support category **Assistive Technology – Maintenance, repair and rental**.

You can also use this procedure to search the benchmark price for low-cost and high-cost AT.

4. From **Step 1** in the AT Item Budget tool, enter the item name or code.
Note: For Motor Neurone Disease, type **flexible** in the **Search for item** field.
5. Select the item from drop-down list.
6. Go to:
 - step 7 for mid-cost AT
 - step 9 for low-cost or high-cost AT.
7. From the PANDA screen, note the following information:
 - At **3 Funding level to be added to the budget**, note the amount. This is the amount you need to add to the participant's budget. If there is more than one item, you need to add the amounts.



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- At 4 Please type the following information to the comments sections in the plan, note the information. This is the information you need to add in the **Additional Description** field for the **Assistive Technology** support category. This will show on the participant's plan. If there is more than one support, add an **Additional Description** for each support.
8. Go to section 'Add mid-cost AT funding' in this article.
 9. For low-cost and high-cost AT, the AT Item Budget Tool will give you the benchmark price for reference. To add funding for:
 - High-cost AT, go to article [Add or update high-cost assistive technology \(AT\) in a plan approval case](#)
 - Low-cost AT, go to article [Add or update low-cost assistive technology \(AT\) in a plan approval case](#).

Add mid-cost AT funding

Add mid-cost AT funding

To add mid-cost AT funding to a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **New Support Category**.
3. Enter **Assistive Technology** into the **Support Category** field.

Note: The support budget will be locked to **Capital**.

4. The **Budget Type** for this support will default to **Stated**.
5. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

6. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.

You may not need to add separate funding if the amount has enough flexible funding for reasonable and necessary supports, for example short term rental.

7. Record the **TSP Variance Reason** from the drop-down list.



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8. Record **Additional Description** about why this support is needed. Use the following template:

Funding for your <support> with a price range from \$xxxx to \$xxxx. You must contact your AT advisor to help you choose and set up the right AT for you.

Note: These comments will not display on a participant's plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

9. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.
10. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.

Example: The participant lives in a rural area, needs a new shower commode and is going on a holiday. The new shower commode is \$4700 and the AT Item Budget Tool determined \$5000. The participant's evidence shows delivery and set up is \$350. You will need to add \$50 extra funding to the assistive technology support category to cover all reasonable and necessary costs. To do this, refer to article [Add or update funding for assistive technology \(AT\) maintenance, repairs, rentals and trials in a plan approval case](#) to add rental supports.

11. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
12. Select the **Evidence Type** from the drop-down list.
- if the **Evidence Type** is **Document**, go to step 13
 - if the **Evidence Type** is **Other**, go to step 14.
13. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Add and link evidence to a case](#).
14. Enter the **Evidence Explanation** into the free text field.
15. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 12.
16. Select **Save**.



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Update mid-cost AT funding

Update mid-cost AT funding

To update mid-cost funding in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology** from the **Stated Budget** items.
3. The **Budget Type** for this support will default to **Stated**.
4. Select the **Instalment Type**.

Note: The **Frequency** and **Plan Duration** fields will be locked. To change the plan duration, refer to article [Change plan duration](#).

5. Enter the **Amount** of this support.

Note: For instalment type 'regular' this amount is the monthly amount. PACE will calculate the frequency amount and the total plan amount.

You may not need to add separate funding if the amount has enough flexible funding for the reasonable and necessary supports, for example short term rental.

6. Record the **TSP Variance Reason** from the drop-down list.
7. Record **Additional Description** about why this support is needed. Use the following template:

Funding for your <support> with a price range from \$xxxx to \$xxxx. You must contact your AT advisor to help you choose and set up the right AT for you.

Note: These comments will not display on a participants plan. Use these comments to discuss funded supports as part of a plan implementation meeting.

8. If the support meets all of the NDIS funding criteria under the **Justifications** heading, select the checkbox.
9. Record **Justification** in the free text field. For some supports, this might automatically populate. For more information about recording justifications, refer to article [Add budget justifications](#).

Note: This field has a character limit of 3000. Certain special characters in this field may cause an error, this is generally caused when copying justifications from SAP CRM into PACE. If you see the characters |%, you will need to remove these before you can select save.

Example: The participant lives in a rural area and needs a new shower commode. The new shower commode is \$4700 and the AT Item Budget Tool determined \$5000. The



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participant's evidence shows delivery and set up is \$350. You will need to add \$50 extra funding to the assistive technology support category to cover all reasonable and necessary costs. To do this, refer to article [Add or update funding for assistive technology \(AT\) maintenance, repairs, rentals and trials in a plan approval case](#) to add rental supports.

10. If you're using evidence to support your justification, select the **Evidence Used** checkbox.
11. Select the **Evidence Type** from the drop-down list.
 - if the **Evidence Type** is **Document**, go to step 12
 - if the **Evidence Type** is **Other**, go to step 13.
12. Enter the **Evidence Link** name. You can view linked evidence on the **Evidence** tab of the **Plan Approval** case. To learn more about linking evidence, refer to article [Link evidence to a case](#).
13. Enter the **Evidence Explanation** into the free text field.
14. If you need to add more evidence to support your justification, select the checkbox **Add further evidence links** and repeat step 11.
15. Select **Save**.

Remove mid-cost AT funding

To remove mid-cost in a draft budget, complete the following PACE steps:

1. In the **Plan Approval** case, select the **Draft Budget** tab.
2. Select **Assistive Technology** from the **Stated Budget** items.
3. If removing the support item, navigate to the bottom and select **Remove Support from Budget**.
4. Select **Yes** to Are you sure you want to remove?
5. Select **Save**.

Next steps

Check if you need to include the following supports:

1. Repairs, maintenance and short term rental. To do this, refer to article [Add or update funding for assistive technology \(AT\) maintenance, repairs, rentals and trials in a plan approval case](#).



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2. Capacity building budget for the AT advisor. To do this, refer to article [Add or update capacity building AT supports in a plan approval case](#).
3. If you have added or updated mid-cost AT funding, you will need to make a fund management decision. Refer to article [Make fund management decision](#).
4. If you need to add further supports, refer to article [Change the draft budget](#).
5. If you are ready for the plan meeting, refer to article [Prepare for the plan meeting](#).

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- **Add:** t_assistivetechology
- **Add:** t_createaplan
- **Add:** t_planchanges
- **Add:** t_reasonableandnecessary

Case names

You can use this guidance for the:

- **Add:** case_planapproval
- **Add:** case_planchange
- **Add:** case_technicaladvice

Version control



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Version	Amended by	Brief Description of Change	Status	Date
1.1	BTM847	KA transferred to correct template KA title updated Aligned to Pace system steps and language Included system steps for update and remove support.	DRAFT	2023-08-09
1.2	MSM312	Peer review	DRAFT	2023-08-21
1.3	BTM847	Action peer review Sent for VT VT results: Long sentences 6.59% Passive voice 3.85% Readability 61/100 Grade level 7	DRAFT	2023-08-21
1.4	EJW711	EL1 review	DRAFT	2023-08-28
1.5	MJB576	Action EL1 feedback Updates of justification and adding evidence steps per Daniel and Hayley's steps.	DRAFT	2023-08-29
1.6	JS0082	EL2 review with comments in relation to PCST	DRAFT	2023-08-31
1.7	BTM847	Action EL2 review	DRAFT	2023-09-05



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Version	Amended by	Brief Description of Change	Status	Date
1.8	BTM847	BIL feedback transferred BIL feedback actioned BIL endorsement received Ready for EL2 approval	DRAFT	2023-09-22
2.0	JS0082	Class 1 Approval	APPROVED	2023-09-25



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Calculate disability-related health supports and meal preparation supports

This article provides guidance for a **planner** to:

- calculate disability-related health supports
- understand Guide to registered nurse hours.

Recent updates

October 2023

Current guidance.

Before you start

You have read and understood relevant guidance from:

- [Our Guideline – Disability-related health supports \(external\)](#)
- [Our Guideline – Continence \(external\)](#)
- [Our Guideline – Diabetes management supports \(external\)](#)
- [Our Guideline – Dysphagia supports \(external\)](#)
- [Our Guideline – Epilepsy supports \(external\)](#)
- [Our Guideline – Nutrition supports including meal preparation \(external\)](#)
- [Our Guideline – Podiatry and foot care supports \(external\)](#)
- [Our Guideline – Wound and pressure care supports \(external\)](#)
- [Our Guideline – Creating your plan \(external\)](#)
- [Our Guideline – Justice system \(external\)](#)
- [Our Guideline – Plan reviews \(external\)](#)
- article [Guide – Respiratory supports](#).

You have also read and understood articles:

- [Add or update disability-related health supports and meal preparation supports](#)



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- [Add or update disability-related health supports Appendix A – Guide to core supports](#)
- [Add or update disability-related health supports Appendix B – Guide to capacity building supports](#)
- [Add or update disability-related health supports Appendix C – Guide to capital supports.](#)

You have:

- checked if the disability-related health support needs advice from the Technical Advisory Branch (TAB) or Childrens Taskforce
- received technical advice, if needed, before you include the disability-related health support in the participant's plan.

Refer to TAB intranet page [Requesting Advice](#).

Calculate disability-related health supports

To calculate disability-related health supports (DRHS) use evidence to guide your decision. Evidence can include assessments or health-related plans and will vary based on the type of DRHS the participant is asking for.

For example:

- continence assessment
- nurse developed care plan
- mealtime management plan
- hospital discharge summary
- epilepsy management plan
- diabetes management plan
- respiratory care plan
- manual handling plan
- wound care plan.

For help making a reasonable and necessary decision, talk to your team leader or technical lead. If the support is complex and your team leader or technical lead needs you to get advice, they need to endorse your non-mandatory technical advice case. For children younger than 9,



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you can also ask for support from the Children's Taskforce. Refer to article [Create a technical advice case](#).

1. Review any available evidence. If:
 - you decide supports recommended in the assessments meet the NDIS funding criteria, go to step 2
 - you decide supports recommended don't meet the NDIS funding criteria or the participant doesn't give you evidence for their disability-related health support needs, go to step 3.
2. Refer to the assessment or allied health-related plan (AHP) in your justification for the supports. Add supports using article [Add or update disability-related health supports and meal preparation supports](#).
3. Determine the DRHS to include in their plan using:
 - section 'Guide to registered nurse hours', to understand recommended hours to develop and implement a registered nurse Delegation of Care plan.
 - resources listed in the 'Before you start' section of this article.
4. Go to section 'Calculate supports for shadow shifts'.

Calculate supports for shadow shifts

If a participant has complex support needs including DRHS, they may need shadow shifts to introduce new workers before they provide support independently. For example:

- very limited communication
- behaviour support needs
- complex supports such as ventilation needs and equipment.

Shadow shifts:

- allow the participant to become familiar with new staff
- help new staff understand the participant's complex support needs
- provide the participant with DRHS in a safe way.

Shadow shifts **don't** replace formal training. An employer is expected to provide formal training to their workforce. Formal training includes shadowing or buddying less experienced staff or new staff with experienced workers or informal carers.

1. Does the participant need shadow shifts for DRHS?



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- If yes, go to step 2.
 - If no, go to step 3.
2. The number of shadow shifts should be based the complexity of the participant's needs and how many workers they have. For help working out the number of shadow shifts, you can create a technical advice case. Refer to article [Create a technical advice case](#).
 3. If the participant needs disability-related:
 - Consumables, go to section 'Calculate consumable DRHS'.
 - Personal care or meal preparation, go to section 'Calculate personal care hours and meal preparation for DRHS'.
 - Nurse or allied health support, go to section 'Calculate capacity building DRHS'.

Calculate consumable DRHS

Health consumables include continence, dysphagia, wound care, nutrition, and respiratory support.

1. Determine what consumable DRHS meet the NDIS funding criteria using article [Add or update disability-related health supports Appendix A – Guide to core supports](#).

Note: If you have completed a technical advice case from TAB, follow any directions about how to record the support in the plan.
2. Add funding for delivery, repairs and maintenance of disability-related health consumables and equipment, if required. Refer to article [Add or update funding for assistive technology \(AT\) maintenance, repairs, rentals and trials in a plan approval case](#).
3. Add disability-related **Core Supports** using article [Add or update disability-related health supports and meal preparation supports](#).

Calculate personal care hours and meal preparation for DRHS

1. Determine what personal care or meal preparation for disability-related health supports meet the NDIS funding criteria using information from:
 - the participant
 - the nurse developed care or hospital discharge plan
 - guidance in the 'Before you start' section, including article [Add or update disability-related health supports Appendix A – Guide to core supports](#).
2. Determine the amount of support the participant needs for:



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- personal care hours from different types of workers, including support workers and allied health professionals
- direct care hours from a nurse. For example, for a nurse to change a catheter.

