Practice Guidelines for Victorian Homelessness Services and their interface with the National Disability Insurance Scheme

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Purpose

These guidelines are to assist Victorian Homelessness Services understand their roles and responsibilities with prospective and current National Disability Insurance Scheme (NDIS) participants who engage with the homelessness service system.

Guidelines review process

Throughout the NDIS transition period, these guidelines will be updated as required. Always check that you have the latest version available on the <u>department's website</u> https://providers.dhhs.vic.gov.au/public-housing-and-national-disability-insurance-scheme-roles-and-responsibilities-operational>

Any issues, suggestions or comments can be sent via email to haas@dhhs.vic.gov.au

Scope

These guidelines outline the expectations of how Victoria's homelessness services should and can work with the National Disability Insurance Agency (NDIA) and its partners – Registered Provider of Supports (RPoS), Local Area Coordinators (LACs) or Support Coordinator and Early Childhood Partners (ECP) - to support good outcomes for current or prospective NDIS participants; and provide general information about what can be expected from the NDIA and its partners.

The guidelines apply specifically to services funded under the Victorian Housing Support and Homelessness Assistance funding activity descriptions which provide:

- Initial contact and support (including intake and assessment; information and referral services)
- Homeless Person's Support Services (such as day programs and mobile outreach programs)
- Case managed support within the homelessness service system (including crisis, transitional, intensive, tenancy and supported accommodation support)

See attachment A for relevant activity codes and an explanation of the service description terms used in this document.

The guidelines are general in nature and do not respond to particular target groups within the homelessness sector, such as youth, aboriginal housing or family violence. They also do not replace existing instructions for Victoria's homelessness services and should be read in conjunction with:

- Homelessness Services Guidelines and Conditions of Funding
- The Human Services Standards, Department of Health and Human Services

Additionally, interface guidelines already exist for health and aged care, specialist clinical mental health and children youth and families. As many homelessness service users are also likely to be in contact with these service systems, understanding the roles and responsibilities of these services will be useful. There are also a range of arrangements with regards to people who are under 65 years but who may be eligible for "myagedcare" support. Visit the People with disabilities page People with disabilities on the myagedcare website for more information.

Information about the NDIA and its partners' roles and responsibilities reflects published policy and standards. It should be read in conjunction with the relevant NDIS operational guidelines. These are available on the NDIS website (see also resources section at the end of this document).

Full roll-out of the NDIS in Victoria is expected to be achieved by July 2019. However, the NDIA continues to review, pilot and make changes to the scheme in response to identified issues. Of particular relevance to people who are experiencing homelessness and homelessness services will be the proposed new pathways for people with psychosocial disability and people with complex support needs.

These guidelines apply during the transition phase and into the future. Issues specific to transition are noted separately. Homelessness Services are encouraged to keep in contact with their local LAC to identify changes that might assist their clients to access the scheme.

Context

By 2020, it is expected that around 105,000 Victorians with a disability will be accessing individual support through the NDIS.

The NDIS is premised on people with a disability being able to access mainstream services, consistent with the National Disability Strategy which aims to maximise the potential and participation of people with disability. To this end, the Council of Australian Governments (COAG) developed and agreed to six "*Principles to determine the responsibilities of the NDIS and other service systems*". These determine the funding and practice responsibilities between the NDIS and other service systems.

COAG also identified applied principles and tables of support to define the responsibilities of the NDIS across eleven key mainstream interface areas. One of these is for Housing and Community Infrastructure. Amongst other things, it stipulates that:

"Housing and homelessness services will continue to be responsible for homelessness—specific services, including through homelessness prevention and through outreach and access to temporary and long term housing for people who are homeless, or at risk of homelessness" and

"The NDIS is responsible for support to assist individuals with disability to live independently in the community, including by building individual capacity to maintain a tenancy and support for appropriate behaviour management where this support need is related to the impact of their impairment/s on their functional capacity."

These guidelines are part of the Victorian Government's commitment to operationalise these principles, and ensure that mainstream services (such as homelessness services) are prepared for the impact of the NDIS roll out and that the interface between the service systems is coordinated and effective.

Homelessness Services will need to think about how they build organisational and staff capability and competency to adjust to this change. This is likely to need to include:

 Investing in building staff competency and capability to identify people who are likely to be eligible for the NDIS and knowing how to make an NDIS access request. Developing a strong partnership with the local LAC, including to identify opportunities to support
each other in working together to assist people who are homeless access the NDIS.

The National Disability Insurance Scheme (NDIS)

The NDIS can provide all people with disability with information and connections to services in their communities such as doctors, sporting clubs, support groups, libraries and schools, as well as information about what support is provided by each state and territory government. However, NDIS' core function is providing access to individualised funded support. The NDIS replaces state and territory based disability programs with a single, individualised and equitable disability support system across Australia.

The NDIS Information Linkages and Capacity Building (ILC) program plays a critical role in ensuring all people with disability are supported to live more accessible and connected lives. ILC provides grants to organisations to carry out activities in the community that benefit the broader population of people with disability.

The NDIS states that at full scheme the NDIS will provide about 460,000 Australians under 65, who have a permanent and significant disability with funding for support and services. The disability requirements include having a permanent disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or to one or more impairments attributable to a psychiatric condition, and the impairment/s are likely to be permanent, and significantly impact on an individual's capacity to participate in daily life and social and economic participation.

The NDIS is administered by the NDIA with support from its partner agencies - Local Area Coordinators (LACs) and Early Childhood Partners (ECP). LACs build capacity in community and mainstream services, provide information, referral and support to access the NDIS and develop and implement plans. Early Childhood and Early Intervention (ECEI) approach is available to all children aged under 7 with a development delay or disability to provide early childhood early intervention and support. The LAC or ECP will usually be the main point of contact with the NDIS for participants.

Local Area Coordinators will:

- Link people to the NDIS. They help people to understand and access the NDIS and create, implement and review plans.
- Provide a link to information and support in the community, including for people who are not NDIS participants.

For more information visit the <u>Community page</u> https://www.ndis.gov.au/community#lac on the NDIS website.

NDIS support is provided by a range of providers, with participants choosing from whom, how and when they receive their support. NDIS participants may also access mainstream services for non-disability specific services. Funding for NDIS supports is determined by consideration of a person's individual needs, goals and aspirations and the National Disability Insurance Scheme Act 2013.

Homelessness Services

Homelessness Services work within a case management framework to provide transitional support and a range of related support services linked to housing in order to support people who are homeless or at imminent risk of homelessness to achieve the maximum possible degree of self-reliance and independence.

Homelessness services also support individuals to identify and access a range of housing options, including social housing, and can assist in preparing applications to the Victorian housing register (VHR).

Victorian homelessness services have always responded to people with a range of complex needs and assisted them to link with and access a range of health and community support services. This now includes the NDIS.

There are a range of scenarios in which homelessness services will interface with the NDIS. This includes with people who:

- Are transitioning into the NDIS (from an existing disability support program). Homelessness services
 may be a current support provider and can support their client to remain connected with the access
 and planning processes.
- May not have accessed disability services before and/or are not yet a participant of NDIA. They may need assistance to engage with, access and participate in the NDIS.
- Are eligible for the NDIS but are not accessing support. They may need assistance to re-engage with the NDIS and implement their plan, or to seek a review if it is no longer meeting their needs.
- Have an active NDIS plan but are accessing homelessness services, including because of a housing crisis. It may be necessary to coordinate between NDIS and other mainstream supports (eg: health).
- Are not likely to meet the NDIS access requirements. They may require support from a Local Area Coordinator to link them into other mainstream and community services.

