# Guidance for Home Modifications Assessors1 March 2017

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## Introduction

This document provides additional guidance for Home Modifications Assessors undertaking Home Modifications assessments for National Disability Insurance Scheme (NDIS) participants who have home modifications in their plans. It is to be read as an informative document and does not replace the following: *National Disability Insurance Scheme Act* 2013 (NDIS Act); the NDIS Rules; National Disability Insurance Agency (NDIA) [Operational Guideline](https://www.ndis.gov.au/Operational-Guidelines) “*Including specific types of supports in plans - Home Modifications*”. Other NDIA guidance includes the NDIS Complex Home Modification (CHM) Assessment Template and the NDIS Assistive Technology (AT) Complexity Classification which provides guidance on the classification of the different levels of home modifications under the NDIS.

AT assessors who undertake home modification assessments should be prepared to provide documentation to an NDIS Auditor when requested to demonstrate their level of competence to provide this support. The NDIA has provided initial guidance on the characteristics that an assessor of CHM supports should demonstrate[[1]](#footnote-1).

## Role of home modification assessors

Home modification assessors have several tasks when assisting participants that include:

* explaining the home modification assessment process, their role and the NDIS approval process to the participant;
* undertaking the home modification assessment, where possible with the participant; and,
* making participants aware of their responsibility to exercise choice and control in selection of suitable providers, and implications for future accessible accommodation options should the NDIA approve reasonable and necessary funding for a home modification in whole or part. These are set out in the NDIS Rules and [Operational Guidelines](https://ndis.gov.au/Operational-Guidelines) (in particular relating to home modifications[[2]](#footnote-2) and specialist disability accommodation[[3]](#footnote-3)), and examples to assist understanding are given later in this document.

## Home modifications and the NDIS

The NDIS will fund standard home modifications that are found to be reasonable and necessary by the NDIA to facilitate achievement of the goals in the participant’s current plan. Support not related to the participant’s goals cannot be funded through the participant’s plan.

The decision about funding is made entirely by the NDIA. The role of the assessor is to advise and make recommendations to the NDIA and the participant as to the most appropriate option for supports related to the participant’s goals. Where required, an appropriate building construction professional must also confirm the viability of the proposed recommendations to the NDIA at the appropriate milestone/time in the process.

Reasonable and necessary funding generally focuses on the demonstrated need for modifications to access the dwelling and frequently used rooms to facilitate Activities of Daily Living (ADLs). The primary focus would be the participant’s bedroom, living area, meal area and bathroom. Fixtures and fittings are considered at a standard grade level. The assessor should consider that it may be possible to purchase second hand or commercial off the shelf items.

Participant choice and control in the implementation of home modifications comes after the reasonable and necessary supports have been decided and relates to how a participant uses their funds. Where there are costs which are unlikely to be funded by the NDIS or where participants choose to contribute additional funds to upgrade the fixtures or fittings or to extend the modifications, the participant’s cost contribution must be agreed prior to the commencement of the build.

Contracts with Building Works Project Managers (BWPMs), builders and other construction professionals are between the participant and the supplier (and do not include the NDIA).

The BWPM (generally required for CHM) must prepare detailed specifications, including drawings to scale to facilitate accurate quotation and delivery of the home modification.

Participants should remain in their home where possible. If the dwelling is uninhabitable for a period of time, the time out of the home should be minimised. The schedule of works must prioritise those modifications which allow the participant’s soonest return. The assessor must advise the NDIA of the need for and recommend suitable options for alternative accommodation in the home modification Assessment Template.

## What criteria must assessors consider and report evidence about to the NDIA?

Assessors need to consider and provide evidence to the NDIA about the factors to be considered under Section 34 of the NDIS Act to explain how the recommended home modification will support the achievement of the participant’s goals and to assess if it is reasonable and necessary. Assessors are generally encouraged to use the relevant NDIS Template to ensure that necessary information is provided and unnecessary delays in the process are avoided. Where a participant requires home modification to enable discharge from a medical or health facility the NDIS expects the utilisation of NDIS approved templates.

### Recommendations must be effective and beneficial with regard to good practice, and must be safe and legal for the NDIS to fund

Recommendations must reflect current good professional practice in home modification including safety considerations (evidence may be requested), be compliant with statutory requirements and not unlawfully restrain a participant. Where a behaviour support management plan is in place for a participant the NDIA may consider recommendations consistent with this plan.

### Recommendations must demonstrate how they facilitate the participant’s functional capacity to meet their goals and reduce the need for funded supports

It is generally expected that home modifications will be suitable for the participant’s anticipated long term needs and that the modifications will increase independence. Therefore, it is unlikely that further modifications will be funded for the same premises except where there are unforeseen and significant changes to the participant’s needs. The [Operational Guideline](https://www.ndis.gov.au/Operational-Guidelines) “*Including specific types of supports in plans - Home Modifications*” provides guidance on the requirements in relation to how the recommendations must demonstrate facilitation of the participant’s functional capacity to meet goals and reduce the need for funded supports.