Note: Nurse direct care hours are separate to delegation of care and supervision hours. To learn more about how to calculate hours for delegation of care, go to section 'Guide to registered nurse hours'.

3. See if you can combine support workers hours so the participant gets value for money. For example, the participant may require support with multiple tasks which require 10 - 15 minutes each to complete. Examples include support administering insulin, skin and pressure area checks and application of pressure garments. In this case 1 hour would be enough to cover multiple tasks.
4. Think about additional time the participant's support workers may need to travel to provide assistance with daily activities. This may include nurses, supports workers and other staff. Refer to [Our Guideline – Reasonable and necessary supports \(external\)](#) and the [NDIS pricing arrangements and price limits \(external\)](#).
5. Add disability-related **Core Supports** using article [Add or update disability-related health supports and meal preparation supports](#).

Calculate capacity building DRHS

1. Does the participant need support which can be delegated from a registered nurse to a support worker to deliver?
 - Yes, go to step 2
 - No, go to step 3.

If you aren't sure whether the participant needs support which can be delegated from a registered nurse, talk to your team leader or technical lead. If you need advice, you can create a technical advice case. Refer to article [Create a technical advice case](#).

2. Can the participant provide you with a report or assessment recommending the supports needed?
 - Yes, go to step 3
 - No, use go to section 'Guide to registered nurse hours' to calculate the amount of registered nurse support hours for a nurse to develop a Delegation of care or nursing care plan.
3. Determine the disability-related capacity building health supports the participant needs. Use the NDIS funding criteria and information from:



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- the participant
 - the nurse developed care or hospital discharge plan
 - guidance in the 'Before you start' section, including article [Add or update disability-related health supports Appendix B – Guide to capacity building supports](#).
4. Check all of the support hours the participant needs across the different health support categories.
 5. Where possible, combine similar disability-related health support hours from different health support categories to reduce duplication of hours for therapy supports. For example, if the participant asks for support from a speech pathologist for swallowing difficulties and verbal language think about if the hours can be combined. Make sure there are enough hours to cover both needs.
 6. Add disability-related **Capacity Building** supports using article [Add or update disability-related health supports and meal preparation supports](#).

Guide to registered nurse hours

Use the lists below to guide you on the amount of registered nurse support to include in the participant's plan. This support is to develop and implement a registered nurse Delegation of Care plan. It does not include the hours for a nurse to complete specific DRHS tasks. For example, changing catheters.

1. Determine the tasks the registered nurse will need to complete.
2. Determine the level of support using [Our Guideline – Disability-related health supports \(external\)](#).

Note: Only use these lists when the participant can't give you a nurse developed care plan or hospital discharge plan.

If you need help calculating hours for delegated care tasks or supervision of those tasks, you can create a technical advice case. Refer to article [Create a technical advice case](#).

Guide of hours for training for delegated disability-related health support tasks

Include training and assessment in tasks to make sure supports are competent in the participant's individual support needs. A Registered Nurse can train Support Workers in small groups or individually if suitable. Providers are responsible for making sure workers have current skills and knowledge, and that the training of workers is documented and regularly audited.

- Up to 2 high intensity supports delivered to 2-4 support staff: 3 hours per year.



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- Up to 2 high intensity supports delivered to 5+ support staff: 6 hours per year.
- 3 high intensity supports delivered to 2-4 support staff: 10 hours per year.
- 3 high intensity supports delivered to 5+ support staff: 20 hours per year.
- 4 high intensity supports delivered to 2-4 support staff: 17 hours per year.
- 4 high intensity supports delivered to 5+ support staff: 34 hours per year.
- 5 high intensity supports delivered to 2-4 support staff: 25 hours per year.
- 5 high intensity supports delivered to 5+ support staff: 50 hours per year.
- 6 high intensity supports delivered to 2-4 support staff: 33 hours per year.
- 6 high intensity supports delivered to 5+ support staff: 66 hours per year.
- 7 high intensity supports delivered to 2-4 support staff: 41 hours per year.
- 7 high intensity supports delivered to 5+ support staff: 82 hours per year.
- 8 high intensity supports delivered to 2-4 support staff: 49 hours per year.
- 8 high intensity supports delivered to 5+ support staff: 98 hours per year.

Guide of hours for assessments, developing care plans and supervision of staff

Health assessment

Preparation, initial assessment, reassessment and reporting on health assessment.

- Up to 2 high intensity supports: 6 hours per year
- 3 high intensity supports: 6 hours per year
- 4 or more high intensity supports: 12 hours per year

Environmental Assessment

- Up to 2 high intensity supports: 1 hour per year
- 3 high intensity supports: 4 hours per year
- 4 or more high intensity supports: 4 hours per year

Care plan

Developing new care plans, a variation or an update to a care plan

- Up to 2 high intensity supports: 4 hours per year
- 3 high intensity supports: 4 hours per year
- 4 or more high intensity supports: 7.5 hours per year



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Supervision of staff delivering tasks delegated by registered nurse, direct and indirect

These hours have been calculated based on the estimated weekly need for indirect support by a registered nurse:

- Up to 2 high intensity supports: 1 hour per month, 12 hours per year
- 3 high intensity supports: 2 hours per month, 24 hours per year
- 4 or more high intensity supports: 1-2 hours per week, 52-104 hours per year.

Next steps

1. Add disability-related health supports to the participant plan, refer to article [Add or update disability-related health supports and meal preparation supports](#).

Article topics and case names – internal use only

User roles

- **Add:** dc_users_plannerdelegate

Topics

This article relates to the following topics:

- **Add:** t_continence
- **Add:** t_diabetes
- **Add:** t_disabilityrelatedhealthsupports
- **Add:** t_dysphagia
- **Add:** t_epilepsy
- **Add:** t_nutrition
- **Add:** t_podiatryandfootcare
- **Add:** t_respiratorysupports
- **Add:** t_therapysupports
- **Add:** t_woundandpressurecare

Case names

You can use this guidance for the:

- **Add:** dc_case_technicaladvice



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Version control

Version	Amended by	Brief Description of Change	Status	Date
0.1	MGC723	<p>New KA created to separate guidance for calculating DRHS from KA – Add disability-related health supports or meal preparation supports to this article.</p> <p>Guidance for registered nurse hours also moved from KA - Add disability-related health supports Appendix B – Guide to registered nurse hours into this article.</p> <p>Changes applied following consultation with TAB during amendments of SOP. Including update to guidance for training for delegated disability-related health support tasks to cover all skill areas and support staff.</p>	DRAFT	2023-09-14
0.2	BTM847	Peer review	DRAFT	2023-09-22
0.3	MGC723	Action peer review	DRAFT	2023-09-22
0.4	CTM829	EL1 review	DRAFT	2023-09-22
0.5	JS0082	Class 1 review to progress to BiL for endorsement	DRAFT	2023-09-25
0.6	MGC723	Action EL2 review	DRAFT	2023-09-26
0.7	MGC723	Collate BIL feedback	DRAFT	2023-10-05
1.0	JS0082	Class 1 Approval	APPROVED	2023-10-09



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Complete personal and environmental circumstances case

This article provides guidance for a **local area coordinator, early childhood coordinator** and all NDIA staff (**planner, payment officer, internal review officer, complaints officer, participant service officer, access officer, quality officer, technical advisor, SDA officer, NCC officer, provider support**) to understand:

- why we complete the personal and environmental circumstances (PEC) case
- the PEC steps and questions
- how to prepare for the conversation to complete the PEC case
- how to complete the PEC
- what to do when an applicant doesn't want to complete the PEC case
- next steps.

Recent updates

July 2023

- Update to system steps and language to align with PACE and knowledge consistency.

Before you start

You have:

- read and understood [Our Guideline – Creating Your Plan](#)
- read and understood [Our Guideline – Disability-related health supports](#)
- checked if:
 - there is an application exception
 - the applicant has a priority situation
 - there are any identified risks
 - they have already applied within the last 6 months



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- the applicant doesn't want to complete the PEC
- read the [Conversation Style Guide](#)
- read article **Checking and updating a participant's preferred communication method.**

Note: PEC case questions will be different for:

- child applicants younger than 7. To learn more, read early childhood articles:
 - **Early childhood – Overview – Personal Environmental Circumstances (PEC) including Capacity Building questions**
 - **Early childhood – How to complete the Personal Environmental Circumstances (PEC) Capacity Building questions**
- applicants 7 to 14 years
- applicants over 15.

Understanding the personal and environmental circumstances case

Why do we complete the PEC case?

We complete the **Personal and Environmental Circumstances** case when a person is applying to the NDIS. Completing the questions in the PEC case helps us to understand:

- the person's support needs
- how the person manages daily life

We will use the information from the PEC case to understand the types of supports that could help an applicant. This can include:

- family, friends, and unpaid carers
- community
- mainstream
- funded supports (if they become a participant of the NDIS).

Understand Personal and Environmental Circumstances steps and questions

In the PEC case, you **must** first review the applicant's:



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- identity details, including their primary reported disability, if relevant
- authorised representative details, if relevant.

Continue the conversation and select or enter responses for all required questions in the case **Steps** marked with an asterisk.

The PEC case **Steps** and questions will vary depending on the person's situation. The case **Steps** are shown on the right of the PEC case screen. To learn more, go to articles:

- **Record Housing information**
- **Record Daily Support information**
- **Record Carers information**
- **Record Capacity Building information**
- **Record Support Coordination information**
- **Record Employment and Training information**
- **Record Equipment and Consumables information**
- **Record Assistive Technology information.**

Note: You **can't** go forward in the **Steps** sequence until you complete all required questions and select **Next**. You can view or update previous **Steps** by selecting **Previous**. Once you complete the PEC case you **can't** edit your responses.

Prepare for the conversation to complete the PEC case

You need to:

- use the [Conversation Style Guide](#) and your interpersonal skills to have a free flowing, person-centred conversation with the applicant
- select the appropriate answers. Don't read the questions out loud to the person. Listen carefully to their answers so you can choose the most appropriate answers in PACE, based on the information they provide.
- avoid selecting blank or unanswered answers in PACE when entering responses. This may result in a Typical Support Package (TSP) being created that doesn't reflect the participant's real circumstances. Instead, ask the person open-ended questions to help them provide more detailed responses.



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Note: The PEC case questions are dynamic and may change in PACE. This will depend on the person's situation, age and some of the response options you select.

How to complete the PEC case for children living in statutory out of home care

During your conversation, record responses to the questions on the basis that the child has a capable parent who provides the same level of informal supports that would be expected from a parent of a child of that age. For example, the state or territory.

When asking these questions, remember to consider the role of the state/territory as the parent and holding parental responsibility, rather than the foster carers. Your responses need to consider the state/territory's statutory responsibility as well as considering valuable matters raised by the individual foster parent responses.

For example, when asking if they can continue to care for the child in the way they currently do you should always respond - Yes. Do not answer No to this question. If the foster carer cannot continue to care for the child, the state/territory remains responsible for the child's care and providing a suitable care arrangement at all times.

The planning conversation allows you the opportunity to gather detailed and concise information. This is also a great opportunity for the child to tell their story and voice their goals and aspirations where possible. The following points can support you to have a high-quality conversation:

- Ask the child the relevant questions where appropriate and where they can understand and respond. When you can't direct questions to the child, you should ask the person with parental responsibility.
- Include the child representative in all conversations and decisions.
- Don't give a service provider or support coordinator any decision-making power in relation to the child's plan at any time.
- Never presume to know what the family is going through or why the child is in statutory out of home care.
- It is possible that the child has experienced trauma, and this should be considered in the context of their vulnerability when discussing some subjects that may be difficult for them.
- Refer to NDIS Intranet page guidance by searching Disability Snapshots and Disability Navigator for further and specific guidance relating the child's disability.



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How to complete the PEC case

You should help the applicant feel comfortable during the discussion. When speaking face-to-face or over the phone you must:

- prepare for the conversation
- build rapport and listen actively
- tailor the wording from the assessment questions
- understand the question you are asking
- understand the person-centred approach
- ask effective questions
- manage expectations with the person so they understand this doesn't necessarily mean they will get a funded NDIS plan.

You should note the following when completing the PEC questions.

Consumable supports

- consumable support has different levels for adults and children
- continence products include catheter consumables such as tubing and bags
- for children younger than 18 the available answers to choose from include:
 - level 1 (high user only, or moderate use and higher cost). For example, the child uses 6 or more continence products per day and higher cost tube feeding.
 - level 2 (moderate use, moderate cost). For example, the child uses 4-6 continence products and low-cost tube feeding, or high-cost tube feeding and less than 4 continence products.
 - level 3 (low to moderate use, low to moderate cost). For example, the child uses less than 4 continence products and low-cost tube feeding.
 - level 4 (low use, low cost). For example, the participant uses continence products only (less than 4), or low-cost tube feeding only.