Additionally, homelessness services are likely to identify children who may be eligible and/or are receiving NDIS support. This includes children under the age of six who may be eligible for support through the early childhood early intervention requirements.

The scale of the interface between homelessness services and the NDIS will vary depending on the capacity of, and the focus of specific programs and the individual being supported. It will also be different for individuals who could be but are not NDIS participants, and those who are.

Services that have a long-term relationship with clients may also be able to provide assistance to their clients to maximise their opportunities to access and benefit from the NDIS, including the provision of evidence for the access request, and general assistance and coordinating with NDIS supports.

There are many resources available to assist in understanding the NDIS and its processes. Links to these are provided throughout the document. Important NDIS resources include:

NDIS factsheets NDIS factsheets NDIS factsheets NDIS factsheets <a href="https://www.ndis.gov.au/about-us/publications/booklets-and-factsheets

The NDIS produces a host of fact sheets for participants and service providers, including around psychosocial disability. Participant booklets are available as a practical tool to learn more about the NDIS.

Booklet 1 – Understanding the NDIS

Booklet 2 – Planning

Booklet 3 - Using your NDIS plan

Operational guidelines https://www.ndis.gov.au/Operational-Guidelines>

These provide descriptions, rules and processes across all areas of NDIS operation, including access and planning.

Transition Arrangements (Until July 2019)

The NDIS is rolling out at different times across Victoria and there are transition plans for clients of existing disability and community mental health programs. By July 2019 most areas of Victoria will have transitioned to the scheme (known as full scheme).

Some disability programs and Victorian Mental Health Community Support Services (MHCSS) are called defined programs and client's accessing these programs at the point of transition have a streamlined access process and will be invited to participate in the NDIS. At each stage of roll out MHCSS clients are the last to transition across. The NDIA will contact these clients directly, usually by mail, although they may also follow up by telephone.

MHCSS programs cease operating when roll out in their area is complete. However, MHCSS intake is delivering an NDIS access project until full roll out. This project can assist people with a mental illness and psychosocial disability consider whether they may be eligible and if appropriate assist with NDIS access requests.

Clients in non-defined programs, for example, Commonwealth funded programs like Day 2 Day Living, Partners in Recovery (PIR) and Personal Helpers and Mentors Scheme (PHAMS) are invited to request access to the NDIS and will be supported by the service they are attending to do so. These programs will continue to operate until roll out is complete, at which stage they phase into the NDIS.

Comprehensive information about transition in Victoria, including timelines, fact sheets and other resources is available on the <u>NDIS Victoria page</u> http://www.vic.gov.au/ndis.html of the vic.gov.au website.

Roles and responsibilities (all homelessness services)

- Be aware of transition arrangements and timelines in your area.
- If your client has mental health issues refer them to the MHCSS intake service (NDIS access project) for support with determining possible eligibility and assistance with making an access request.
- Support clients to remain linked with any existing community mental health or disability program during transition.
- If necessary, work with existing community mental health or disability programs to support clients to
 make or respond to contact from the NDIA. For example, if consent is given to the homelessness
 service, this might include inquiring about mail received, alerting them to the likely arrival of such
 documentation or proactively contacting the NDIA if the client has not received documentation or a
 phone call.
- If appropriate, provide copies of any assessments you have undertaken or provide a statement of
 evidence about functional limitations and the areas of life in which they need support to support their
 access request. This may be particularly important if evidence from health professionals is difficult to
 obtain due to your client not having a relationship with a general practitioner.

For contact details for the MHCSS intake and the NDIS access project, read the Mental Health NDIS Access Support Flyer https://www.neaminational.org.au/news-and-events/victorian-intake-service-funded-to-assist-with-ndis-access/ on the Neami National website.

The NDIS and Homelessness Service Interface Circumstances

Circumstance 1: Not knowing about or not wanting to engage with the NDIS

Description

Homelessness services may identify people who are likely to be eligible for the NDIS and appear to need additional support, but who do not know about the NDIS, who do not identify (or want to identify as having a disability, or a mental health issue) or who are wary of making an access request.

Context

There are a range of reasons why people may not want to engage with the NDIS and/or may not have heard about it. They may have had negative experiences with services in the past and may find the thought (and actual doing) of engaging with the NDIS difficult and stressful. For those with a psychosocial disability, the very nature of the disability can mean difficulties in communicating and engaging with others, and particularly those with whom they do not have a relationship.

Additionally, some people may not identify their condition as resulting in disability, while for others the idea of a permanent disability may be difficult to reconcile with their own perceptions of recovery.

This group is likely to include people living in private boarding houses or Supported Residential Services, residents in social housing, rooming houses, and people sleeping rough. For many of these people, their disability may be contributing to less than optimal living situations as well as putting their accommodation at risk. Often identified as hard to reach by the NDIA, these people are often known to homelessness service providers but can be difficult to engage in formal support.

Best Practice

 Discussion with a client about potential eligibility and/or making an access request is based on recovery orientated practice principles and is trauma informed.

Roles and responsibilities

All homelessness services

- Understand the NDIS access requirements and the support the NDIS can provide.
- Understand reasonable and necessary supports and what the NDIS can and cannot fund.
- Identify those who may be eligible (as part of normal intake and assessment processes).
- Engage with the client and talk with them about the availability of NDIS support which may assist them.
- If appropriate, provide copies of fact sheets about the NDIS and information about the LAC.
- Consult with the LAC about pathway options for hard to reach clients.
- Continue to provide appropriate support if the person is not ready or is unwilling to engage with the NDIS, and understand that NDIS is a voluntary scheme.

Homeless persons support services

- Support and encourage engagement with the NDIS, while recognising that this may take some time.
- Use professional judgement to identify and utilise the opportunities in which a person may be ready to consider asking for additional support.
- Identify services that may be able to assist your client should they wish to make an application (for example, case manager at a mental health service); or consider referral to transitional case management.
- If appropriate, introduce the client to the LAC. This could include asking the LAC to make contact with your client at your service and provide a "face" to the NDIS.

Case management (all types)

- Support and encourage engagement with the NDIS, while recognising that this may take some time.
- Use professional judgement to identify and utilise the opportunities in which a person may be ready to consider asking for additional support.
- If appropriate, support your client to commence the access request process (see circumstance 2).
- Request a face to face intake meeting with the LAC, with client's consent.

If a person continues to not want to engage or provide consent to access the NDIS, and clearly needs high level disability support, consider options such as the need for a Guardianship or Administration order (these can be explored with the Office of the Public Advocate Advice Service). Also talk with the LAC about your client's circumstance and how they may be able to assist.

Local Area Coordinator

- Provide information about the NDIS and the access process.
- May be able to visit the client and provide a "face" for the NDIS; be a point of contact should the client decide to test their eligibility.
- Provide information and referral to other government services and local or community based supports.

National Disability Insurance Agency

- Provide information about the NDIS and the access process.
- Continue to develop (and implement) appropriate pathways into the NDIS for "hard to engage" clients.