#### Case Examples

1. An assessor recommends the NDIS fund automation of all windows and blinds of a house for a participant with a C5 spinal injury (participant can raise their arms and bend elbows and has total paralysis of wrists, hands, trunk and legs). Funding would generally be only approved for home modification to the participant’s bedroom, the living room and dining room as these are the most likely rooms where the participant may be alone for periods of time undertaking independent goal related activities and may need to adjust the blinds.
2. An assessor recommends the NDIS fund modifications to the laundry, kitchen and pantry of a house for a participant with a C4 spinal injury who requires full assistance with activities of daily living to make them fully accessible. The recommendations are unlikely to be funded as the participant’s current functional capacity does not allow them to achieve a goal to perform activities such as laundry or cooking for the foreseeable future even with the use of currently available AT.

### Recommendations must demonstrate how they facilitate the participant’s participation and involvement in social and community life including economic participation.

Informal supports, community and mainstream supports are considered before funded supports as options for achieving the participant’s goals. This strategy is to be employed by assessors when identifying the barriers the home modification is aimed to address and the appropriate modification option. The recommendations must consider what reasonable informal and community supports should be used to support the participant.

#### Case Examples

1. Kitchen modifications for a teenager, who uses a wheelchair for mobility at all times and wants to learn to cook. A teenager is likely to eventually want to move out of the family home. Whilst living with parents who still have the primary responsibility to provide meals any kitchen modifications should be minimal and reversible. Consider the use of the kitchen table or an alternate solution rather than permanently modifying a kitchen bench, or local cooking classes for skill building, social participation and increasing social networks. Kitchen modifications are unlikely to be funded in this situation.
2. A participant who is interested in cooking for leisure but who will never be independently able to cook (e.g. due to a severe cognitive impairment), is unlikely to be funded for a kitchen modification to make the kitchen fully accessible. Options such as joining an age appropriate community cooking group and providing some AT are more likely to be supported.
3. A participant who has a regular water exercise program, is unlikely to be funded for the installation of a pool. Exercise and therapy needs can be more appropriately met by attendance at a local gym, community activity centre or therapy service. This attendance is more likely to be funded.
4. The building of an indoor climbing wall in a home is not likely to be funded due to limited evidence that this will result in achievement of goals. Notwithstanding the safety risks, alternatives exist in the community.

### Recommendations must demonstrate how they have considered alternative funded supports

Home modification assessments and recommendations must provide the NDIA with documented evidence that all alternate options to achieve the goal(s) have been explored, including other AT and a less extensive home modification. Reports should note the participant’s preferred option. Where alternative options achieve the same goals and are more cost effective then home modifications are unlikely to be found reasonable and necessary.

#### Case Examples

1. Where the participant has minor mobility problems and has a shower over the bath, the use of a bath-seat and grab rail should be considered and trialled. Removal of the bath and installation of a stepless shower is unlikely to be reasonable and necessary in the first instance where there is no evidence of why the bath-seat and rail were inappropriate.
2. Funding for the creation of a walk-in wardrobe to facilitate a participant using a wheelchair to choose his own clothes is unlikely to be found reasonable and necessary. The installation of cupboards along the bedroom may equally enable the participant to choose their clothes. The provision of storage for belongings is a normal day to day expense and as such would not be considered reasonable and necessary.
3. Provision of wheelchair accessible appliances and creation of access to them with minimal modification in the existing kitchen should be considered before reconfiguring and redesigning an entire kitchen.
4. Exercise and therapy needs can be more appropriately met by attendance at a local gym, community activity centre or therapy service rather than a home modification to create a home therapy room.
5. Large amounts of equipment in the home may indicate a review of the person’s equipment needs is more appropriate in the first instance rather than creating an equipment storage room.

### Recommendations must be solutions which would be appropriate for NDIS to fund

There are several aspects to consider here:

* **NDIS cannot fund supports which are normally the responsibility of the home owner, participant, parent or government service/program.** Specifically consider roles and responsibilities of family and other residents in the home.
* **Recommendations must take into account the responsibility of the participant to choose the most appropriate housing related to their disability**: Where the home was purchased after the acquisition of the disability, or funding is sought for a new build, the NDIA would expect the participant to have considered their existing disability needs in the selection of the site and design of the new premises. It is not expected that NDIS will fund significant modifications to new premises, rather it will only meet the disability needs of an already accessible home. It is recommended that all new builds should be built to platinum level of Livable Housing Australia (LHA) design guidelines. The [Operational Guideline](https://www.ndis.gov.au/Operational-Guidelines)“*Including specific types of supports in plans - Home Modifications*” provides guidance regarding the circumstance where there is more than one residence that a participant needs to access. It also notes that:

“The NDIS generally will not fund: … modifications for a property purchased after a participant was granted access to the NDIS, unless the NDIA was involved in the decision to purchase the property, or the purchase of a more accessible property was not possible”[[4]](#footnote-4)

* **If the participant is a tenant in public housing** the home modification assessment will need to specifically and accurately address what component(s) of the home modification are proposed to be funded by NDIS and what is the responsibility of the state/territory government.
* **Does the participant have a medical condition that suggests funding AT or Home Modification is the responsibility of another party (e.g. Health)?** The home modification assessor needs to carefully consider the attribution of the AT & home modification need. Where the need is disability related, the participant may be eligible for funding through the NDIS. Needs may be the result of other causes such as a health condition and therefore funding for the AT and home modification will be the responsibility of another party (e.g. Health). Eligibility or acceptance as a participant to the NDIS does not mean home modifications or other supports will be funded in every instance. Attribution of the cause for support can be difficult to separate. Where a participant has a combination of different disabilities, the assessor should attempt to determine the primary disability and the impact of other disabilities and discuss this in the report.