Note: In rare situations we may include funding for continence supports for an eligible child participant younger than 5 with disability related medical conditions. To learn more refer to [Our Guidelines – Continence Supports](#).

Capacity building supports (for applicants over 6)



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Use the following examples as a guide to understand the different levels of capacity building support. Select the most appropriate option when answer the PEC questions about capacity building.

Note: As a guide to understanding an applicant's goals, consider:

- for **simple goals**:
 - these are likely to be short-term
 - the applicant and the people who support them can easily identify steps to work towards it
- for **complex goals**:
 - these are likely to be medium to long-term
 - we would need to work with the applicant participant, and the people who support them, to identify how to work towards the goal
 - we may need to request progress reports to understand how supports were helping the person to work towards their goal.

None (**Capacity Building Level 5**) may include:

- The participant only has simple goals in their plan and can work towards these with support from informal, community or mainstream supports.
- Selecting this option means that the participant can work towards their goals without any funded Capacity Building support.

Low (**Capacity Building Level 4**) may include:

- The participant may have one simple goal in their plan that requires some support to work towards.
- Selecting this option means they may be able to work towards this goal with support from one provider, such as an allied health professional or support worker.

Moderate (**Capacity Building Level 3**) may include:

- The participant has up to 3 simple goals in the plan that require some support to work towards.
- They might need support from a few different support providers or allied health professionals to work towards their goal.



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- For example, a participant may want to work towards being able to use transport independently. To do this they might need some help from an Occupational Therapist to understand how to get to the bus stop and buy a ticket and help from a Speech Therapist to be able to communicate with the bus driver.
- Selecting this option usually means the participant can work towards their goal during the current plan period.

High (**Capacity Building Level 2**) may include:

- The participant has up to 4 simple goals and one complex goal in their plan.
- They might need help from a few different allied health professionals and a support worker to work towards their goal.
- For example, a participant might need to have a support worker travel with them on the bus to build their independence, as well as work with the Occupational Therapist and Speech Therapist to support their communication and planning skills.
- Selecting this option usually means that the participant's goals are long-term and something they will work towards over more than one plan period.

Very High (**Capacity Building Level 1**) may include:

- The participant has more than one complex goal in their plan and requires some behaviour support to be able to work towards their goals.
- You would have already referred to [Practice Guide – Positive Behaviour Support and Behaviours of Concern](#) if you have decided that behaviour supports are reasonable and necessary to support the participant to work towards their goals.

I don't know/Unsure (**Capacity Building Level 5**) may include:

- Using this response may mean the participant does not receive the appropriate level of support to help them work towards their goals.
- **Note:** Avoid using this response wherever possible.

What if the applicant does not want to complete the PEC?

The applicant may not want to complete the PEC. It's important to complete the PEC so we can generate the right budget and support for participants. It's important you let the person know their application could be delayed if we don't complete the PEC.



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Next Steps

Read article **Create a Personal and Environmental Circumstances case**.

Once we have completed the PEC case, we need to:

- complete functional capacity assessment. Read article **Understand functional capacity assessments**.
- complete Streaming. Read article **Participant streaming**.
- complete then submit the access request case. Read article **How to apply for the NDIS in PACE**.

Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	EMN960	Director review and approval	APPROVED	2022-11-07
2.0	EMN960	Director review and approval	APPROVED	2022-11-10
3.0	EMN960	Director review and approval	APPROVED	2023-02-02
4.0	JJO192	Revised for staff experience common capabilities micro-release	APPROVED	2023-03-17
4.1	JJO192	CI-package – Applying to the NDIS Update knowledge article for the Disability (PEC) case.	DRAFT	2023-06-20
4.2	DFB448	Peer review	DRAFT	2023-06-21
4.3	JJO192	Actioned peer review	DRAFT	2023-06-21
4.4	JJO192	Actioned visible thread review – reduced sentence lengths and passive sentences where possible. Flesch Readability 51 Grade 8.3 Passive voice 4.17%	DRAFT	2023-06-21



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Version	Amended by	Brief Description of Change	Status	Date
4.5	VFK746	EL1 Review progress to EL2 for SD and Partner Review	DRAFT	2023-06-27
5.0	EMN960	EL2 Approval to publish	APPROVED	2023-06-29
5.1	JJO192	Upload and action SME feedback – EC Partners	DRAFT	2023-06-30
5.2	VFK746	EL1 review of SME Feedback and progress to EL2 for approval	DRAFT	2023-07-03
6.0	EMN960	EL2 Approval to publish	APPROVED	2023-07-04



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Create a new personal and environmental circumstances case

This article provides guidance for a **local area coordinator, early childhood partner** and all NDIA staff (**planner delegate, payments officer, internal review delegate, complaints officer, participant support officer, access delegate, technical advisors, National Contact Centre, liaison officers (HLO/JLO), complex support needs (CSN) planner, national reassessment delegate**) to:

- create a new personal and environmental circumstances (PEC) case.

Recent updates

December 2023

New guidance to create a new personal and environmental circumstances case.

Before you start

You:

- have utilised guidance in article [How to apply for the NDIS in PACE](#)
- are preparing the applicant's PEC case.

Create a new personal and environmental circumstances case

1. From **Person Account**, select **Cases** tab.
2. Select **New**.
3. Select **Personal and Environmental Circumstances**.
4. Select **Next**.
5. At the **Categorisation** section, select **Case Origin**.
6. Select **Save**.
7. From the case view, select the **Personal and Environmental Circumstances** tab.



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8. Review details before proceeding. Select **Next**.
9. For **Do you wish to select an authorised representative?**:
 - Select **Yes** if the person answering the questions is an authorised representative, select the authorised representative's name then select **Save Authorised Representative**. Read article [Understand authorised representatives](#) to learn more.
 - Select **No** if you are speaking with the applicant.
10. Select **Next**.

System intelligence note: The steps in the **Personal and Environmental Circumstances** case are dynamic and may change. This will depend on the person's situation, age, and some of the response options you select.

Next steps

1. Use article [Complete personal and environmental circumstances case](#) to assist with the applicant's PEC questions.

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- t_applying
- t_childrepresentatives
- t_complexsupportneeds
- t_createaplan
- t_identity
- t_informalcommunityandmainstreamsupports
- t_nominees
- t_planchanges
- t_reasonableandnecessary
- t_reviewingdecisions.

Case names



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You can use this guidance for the:

- dc_case_accessrequest
- dc_case_checkin
- dc_case_createpersonaccount
- dc_case_eligibilityreassessment
- dc_case_personalandenvironmentalcircumstances
- dc_case_updateprofile.

Version control

Version	Amended by	Brief Description of Change	Status	Date
0.1	MIC163	CI-Applying work package – sprint 1 New KA split from WP17B.19j-02 – Complete personal and environmental circumstances case	DRAFT	2023-06-14
0.2	JJO192	Peer review actioned	DRAFT	2023-06-16
0.3	JJO192	Noted visible thread review: Flesch Readability 39 Grade 8.8 Passive voice 0%	DRAFT	2023-06-16
0.4	JJO192	Upload and action SME feedback – NARB	DRAFT	2023-06-22
0.5	VFK746	EL1 Review & progress to EL2 for Class 2 Approval	DRAFT	2023-06-27
0.6	LCM135	Revise and check for errors, KA consistency, and outdated information	DRAFT	2023-12-14
0.7	TER030	APS 6 draft preparation for EL1 review	DRAFT	2023-12-15
0.8	VFK746	EL1 Review and progress to EL2 for approval	DRAFT	2023-12-18



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Version	Amended by	Brief Description of Change	Status	Date
0.9	EMN960	EL2 Review and approval to QA and publish	DRAFT	2023-12-18
1.0	EMN960	Class 1 Approved New guidance to create a new personal and environmental circumstances case.	APPROVED	2023-12-18

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Record equipment and consumables information

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This article provides guidance for a **local area coordinator, early childhood coordinator and all NDIA staff (planner, payment officer, internal review officer, complaints officer, participant service officer, access officer, quality officer, technical advisor, SDA officer, NCC officer, provider support)** to understand:

- disability related health supports
- consumable products
- when the NDIS would fund consumable products.

Recent updates

July 2023 Update to system steps and language to align with PACE release 1.13.

Before you start

You have:

- read and understood [Our Guidelines – Disability-related health supports](#)
- read article, [Add disability-related health supports Appendix C – Guide to disability-related Core supports](#)
- read article, [Complete personal and environmental circumstances case](#)
- read article, **Create Personal and Environmental Circumstances case**
- read article, [Update informal, community and mainstream supports during a check-in.](#)
- read [Conversation Style Guide](#).

Personal and environmental circumstances – equipment and consumables information

[Explain disability-related health supports](#)

Disability-related health supports help a participant manage a health condition that relates to their disability.

The equipment and consumables questions help identify what supports a participant may need in their plan.

Understand consumable products in a participant's plan

Consumable products are items a participant uses daily to help them with a condition related to their disability. These can include:

- dysphagia supports for those who have trouble eating, drinking, or swallowing daily
- continence supports such as nappies, pads, liners, bedding, and seating protection, as well as catheter consumables such as tubing and bags
- wound and pressure care supports for those that have slow to heal wounds, and need regular skin, wound, and pressure care.

When will we fund equipment and consumables?

A participant can have some disability-related health supports funded through the healthcare system. These supports may not meet the reasonable and necessary criteria of the NDIS.

You should support the participant to navigate other service systems to get the disability-related health support they need.

Record equipment and consumables information

Ask the person the **Equipment and Consumables** questions in the **Personal and Environmental Circumstances** case and record their answer.

Note: Don't read the response options to the person out loud. Instead, listen carefully to their answers. You may need to select the most appropriate option for each question.

Use your interpersonal skills in a guided conversation to seek answers to each question. Explain to the person we need the right information **before** we make an eligibility decision.

You **must** record a response for each mandatory field marked with an asterisk. Then select **Next** to continue.

Note: The PEC case **Steps** and questions are dynamic and may change. This will depend on the person's situation and age, as well as the response options selected for some questions.

Next steps

There are no further steps.

Article topics and case names – internal use only

Topics

This article relates to the following topics:

- **Add:** t_continence
- **Add:** t_disabilityrelatedhealthsupports
- **Add:** t_dysphagia
- **Add:** t_woundandpressurecare

Case names

You can use this guidance for the:

- **Add:** dc_case_personalandenvironmentalcircumstances

Version control

Version	Amended by	Brief Description of Change	Status	Date
2.0	EMN960	EL2 review and approval - no feedback from SD and Partners	APPROVED	2023-06-20
2.0		Article ID: 143397597 Description: Added active published article links and labels.		



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Complete the planning conversation tool

This Standard Operating Procedure (SOP) will help you complete the Planning Conversation Tool task in the NDIS Business System (System).

Note:

- If you do not have access to the System use the [Off System planning pack – 15 years and over](#). Transfer the information to the System when you get access.
- You don't need to record your justification for changing the Typical Support Package here. You will do this as part of the **Review and Submit Plan for Approval** task. Refer to [Standard Operating Procedure – Review and submit plan for approval](#).
- The age range is changing for the NDIS early childhood approach. From July 1, 2023, the age will change to include children younger than 9. The change will be rolled out over the next 2 years. Early childhood partners will need to use this resource to plan for children aged 7 or 8.

1. Recent updates

Date	What's changed
July 2023	Updates to support early childhood partners to plan for children aged 7 or 8.
April 2023	Guidance for staff inserted at step 10, reminding to use the participant's correct pronouns in the Notes field.

2. Checklist

Topic	Checklist
Pre-requisites	You have: <ul style="list-style-type: none"> <input type="checkbox"/> read and understood Our Guideline – Creating your plan. <input type="checkbox"/> read and understood the Age range change <input type="checkbox"/> started the planning conversation.



