# FactSheet. Accessing the NDIS - Excellence in evidence of disabilityAccessing the NDIS Excellence in evidence of disability

# March 2018

## How can you make an access request?

There are two ways to make an access request:

* **NDIA Staff contact you**

If you are already receiving supports from State and Territory disability programs we will contact you to make an access request.

If your current disability program has the same eligibility criteria as the NDIS, you will not need to provide evidence of your disability. We will let you know what information we need from you when we call you.

If your current disability program has different eligibility criteria to the NDIS, you will need to provide evidence of your disability, and the impact it has on your daily life to support your access request. We will advise you if this is the case.

* **You contact the NDIA**

If you do not currently receive disability supports from State and Territory disability programs, and the NDIS is available in your area, you may request access by calling the NDIA. You will also need to provide evidence of your disability, and the impact it has on your daily life to support your access request.

## Who can help you prepare for your access request?

You can choose who you would like to help you prepare your NDIS access request. You might work with a family member, friend, carer, an NDIS Local Area Coordinator, Early childhood partner, a General Practitioner (GP) or other treating Professional.

The person helping you complete your access request will not be able to tell you if you meet NDIS requirements. Only the NDIA can make this decision.

If you need further help to get your evidence together [Local Area Coordinators](#_LAC_partners) (LAC) in your area are available to assist you.

## What if you don’t have enough information to support your access request?

If the evidence of disability you give us doesn’t help us to make a decision, wewill ask you to give us more information. It is ok if we ask for more evidence, but it will slow us down and it will take longer to give you a decision. To help us make a fast decision, we recommend you provide ‘excellent evidence’ of your disability.

## What is ‘excellent evidence’ of disability?

Excellent evidence is:

* Recent
* Completed by a treating professional relevant to your primary disability
* Confirms diagnosis of a primary disability
* Confirms functional impacts (related to your disability) across different life domains
* Describes previous treatments and functional outcomes
* Describes future treatment options and expected functional outcomes

## Who can provide evidence of disability?

You may work with treating professionals to provide evidence of disability to support your NDIS access request.

Typically these treating professionals are:

* General Practitioners (GP’s)
* Paediatricians
* Orthopaedic surgeons
* Occupational Therapists
* Speech Therapists
* Neurologists
* Psychologists
* Psychiatrists

The treating professional who completes the evidence of your disability should:

* be the most appropriate for your primary disability
* have treated you for a significant period of time (e.g. at least 6 months)

Use the information provided in [Appendix 1: Best Practice Evidence & Treating Professionals by Primary Disability](#_Appendix_1:_Best) to assist decision making about the most appropriate Treating Professional for each primary disability type.

If you need help to get your evidence together [Local Area Coordinators](#_LAC_partners) (LAC) are available to assist you.

## What does your treating professional need to do?

The treating professional is to provide evidence of your disability and functional impairment to support your access request. Evidence can be provided in the following ways:

* By completing the **NDIS Supporting Evidence Form** or sections of the **Access Request Form;** or
* By providing existing reports, assessments or letters that provide evidence of your disability.

## What type of evidence is required from your treating professional?

The type of evidence needed to support your access request will depend on your primary disability. [Appendix 1: Best Practice Evidence & Treating Professionals by Primary Disability](#_Appendix_1:_Best) lists assessments that will usually make the decision making process faster, but these assessments are not essential.

If you have not undergone one of the assessments listed in [Appendix 1: Best Practice Evidence & Treating Professionals by Primary Disability](#_Appendix_1:_Best)  your treating professional will need to provide the following information:

* Evidence you have, or are likely to have, a permanent disability, including information about:
  + Type of disability
  + Date the disability was diagnosed (if available)
  + How long the disability will last; and
  + Available treatments (i.e. medications, therapies or surgeries)
* Evidence of how your disability impacts your everyday life in the following areas:
  + Mobility/motor skills
  + Communication
  + Social interaction
  + Learning
  + Self-care; and
  + Self-management.

