Evidence we need to include NDIS supports in your plan

To create your NDIS plan, we use evidence to help us decide what NDIS supports meet the NDIS funding criteria for you.

If your situation changes and you need new or different NDIS supports included in your plan, you'll need to give us evidence. We need different types of evidence for different supports.

This factsheet explains the type of evidence we need to include a support in your plan. We'll consider all the evidence you give us, who provided it and how recent it is. We'll talk to you about the type of evidence we need.

Evidence is important to help us understand your disability support needs and make sure we include the right NDIS supports in your plan.

Things we fund are called NDIS supports. You can use the funding in your plan to buy NDIS supports that are in line with your plan. The supports in your plan need to be related to your eligible impairments.

This factsheet is general guidance only. If you need more information about evidence for your specific support needs, you can contact us.

You can also access support through other services, like Medicare, government-funded health services, and Aboriginal Community-Controlled Health Organisations (ACCHOs). To learn more, go to Our Guideline – Mainstream and community supports.

For more information about supports we can fund, go to:

- What does NDIS fund?

- Our Guideline – Reasonable and necessary supports
- Our Guideline – Creating your plan
- Factsheet - Support categories

How to give us your evidence

You can give us the evidence we need by:

- submitting a new enquiry through our service hub
- mail to: NDIA, GPO Box 700, Canberra ACT 2601
- in person: visit a local area coordinator, early childhood partner or NDIS office in your area.

If you're asking us to include a new support in your plan because you need a plan reassessment, you'll need to complete the plan reassessment request form. Learn more in section **How to ask for a plan reassessment** in Our Guideline – Plan reassessments.

If you need more information or support to give us evidence, you can contact us.

Contents

Report requirements

Depending on the type of supports you need, we might ask for specific types of reports. You can use this table to check the evidence requirements for different types of reports, including who should provide the evidence and how recent it should be.

If your support needs are changing quickly, we may ask for more recent evidence to understand your disability support needs.

Reports should be completed by your treating professional. When we say treating professional, we mean the person who assesses your disability support needs. For example, this could be your doctor, occupational therapist, behaviour support practitioner or registered nurse.

Evidence required	Type of Professional	Timeframe
Assistance animal assessment	Assistance animal provider	Within the last 12 months
Assistive technology assessment	Assistive technology advisor Assistive technology assessor	Within the last 12 months
Behaviour support plan (BSP)	Behaviour support practitioner	For a comprehensive BSP: within the last 12 months For an interim BSP: within the last 6 months
Centrelink Job Capacity Assessments or Employment Services Assessments	Treating professional	Within the last 12 months
Complex bowel care information	Continence nurse	Within the last 12 months

Evidence required	Type of Professional	Timeframe
Continence assessment and management plan	Registered nurse	Within the last 12 months
Diabetes management plan	Treating professional	Within the last 12 months
Dog guide assessment	Assistance animal provider	Within the last 12 months
Early childhood provider report	Treating professional	Within the last 12 months
Emergency medication management plan (EMMP)	Treating professional	Within the last 12 months (or as per direction in the EMMP)
Enteral management plan	Dietician Treating professional	Within the last 12 months
Epilepsy or seizure management plan	Treating professional	Within the last 12 months
Functional capacity assessment (FCA)	Occupational therapist Physiotherapist	Within the last 12 months
Hospital discharge plan	Treating professional	Within 3 months
Incident reports	Behaviour support practitioner Implementing provider Support workers	Within the last 3 to 6 months

Evidence required	Type of Professional	Timeframe
Individualised living options (ILO) service proposal form	ILO provider	Within the last 6 months
Information on current wounds or wound management plan	Treating professional	Within the last 3 to 6 months
Lymphoedema management plan	Lymphoedema trained practitioner	Within the last 3 to 6 months
Manual handling plan	Occupational therapist Physiotherapist	Within the last 12 months
Mealtime management plan	Speech pathologist	Within the last 12 months
Minor home modification assessment and complex home modification assessment	Occupational therapist Home modification assessor	Within the last 12 months
Neuropsychological Assessment	Neuropsychologist	Within the last 2 years
Nutrition and dysphagia assistive technology assessment	Treating professional	Within the last 12 months
Podiatry care plan	Podiatrist Treating professional	Within the last 12 months