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Topic	Checklist
	<ul style="list-style-type: none"> <input type="checkbox"/> checked consent has been given to collect information from third parties (if relevant). Refer to Standard Operating Procedure – Check third party consent or authority. <p>If available, you have reviewed:</p> <ul style="list-style-type: none"> <input type="checkbox"/> the Access Request Form (ARF) <input type="checkbox"/> current supports or compensation information provided under s55 of the National Disability Insurance Scheme Act 2013 (NDIS Act) <input type="checkbox"/> any relevant recommendations or reports, such as a functional capacity assessment <input type="checkbox"/> the participant statement <input type="checkbox"/> any recorded informal, community and mainstream supports <input type="checkbox"/> participant and family outcomes questionnaire responses <input type="checkbox"/> Alerts, Interactions, or Inbound Documents <input type="checkbox"/> the In-Kind listing report in Panda Live to see if the participant is receiving any In-kind supports. Refer to Standard Operating Procedure – Using the In-kind Listing report <input type="checkbox"/> supporting information provided by the participant or carer. This may include the Participant Booklet 2 – Planning or a carer's statement. <p>If the participant is self-managing, you have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> checked bank account details are recorded. Refer to Standard Operating Procedure – View approved bank details
Actions	<ul style="list-style-type: none"> <input type="checkbox"/> 3.1 Complete the planning conversation tool

3. Procedure

Note: For participants younger than 7, the **Reasonable and Necessary Supports**

Explanation checkbox is the only requirement that needs to be completed in the planning conversation tool. No further information needs to be completed in the planning conversation tool. Refer to the [Practice Guide – Early childhood planning](#) for additional information.

3.1 Complete the planning conversation tool

1. From the **Pre-Planning** staff tasks, select **Planning Conversation Tool**.



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2. The **Create – Record Informal, Mainstream and Funded Support Needs** screen displays. There are 13 sections to complete.

Record information in **Notes** that is relevant to your reasonable and necessary decision making. Only record information in this section that you do not record elsewhere in the System.

Note: Make sure you refer to the participant by their preferred name and correct pronouns.

3. **Reasonable and Necessary Supports Explanation:** You can use the reasonable and necessary explanation as a guide to help the participant understand what reasonable and necessary supports are, or you can use your own words. Select the **checkbox** to show you have done this.

Note: For participants younger than 7, this is the only section of the planning conversation tool that needs to be completed. Once completed, select **Submit**.



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Reasonable and Necessary Supports Explanation

The following explanation has been provided to the participant:

The NDIS provides reasonable and necessary supports that aim to assist people to live a good life through building and maintaining independence and through participation in community, work and social activities. There must be evidence that funded supports are likely to be effective and beneficial (good practice) and represent a reasonable cost in comparison to alternative support. Importantly, funded supports must relate to a person's disability and have a clear link to their goals. The NDIS does not fund supports that are seen as day-to-day living costs, that is, costs that everyone would incur regardless of whether they have a disability e.g. if a participant has a goal of getting fit by going to a gym, the NDIS may pay for the support or assistive technology the person requires to undertake this activity, however it is not the NDIS's responsibility to pay for a person's gym membership itself. Before the NDIS can determine what is reasonable and necessary to fund we must first explore what can be provided by informal and other support systems. This is because the NDIS does not want to replace the positive natural supports a person has in their life (such as those supports provided by family, carers and friends); and because the NDIS is not responsible for funding supports that are already available through existing services, community groups or government departments (such as Medicare or the education system).

4. Daily living (core support needs): Select the relevant checkboxes.

Daily living (core support needs)

Includes support needs for home community, education and work; transport; and supported independent living

Financial management - mainstream: <input checked="" type="checkbox"/>	Referral to mainstream service <input type="checkbox"/>	Support to sustain informal care <input type="checkbox"/>
Informal support available: <input type="checkbox"/>	Household assistance <input type="checkbox"/>	Community Access (core) <input type="checkbox"/>
Personal Care: <input type="checkbox"/>	Home Enteral Nutrition <input type="checkbox"/>	Continence aids <input type="checkbox"/>
Live in carer: <input type="checkbox"/>	Interpreting and translating <input type="checkbox"/>	Assistance in shared living <input type="checkbox"/>
Group activity: <input type="checkbox"/>	Short term accommodation <input type="checkbox"/>	Supported living -single person <input type="checkbox"/>
Host /alternative family situation: <input type="checkbox"/>	Vacation care <input type="checkbox"/>	Transport assistance <input type="checkbox"/>

Notes:

5. Daily living (capacity support needs to improve daily living): Select the relevant checkboxes.



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✓ Daily living (capacity building support needs to improve daily living)

Referral to mainstream service: Informal support available Therapy / skills training

Trans disciplinary therapy package: Specialist driver training Therapy assistant

Individual Assessment: Assessment by a nurse Multidisciplinary intervention

Decision making: Daily planning Budgeting

Travel training: Mobility training

Notes:

6. Daily living (capital – assistive technology (AT): Select the relevant checkboxes.

✓ Daily living (capital - assistive technology (AT))

Referral to mainstream service:

Assessment required:

Therapy / skills training:

Notes:

For more information refer to:

- [Our Guideline – Assistive technology](#) on the NDIS website, and
- Assistive Technology guidance on the [Planning Intranet page](#).

7. Daily living (capital – vehicle modification needs): Select the relevant checkboxes.

✓ Daily living (capital - vehicle modification needs)

Referral to mainstream service:

Assessment required:

Notes:



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8. Home (capital – home modification needs): Select the relevant checkboxes.

✓ Home (capital - home modification needs)

Referral to mainstream service:

Assessment required:

Notes:

Refer to [Standard Operating Procedure – Include home modification capacity building supports in plans](#) if you need more information.

9. Home (capacity building support needs to improve living arrangements):

- For Younger People in Residential Aged Care (YPIRAC) participants in a Residential Aged Care Facility (RACF): select **Support to locate accommodation**. Go to **Step 10**.
- For all other participants: select the relevant checkboxes. Go to **Step 11**.

✓ Home (capacity building support needs to improve living arrangements)

Referral to mainstream service: <input type="checkbox"/>	Informal support available <input type="checkbox"/>
Therapy / skills training: <input type="checkbox"/>	Support to maintain tenancy <input type="checkbox"/>
Support to locate accommodation: <input type="checkbox"/>	Support to sustain informal care <input type="checkbox"/>

Notes:

10. For YPIRAC participants record the following questions and the participant's answers at every review in **Notes**:

- What led to you living in aged care? For example, breakdown of informal supports, function getting worse, couldn't find housing to support my needs, high medical support needs, cost.
 - Is it your choice to live in aged care?
 - If yes, why do you think aged care is the best place for you to live? For example, worried about getting the right supports, safety reasons, change in the family, like living in aged care.
- If no, continue to next question.



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- Did you consider or try other housing options? For example, support to live at home, Supported Independent Living or Specialist Disability Accommodation.
 - If no, ask the participant to explain why. Consider if the NDIA can support the participant to overcome any barriers.
 - If yes, ask the participant to explain why they didn't find the options suitable.
 Keep a record of the housing options considered and the participant's reasons.
- During this plan, do you need support to explore other housing options? Tell the participant what supports may be funded in the plan. Tell them they will be supported to identify and choose suitable housing options. This will include support for assessments and support coordination where needed.
- When thinking about other housing, what are your preferences?

If the participant has a goal to find suitable housing refer to [Practice Guide – Identifying housing solutions](#).

11. Social/Community Participation (capacity building supports to improve participation): Select the relevant checkboxes.

✓ Social /Community Participation (capacity building support needs to improve participation)

Referral to mainstream service: <input type="checkbox"/>	Informal support available <input type="checkbox"/>
Referral to volunteer work: <input type="checkbox"/>	Skills development (ind. /group) <input type="checkbox"/>
Peer support/ mentoring: <input type="checkbox"/>	Activity costs <input type="checkbox"/>
Notes: <input style="width: 100%;" type="text"/>	

12. The Work (capacity building supports to find and keep a Job): Select the relevant checkboxes.

✓ Work (capacity building support needs to find and keep a Job)

Referral to mainstream service: <input type="checkbox"/>	Informal support available <input type="checkbox"/>
Referral to ADE: <input type="checkbox"/>	ADE Ongoing <input type="checkbox"/>
On-the-job support: <input type="checkbox"/>	Employment preparation <input type="checkbox"/>
Employment Services Assessment: <input type="checkbox"/>	
Notes: <input style="width: 100%;" type="text"/>	



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13. Relationships (capacity building supports to improve relationships): Select the relevant checkboxes.

Relationships (capacity building support needs to improve relationships)

Referral to mainstream counselling: Informal support available

Referral to mainstream service: Behaviour intervention

Social skills development:

Notes:

Refer to [Standard Operating Procedure – Behaviour intervention supports](#) if you need more information.

14. Health and Wellbeing (capacity building support needs to improve health and wellbeing): Select the relevant checkboxes.

Health and Wellbeing (capacity building support needs to improve health and wellbeing)

Referral to mainstream allied health: Informal support available

Referral to mainstream service: Personal training

Notes:

15. Lifelong Learning (capacity building support needs to improve learning): Select the relevant checkboxes.

Lifelong Learning (capacity building support needs to improve learning)

Referral to mainstream service: Informal support available

Mainstream education: Employment Services Assessment

Transition from school to other:

Notes:



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16. **Choice and control (capacity building support needs to improve life choices):**
Select the relevant checkboxes.

✓ Choice and control (capacity building support needs to improve life choices)

Training in plan management:

Support connection

Support coordination (SC):

Specialist SC

Plan Management Provider:

Notes:

Notes:

- If you need more information on plan management or support coordination refer to:
 - [Standard Operating Procedure – Complete the Determine Plan Management task](#)
 - [Standard Operating Procedure – Include Support Coordination in a plan.](#)
- If support coordination or a recovery coach is included in the plan, ask the participant or their authorised representative if they have a preferred provider. If they do, refer to [Standard Operating Procedure – Make a Request for Service \(support coordination and recovery coach\)](#). You will also need to ask for their consent for the NDIA to make a referral on their behalf.
 - For more information, refer to [Practice Guide – Psychosocial disability](#) and [Standard Operating Procedure – Include Psychosocial Recovery Coach support in a plan.](#)

17. When you have finished select **Submit**.

4. Related procedures or resources

- [Our Guideline – Creating your plan](#)
- [Our Guideline – Assistive technology](#)
- [Planning Intranet page](#)
- [Participant Booklet 2 – Planning](#)
- [Off System planning pack – 15 years and over](#)



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- [Practice Guide – Psychosocial disability](#)
- [Practice Guide – Identifying housing solutions](#)
- [Practice Guide – Early childhood planning](#)
- [Standard Operating Procedure – Behaviour intervention supports](#)
- [Standard Operating Procedure – Check third party consent or authority](#)
- [Standard Operating Procedure – Complete the Determine Plan Management task](#)
- [Standard Operating Procedure – Include home modification capacity building supports in plans](#)
- [Standard Operating Procedure – Include Psychosocial Recovery Coach support in a plan](#)
- [Standard Operating Procedure – Include Support Coordination in a plan](#)
- [Standard Operating Procedure – Make a Request for Service \(support coordination and recovery coach\)](#)
- [Standard Operating Procedure – Review and submit plan for approval](#)
- [Standard Operating Procedure – Using the In-kind Listing report](#)
- [Standard Operating Procedure – View approved bank details](#)

5. Feedback

If you have any feedback about this Standard Operating Procedure, please complete our [Feedback Form](#).

6. Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CW0032	Class 2 approval. Standard Operating Procedure moved to the new SOP format to be used with Our Guidelines – Creating your plan. This SOP replaces existing SOP – Complete the planning conversation tool V7.0.	APPROVED	2021-02-09



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Version	Amended by	Brief Description of Change	Status	Date
2.0	EMN960	Class 1 approved Updated to align with updates to planning resources for participants younger than 7.	APPROVED	2022-01-20
3.0	EMN960	Class 1 approved Reminder to use the participant's correct pronouns.	APPROVED	2023-02-03
4.0	CW0032 IIW664	Class 2 approved Updated to align with the early childhood age range change. Updates to support early childhood partners to plan for children aged 7 or 8.	APPROVED	2023-06-19



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No quote provided for high cost assistive technology

This Standard Operating Procedure (SOP) will help you find the amount to include for high cost Assistive Technology (AT) when the participant does not have a quote. Use this SOP when the participant has given you an assessment, but does not have a quote.

1. Recent updates

Date	What's changed
February 2022	The way you find the cost for AT supports has changed. Section 3.1 has been updated to explain you can use the assistive technology budget tool in PANDA to check the benchmark price.
December 2020	Pre-requisites updated to include reference to the Participant Experience Delivery (PED) Key Performance Indicators (KPIs) and compliance relevant to this task.