Resources to support engagement

- Psychosocial disability and the NDIS information
 https://www.ndis.gov.au/understanding/how-ndis-works/mental-health-and-ndis-
- NDIS Practice Advice A practical guide for workers supporting the connection of eligible participants
 with complex needs and living in supported residential services accommodation with the NDIS
 https://www.ehn.org.au/practitioner-resources/ndis-information-and-resources_245s276>
 Developed by the Eastern Supported Residential Services (SRS) Resident Opportunities After
 Reform (ROAR) Project, Salvocare and EACH, 2018
- Mental Health Access Snapshot Series https://www.ndis.gov.au/understanding/how-ndis-works/mental-health-and-ndis-

Access Snapshot 1 – General Information about how the NDIS can support your mental health

Access Snapshot 2 - Impairment and Mental Health in the NDIS

Access Snapshot 3 - Recovery and the NDIS

Access Snapshot 4 - Functional capacity and mental health issues

Access Snapshot 5 – NDIS and other services supporting your mental health

"Our client had a range of complex needs including a physical disability and a diagnosis of Post Traumatic Stress Disorder, Borderline Personality Disorder and major depression. She was also socially isolated and it was difficult for her to undertake daily activities and attend appointments. As a result, the process of applying for the National Disability Insurance Scheme (NDIS) felt both overwhelming and traumatising for her.

Through our Journey to Social Inclusion Program, we were able to provide intensive case management to support her to apply for the NDIS. To best facilitate this, we gained her consent to exchange relevant information between her healthcare providers, her case manager and the NDIS. We also provided advocacy and support in the planning process, and requested a conference between the case manager, participant and the NDIS planner. The client subsequently acquired a plan within six weeks, although it was a five-month wait period before she could be connected with a support coordinator due to high demand."

Support worker, Sacred Heart Mission

Circumstance 2: Supporting NDIS access

Description

Individuals who are not currently in receipt of an existing disability program are likely to need support to understand and prepare for the NDIS access process, including to collect the evidence they need to make an NDIS access request.

Context

To access the NDIS, an applicant must first make an access request to the NDIA. To complete the access process, the applicant will need to provide evidence that they meet the NDIS age, residence and disability or early intervention requirements. Without this evidence the person cannot complete the process.

In most cases, evidence of the diagnosis of the disability must be from a treating doctor or medical specialist; and evidence of the functional impact of condition must be provided by a specialist or an allied health professional (physiotherapist, occupational therapist, speech pathologist, psychologist, social worker or nurse). Additional information to support the functional assessment can include pre-existing assessment reports such as WHODAS or LSP12 from providers such as clinical mental health services, Centrelink or Partners in Recovery. Informal supports can also provide additional information to support the functional assessment, such as a carer's statement. Hospitals, including clinical mental health services, are expected to assist with providing this documentation for their clients to make an access request. Participants may also submit a personal impact statement.

For people who do not have established relationships with health service providers who can or will verify their condition and functional limitations, and/or are wary of Government and other services, obtaining the evidence to complete the access request form can be difficult.

The capacity of homelessness services to support a client through an access pathway will depend on the length of the support period, the nature of support and the service's length and depth of relationship with the client. At times, homelessness support services may be limited in their ability to assist a client because the timeframe for preparing an application and getting a response from the NDIA may be outside the service response timeframes of the homelessness service.

All homelessness services will play a key role in assisting their clients to check their eligibility for the NDIS by identifying those who may be eligible and if appropriate, explaining the benefits, the access criteria and the process. They can also identify, involve and refer to other supports and services, including social workers, LACs and health professionals, who can assist the client to make an access request, and support access requests though providing copies of any assessments that have been undertaken, or a statement of evidence about functional limitations and the areas of life in which they need support to support their access request. This may be particularly important if evidence from health professionals is difficult to obtain due to a client not having a relationship with a general practitioner.

Medium to longer term case managers can also lead and coordinate the access process.

In addition, some people, particularly those with mental health issues, may find making an access request confronting and demoralising as the notion of having a permanent disability conflicts with their notions of recovery and hope. Workers can play an important role in assisting a client to differentiate between confirming the likelihood of a lifelong impairment and their capacity to achieve their best personal and emotional wellbeing. The NDIS understands that psychosocial disability can fluctuate and

participants are able to plan their services based on needs at any point in time. It can be helpful to speak about the NDIS as providing support options to meet individual participant needs. These may be increased or decreased as needed.

Something to think about:

There is not a straightforward answer at the moment as to what to do if you start working with a client to help them prepare an access request and have made progress in collecting evidence and they disengage from your service (for whatever reason).

The best option is likely to make a formal access request early (that is, have an initial conversation with the NDIA or LAC and ask for an access request form). This will inform the NDIA that your client has a disability and wishes to seek access. With the client's consent you can also have yourself recorded as a correspondence nominee. This means the NDIA will contact you regarding the progress of the application.

While the NDIA will provide a timeframe to provide additional information there is no disadvantage if it is not met. If it is not possible to provide all the evidence, providing some will ensure that this is recorded by the NDIA (and therefore not lost) and another service (or the client) can build on this evidence at a later date. Overtime this approach may provide the NDIA with the evidence it needs, including to recognise the consistency of impairment over time.

As correspondence nominee, you can manage notifications requesting more information or rejection due to a lack of evidence on behalf of your client and/or handover to another support worker when appropriate.

If appropriate, another option is to suggest to your client that they keep the form and any supporting information with them.

Best Practice

- An NDIS access request is only facilitated with the client's consent; verbal or written consent can
 be provided to the NDIS when services are acting on behalf of the client. It is important to ensure
 the client has ownership and choice in this process.
- The process related to obtaining evidence, the discussions and the language used in completing
 the form is meaningful to the client, and is based on recovery orientated principles and is trauma
 informed.
- Clear procedures for communication with the client about assessments of disability and functional capacity are established.
- Support workers take a long term view to supporting access and recognise value in starting the process, even if support timeframes mean they by unable to complete it with the client.

Roles and responsibilities

All homelessness services

- Be familiar with NDIS access criteria and consider whether your client may be eligible in any initial assessment
- Where appropriate, provide the client with information about the benefits of the NDIS (eg: fact sheets), the access criteria and the process to request an access request form.
- Identify, involve and refer to other support providers who can assist the client to make an access request.
- Work with any other service providers who may be assisting your client to make an access request.

- If there is a long term relationship with the client, provide supporting evidence regarding functional impairments and support needs as appropriate.
- Support your client to identify how they can manage the process themselves, and/or consider
 how to keep the application process progressing with other services, in the case of the client
 disengaging from your service and previous consent becoming void.

Initial contact and support

- Include in initial screening inquiry as to whether the client has accessed the NDIS, may be eligible for the NDIS and/or has an NDIS plan.
- Consider referral to transitional case management if the client is potentially eligible for the NDIS, needs disability support and needs support to access housing and/or maintain a tenancy.
- Refer the client to the LAC for information about the process.

Homelessness persons support services

- Liaise with the LAC to assist the client to make an access request.
- Assist the client to link to a GP or appropriate treating professional with the aim of developing a relationship which can assist in an application now or in the future.
- Assist the client to identify relevant service providers who may have information that they can use and/or assist them to link to relevant service providers to collect the information that they need, including to a GP.
- If you have a long term relationship with the client, provide a statement of evidence of your understanding of their functional limitations and the areas of life in which they need support.
- Ask the client if they would like a staff member/service to be noted as a contact on the access request form and for NDIS mail to be sent to the service (called a correspondence nominee) and/or establish with the client a secure place for NDIS mail to be sent.