**Note:** For some disabilities, information about how your disability impacts you may not be needed. These disabilities are listed in the [List A - conditions which are likely to meet the disability requirements](https://www.ndis.gov.au/operational-guideline/access/list-a.html) on the [NDIS website](http://www.ndis.gov.au/)

If additional consultation time is required to prepare evidence of disability this may be claimed by the treating professional via Medicare.

In exceptional circumstances, in the absence of existing assessments, Access staff may complete a general standardised functional assessment (i.e. WHODAS or PEDI-CAT) with you or your authorised representative.

## Working with Children (0-6 years)

If you are a parent or representative of a child aged 0 to 6 years who may benefit from early intervention or disability support under the NDIS, you should contact or an NDIS [Early Childhood Partner](https://www.ndis.gov.au/about-us/locations.html) in your area.

The NDIS has engaged Early Childhood Partners around Australia to deliver the Early Childhood Early Intervention ([ECEI) approach](https://www.ndis.gov.au/ecei.html). Early Childhood Partners are experienced in providing early childhood intervention.

## How is an Access decision made?

When we receive your completed access request we will review all information you have provided against the NDIS Act (2013). The NDIS Act is the law which guides the NDIS.

We might ask you to provide additional evidence to help us complete the decision. If additional evidence is required it might delay the access decision.

To make sure an access decision is not delayed, it is best you provide us with [“excellent evidence”](#_What_is_excellence) to show you meet the NDIS access requirements when you first apply.

## What happens if you do not meet NDIS access criteria?

When the access decision is complete you will be advised in writing of the decision.

If you do not meet NDIS access criteria we will make every effort to contact you and explain the decision and [your right to have the decision reviewed](https://www.ndis.gov.au/operational-guideline/review-of-decisions.html).

If you do not meet NDIS access criteria you will either continue to be supported by your [current State or Territory disability service providers](https://www.ndis.gov.au/people-disability/continuity-support.html) or referred to relevant [mainstream and community](https://www.ndis.gov.au/people-disability/connecting-mainstream.html) supports. Information and referral to these supports may also be facilitated by an LAC or Early Childhood partner in your region.

### Early Childhood partners

NDIS Early Childhood Partner work with children (0-6 years) who have a disability or developmental delay and their Families or Carers to:

* Provide information
* Connect children and families with appropriate supports in their local area, such as the community health center, educational setting and playgroup
* Provide short-term early intervention where this has been identified as the most appropriate support
* Assist people to make an NDIS access request if a child is identified as requiring longer-term early childhood intervention supports

### LAC partners

NDIS Local Area Coordinators work in local communities to assist with [information, linkage and referral](https://www.ndis.gov.au/people-disability/information-and-referral.html) activities, including working with the person with a disability, Carers and family members to:

* Assist to build community connections
* Optimise how to best work with the NDIA
* Identify and access community and mainstream supports
* Provide feedback about barriers, or ongoing issues, to receiving services

If you need help to get your evidence together [Local Area Coordinators](#_LAC_partners) (LAC) are available to assist you.

## Can another NDIS access request be made at a later date?

NDIS access decisions are based on the current impact of your disability on your daily life and this may change over time. Changes may result from progression of a degenerative disability (such as Multiple Sclerosis), a recently acquired traumatic event (such as Acquired Brain Injury) or an unexpected deterioration in capacity.

If your previous access request was made within the last three months, and **additional evidence is available**, you can request a review of the original access decision. For further information please refer to NDIS [reviewable decisions](https://www.ndis.gov.au/operational-guideline/review-of-decisions.html).

If the functional impact of a your disability has significantly increased, there is evidence to support this and it has been at least three months since your previous request, you may make a new NDIS access request.

**More information**

**www.ndis.gov.au**

1800 800 110 8am to 11pm (local time) Monday to Friday  
**For people with hearing or speech loss**

TTY: 1800 555 677

Speak and Listen: 1800 555 727

**For people who need help with English**

TIS: 131 450

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\*1800 calls from fixed lines are free. Calls from mobiles may be charged.