2. Checklist

Topic	Checklist
Pre-requisites	<p>You have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> read and understood Our Guidelines – Assistive Technology <input type="checkbox"/> received the assessment, but don't have a quote for the AT support <input type="checkbox"/> have reviewed the Participant Service Guarantee and are complying with the response timeframe related to your task.
Actions	<ul style="list-style-type: none"> <input type="checkbox"/> 3.1 Determine funding for high cost AT <input type="checkbox"/> 3.2 Next steps



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3. Procedure

3.1 Determine funding for high cost AT

1. Find the cost of the AT support using the following resources as a guide:
 - information on the [NDIS Pricing Arrangements and Price Limits](#) section of the NDIS website
 - the assistive technology budget tool in PANDA. For help to use the tool to find the benchmark price refer to [Standard Operating Procedure – Add mid cost assistive technology in a plan](#)
 - the product catalogue in the NDIS Business System (System).
2. Check if you need mandatory advice from the [Technical Advisory Branch \(TAB\)](#) for the AT support. Request advice if needed.
3. Use this amount to determine if the high cost AT is reasonable and necessary. Refer to [Our Guidelines – Assistive Technology](#).
4. Draft a detailed comment to add to the participant's plan. Make sure you include the following:
 - the reasonable and necessary amount of funding you determined in step 1
 - a description of the AT support you are approving (planners and delegates) or recommending (partners in the community)
 - the description of the item from the [Assistive Technology, Home Modifications and Consumables Code Guide](#).

Example comment: Funding for your specialised computer input device using eye or neural/neuromuscular control up to the value of \$19,800.00.

Note: Include all the detail in your comment. When the participant submits the quote it is compared to the information you record.

3.2 Next steps

1. Add the high cost AT using [Standard Operating Procedure – Add high cost assistive technology in a plan and include replacement AT](#).



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4. Related procedures or resources

- [Our Guidelines – Assistive technology](#)
- [Standard Operating Procedure – Add high cost assistive technology in a plan and include replacement AT](#)
- [Standard Operating Procedure – Add mid cost assistive technology in a plan](#)
- [Assistive Technology, Home Modifications and Consumables Code Guide](#)

5. Feedback

If you have any feedback about this standard operating procedure, please complete our [Feedback Form](#).

6. Version control

Version	Amended by	Brief Description of Change	Status	Date
3.0	CW0032	Class One Language update to make plan approval inclusive.	APPROVED	2020-11-20
4.0	CS0074	Class 1 approval Pre-requisites updated to include reference to the Participant Experience Delivery (PED) Key Performance Indicators (KPIs) and target relevant to this task.	APPROVED	2020-12-23
5.0	CW0032	Class 2 Approved Update of resource at 3.1 to include AT Item budget tool to find benchmark cost of assistive technology	APPROVED	2022-01-31



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Include disability-related health supports or meal preparation supports in the participant's plan

This Standard Operating Procedure (SOP) will help you to include disability-related health supports or supports for meal preparation in the participant's plan.

Note: The age range is changing for the NDIS early childhood approach. From July 1 2023, the age will change to include children younger than 9. The change will be rolled out over the next 2 years. Early childhood partners will need to use this resource to plan for children aged 7 or 8.

1. Recent updates

Date	What's changed
July 2023	Updates to support early childhood partners to plan for children aged 7 or 8.
December 2022	Guidance updated to include new core line items. Clearer guidance for staff for how to calculate meal preparation costs.
June 2022	Included content from retired DRHS Practice guides to align with release of 6 new OGs for individual DRHS including Continence supports, Diabetes management supports, Dysphagia supports, Epilepsy supports, Podiatry and foot care supports and Wound and pressure care supports. Updated guidance related to Delegation of Care hours.
February 2022	New guidance included to align with release of Our Guideline – Nutrition supports including meal preparation . New guidance for how to calculate hours to include in the participant's plan for meal preparation in section 4.2. Name changed to Include disability-related health supports or meal preparation supports in the participant's plan

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2. Checklist

Topic	Checklist
Pre-requisites	<p>You have read and understood:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Our Guideline – Disability-related health supports <input type="checkbox"/> Our Guideline – Creating your plan <input type="checkbox"/> the Age range change <p>You have read and understood the relevant guidance:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Our Guideline – Continence supports <input type="checkbox"/> Our Guideline – Diabetes management supports <input type="checkbox"/> Our Guideline – Dysphagia supports <input type="checkbox"/> Our Guideline – Epilepsy supports <input type="checkbox"/> Our Guideline – Nutrition supports including meal preparation <input type="checkbox"/> Our Guideline – Podiatry and foot care supports <input type="checkbox"/> Our Guideline – Wound and pressure care supports <input type="checkbox"/> Our Guideline – Justice system <input type="checkbox"/> Our Guideline – Changing your plan <input type="checkbox"/> Practice Guide – Respiratory supports <p>You have read the Technical Advisory Branch (TAB) intranet page and:</p> <ul style="list-style-type: none"> <input type="checkbox"/> checked if the disability-related health support needs referral to TAB for advice <input type="checkbox"/> received TAB advice, if needed, before you include the health support in the participant's plan.
Actions	<ul style="list-style-type: none"> <input type="checkbox"/> 3.1 Calculate disability-related health supports <p>If needed:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 3.2 Add disability-related Core health supports in the plan <input type="checkbox"/> 3.3 Add Capacity Building (Assistance) health supports in the plan <input type="checkbox"/> 3.4 Add Capital health supports in the plan <input type="checkbox"/> 3.5 Find state and territory help for electricity and oxygen costs <p>Then:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 3.6 Next steps

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3. Procedure

3.1 Calculate disability-related health supports

To calculate disability-related health supports use evidence to guide your decision. Evidence can include assessments or health-related plans and will vary based on the type of disability-related health supports the participant is asking for.

For example:

- continence assessment
- nurse developed care plan
- mealtime management plan
- hospital discharge plan
- epilepsy management plan
- diabetes management plan.

For help making a reasonable and necessary decision, you can ask for support from your Service Delivery Team Leader, Assistant Director or Director. For children younger than 9, you can also ask for support from the [Children's Taskforce](#). If you need specific subject matter expertise support, request advice from [TAB](#).

1. Review the evidence available and add the reasonable and necessary supports to the participant plan. If:
 - you decide the supports recommended in the assessments and plans are reasonable and necessary, go to step 2
 - you decide the supports recommended in the assessments and plans are **not** reasonable and necessary, go to step 4
 - the participant is unable to give you evidence for their disability-related health support needs, go to step 6.
2. Refer to the assessment and/or health-related plan in your justification for the supports.
3. Go to [3.1.1 Calculate supports for shadow shifts](#).
4. For participants younger than 7:
 - follow guidance in [Practice Guide – Early childhood planning](#) about including supports for capacity building in plans and information about **Supports not recommended**.

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- record declined supports using [Interaction template – Planning – Early childhood declined supports](#).
5. For participants 7 and older:
 - follow guidance in [Practice Guide – Understanding therapy supports](#)
 - consider section **6.1.2 What if I decide not to include all of the Allied Health Professional (AHP) recommendations**
 - this provides important information on who you need to consult with before including different hours to the AHP recommendations and how to communicate this decision.
 6. Go to [3.1.1 Calculate supports for shadow shifts](#).
 7. When the participant is unable to provide you with evidence of the disability-related health supports, determine the disability-related health supports to include in their plan using:
 - [4.1 Guide to registered nurse hours](#), which provides recommended nursing hours for direct care by a nurse, to develop and implement a Delegation of Care model of support to include in the participant's plan.
 - [5. Related procedures or resources](#).
 8. Go to [3.1.1 Calculate supports for shadow shifts](#).

3.1.1 Calculate supports for shadow shifts

Shadow shifts may be required to introduce some participants to new workers before they commence providing support independently, if they have complex support needs including disability-related health support needs. For example:

- very limited communication
- behaviour support needs
- complex supports such as ventilation.

Shadow shifts:

- let the participant become familiar with new staff
- help new staff understand the participant's complex support needs
- provide the participant with disability-related health supports in a safe way.

Shadow shifts do **not** replace formal training by an employer to their workforce. Formal training includes shadowing or buddying less experienced staff or new staff with experienced workers or informal carers.

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1. Does the participant need shadow shifts for disability-related health supports. If:
 - **Yes**, go to step 2
 - **No**, go to [3.1.2 Calculate health consumable supports](#).
2. The number of shadow shifts should be based on the number of workers the participant has and the complexity of their needs. For help to determine the number of shadow shifts, you can ask for support from your Service Delivery Team Leader who can seek advice from [TAB](#).
3. Go to [3.1.2 Calculate health consumable supports](#).

3.1.2 Calculate health consumable supports

Health consumables include continence, dysphagia, wound care, nutrition and respiratory support.

1. Determine the reasonable and necessary consumables required across all disability-related health support needs using [5 Related procedures or resources](#)
2. If TAB provides advice for health consumable supports, follow any advice for how to enter supports in the plan.
3. Bundle these in units of \$500 or \$1500 depending on the support item you select. This will maximise funding flexibility and avoid funding multiple small support items/services.

Note: Although we include this funding in units of \$500 or \$1500, providers will be able to claim against units of \$100.

4. Add funding for delivery, repairs and maintenance of disability-related health consumables and equipment. For specific funding guidance, go to [4. Appendices](#).
5. Add disability-related **Core** supports using [3.2 Add disability-related Core health supports in the plan](#).

3.1.3 Calculate personal care hours for assistance with health-related tasks and/or meal preparation

1. Determine the reasonable and necessary amount of personal care hours the participant needs for assistance with health-related tasks and/or meal preparation using information from:
 - the participant
 - the nurse developed care or hospital discharge plan
 - [4.2 Guide to disability-related Core supports](#)
 - guidance in [5. Related procedures or resources](#).

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2. Determine personal care hours for all types of workers including support workers, allied health professionals and direct care hours from nurses. For example, for a nurse to change a catheter.

Note: Nurse direct care hours are separate to delegation of care and supervision hours. To learn more about how to calculate hours for delegation of care, go to [3.1.4 Calculate capacity building health-related supports](#).

3. Consider if you can combine support workers hours so the participant gets value for money. For example, the participant may require support with multiple tasks which require 10 -15 minutes each to complete. Examples include support with support administering insulin, skin and pressure area checks and application of pressure garments. In this case 1 hour would be enough to cover multiple tasks.
4. Consider additional time required for nurses, supports workers and other staff to travel to provide daily activities. Refer to [Our Guideline – Reasonable and necessary supports](#) and the [NDIS Pricing Arrangements and Price Limits](#).
5. Add disability-related **Core** supports using [3.2 Add disability-related Core health supports in the plan](#).

3.1.4 Calculate capacity building health-related supports

1. Does the participant need support which can be delegated from a registered nurse to a support worker to deliver?
 - **Yes**, go to step 2
 - **No**, go to step 3.

If you are unsure whether the participant needs support which can be delegated from a registered nurse, ask for support from your Service Delivery Team Leader, Assistant Director or Director. If you need specific subject matter expertise support, request advice from [TAB](#).

2. Can the participant provide you with a report or assessment recommending the supports required?
 - **Yes**, go to step 3
 - **No**, use [4.1 Guide to registered nurse hours](#) to calculate the amount of registered nurse support hours to include for a nurse to develop a Delegation of care or nursing care plan.
3. Determine the reasonable and necessary disability-related capacity building health supports the participant needs. Use information from:



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- the participant
 - the nurse developed care or hospital discharge plan
 - [4.3 Guide to disability-related Capacity Building supports](#)
 - [5. Related procedures or resources.](#)
4. Check all hours the participant needs across the different health support categories.
 5. Where possible, combine similar disability-related health support hours from different health support categories. This will reduce duplication of hours for therapy supports. For example, if the participant has a speech pathologist request for swallowing difficulties and verbal language consider if the hours can be combined. You will need to make sure there is enough hours to cover both needs.
 6. Add disability-related **Capacity Building** supports using [3.3 Add Capacity Building \(Assistance\) health supports in the plan.](#)

3.2 Add disability-related Core health supports in the plan

To complete this section, use the information you have gathered in [3.1.3 Calculate personal care hours for assistance with health-related tasks and/or meal preparation.](#)

1. In **Planning – Staff Tasks**, select the **Determine the Funded Supports** task.
2. The **Determine the Support Needs** form will open. Select **Core**.

Determine the Support Needs	
Support Type	Price \$
Core	0.00
Capacity Building	0.00
Capital	0.00
Total Plan Budget (\$)	

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3. The **Core** support category form will open. You can include disability-related health supports in the **Consumables** or **Daily Activities** budgets.

Determine the Support Needs		
Support Type >	Support Category	
Support Category	Price \$	Comment
Consumables	0.00 	
Daily Activities	0.00 	
Social, Community and Civic Participation	0.00 	
Transport	0.00 	

4. Add low cost health assistive technology using the [Standard Operating Procedure – Add low cost assistive technology supports in a plan.](#)
5. If the participant:
- needs disability-related health consumables, go to [3.2.1 Add health consumables](#)
 - needs personal care hours for health-related tasks, go to [3.2.2 Add personal care hours for assistance with health-related tasks or meal preparation.](#)
 - doesn't need either of these supports, go to step 6.
6. Record the **Core Comment** using [3.2.3 Record the Core Comment.](#)

3.2.1 Add health consumables

1. Select the **Consumables** expander button.

Determine the Support Needs		
Support Type >	Support Category	
Support Category	Price \$	Comment
Consumables	0.00 	
Daily Activities	0.00 	



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- The **Support Calculator** will open. Select **Add Row** (plus sign) to add a row if the **Select a Product** field does not display or to add extra rows.