Case management support (crisis)

- If appropriate, include in case planning a goal of making an access request, for example, establishing a relationship with a GP or contacting other service providers for information.
- Handover case to longer term case management service or other support provider, and/or refer the client to the LAC for more information about the access request process.

Case management support (medium to long term)

- With the client's consent support the client to make an access request. This may include requesting an access request form on their behalf.
- Ask the client if they would like a staff member/service to be noted as a correspondence or plan nominee and record this on the access request form.
- If not a correspondence nominee establish with the client a secure place for NDIS mail to be sent.
- Be familiar with the access requirements, the meanings of permanent disability and functional impairment and the language to describe these. There are a range of resources to assist with this.
- Coordinate with other service providers to obtain the assessments the client needs to complete
 the access request form, including to establish the presence of disability and functional
 impairment.
- Support the access request process by providing any copies of relevant assessments or reports
 you may have completed for your client; and a statement of evidence of your understanding of
 their functional limitations and the areas of life in which they need support.

- Ask the LAC to assist your client (and you) identify if the application is complete before submission.
- If discharge occurs before the process is complete, ensure that the client knows who to contact for further assistance, and if in place handover to other support provider.
- If access is not granted, and you believe a mistake has been made, support your client to request a review.

Local Area Coordinator

The Local Area Coordinator can provide some support in the application process. This includes assisting you and/or your client to:

- Obtain an access request form.
- Understand what information is required and where you can get it, including providing support to
 homelessness services to understand what additional supplementary evidence they may be able
 to provide where evidence from health practitioners is difficult to obtain.
- Ensure that the application is complete before it is submitted.

National Disability Insurance Agency

Upon receiving an access request, the NDIA is responsible for:

- Notifying the person within 21 working days if they meet NDIS access criteria or requesting further information (where required) to assess an access request. In this case the person will have at least 28 days to provide the information.
- Providing updates on the NDIS access process to the person or their nominated contact.
- Upon receiving the final piece of information, notifying the person within 14 working days if they
 meet NDIS access criteria.

"My client is profoundly deaf in both ears and struggles with reading and writing. Due to this, my client felt uncomfortable using the relay service to obtain an Access Request Form via the phone as was recommended. I have liaised with the closest LAC to complete an access request in person with the use of an interpreter which I will transport my client to"

NDIS and Homelessness Project Worker, Vincentcare

Resources to support access

NDIS information

<u>Operational Guideline – Access</u> https://www.ndis.gov.au/about-us/operational-guidelines/access-ndis-operational-guideline: Includes definitions, lists of disabilities which provide immediate access, what the NDIS must do etc.

Other useful information

<u>Eastern Homelessness Network</u> – https://www.ehn.org.au/practitioner-resources/ndis-information-and-resources 245s276>: Providers information and resources, including:

- Quick Resource Guide to the NDIS, including how to document evidence for the NDIS.
- NDIS Practical Advice developed by the SRS ROAR Project by SalvoCare Eastern and EACH.

See also snapshot series and fact sheets (detailed above).

Circumstance 3: Supporting NDIS planning for a new participant

Description

Clients who the NDIA have determined are eligible for an NDIS individualised funding package and need support to prepare for and engage in their first NDIS plan discussion.

Context

The NDIS plan provides a statement of the participant's goals and aspirations and a statement of supports, which specifies which supports will be provided or funded by the NDIA.

Supporting a client to get a planning outcome which responds to their needs and assists them to reach their goals is important. For many clients, access to such support will provide a pathway for them to exit the homelessness service system, and hopefully homelessness. With the client's permission and/or at the client's request a support worker can be identified as a correspondence or plan nominee (or both). This can assist in organising and participating in the planning meetings, and allows the NDIA/LAC to directly communicate with the support worker.

Once accepted as eligible for support, participants are invited to a planning meeting. This is usually with the LAC. Clients may be contacted by mail or by telephone to participate in a meeting.

Most planning meetings occur at the LAC office. However, a participant can ask for a face to face meeting with the NDIA at a place that suits them. This may be particularly important for clients who experience difficulties interpreting communication, following instructions, conversations or directions, reading nuances of verbal and non-verbal cues, and have difficulty communicating their needs/wants. A meeting at the client's home can also be useful for the planner to see how your client operates in their environment, as they may notice limitations and opportunities that the client may have difficulty in articulating.

Most people have only one initial planning meeting, but planning can occur over more than one meeting if required. It is up to the participant who attends a planning meeting. The meeting can involve carers, family or significant others, as well as support workers.

The initial planning discussion identifies needs, goals and current supports (informal and formal). It can be very challenging for some clients, and particularly difficult if they are struggling to have their basic needs such as food and shelter met. For this reason, it is important that homelessness services consider ways they can help their clients prepare for their plan discussion.

Key considerations include:

- Ensuring that the client understands the planning process, that they can invite whoever they wish
 and the types of support that are available (reasonable and necessary supports, and what the
 NDIS can and cannot fund).
- Supporting the client to organise the planning meeting at a place and time that suits them.
- Assisting the client to be able to articulate the support they are receiving now and how it improves
 their functional capacity, and what they might need but have not been able to access. This is
 important in the context of homelessness support being transitional.
- Support the client to think beyond current support needs what skills do they want to learn and how this may be received, i.e. support to attend swimming once a week.

- Identification of tenancy supports that may be required for when homelessness services are no longer involved.
- Assisting the client to think about future support needs, including the need for flexibility to provide
 higher levels of support in response to an episodic condition, such as psychosocial disability, or if
 their housing situation changes (for example, the support that will be needed to maintain a
 tenancy).
- Identifying current and potential informal supports, such as family or other carers, with whom your client could involve in the planning discussion.

Case managers are most likely to be involved in supporting a client through planning. However, where other services have a long term relationship with the client, consideration should be given to assisting the client prepare for their planning and if requested, accompanying them to the meeting/s. Multiple people in a planning meeting may not be helpful for the client. It is important to consider what services can provide reports for the planning meeting.

"One of my clients had some issues meeting her property condition obligations. My client's NDIS plan was conducted through outreach to the client's premises. This made them aware of the hoarding situation and led to 'Improved Living Arrangements' being made part of the support plan"

SHASP worker, Launch Housing

Best practice

- The planning process upholds the participant's autonomy and choice and control.
- The participant engages and trusts the planner and the planning process.
- The place of the planning meeting is consistent with the participant's preferences.
- NDIA are aware of any occupational health and safety concerns prior to meeting with participant, especially if planning meeting is occurring at participants home.
- Participants are well informed about the types of support and services the NDIS funds and what is available via mainstream services.
- Family members and carers are supported to provide the NDIA with a carer statement during the planning meeting.
- Understand the participants goals and aspirations as this is critical to the development of participant supports.
- The planner / local area coordinator is provided with the information they need to complete plan, as well as information that supports decisions related to occupational, health and safety obligations.

How to pre-plan:

- Prepare a brief history and their goals to be read out at the planning meeting by the participant.
- Discuss how their condition impacts on their mobility, communication, social interaction and relationships, learning, capacity for self-care and self-management.
- Support the client to think about and write down what they would like to achieve in key life areas, such as health and wellbeing, social interactions, community engagement,

independence, education and employment and identify what is working well and what needs to change.