## Appendix 1: Best Practice Evidence & Treating Professionals by Primary Disability

The following table indicates standardized assessments which are considered ‘best practice’ in evidence and the most appropriate treating professional to provide the evidence for an NDIS access decision.

| **Primary disability** | **Treating Professional** | **Best practice evidence(in preference order)** |
| --- | --- | --- |
| Acquired brain injury | * Multidisciplinary team * Rehabilitation – Brain Injury health professionals | 1. Care and need scale (CANS) (17 years and over) 2. World Health Organisation disability assessment schedule (WHODAS) 2.0 (17 years and over) or PEDI-CAT (16 years and under) |
| Autism | * Multidisciplinary team * Psychologist * Occupational Therapist * Speech Therapist | 1. Diagnostic and statistical manual of mental disorders, fifth edition (DSM-V) 2. Vineland adaptive behavior scale (Vineland-II) 3. World Health Organisation disability assessment schedule (WHODAS) 2.0 (17 years and over) or 4. PEDI-CAT (16 years and under) |
| Cerebral palsy | * Occupational Therapist * Physical Therapist * Pediatrician * Physiotherapist | 1. Gross motor functional classification scale (GMFCS) 2. Other: Manual ability classification scale (MACS) 3. Other: Communication function classification system (CFCS) |
| Hearing impairment | * Audiologist | 1. Hearing impairment responses and groupings guide (17 years and over) or, 2. PEDI-CAT (16 years and under) 3. Other: Hearing acuity score |
| Intellectual disability, Developmental delay, Global developmental delay, Down syndrome | * Psychologist * Occupational Therapist * Speech Therapist | 1. Diagnostic and statistical manual of mental disorders, fifth edition (DSM-V) 2. Vineland adaptive behavior scale (Vineland-II) 3. World Health Organisation disability assessment schedule (WHODAS) 2.0 (17 years and over) or PEDI-CAT (16 years and under) |
| Multiple sclerosis | * Neurologist * Disease steps trained Nurse examiner | 1. Disease steps 2. Patient determined disease steps (PDDS) 3. Other: Expanded disability status scale (EDSS) |
| Psychosocial disability | * HoNOS trained clinical mental health staff * Clinical psychiatric staff * Mental Health Occupational Therapist  Psychologist * Psychiatrist | 1. Health of the nation survey (HONOS) 2. Life skills profile – 16 item (LSP-16) 3. World Health Organisation disability assessment schedule (WHODAS) 2.0 (17 years and over) or, 4. PEDI-CAT (16 years and under) |
| Spinal cord injury | * Multidisciplinary team * Neurologist * Physiotherapist * Occupational Therapist * Recreational Therapist * Psychologist * Psychiatrist * Rehabilitation – Spinal cord injury professional | 1. Level of lesion, or 2. American spinal injury association impairment scale (ASIA/AIS) 3. World Health Organisation disability assessment schedule (WHODAS) 2.0 (17 years and over) or 4. PEDI-CAT (16 years and under) |
| Stroke | * Multidisciplinary team * Neurologist | 1. Modified Rankin Scale (mRS) |
| Vision impairment | * Ophthalmologist | 1. Vision impairment questionnaire (17 years and over) or 2. PEDI-CAT (16 years and under) 3. Other: Visual acuity rating |
| Other | * Occupational Therapist * Speech Therapist * Physiotherapist * Social Worker | 1. World Health Organization disability assessment schedule 2. (WHODAS) 2.0 (17 years and over) 3. PEDI-CAT (16 years and under) |

For some disabilities, information about impact on functionality may not be required. These disabilities are listed in the [Operational Guidelines](https://www.ndis.gov.au/operational-guideline/access.html) on Access on the [NDIS website](http://www.ndis.gov.au/).

**Version change control**

| Version No | Approved by | Brief description of change: | Status | Date |
| --- | --- | --- | --- | --- |
| 1.0 | TS0036 | APPROVED: NAWM Branch Manager (Tori Stevens). | [APPROVED](file:///\\NDIASTAFF.NDIA.GOV.AU\Data\Shared\Secured\VERSION%20CHANGE%20CONTROL\APPROVAL%20-%20FACT%20SHEET%20-%20Accessing%20the%20NDIS%20-%20Excellence%20in%20evidence%20of%20disability%20v.08%20-%20NAWM%20Branch%20Manager%20TS%202018-02-23.docx) | 2018-02-23 |
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