Support Calculator						
Product	Price	Quantity	Unit	How Often	Frequency	Total
Select a Product	0.00	1		Once	1.00	0.00
Item Type <input type="text"/>						
Quote Required <input type="checkbox"/> Quote Received <input type="checkbox"/>						
						\$0.00

- Search for support item **Disability-Related Health Consumables**.
- Select the most appropriate support item for the participants individual support needs.

Select a Product	
Disability-related Health Consumables	
Disability-Related Health Consumables - High Cost 03_040000111_0103_1_1	
Disability-Related Health Consumables - Funding Only 03_040000911_0103_1_1	
Disability-Related Health Consumables - Low Cost 03_040000919_0103_1_1	

- This will take you back to the **Support Calculator**.

Support Calculator						
Product	Price	Quantity	Unit	How Often	Frequency	Total
Disability-Related Health C	500	1	each	Once	1.00	500.00
Item Type <input type="text"/>						
Quote Required <input type="checkbox"/> Quote Received <input type="checkbox"/>						
						\$500.00

- Complete the following fields:
 - Quantity:** enter the number of units
 - How Often:** as required
 - Item Type:** leave blank.

Note: The price will change depending on the support item you have selected.

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7. Select **Done**.

3.2.2 Add personal care hours for assistance with health-related tasks or meal preparation

1. Select the **Daily Activities** expander button.

Support Category	Price \$	Comment	Periodic
Consumables	0.00		>
Daily Activities	0.00		>
Social, Community and Civic	0.00		>

2. The **Support Calculator** will open. Select **Add Row** (plus sign) to add a row if the **Select a Product** field does not display or to add extra rows.

Product	Price	Quantity	Unit	How Often	Frequency	Total
Select a Product	0.00	1		Once	1.00	0.00

Item Type

Quote Required Quote Received

\$0.00

3. Add the reasonable and necessary disability-related health supports or meal preparation supports using the calculator. You will use different support items based on the type and level of support the participant needs.

- If you have included supports that relate to delegation of care, you need to upload supporting information using [Standard Operating Procedure – Manage inbound documents](#).

Note: Meal preparation supports should **not** be stated and do **not** require a quote. This will allow participants to use this support flexibly.

4. Select **Done**.

3.2.3 Record the Core Comment

Due to the flexible nature of the **Core** budget, combine comments for all **Core** categories into one comment. You record this comment in the **Daily Activities Comment** field.

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1. Select the **Comments** field for **Daily Activities**.
2. Add your comment. Make sure the comment describes supports across all **Core** categories and for all types of supports, not just health. For example:

Core supports can be used flexibly to help with my daily activities, disability-related needs and pursuing my goals. Core supports include funding for my respiratory consumables and low cost assistive technology.

Daily Activities	10,300.00		Core supports can be used flexibly to help with my daily activities, disability-related
------------------	-----------	--	---

- Where funding is included for respiratory consumables, include in your comment:

Respiratory consumables must be compatible and fit for purpose with my prescribed respiratory equipment.

- Where funding is for meal preparation support, you should specify in your comment:

Core supports include [amount] for support with preparing meals.

Daily Activities	10,300.00		Core supports include \$7990.32 for support with preparing meals
------------------	-----------	--	--

3. Determine the next step:
 - if the participant requires health supports for capacity building in their plan, go to [3.3 Add Capacity Building \(assistance\) health supports in the plan](#)
 - if the participant requires **Capital** health supports, go to [3.4 Add Capital health supports in the plan](#)
 - if there are no other disability-related health supports to add to the participants plan, go to [3.6 Next steps](#).

3.3 Add Capacity Building (Assistance) health supports in the plan

1. In **Planning – Staff Tasks**, select the **Determine the Funded Supports** task.
2. The **Determine the Support Needs** form will open. Select **Capacity Building**.



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Determine the Support Needs	
Support Type	
Support Type	Price \$
Core	<input type="text" value="0.00"/>
Capacity Building	<input type="text" value="0.00"/>
Capital	<input type="text" value="0.00"/>
Total Plan Budget (\$) <input type="text"/>	

3. The **Support Category** form will open. Select **Capacity Building**.

Determine the Support Needs		
Support Type >	Support Category	
Support Category	Price \$	Comment
Capacity Building	<input type="text" value="0.00"/>	<input type="text"/>
Support Coordination	<input type="text" value="0.00"/>	<input type="text"/>

4. The **Capacity Building** form will open. The **Capacity Building** support categories where disability-related health supports can be included are:
- **CB Daily Activity:** allied health practitioners and all levels of nursing.
 - **CB Health and Wellbeing:** support from a dietitian.



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Determine the Support Needs		
Support Type > Support Category > Capacity Building		
Support Category	Price \$	Comment
CB Choice & Control	0.00	
CB Daily Activity	0.00	
CB Employment	0.00	
CB Health & Wellbeing	0.00	
CB Home Living	0.00	
CB Lifelong Learning	0.00	
CB Relationships	0.00	
CB Social, Community, Civic	0.00	

5. Select the **CB Daily Activity** expander button.

Determine the Support Needs			
Support Type > Support Category > Capacity Building			
Support Category	Price \$	Comment	Associated Goal
CB Choice & Control	0.00		
CB Daily Activity	0.00		

6. The **Support Calculator** will open. Select **Add Row** (plus sign) to add a row if the **Select a Product** field does not display or to add extra rows.

Support Calculator							
Product	Price	Quantity	Unit	How Often	Frequency	Total	
Select a Product	0.00	1		Once	1.00	0.00	
Item Type							
Quote Required	<input type="checkbox"/>	Quote Received	<input type="checkbox"/>				
							\$0.00



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- Add disability-related health nursing supports using [3.3.1 Add nursing supports](#).
- Add disability-related health podiatry supports using [3.3.2 Add podiatry supports](#).
- Add disability-related health speech pathology supports using [3.3.3 Add speech pathology supports](#).

7. Record the **CB Daily Activity Comment**. Write the comment so the participant will understand what the funding is for. For example:

Includes podiatry assessment, care plan and selection or manufacture of customisable or wearable technology.

CB Daily Activity	969.95		Includes podiatry assessment and care plan and selection or manufacture or
-------------------	--------	--	--

8. If you have included supports that relate to delegation of care, upload supporting information to the NDIS Business System. Refer to [Standard Operating Procedure – Manage inbound documents](#).
9. If the participant has disability-related health dietitian supports, go to [3.3.4 Add dietitian supports](#).
10. Determine the next step:
- If the participant requires **Capital** health supports go to [3.4 Add Capital health supports in the plan](#).
 - If there are no other disability-related health supports to add to the participant's plan go to [3.6 Next steps](#).

3.3.1 Add nursing supports

The plan developer should make sure there are sufficient funds included in the plan to cover a participant's reasonable and necessary nursing support needs. It is the responsibility of the service provider to assign the most appropriately qualified nurse to provide the disability related health support.

1. Search for and select the nursing support.
 - If you do **not know** the level of nursing at the time of planning, include all nursing hours together using the support item **Composite Funding For Delivery Of Health Supports By A Clinical Nurse Consultant**.
 - When the participant provides clear supporting information include like-for-like support items from:

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- **Composite Funding For Delivery Of Health Supports By An Enrolled Nurse**
- **Composite Funding For Delivery Of Health Supports By A Registered Nurse**
- **Composite Funding For Delivery Of Health Supports By A Clinical Nurse**
- **Composite Funding For Delivery Of Health Supports By A Clinical Nurse Consultant**
- **Composite Funding For Delivery Of Health Supports By A Nurse Practitioner.**

Select a Product

✕ 🔍

Composite Funding For Delivery Of Health Supports By An Enrolled Nurse
15_430_0114_1_3

Composite Funding For Delivery Of Health Supports By A Registered Nurse
15_431_0114_1_3

Composite Funding For Delivery Of Health Supports By A Clinical Nurse
15_432_0114_1_3

2. Complete the following fields:

- **Quantity:** enter the number of units
- **How Often:** as required
- **Item Type:** leave blank. Nursing supports should **not** be **Stated**. This is so the participant can access all levels of nursing support for the duration of their plan.

3.3.2 Add podiatry supports

1. Search for and select podiatry supports using support items below:

Assessment, Recommendation, Therapy and/or Training (Incl. AT) - Other Therapy
Selection and/or Manufacture of Customised or Wearable Technology.

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Select a Product
Search
Selection And/or Manufacture Of Customised Or Wearable Technology 15_047_0135_1_3
Assessment Recommendation Therapy And/or Training (Incl. AT) - Psychology 15_054_0128_1_3
Assessment Recommendation Therapy And/or Training (Incl. AT) - Physiotherapy 15_055_0128_1_3
Assessment Recommendation Therapy And/or Training (Incl. AT) - Other Therapy 15_056_0128_1_3

2. Complete the following fields:

- **Quantity:** Enter the number of units
- **How Often:** as required
- **Item Type:** leave blank.

3.3.3 Add speech pathology supports

1. Search for and select support item:

Assessment, Recommendation, Therapy And/or Training (Incl. AT) - Other Therapy.

Select a Product
Search
Capacity Building Supports For Early Childhood Interventions - Other Therapy 15_005_0118_1_3
Assessment Recommendation Therapy And/or Training (Incl. AT) - Other Therapy 15_056_0128_1_3



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2. Complete the following fields:
 - **Quantity:** enter the number of units
 - **How Often:** as required
 - **Item Type:** leave blank.

3.3.4 Add dietitian supports

1. Select the **CB Health and wellbeing** expander button.

Determine the Support Needs		
Support Type > Support Category > Capacity Building		
Support Category	Price \$	Comment
CB Choice & Control	0.00	
CB Daily Activity	0.00	
CB Employment	0.00	
CB Health & Wellbeing	0.00	

2. The **Support Calculator** will open. Select **Add Row** (plus sign) to add a row if the **Select a Product** field does not display or to add extra rows.

Support Calculator							
Product	Price	Quantity	Unit	How Often	Frequency	Total	
<input type="button" value="+"/> <input type="button" value="🗑️"/> Select a Product	0.00	1		Once	1.00	0.00	
Item Type	<input type="text"/>						
Quote Required	<input type="checkbox"/>	Quote Received	<input type="checkbox"/>				
							\$0.00



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3. Search for and select **Dietician Consultation And Diet Plan Development**.

Select a Product
dietician
Dietician Consultation And Diet Plan Development 12_025_0128_3_3
Dietician Group Session - Group of 3 12_026_0128_3_3

4. Complete the following fields:

- **Quantity:** enter the number of units
- **How Often:** as required
- **Item Type:** leave blank.

5. Record the **CB Health and Wellbeing Comment**. Write the comment so the participant will understand what the funding is for. For example:

Funding for a nutrition plan consultation, assessment and report - 4 hours.

CB Health & Wellbeing	775.96		Funding for a nutrition plan consultation, assessment and report - 4 hours.
-----------------------	--------	--	---

3.4 Add Capital health supports in the plan

You only include mid cost or high cost disability-related health supports in the **Capital - Assistive Technology** budget.

Note: You can include low-cost assistive technology (AT) in the **Core Consumables** budget. For more information, go to [Our Guideline – Assistive technology](#) and Assistive Technology guidance on the [Planning resources intranet page](#).



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1. Select **Capital** from the **Determine the Support Needs** form.

Support Type	Price \$
Core	0.00
Capacity Building	0.00
Capital	0.00

Total Plan Budget (\$)

2. Select **Assistive Technology** expander button.

Support Category	Price \$	Comment
Assistive Technology	0.00	
Home Modifications	0.00	

3. The **Support Calculator** will open. Select **Add Row** (plus sign) to add a row if the **Select a Product** field does not display or to add extra rows.

Product	Price	Quantity	Unit	How Often	Frequency	Total
Select a Product	0.00	1		Once	1.00	0.00

Item Type

Quote Required Quote Received

\$0.00

4. Search for and include disability-related assistive technology supports. Examples of disability-related health supports are:

Air-Filled Garments And Compression Units For Managing Circulation Problems

Aspirators – Portable suction machines

Cough Assist Machine

Respirators - Invasive Ventilation For Continuous Use

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Ventilators - Supplemental Ventilation Support (Including CPAP and BPAP)

Select a Product

resp
⊗ 🔍

Respirators - Invasive Ventilation For Continuous Use
 05_040312111_0103_1_1

Cancel

5. Complete the required fields for the support.
6. Select **Done**.
7. Delete any information in the **Assistive Technology Comment** field that pre-populates.