- If they have a psychosocial disability, discuss with them how much support they need when they are unwell, what supports they need to maintain or improve their psychosocial functioning and capacity to self-manage their mental illness.
- Obtain information / records about the person's clinical diagnosis and supports
- Think about how much and what support they might need to maintain a tenancy (particularly if they are not in long term stable housing at the time of the planning meeting).

Check that your client can articulate their goals, and for each goal their needs and the support

Roles and responsibilities

Case managers (medium to longer term) / other services with whom a client has a long term relationship.

What you need to know

- Understand the NDIS principles of choice and control and reasonable and necessary supports.
 Also ensure you have an understanding, and evidence of, functional impact if you are supporting NDIS planning.
- Keep in mind that many homelessness supports will remain mainstream but will be provided alongside disability funded support through NDIS.
- Understand the roles and responsibilities of informal supports, and assist to identify your client's current informal supports.
- Understand the planner role and the key aspects of an NDIS plan.
- Be familiar with the range of planning resources available.

Assisting the client prepare

- Actively support clients (with their consent) who need assistance to exercise choice, express their needs and goals and make decisions.
- Understand the importance of participant goals and aspirations in NDIS planning, and how this is critical to developing reasonable and necessary supports for NDIS participants.
- If not already in place, ask your client if they would like to nominate you as a correspondence and/or plan nominee to assist with organising planning meetings and communicating with the NDIA/LAC and update NDIA records as appropriate.
- Check in with your client as to whether they have heard from the NDIA / LAC regarding their planning meeting and follow up if appropriate; inform them of their options as to when and how this meeting can occur.
- Identify support provided through the LAC, such as pre planning workshops, and support them to attend.
- Pre plan with your client to prepare for the planning discussion.
- Assist the participant to identify and engage with any informal supports, including carers or family, who could be involved in the planning meeting and/or support carers or family to provide a carer statement to support the planning processes.

Participating in the meeting (if appropriate)

Discuss the option of you participating in the planning meeting (if the client identifies this need)
and seek your client's permission to talk with the planner about their needs and support required,
including support required which directly addresses the clients disadvantage due to their disability

(for example, supports which will assist a person obtain and maintain housing) and need for support coordination). Discuss what you will say at the meeting with the client before the NDIA planning discussion.

- Requesting the NDIA consider support coordination be part of the participant's NDIS plan, if in the judgement of the NDIA planner, they feel this is a necessary support.
- Provide a copy of any plan you may have written with your client to take along to the meeting, including any documentation about other service providers who may be part of your client's support network.
- Support the participant to understand the difference between self, plan and agency managed plans so they may make an informed decision that fits their needs.
- Where transport is required with a support worker have the LAC explain the different ways this can be managed, and where this may be flexible or not.

Other

- Support the client to request a review of their NDIS plan if it is felt by the client or other people involved in their support that key supports have not been included in the plan and/or the amount of supports in the plan are not adequate (see circumstance 6).
- Ensure the client knows who to contact in the LAC or NDIA to check on progress on their plan, including if they disengage from your service or are discharged before the plan is finalised; and/or handover to other support provider.

Pre-planning (or plan readiness) meetings were held individually for residents at their hostel with a hostel staff member present if the participant agreed. The meeting explored resident goals and activities and documented these in a summary statement which was later read by the resident in their planning meeting. WA Hostels report

National Disability Insurance Agency / Local Area Coordinator

- Ensure that a face to face meeting is offered to the participant at a time and place that suits them, and that any information that supports decisions related to occupational, health and safety obligations is requested.
- Provide information for potential participants and carers to help them understand what supports may be available under the NDIS and prepare for the planning discussion.
- Coordinate the planning conversation with the person and their family, friends, carer(s) or other people who are important to the person.
- Support the participant to work out goals and identify supports.
- Support the participant to develop and exercise meaningful choice throughout the planning process.
- Request information, assessments or reports about the participant's support needs (e.g. medical reports, assessments) and collect information about the participant from various sources.
- Consider what supports are reasonable to expect from carers and families and take into account carer's statements.
- Communicate with the participant, their family, friends, carer(s) and involved service providers the agreed outcomes from the planning discussion.
- Providing timely updates on the planning process.
- Provide a consistent point of contact (if this is desired).
- Prepare a participant's plan within six weeks of confirming that a person meets access criteria, pending the individual's circumstances.

- Specify a review date for a participant's plan.
- Offer the participant a printed copy of their NDIS plan.

Resources for planning

NDIS information

NDIS Operational Guideline – Planning https://www.ndis.gov.au/about-us/operational-guideline provides information about the rules, processes and what is in a plan.

What are reasonable and necessary supports? https://www.ndis.gov.au/participants/reasonable-and-necessary-supports>

<u>Preparing for your planning meetings</u>: https://www.ndis.gov.au/participants/creating-your-planning-meeting-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-your-planning-yo

Other useful information

Health interface project 2016 http://g21hwbpillar.com.au/resources/ndis-health-interface-project-2016-17-report-and-toolkit

A joint project between Deakin University, G21 and Barwon Health, funded by National Disability Insurance Agency (NDIA). Provides templates for use by health practitioners for planning, assessment and report writing, as well as explanations of NDIS terminology and how it relates to commonly used terminology, sample allied health reports and NDIS process and community information.

Reimagine today
— funded by the NDIS and produced by the Mental Health Coordinating Council. A workbook and information to assist people with a psychosocial disability navigate the NDIS. Includes information and examples of supporting evidence.

Building New Lives: Bringing the NDIS to people living in psychiatric hostels. NDIS Perth Hills Trial Site WA, July 2017 https://valuedlives.org.au/building-new-lives-bringing-ndis-people-living-psychiatric-hostels-perth-hills-trial-site/

Circumstance 4: Supporting a participant to implement their first plan

Description

NDIS participant is receiving homelessness assistance and needs assistance to implement their first plan.

Context

Participants are notified when their plan is approved. Plans are available through the "myplace" portal which is linked to the "mygov" website.

On completion and receipt of a plan, NDIS participants need to choose and engage their support providers. Participants can choose to have the NDIA manage the plan, manage it themselves, or have an intermediary (plan managed).

Support Coordination is a reasonable and necessary funded support under the NDIS. There are three levels of Support Coordination that may be included in a participants plan; Support Connection, Support Coordination - Coordination of Supports, and Specialist Support Coordination. Funding for Support

Coordination is determined based on individual factors, including the participant's disability and its functional impact, complexity of the participant's circumstances, the existing role of family, carers and other informal supports, and any other individual factors that may be relevant.

The NDIS funds reasonable and necessary support coordination. A key focus of support coordination is helping the participant build capacity to make decisions about their support and to coordinate their NDIS supports. If the participant has support coordination in their plan, the LAC or NDIS will support participants to connect with a support coordinator. Where support coordination is not funded within the participants NDIS plan a LAC will assist the participant during plan implementation.

Potential issues for people who are homeless include finding providers who have the expertise and interest to work with someone with significant social disadvantage and / or a range of complex needs and difficulties in accessing support while experiencing homelessness or living in unstable accommodation and/or in managing the agreement process. They may also be wary of engaging with the support coordinator and new providers.

For most clients, the plan implementation phase will be the key point at which clients will transition out of homelessness support and in to their funded NDIS supports. A priority of homelessness support services during this transition phase should be to assist their client to link with the support coordinator and/or the LAC.