#### Case Examples

1. Where a parent is responsible for undertaking cooking and cleaning for a child participant and the rest of the household, the NDIS cannot fund major modification of the kitchen and/or laundry.
2. Where a participant is a child and lives on a busy road, the parents are responsible for the funding of a standard fence as this is a normal expectation of a parent with regard to their child’s safety. If the child absconds over a standard fence due to their disability, the NDIS may fund the difference between the cost of a standard fence and a suitable solution.
3. A person with an intellectual disability becomes terminally ill and is receiving palliative care as a result of invasive cancer. As a result they need a wheelchair for mobility in the community or for medical appointments and the installation of a ramp at home. The person would not be considered eligible for NDIS support for the wheelchair or ramp because the need for the equipment is related to a medical condition not a lifelong disability.
4. A participant with a visual impairment who later develops a medical condition may need to sit whilst showering as they cannot manage standing for extended periods. The participant may not be eligible for NDIS support for bathroom modifications as the incapacity relates to a medical condition.
5. A participant who has a single below knee amputation and is morbidly obese may require the installation of a bidet. The participant would not be eligible for NDIS support for bidet as the incapacity relates to obesity which is not the disability for which the person was made eligible for the NDIS.
6. A participant requires a built in shower bench as a result of their disability. The participant’s weight requires that the bench be extra strong which is more expensive. NDIS would fund the additional cost to ensure the bench is of the required strength as requirement for the bench is a result of the participant’s disability.

#### Responsibilities of parents or homeowners:

##### Case examples of recommendations unlikely to be funded by the NDIS

1. A private room for a participant where the home is considered too small for the number of occupants or the makeup of the participant’s family. This may include an extension to the home’s existing footprint to provide more room, extra bathroom space or a separate toilet. Where the need cannot be specifically attributable to the person’s disability the modification will not be funded under the NDIS.
2. The construction of or modification to create a functional standard kitchen or bathroom where these do not exist in the home will not be funded by the NDIS. Features to make the rooms accessible such as an accessible vanity and grab rails are likely to be funded by the NDIS. Where the participant is contributing their own funds to a home modification the assessor can make a recommendation about the percentage of the construction or modification cost that is disability related and which may be appropriate for the NDIS to fund.
3. The painting of ceilings, changes of lights, towel rails etc. which the participant may wish to have undertaken during a bathroom modification would not be funded by the NDIS.
4. Modifications to accommodate paid carers in the home would not be funded by the NDIS. In exceptional circumstances, such as rural isolation, where there is a requirement for a paid a support worker to stay at a participant’s home for extended periods the NDIA will consider funding on a case by case basis.
5. Heating in bathrooms and full funding for the provision of climate control where this is a normal feature of homes will not be funded by the NDIS. In some circumstances a contribution towards the funding of climate control may be included in a participant’s plan, but only for areas frequently used by the participant: the bedroom, living area and dining room.
6. The addition of a room to be used as a therapy room or as an equipment storage room is unlikely to be a reasonable and necessary support required to achieve a participant’s social or economic goals, and therefore would not be funded by the NDIS.
7. A participant’s home includes an ensuite which is too small for use by the participant using a wheelchair but there is a main bathroom which could be made accessible through the removal of the bath. However, the family does not want the bath removed as they use it occasionally. A recommendation which includes modifying the home to include a third bathroom outside the current footprint would not be considered reasonable and necessary as the main bathroom could be modified. Occasional use of the existing bath would not be a reasonable grounds to preclude modification to the existing bathroom by removing the bath.

### Recommendations must demonstrate how the proposed modifications provide value for money

The principle of value for money is of equal weight to the other considerations in Section 34 of the NDIS Act. On occasion a home modification will be less expensive than the alternatives. However, where the other considerations in Section 34 of the NDIS Act are not satisfied, the home modification will not be determined reasonable and necessary.

1. February 2017 | NDIS FAQs about Home Modifications [↑](#footnote-ref-1)
2. [Operational Guideline](https://www.ndis.gov.au/Operational-Guidelines) “*Including specific types of supports in plans - Home Modifications*”; [↑](#footnote-ref-2)
3. Both the NDIS (Specialist Disability Accommodation) Rules 2016 and the Operational Guidelines on SDA. [↑](#footnote-ref-3)
4. Operational Guideline “*Including specific types of supports in plans - Home Modifications*” [↑](#footnote-ref-4)