Assistive Technology	1,800.00	📄	Cough Assist Machine (x 1)
----------------------	----------	---	----------------------------

8. Record a comment so the participant will understand what the total funding is. For example:

Funding for a cough assist machine.

Assistive Technology	1,800.00	📄	Funding for a cough assist machine.
----------------------	----------	---	-------------------------------------

If TAB advice has been provided, follow any direction for how to state the support in the plan.

9. Go to [3.6 Next steps](#).

3.5 Find state and territory help for electricity and oxygen costs

3.5.1 State and territory help for electricity costs

If the participant asks you for more information about emergency medical essential power in their area please refer to the links below, or the relevant state or territory government website:

- [Life support equipment – be prepared and make a plan | Energy Made Easy](#)
- [Customers using life support equipment | Energy Made Easy](#)



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3.5.2 State and territory help for oxygen costs

State and territories are responsible for providing oxygen supply and related equipment. If the participant asks you about help for oxygen costs in their area, use this table to guide them on where they can get information.

Region	Where to find information
Western Australia	Government of Western Australia Department of Health - Respiratory Health Network – Domiciliary Oxygen
Queensland	Home Oxygen – Queensland Health
New South Wales	Home Respiratory – EnableNSW
Northern Territory	To learn more, encourage participants to contact their local health service or go to: Northern Territory – General equipment schemes and services Disability Gateway
Tasmania	Health – Tasmanian Government Discounts & Concessions
Victoria	Other services – Health.Vic
South Australia	Home Oxygen Therapy – SA Health
Australian Capital Territory	Oxygen and Equipment Services – ACT Government

Refer any requests to fund oxygen support related to the participant's disability and **not** provided by the state or territory health system to the TAB for advice. Learn more on the [TAB](#) intranet page for Disability Related Health Supports.

3.6 Next Steps

1. Check you have obtained and followed any mandatory TAB advice related to supports you are including in the plan.
2. Check you have included all reasonable and necessary supports when completing the **Determine the Funded Supports** task. Refer to relevant [planning resources](#) when completing the remaining steps to develop the participant's plan.

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4. Appendices

4.1 Guide to registered nurse hours

Use the tables below to guide you on the amount of registered nurse support to include in the participant's plan to develop and implement a registered nurse Delegation of Care plan. It does not include the hours required for a nurse to complete specific disability-related health support tasks. For example, changing catheters.

1. Determine the tasks the registered nurse will need to complete.
2. Determine the level of support using [Our Guideline – Disability-related health support](#). This will be Low, Intermediate or High.

Note: Only use this table when the participant **can't** provide you with a nurse developed care plan or hospital discharge plan.

If you need help to calculate hours for delegated care tasks or supervision of those tasks, request advice from [TAB](#).

4.1.1 Guide of hours for training for delegated disability-related health support tasks

Includes training and assessment in tasks to ensure competency. Training may be suitably undertaken in small groups or individually between the Registered Nurse and Support Workers.

Training for delegated disability-related health support tasks	Low Level	Intermediate level	High level
2 skill areas delivered to 2-4 support staff	3 hours per year	N/A	N/A
3 skill areas delivered to 2-4 support staff	N/A	Up to 10 hours per year	N/A



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Training for delegated disability-related health support tasks	Low Level	Intermediate level	High level
4 skill areas delivered to 2-4 support staff	N/A	N/A	17 hours per year
4 skill areas delivered to 5+ support staff	N/A	N/A	34 hours per year
5 skill areas delivered to 2-4 support staff	N/A	N/A	25 hours per year
5 skill areas delivered to 5+ support staff	N/A	N/A	50 hours per year
6 skill areas delivered to 2-4 support staff	N/A	N/A	33 hours per year
6 skill areas delivered to 5+ support staff	N/A	N/A	66 hours per year
7 skill areas delivered to 2-4 support staff	N/A	N/A	41 hours per year
7 skill areas delivered to 5+ support staff	N/A	N/A	82 hours per year
8 skill areas delivered to 2-4 support staff	N/A	N/A	49 hours per year
8 skill areas delivered to 5+ support staff	N/A	N/A	98 hours per year



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4.1.2 Guide of hours for assessments, developing care plans and supervision of staff

Task	Low Level	Intermediate level	High level
Health assessment Preparation, initial assessment, reassessment and reporting on health assessment	6 hours per year	6 hours per year	12 hours per year
Environmental Assessment	1 hour per year	4 hours per year	4 hours per year
Care plan Developing new care plans, a variation or an update to a care plan	4 hours per year	4 hours per year	7.5 hours per year
Supervision of staff delivering tasks delegated by registered nurse Direct and indirect These hours have been calculated based on the estimated weekly need for indirect support by a registered nurse: <ul style="list-style-type: none"> • Low: 1 hour per month • Intermediate: 2 hours per month • High: 1-2 hours per week. 	12 hours per year	24 hours per year	52-104 hours per year



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4.2 Guide to disability-related Core supports

Use the [Our Guideline](#) relevant to the specific DRHS and the [5. related procedures and resources](#) to support your reasonable and necessary decision making for disability-related health **Core** supports.

The table outlines the broad type of support and the estimated hours for each of the relevant support categories to include in the participant's plan.

For any personal care hours where tasks are delegated from a Registered Nurse, determine the skill level of the personal care worker using [Our Guideline – Disability-related health support](#).

Type of support	Support Category	Supports for consideration
Nutrition	Consumables	<p>Percutaneous Endoscopic Gastrostomy (PEG) and Home Enteral Nutrition (HEN) equipment and consumables. This includes enteral feeding tube, administration reservoir such as a feed bag or bottle, giving set, syringes, enteral pump.</p> <ul style="list-style-type: none"> Health consumables can be included in plans using line items – Disability-Related Health Consumables – High Cost, or Disability-Related Health Consumables – Low Cost. HEN formula – Up to \$23.66 per day can be included at the budget level for full or partial HEN feeds if not covered by the Pharmaceutical Benefits Scheme. <p>Note: For requests for more than \$23.66 per day for HEN formula, contact the Technical Advisory Phone Services (TAPS) for further guidance.</p>



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Type of support	Support Category	Supports for consideration
Nutrition	Daily Activities	<p>Personal care hours to:</p> <ul style="list-style-type: none"> Administer HEN and help with PEG maintenance and care where a participant or their child representative is unable to independently manage due to their functional impairment. <p>Note: It is generally expected that supports to manage HEN are a delegated task but there may be rare cases where a nurse is recommended. Requests for more than 3 hours per day for registered nurse direct care for PEG or HEN maintenance need to be referred to the TAPS.</p> <ul style="list-style-type: none"> Attend individualised training conducted by a nurse to implement the HEN regime under delegation of care – up to 3 hours, 2-3 times a year. The frequency will depend on the participant's individual circumstances and needs. <p>Note: Hours will vary depending on the participant's other disability related support needs.</p>



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Nutrition	Daily Activities	<p>Assistance with meal preparation can be provided either through a disability support worker or prepared meals.</p> <p>As a guide, costing for meal preparation should be based upon personal care hours for a support worker to plan, shop and prepare meals with the participant. For example:</p> <ul style="list-style-type: none"> • 1 meal a day: up to 3 hours per week • 2 meals a day: up to 4 hours per week • 3 meals a day: up to 5 hours per week <p>This should be sufficient time for support workers to help a participant order food, prepare and store enough meals for the week.</p> <p>If meal preparation is specified in the plan, participants can use this support flexibly to instead have meals prepared and delivered for a period of time. It does not include the cost of food and ingredients. When purchasing ready/prepared meals participants can flexibly use their funding to claim:</p> <ul style="list-style-type: none"> • 100 percent of the invoice if the provider has removed the cost of food • 70 percent of the invoice if the provider includes the cost of food in the total cost. <p>The cost of meal preparation and delivery should usually cost less than a support worker to prepare meals with the participant.</p> <p>This support no longer requires a quote and should not be stated. This will make sure participants can maintain flexibility in how they access this support as their needs change.</p>
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Type of support	Support Category	Supports for consideration
		<p>Note: Some participants will always have their meals prepared and delivered. In these instances, if you know the cost, you can include this instead of the support worker hours. You will need to specify this in the comments of the participant's plan. If you don't know the cost, you should use the personal care hours for a support worker above as a guide.</p> <p>Note: Hours will vary depending on the participant's other disability related support needs, existing informal supports and participant's other supports. For example, participants with supported independent living should not require this additional support.</p> <p>Note: For children younger than 7, consider what is reasonable to expect of families or carers in preparing the child's meals. Learn more in the Practice Guide - Early childhood planning. If the child's support needs are significantly beyond what is usually required for children of the same age, you may consider funding for a support worker to help with meal preparation. Make sure any supports above typical parental responsibility are clearly outlined in the justification comments – Core.</p> <p>You should talk with the Children's Taskforce or your line manager if you get a request for meal preparation and delivery for a child participant.</p>



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Type of support	Support Category	Supports for consideration
Wound and pressure care	Consumables	<p>Consumables for prevention and dressing of wounds such as PH wash, moisturiser and barrier creams, gauze, bandages, dressing packs, dressings, tape to dress wounds. Providers are generally responsible for Personal Protective Equipment related to wound and pressure care for staff.</p> <p>You should consider the following amounts when including consumable related to wound prevention and management:</p> <ul style="list-style-type: none"> • Wound Prevention kit for participants at risk of pressure injury - \$1000 per year. • Additional \$1000 per year where management of 3-4 simple wounds per year required – (dressings for wound care 2-3 days for each wound for 2-6wks) - \$2000 total per year. • Additional \$2500 per year above the prevention kit funding where management of ongoing chronic wound care required, \$3,500 total per year. <p>Any additional funds will be quotable following assessment by Clinical Nurse Consultants (CNCs).</p> <p>Pressure care garments and supports (AT) up to \$1500 per item, disability-related health equipment and consumables delivery and repairs and maintenance of disability-related health machines can all be included using the low-cost AT line items.</p>



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<p>Contenance</p>	<p>Consumables</p>	<p>Contenance supports are typically funded for children 5 years of age or older. In rare situations we may include funding for continence supports for children younger than 5 for disability-related medical conditions. Learn more in Our Guideline – Contenance Supports.</p> <p>The guided planning questions in the System provide a drop down option for the selection of continence needs identified as part of the planning conversation for participants 7 years or older.</p> <p>Example guided planning question: ‘Do you currently use any consumable products, for example, continence products or tube feeding for getting your food?’</p> <p>Select the option best describes the participant’s use. There are 7 responses to choose from:</p> <ul style="list-style-type: none"> • Adult level 1 – high use, higher cost • Adult level 2 – high use, moderate cost • Adult level 3 – high use only, or moderate use and higher cost • Adult level 4 – moderate use, moderate cost • Adult level 5 – low to moderate use, low to moderate cost • Adult level 6 – low use, low cost • Adult level 7 – none necessary. <p>The level selected will change the TSP generated.</p> <p>Review the amount generated in the TSP. Consider if this will be enough to cover the costs of all the participant’s consumable needs. Adjust the TSP if needed using reasonable and necessary</p>
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Type of support	Support Category	Supports for consideration
		<p>decision making. Refer to Standard Operating Procedure – Complete the determine the funded supports task for guidance on adjusting the amount generated in the TSP.</p> <p>Note: For children younger than 7 years of age continence needs are guided by a continence assessment. Use the Assistive Technology, Home Modifications and Consumables Code Guide to help calculate continence consumables for children aged 5-7. Include consumables as per the rate of daily use.</p> <p>For children younger than 7 who need a membership to a stoma association, add either \$50 concession or \$60 full rate at the budget level.</p>
Continence	Daily Activities	<p>Personal care hours for assistance with continence care as part of the participant's daily personal care. For example, for maintenance and care of a catheter, go to section 4.1 Guide to registered nurse hours.</p>



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Type of support	Support Category	Supports for consideration
Epilepsy	Daily Activities	<p>Personal care hours for a support worker to:</p> <ul style="list-style-type: none"> Attend training to implement Epilepsy Management Plan or Emergency Medication Management Plan - up to 90 minutes every 2 years. Attend training to implement a ketogenic diet plan – up to 1hr per year initially and then reviewed when there has been a change to the diet plan. Implement a Ketogenic diet plan (shop for and cook). The frequency of support will also need to be decided depending on the participant's capacity. Support may be required daily or weekly at the start of a plan and decrease in frequency over time. Monitor seizures where the level and risk of seizure are high due to the severity of the participant's epilepsy – hours will depend on participant's other disability support needs. <p>Low-cost assistive technology (up to \$1500 per item) such as seizure monitor alarm systems, seizure mats for beds and oximeters, to measure a person's oxygen saturation.</p> <p>Important note: Any requests for 24/7 or 2:1 support should be referred to TAB for advice.</p>
Podiatry and foot supports	Consumables	Low-cost AT (non-quotable, up to \$1500 per item) such as orthotics and wearable technology