If the client is part of a longer term supported accommodation program (such as a youth foyer), the program and its supports will need to be coordinated with the NDIS supports and case managers need to be available for discussions with the support coordinator to this end (these may also include other mainstream supports such as mental health case managers). The case manager may also need to be involved in plan implementation if the case manager will be assisting with coordination of supports in to longer term housing (if long term housing has been organised by the homelessness service).

A homelessness service may find that by the time the plan is approved that they are no longer supporting a client but are still identified as a key contact. In this instance, consideration may need to be given to determine whether the client may need some support to engage with the support coordinator or LAC.

Best Practice

- The preferences regarding how and when a client engages with their NDIS supports are known and respected.
- Communication processes and guidelines are established with the client's support coordinator or LAC.

Roles and responsibilities

Case management (transitional, intensive, tenancy)

- If possible remain in contact with the client until the plan is approved and provide a warm handover to the LAC and/or support coordinator, to encourage a smooth transition to NDIS.
- Inform the client of whom to contact if they do not hear about their plan and/or have questions.
- Confirm with the client what support is in their plan and who will assist implementing, such as the LAC or support coordinator.
- With the client's consent, contact their NDIS funded support coordinator or LAC. Ensure that the support coordinator understands your role and your capacity to assist in the implementation.
- Identify service providers who you think would be suitable for your client, and suggest that they go and meet them (this can occur before the plan is finalised).

- If the client does not have support coordination in their plan and appears to be unable to implement the plan without significant assistance, support the client to request a review.
- If appropriate, take action to continue to support the client's plan implementation even if they disengage from your service. This could include obtaining permission for you to inform any relevant others (family, community housing tenancy manager) of the status of the plan and the next steps; assisting the support coordinator or LAC to contact the client.
- If the client is in community or public housing, encourage the client to inform the tenancy manager
 that they are in receipt of an NDIS package and who to contact if their issues associated with their
 disability are impacting on their tenancy.

Case managers (supported accommodation)

- Confirm with the client what support is in their plan and who will assist implementation, such as the LAC or support coordinator.
- With the client's consent, contact their NDIS funded support coordinator or LAC. Ensure that the support coordinator understands your role and your capacity to assist in the implementation.
- Identify NDIS providers who you think would be suitable for your client, and suggest that they go and meet them (this can occur as a scoping exercise before the plan is finalised).
- If the client does not have support coordination in their plan and appears to be unable to implement the plan without significant assistance, support the client to access the LAC and consider a request for a review.
- See also circumstance 5.

Support coordinator (if funded via the participant's NDIS plan)

Support Coordination is a capacity building support to implement all the supports in a participant's plan, including informal, mainstream, community and funded supports. This include supporting the participant to:

- Register / set up on the mygov website and link to the NDIS participant portal "myplace".
- Assess a number of community, mainstream, informal and provider options.
- Link to mainstream and community services (ie justice, housing, education, transport, health).
- Choose preferred options or providers.
- Resolve issues or problems that arise with their support providers, including to change or end a service agreement.
- Negotiate services to be provided and their prices, develop service agreements and create service bookings with preferred providers.
- Negotiate services and prices as part of any quotable support.
- Arrange any assessments required to determine the nature and type of funding required (e.g assessment to determine the type of complex home modifications required).
- Resolve issues or problems arise with their support providers, including to change or end a service agreement.
- Prepare for a plan review by talking about what is working well, gaps and new goals.
- Decide on what actions to take to achieve goals in relation to exploring housing options and life transition planning.
- Contact and coordinate supports with other existing support providers. This may include linking to
 or coordinating with the agency providing community or public housing tenancy management
 functions.
- Identify any additional supports that may be required and communicate during scheduled plan review if possible.
- Decide the budget for each support type and advise any relevant plan manager of the breakdown of funds.

- Liaise with any plan manager to establish the appropriate claim categories and attribute the correct amount of funds.
- Communicate with the homelessness service to support a smooth transition from the homelessness service.
- Strengthen and enhance their capacity to coordinate supports, self-direct and manage supports and participate in the community, including providing participants with assistance to:
 - resolve problems or issues that arise
 - understand their responsibilities under service agreements
 - o change or end a service agreement

Support coordinators do not make requests for an unscheduled plan review on behalf of participants. Support coordinators are not funded to provide participant transport, plan administration, plan management, support rostering, advocacy or disability supports.

The NDIA will send a request for service to support coordinator(s) the participant has identified. The request includes details of what supports the participant requires. Support coordination providers consider the request and inform the NDIS planner whether it is accepted.

National Disability Insurance Agency / Local Area Coordinator

- Create and assist participants to implement their plan.
- Work with the local community to support implementation and accessibility.
- If appropriate, respond to requests for urgency reviews for additional supports.
- Undertake regular scheduled reviews.

Resources for Plan Implementation

Starting your plan fact sheets https://www.ndis.gov.au/people-disability/fact-sheets-and-publications> Provides fact sheets explaining what to do to start a plan, how to work with a support coordinator and the LAC.

Registered Providers Operational Guideline https://www.ndis.gov.au/about-us/operational-guidelines/

Assistance in finding suitable providers for a NDIS plan

The NDIS provides a list of registered providers by State, however, registration does not necessarily mean that the service is being provided. Visit <u>find a registered provider</u> https://www.ndis.gov.au/document/finding-and-engaging-providers/find-registered-service-providers.html

<u>clickability</u> https://clickability.com.au/ is an online site in which client's review disability services. Searching is limited to type of service, funding type and location.

Circumstance 5: Coordinating homelessness assistance with NDIS supports

Description

There are a number of possible scenarios in which there will be benefits from coordination between homelessness support services and NDIS services. These include where the:

- Participant has a housing crisis, and/or is at imminent risk of homelessness and is accessing crisis support.
- Homelessness service has supported a client to access the NDIS and they are yet to be discharged from the program.
- Participant is in permanent supportive housing.
- Participant is accessing homelessness support programs, such as a day centre or an outreach service.

Context

If an NDIS participant has a housing crisis and/or is at imminent risk of homelessness, it is likely that they will either access, or be referred to, a homelessness service. If the response includes access to crisis accommodation, it may be that existing NDIS supports are not relevant or appropriate and/or the NDIS support provider may be unwilling or unable to continue to provide support (for example, if the accommodation is in a different area, the accommodation provides services which would duplicate NDIS services or staff are not trained to work in the new environment).

In these instances, coordination with the support coordinator (if available) or the LAC will be needed to determine whether the crisis is disability related and if so are there opportunities for the plan to be used flexibly to address the change in environment and/or the degree to which the homelessness support provides temporary support until the housing situation is resolved. If it becomes clear that a reason for the crisis is a lack of supports in the plan, then the homelessness service may need to support the client to access a review.

Additionally, it is possible that day programs and outreach services may come in contact with NDIS participants. Some people who are homeless can struggle to meet their obligations with their support providers, including keeping to agreed times to receive support and/or advising of cancellations with agreed timeframes. Homelessness support services may be able to assist clients to meet these obligations. For example, with a client's consent the service may arrange for support coordinators or providers to notify the homelessness service if there are continued no shows and/or to come to arrangements in which the homelessness service might be able to help (such as arranging for support to be delivered at the day program).

Homelessness services may also need to notify the support coordinator or the LAC if the client is experiencing an urgent/ rapid increase in their support needs or other change of circumstance.

In all cases, where there is support coordination in plan, the support coordinator would be expected to take the lead in assisting the client to integrate their disability support services.

Best practice

 All clients are able to access crisis support to address a housing or homelessness crisis; or to prevent homelessness. Homelessness services, NDIS providers and the LAC work in partnership to coordinate and integrate their service responses.

Roles and responsibilities

All services (where the NDIS participant is experiencing a housing / accommodation crisis)

- Work with the client and/or support coordinator if available to ensure that NDIS support providers
 are aware of client's circumstances and identify any current service agreements which need to be
 put on hold (for example, if the plan includes housing support arrangements and the client is
 experiencing a housing crisis, the support provider would need to be made aware of this).
- Identify with the client and/or support coordinator or LAC flexibility within the plan to adjust supports to meet the client's changed circumstances.
- Provide necessary support and assistance to address immediate housing/ accommodation issues.
- Take steps to initiate a plan review if it appears that a reason for accessing homelessness support services was due to the plan no longer meeting the person's needs (see circumstance 6). This will most likely occur if there has been a significant change in the client's circumstances.

Homelessness persons support services

- If appropriate, agree to a process directly with the participant to ensure NDIS supports are coordinated with homelessness supports, including how the participant's NDIS providers will respond when the client's experiences a change in their needs or crises related to their disability.
- Support the participant to understand their obligations under the support agreement with their provider and meet them.
- Support the participant to communicate with their support coordinator / LAC if the client experiences an urgent / rapid increase in their support needs or other change of circumstance which may impact on their capacity to meet their service agreements.

Case management (transitional, supported accommodation, tenancy)

- Support the participant to understand their obligations under the support agreement with their provider and meet them.
- Agree to a process directly with the participant to ensure NDIS supports are coordinated with homelessness supports, including how the participant's NDIS providers will respond when the client experiences a change in their needs or crises related to their disability.
- Support the participant to notify the support coordinator/ LAC when they are being discharged from the homelessness service and develop and implement a handover housing plan.

Local Area Coordinator

- Coordinate with the homelessness service and/or Support Coordinator to determine whether the
 individual's circumstances have changed due to their disability and whether a plan review is
 necessary.
- Identify opportunities to flexibly use NDIS funding within current funding plan resources to address change in circumstances.
- Refer the client to further mainstream services that can assist with their current circumstances.

Support coordinator (if funded via the participant's NDIS plan)

- Support the participant to maintain contact with any homelessness service accessed by the
 participant, including those services who the client may not have a formal relationship with (for
 example, day centres or outreach services).
- Coordinate any interim support requirements related to the participant's disability with the homelessness worker to maximise the housing outcome for the participant.
- Refer the participant to any other services (for example mental health services) if there are concerns about their health status or wellbeing.
- If additional supports are required, look at options for flexibility within the plan and consider the need for a review (see circumstance 6).

National Disability Insurance Agency

- If required, undertake a plan review in a timely manner and notify, the participant, local area coordinator of the outcome in a timely manner.
- Ensure the NDIA has the capacity and processes to undertake plan reviews when the situation is complex or urgent.
- Aim to include the homelessness service in the review process to ensure that the plan adequately reflects disability related support needs to promote a stable tenancy into the future.
- Undertake regular scheduled reviews
- Undertake a plan review where the circumstance is complex, and participant does not already have support coordination funding.

Circumstance 6: Client has an NDIS plan but is not accessing support

Description

An NDIS participant accesses a homelessness service but is not receiving any NDIS supports.

Context

Once a person becomes a participant in the NDIS, the person is likely to receive lifelong support under the NDIS. If a person meets the access criteria for the NDIS and becomes a participant, it is not necessary to reapply for access.

People presenting at homelessness services, including because of a housing or imminent housing crisis, may already be an NDIS participant but not be engaged with their supports. Possible reasons include:

- not notifying existing providers and/or not being available for appointments or cancelling without sufficient notice leading to a termination of the agreement between provider and participant.
- moving to a different area and the same supports not being available and / or not having the skills, knowledge or capability to reconnect or engage with new service providers.
- supports being provided not suitable or appropriate.

It is also possible that the participant may not have a plan that has been implemented.

These scenarios are likely to become more common. In some instances, a plan review may be required (see circumstance 7), whereas for others it may be a re-activation of the existing plan.\

"A regular client reengaged with our service after some time out of area and it was identified by the IAP worker that he was an NDIS participant, but he was not accessing supports. The client, who has significant memories issues and has been transient most of his life, could not remember the address that was first registered and the NDIS would not allow him to access his information. He was asked to present 100 points of ID to an NDIS office to confirm his identity. The client was referred to a case manager who was then able to assist him to reengage with the NDIS and locate his Support Coordinator. The client has now been able to move in to a transitional property and utilise his package to learn daily living skills and maintain his tenancy."

NDIS and Homelessness Project Worker, Vincentcare

Roles and responsibilities

Initial contact and support

- Include in initial screening a question as to whether the client has accessed the NDIS / is eligible for the NDIS / has an NDIS plan.
- Refer the client to the LAC for support to re-engage with the NDIS and/or with the client's permission contact the LAC and provide the client's contact details.
- Provide necessary support and assistance to address immediate housing issues.

Homelessness persons support services

- Refer the client to the LAC for support to re-engage with the NDIS and/or with the client's permission contact the LAC and provide the client's contact details.
- Continue to provide support.

Support Coordinator (if the participant has this funded in their NDIS plan)

 Assist the client to identify appropriate service providers; identify how to flexible use the plan to meet any immediate needs.

National Disability Insurance Agency / Local Area Coordinator

Assist the client to locate an appropriate Support Coordinator.

Circumstance 7: Supporting a client to urgently review their plan

Description

A client's circumstances have changed and the supports in their plan are not meeting their needs, and a participant needs assistance to request a review.

Context

A plan review is scheduled towards the end of funded supports. The level and nature of support in a plan is expected to change from year to year depending on the participant's needs and goals. NDIS plans also allow for some flexibility within the core support category to enable participants to prioritise or change supports as required, for example to increase support in self-care, and to decrease social activities, to accommodate a temporary decline in health.

However, a plan review can occur when a plan is not meeting a person's needs due to changed circumstances. The process requires completion of a plan review request form which asks for information about the changes that have affected the person, any other information that is relevant and why the participant thinks their plan needs to change.

Homelessness services may identify a need for a review where it becomes evident that a lack of support or flexibility in the plan has contributed to a participant becoming homeless or is at risk of homelessness, including if the participant needs assistance to implement their plan and this is not included. If appropriate, homelessness services may advocate on behalf of clients for a review to the support coordinator or the LAC.

Best Practice

- The LAC/ support coordinator is informed of any changed circumstances, explores opportunities
 to flexibly use the participants NDIS funds to address their changes and if necessary initiates a
 review.
- The participant is supported to steer the review process.
- A review is undertaken in a timely manner.

Roles and responsibilities

All homelessness services

- Identify any significant disability related changes in functioning or changes in the participant's circumstances for which NDIS supports cannot respond.
- Inform, or support your client, to inform the LAC or support coordinator of the changed circumstances. If the situation is complex and there is no support coordination function, the LAC should be informed.

Case management (medium to longer term; and if appropriate homelessness support services)

• Provide input into the plan review process with regards to the disability related support needed to assist them access and maintain housing.