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Type of support	Support Category	Supports for consideration
Podiatry and foot supports	Daily Activities	<ul style="list-style-type: none"> Personal care hours - As a general guide 15 minutes per day on top of the participant's normal daily care routine Training in the specific needs of the participant - 1 hr per support worker.
Dysphagia	Consumables	<ul style="list-style-type: none"> Low-cost AT: up to \$1500 – for example adaptive cutlery, plate guards or sticky mats thickeners for participant who have a full oral feeding diet: slightly thick fluids \$360, mildly thick fluids \$700, moderately thick fluids \$1400 and extremely thick fluids \$2100 thickeners for participants who have a combination of oral and HEN feeding: Up to \$23.66 per day for HEN. Seek TAB advice for the amount of funding for thickeners to include in the plan. <p>Include consumables in plans in multiples of \$500, using support item - Disability-related health consumables – low cost.</p> <p>Consider all of the participant's disability related health consumable needs when you include funding in the plan.</p> <p>Note: Calculations have been determined using Thicken-up Clear ® 900 gram tin Brightsky thickeners (external).</p>



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Type of support	Support Category	Supports for consideration
Dysphagia	Daily Activities	<p>Personal care hours:</p> <ul style="list-style-type: none"> • hours to support the implementation of a participant's mealtime management plan with any recommended swallowing therapy strategies, where informal supports are unable to provide • additional hours to attend participant specific training: up to 2 hours per year per support worker • consider personal care supports required for other areas, for example, other health-related supports, morning and evening routines, social participation.
Diabetes	Consumables	The NDIS does not generally fund diabetic consumables as these are available under NDSS.



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Type of support	Support Category	Supports for consideration
Diabetes	Daily Activities	<p>Personal Care hours to support the participant to implement their diabetic management plan. This includes support with the administration of routine, non-complex insulin when the participant is unable to perform the tasks due to their ongoing functional impairment. As a general guide the task to administer insulin will take 15 minutes per administration and the total time required will depend on:</p> <ul style="list-style-type: none"> • the number of insulin injections for example, one to 5 times per day • the equipment used by the participant for example, to measure blood glucose levels • their functional capacity. <p>Personal Care hours for a support worker to attend training to implement a disability-related diabetes management plan specific to the needs of the participant. As a general guide 2 hours per year per worker however this could be provided to a group of workers at the same time.</p>



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4.3 Guide to disability-related Capacity Building supports

Use the [Our Guideline](#) relevant to the specific DRHS and the [5. Related procedures and resources](#) to support your reasonable and necessary decision making for disability-related health **Capacity Building** supports.

The table outlines the broad type of support and the estimated hours for each of the relevant support categories to include in the participant's plan.

Type of support	Support Category	Supports for consideration
Nutrition	CB Daily Activity	<p>Composite nursing hours for a RN to train a support worker in the individualised needs of the participant in relation to their PEG maintenance and care. To calculate the nursing hours, refer to 3.1.4 Calculate capacity building health-related supports.</p> <p>Note: PEG general maintenance and care is a standard competency skill expected for disability support workers. The NDIS will not fund training for staff to attain basic competency. It is the responsibility of a provider to employ suitability qualified staff with these basic level competencies.</p>
Nutrition	CB Daily Activity	Nursing consultation to develop a PEG maintenance care plan, which informs the daily management and care of the PEG and surrounding tissue and the HEN regime by the instructing dietitian. To calculate the nursing hours, refer to 4.1 Guide to registered nurse hours .
Nutrition	CB Health and Wellbeing	<p>Dietitian hours for standard nutrition plan:</p> <ul style="list-style-type: none"> • Initial consultation, assessment and report: 2 hours • Development of the plan: 1-2 hours



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Type of support	Support Category	Supports for consideration
		<ul style="list-style-type: none"> • Re-assessment: 2 hours • Training 2-3 family members or support workers specific to the participant's individual nutritional needs - 1-2 hours of training once a year (more frequently if the nutritional plan is updated). <p>Dietitian hours for complex nutrition plan – for example, HEN feeding plan:</p> <ul style="list-style-type: none"> • Initial consultation and assessment: 2-3 hours • Report and development of the plan: 2-5 hours <p>2 hours for fully HEN fed, stable nutritional status and constant feeding regime.</p> <p>5 hours for a combination of HEN and oral feeding, unstable or declining nutritional status and changes to the feeding regime in terms of formula type and pattern.</p> <ul style="list-style-type: none"> • Re-assessment depending upon the above varying factors: 2 hours. <p>Use line item - Dietitian Consultation And Diet Plan Development</p> <p>You need to refer requests for more than 20 hours per year for assessment and development of a meal plan to TAPS for advice.</p>
Wound and pressure care	CB Daily Activity	Prevention of pressure injury can be delegated by a nurse (skin integrity checks), occupational therapist or physiotherapist for positioning care.



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Type of support	Support Category	Supports for consideration
		<p>Consider composite nursing hours for specific pressure care and wound management assessment and plan:</p> <ul style="list-style-type: none"> • Including initial consultation and assessment – 2hrs • Development of the plan – 1-2hrs • Ongoing clinical intervention support as identified by assessment – 3-7 hours per week (RN rate) if support is provided by a nurse • Training and assessment of the support worker/s to deliver the delegated support based on the participant's care plan if the support is delegated by the RN. 1 hr per support worker • Reassessment – 1hr.
Wound and pressure care	Daily activities	<p>Consider if you need to include hours for the support worker to attend training. We can fund suitable hours for support worker training that is:</p> <ul style="list-style-type: none"> • Provided by the health treatment team. • Specific to the implementation of the participant's management plan. • Required to make sure the support worker can perform day-to-day monitoring, maintenance and prevention of pressure injury.



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Type of support	Support Category	Supports for consideration
Continence supports	CB Daily Activity	<p>Continence supports are typically funded for children 5 years of age or older. In rare situations we may include funding for continence supports for children younger than 5 for disability-related medical conditions. Learn more in Our Guideline – Continence Supports.</p> <p>Continence assessment plans and reviews from a continence nurse (CNC level nurse) which includes identification of continence consumable and AT support needs.</p> <ul style="list-style-type: none"> • 5 hours per year for participants with changing needs. • 3 hours per year for children between 5 and 7 years of age. • 2 hours per year for participants with stable needs. • 1 hour for reviews. <p>Nursing hours for catheter changes for suprapubic and indwelling catheters – estimated at 30mins to 1 hour per change every 4-8 weeks suprapubic and 1-3 months for indwelling catheters. This will be guided by participant experience and continence assessment.</p>
Podiatry and foot care	CB Daily Activity	<p>Podiatrist hours including:</p> <ul style="list-style-type: none"> • Podiatry assessment – 2hrs • Prepare a podiatry care plan – 1hr • Conduct a re-assessment – 1hr up to 3 per year



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Type of support	Support Category	Supports for consideration
		<ul style="list-style-type: none"> • Provide subsequent plans - 2hr to conduct the assessment, and a further 1hr to prepare the podiatry care plan • Training support workers in the individual needs of the participant - 1 hr per support worker • Cutting toenails and other foot care - 20 - 60min per visit, every 6-8 weeks. <p>Include podiatrist hours using line items:</p> <p>Assessment, Recommendation, Therapy and/or Training (Incl. AT) - Other Therapy</p> <p>Selection and/or Manufacture of Customised or Wearable Technology</p> <p>Note: Where the complex health and disability care needs of the participant exceed the skill set of a trained support worker, podiatrist hours may be included to implement the podiatry care plan.</p>
Dysphagia	CB Daily Activity	<p>Delivery of health supports by a speech pathologist including:</p> <ul style="list-style-type: none"> • assessment mealtime management plan: 3-5 hours per location • development of plan and report: 2 hours • re-assessment of plan, including update of plan: 2 hours • swallowing therapy intervention: usually included as part of the mealtime management plan



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Type of support	Support Category	Supports for consideration
		<ul style="list-style-type: none"> training of support workers, including family, carers and informal supports, by the speech pathologist at the therapist rate: 1-2 hours, twice a year in each environmental setting. <p>Use support item - Assessment, Recommendation, Therapy And/or Training (Incl. AT) - Other Therapy.</p>
Diabetes	CB Daily Activity	<p>If the participant needs support from someone who is more skilled than a trained support worker with medication competencies, registered nurse hours may be included. The registered nurse will assess blood glucose levels and administer insulin until evidence about the complex disability support needs are provided. As a general guide the task to administer insulin will take 15 minutes per administration and the total time required will depend on:</p> <ul style="list-style-type: none"> the number of insulin injections for example, one to 5 times per day the equipment used by the participant for example, to measure blood glucose levels their functional capacity. <p>Note: You must contact TAB for advice if registered nurse supports are requested for direct management of diabetes when there is evidence that the diabetes is stable.</p>



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4.4 Guide to disability-related capital supports

Use [Our Guideline](#) relevant to the specific DRHS and the [5. related procedures and resources](#) to support your reasonable and necessary decision making for disability-related health **Capital** supports.

The table outlines the broad type of support and the estimated hours for each of the relevant support categories to include in the participant's plan.

Type of support	Support Category	Supports for consideration
Wound and pressure care	Assistive technology	Purchase or lease of pressure supports (AT) over \$1500 per item including: <ul style="list-style-type: none"> • Pressure cushions • Mattress • Air-Filled Garments and Compression Units for Managing Circulation Problems and Lymphoedema • Lymphoedema machine if required for maintenance • Negative pressure wound therapy – Vacuum assisted closure (VAC).
General	Assistive Technology	Air conditioning or heating for people who have a disability that affects their ability to regulate their body temperature may be funded as a disability-related health support if considered reasonable and necessary. Refer all requests for air conditioning or heating to TAB for advice



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5. Related procedures or resources

- [Our Guideline – Disability-related health support](#)
- [Our Guideline – Continence supports](#)
- [Our Guideline – Diabetic management supports](#)
- [Our Guideline – Dysphagia supports](#)
- [Our Guideline – Epilepsy supports](#)
- [Our Guideline – Nutrition supports including meal preparation](#)
- [Our Guideline – Podiatry and foot care supports](#)
- [Our Guideline – Wound care and pressure supports](#)
- [Practice Guide - Respiratory Supports](#)
- [Standard Operating Procedure – Add low cost assistive technology supports in plan](#)
- [Standard Operating Procedure – Add self-care and community access supports](#)

6. Feedback

If you have any feedback about this Standard Operating Procedure, please complete our [Feedback Form](#).



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7. Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CW0032	Class 2 approved. Standard Operating Procedure moved to the new SOP format to be used with Our Guideline Disability Related health supports. SOP includes information on: <ul style="list-style-type: none"> • shadow shifts • guide to registered nurse hours (only to be used when the participant is unable to provide you with evidence of the disability-related health supports) • state and territory power and oxygen subsidies 	APPROVED	2021-06-03
2.0	JS0082	Class 1 approval Added guidance for mandatory referrals to TAB to align with DRHS OG. Updated table for state and territory information about oxygen. Content updates endorsed by JR0059 from TAB	APPROVED	2021-11-18
3.0	CW0032 JC0075 AGV957 DCP167 LS0042	Class 2 approved Addition of guidance for planners to calculate nutrition support including meal preparation. Included information from PG Nutrition supports to support release of OG nutrition supports including meal preparation. Name changed to Include disability-related health supports or meal preparation supports in the participant's plan	APPROVED	2022-02-15

V6.0 2023-06-21 Include disability-related health supports or meal preparation supports in the participant's plan Page 44 of 45

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Version	Amended by	Brief Description of Change	Status	Date
4.0	CW0032 CM0032 AGV957 DCP167 LS0042	Class 2 approval Included information on individual DRHS topics to support the release of DRHS OGs. Updated Delegation of Care table. Further Class 1 approval by JS0082 for additional feedback provided by ECS.	APPROVED	2022-06-16
5.0	JS0082	Class 1 approval Update to amend errors in support categories. Clearer guidance for how to calculate meal preparation costs.	APPROVED	2022-12-02
6.0	CW0032 IIW664	Class 2 approved. Updated to align with the early childhood age range change. Updates to support early childhood partners to plan for children aged 7 or 8.	APPROVED	2023-06-21

V6.0 2023-06-21 Include disability-related health supports or meal preparation supports in the participant's plan

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