Support coordinator and Local Area Coordinator (if the participant has this service funded in their NDIS plan)

- Maintain regular contact with the participant and identify any significant changes in functioning or changes in the participant's circumstances.
- Explore opportunities to use flexibly the participant's NDIS funding to address the changes in their circumstances and functioning.
- Identify if additional supports are required.
- If additional supports are required, support the participant to request an urgent plan review with an aim of increasing or adding support services required to address the complex circumstances.
- Refer the participant to their local health services if there are concerns about their health status or wellbeing.

Local Area Coordinator

- Maintain contact with the participant and identify any significant changes in functioning or changes in the participant's circumstances.
- Explore opportunities to use flexibly the participant's NDIS funding to address the changes in their circumstances and functioning.
- If the situation is complex and the participant doesn't already have support coordination funding, request the NDIA to conduct an emergency plan review and recommend that the participant requires support coordination.
- If additional disability related supports are required, escalate to the NDIA for an urgent plan review with an aim of increasing or adding support services required to address the complex circumstances.
- Refer the participant to their local health services if there are concerns about their health status or wellbeing.

National Disability Insurance Agency

- If required, undertake an urgent review in a timely manner and notify, the participant, LAC of the outcome in a timely manner.
- Aim to include the homelessness services in the review process to ensure that the plan adequately reflects support needs to promote a stable tenancy into the future.
- Undertake regular scheduled reviews.
- Ensure the NDIA has the capacity and processes to undertake emergency plan reviews when the situation is complex or urgent.

Resources for plan review

Review of Decisions Operational Guideline https://www.ndis.gov.au/about-us/operational-guideline

Circumstance 8: Client is a child aged 0 -6 years with a developmental delay or disability

Description

A child under the age of six that is not an NDIS participant but appears to have a significant developmental delay that presents as part of a family unit who is homeless or at imminent risk of homelessness.

Context

The NDIS has a different pathway for children under the age of six years with developmental delay or disability and who would benefit from early intervention. Having a child with a disability is a known risk factor for homelessness, and there are also a number of homelessness services which target families and/or children.

To be eligible under these requirements children aged 0 – 6 years must have a delay which results in:

- Substantially reduced functional capacity in one or more of the areas of self care, receptive and expressive language, cognitive development or motor development; and
- results in the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services which are of extended duration, and are individually planned and coordinated; and
- those supports are most appropriately funded through the NDIS, and not through another service system.

The NDIS has engaged Early Childhood Partners (ECPs) to deliver the Early Childhood Early Intervention approach. Early Childhood Partners will undertake an assessment of needs, provide assistance to access supports and monitor progress. If the child requires longer term early childhood intervention supports, the ECP will help the family to request NDIS access and develop a plan.

The document *Practice Guidelines National Disability Insurance Scheme – mainstream interface* provides roles and responsibilities for children who are an existing NDIS participant in a family violence situation, as well as a number of scenarios for children in or leaving care.

Roles and responsibilities

Initial contact and support

- Understand and know about the NDIS, including what supports are available for children, i.e. early childhood early intervention.
- At the point of intake identify and record information about the child's disability or developmental delay and seek information on their current NDIS participant status.
- If it is likely that the child requires early intervention or disability support and is not receiving it, make a referral to the Early Childhood Partner.

Case management (all)

- Understand privacy and consent requirements for NDIS enquiries.
- Understand and know about the NDIS, including what supports are available for children, i.e. early childhood early intervention.
- If a developmental delay is identified in children presenting with their families, make a warm referral to the ECP.

 Support the Early Childhood Partner to provide support to the child and its family, for example, through facilitating meetings and keeping the Early Childhood Partner informed of changes in their housing situation.

Early Childhood Partner

- Discuss with the family the child's disability or concerns about their development.
- Coordinate with the homelessness service support worker to assist with organising assessments or service delivery, including to understand the impact of their housing situation.
- Identify supports and services in the community which can assist the child achieve their goals.
- If appropriate, facilitate the provision of short-term funded interventions.
- If appropriate, prepare the child and family/carer for getting ready for NDIS access and planning.

National Disability Insurance Agency

Upon receiving an access request, the NDIA is responsible for:

- Notifying the person within 21 working days if they meet NDIS access criteria.
- Providing updates on the NDIS access process to the person or their nominated contact.
- Requesting further information (where required) to assess an access request. In this case, the
 person will have at least 28 days to provide the information.
- Upon receiving the final piece of information, notifying the person within 14 working days if they
 meet NDIS access criteria.

Resources for Early Childhood Early Intervention

<u>How ECEI works – step by step process</u> https://www.ndis.gov.au/understanding/families-and-carers/how-ecei-works-step-step-process provides general information and factsheets about early childhood early intervention support.

Get support for your child: https://www.ndis.gov.au/understanding/families-and-carers/get-support-your-child>

Other useful resources

NDIS guide for price and paying for supports https://www.ndis.gov.au/providers/price-guides-and-information

Lists the main support categories and price (note: different guides for different states). Provides a good indication of what type of support is available and what will be paid.

<u>Quarterly Reports</u> https://www.ndis.gov.au/about-us/publications/quarterly-reports The NDIA reports quarterly to COAG. They report on progress regarding implementation, including number of participants and expenditure.

Understanding the mainstream interface

<u>Practice guidelines – NDIS and mainstream services</u> https://providers.dhhs.vic.gov.au/practice-guidelines-ndis-and-mainstream-services

Homelessness and the National Disability Insurance Scheme: Challenges and Solutions, Council to Homeless Persons http://chp.org.au/wp-content/uploads/2017/05/170525-NDIS-and-homelessness-v.8-long-version-FINAL.pdf

This project was commissioned to gain a better understanding of the interface between Specialist Homelessness Services (SHS) and the National Disability Insurance Scheme (NDIS). Additionally, it considers the opportunities the NDIS presents for people who both have a disability and experience homelessness, as well as for the SHS sector itself and how to maximise these opportunities.

Attachment A: Descriptions of Housing and Homelessness Assistance Programs

1. Initial contact and support

Includes all activities that provide a service response to people when they first make contact with the homelessness service system. This could include and is not limited to:

- Initial Assessment and Planning
- · Opening Doors
- Telephone information and referral
- Intake and access family violence

2. Homeless Persons Support Services

Homeless persons support services offer a range of supports and practical assistance for people who are homeless or at risk of homelessness, including meals, living skills, information, counselling, personal care, health care, showers facilities and referrals. This may also include referrals and supports from other services such as legal and health care services.

Can be walk in (day centred) or mobile outreach (eg: soup vans).

3. Case Management - crisis

Crisis Supported Accommodation

Short-term crisis supported accommodation includes accommodation and support services provided at congregate facilities, transitional housing management based crisis properties, refuge's, hotels, motels, caravan parks, couch surfing, living temporary with friends or other locations as arranged by your specialist homelessness service.

Crisis supported accommodation is expected to be for a short duration of time, up to six weeks.

Crisis supported accommodation services focus on stabilising people's immediate crisis situation and assisting them to transition to stable medium to long-term accommodation such as transitional housing, public housing or private rental.

4. Case Management – medium to longer term

Includes all activities which have case planning as a performance measure. This could include and is not limited to:

- transitional support
- intensive support
- all supported or permanent accommodation programs; and
- · tenancy support.

Case management support can include counselling, crisis resolution, personal care, life skills training, information and advocacy, along with assessment and referral. Its focus is to assist with accessing or maintaining housing, and connect with training and employment opportunities. Tenancy support case management is for tenants of social and public housing with a focus on establishing successful tenancies and intervening when tenancies are at risk.