Evidence required	Type of Professional	Timeframe
Respiratory or ventilator management plan	Treating professional	Within the last 12 months
Sleep logs or charts	Behaviour support practitioner Occupational therapist Implementing provider Support workers	Minimum of 4 to 6 weeks of logs within the last 6 months
Therapy assessments or progress reports	Treating professional	Within 12 months for recommendations of new therapy supports Within 3 months for progress reports
Vehicle modification assessment or occupational therapy driving assessment report	For passenger modifications: occupational therapist. For driving modifications or specialist driving lessons: occupational therapy driving assessor.	Within the last 12 months

Evidence for specific supports

Assistance animals including dog guides

Assistance animals, including dog guides, are animals specially trained to help you do things you can't do because of your disability.

We have different evidence requirements for funding assistance animals and dog guides.

Assistance animals

Table 1 – Assistance animals

Question	Answer
What will we ask you about?	We'll talk to you about: • what tasks you need the assistance animal to help you do because of your disability. These need to be active tasks that require the animal to have specialised training. The assistance animal needs to perform at least three tasks or behaviours that help you do things. For example, this could include things like opening doors. For more examples, go to Our Guideline – Assistance animals including dog guides. • how and why an assistance animal is the best value way to help you with your disability-related needs and goals, compared to other evidence-based best practice supports • whether you've had an assistance animal before • whether the assistance animal will be effective and beneficial for you • how the assistance animal will work with your other supports. • whether there are any risks to you or to the animal's wellbeing and safety. For example, due to the tasks it performs, or where it lives or works.

Question	Answer
What evidence do we need?	We need information and evidence that explains: • the specific things you can't do because of your disability, and how the assistance animal can actively help you do these things. • other supports you've used to address these support needs, like capacity building or assistive technology • the expected outcomes of any other types of proposed supports to address these needs • why an assistance animal is the best value, effective and safest way to increase your independence and reduce the need for other types of supports. • Your needs and situation and why an assistance animal is the most appropriate AT for your support needs We'll also need: • A suitability assessment from an assistance animal provider. This includes confirmation that the assistance animal can be matched to you and is either already qualified or is being trained for you. • a quote for the cost of your assistance animal, including any ongoing maintenance costs.
Who can provide it?	Your occupational therapist, psychologist or other allied health professional can provide evidence if an assistance animal is suitable for you, depending on the type of assistance animal you're asking for. The suitability assessment needs to be completed by an assistance animal provider. We strongly recommend that you use an accredited assistance animal provider so it can be formally recognised as an assistance animal in the community.

Question	Answer
How recent should this information be?	Within the last 12 months.
How do you provide it?	We have an assistance animal assessment template you can use to give us the information we need. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for assistance animals in your plan.
Where can you learn more?	• Our Guideline – Assistance animals including dog guides • What are assistance animals • How to ask for funding for assistance animals.

Dog guides

Table 2 – Dog guides

Question	Answer
What will we ask you about?	We'll talk to you about: • what tasks you need the dog guide to help you do because of your disability. These need to be active tasks that require the animal to have specialised training. • how and why a dog guide is the best value way to help you with your disability-related needs and goals, compared to other evidence-based best practice supports • whether you've had a dog guide before • whether the dog guide will be effective and beneficial for you

Question	Answer
	• how the dog guide will work with your other supports. • whether there are any risks to you or to the animal's wellbeing and safety. For example, due to the tasks it performs, or where it lives or works.
What evidence do we need?	We need different information depending on if you're requesting your first dog guide or a replacement dog guide. If you're requesting your **first dog guide**, we need information about: • your ability to access the community independently if you didn't have assistance • why a dog guide as a mobility aid is the best value, most effective and safest way to meet your disability-related needs • information about the supports you currently use to access the community, including any informal supports • how the supports you use to access the community are expected to change once you have a dog guide. If you're requesting a **replacement dog guide**, we need information about: • how long you've been working with your current or previous dog guide • why your partnership with your current or previous dog guide is ending • whether you're still able to access the community independently with a dog guide • whether a dog guide will continue to reduce the need for person-to-person support for your regular travel routes. We'll also need a quote for the cost of getting your dog guide from your assistance animal provider, including any ongoing maintenance costs.

Question	Answer
Who can provide it?	Evidence should come from your assistance animal provider. We strongly recommend using an accredited assistance animal provider.
How recent should this information be?	Within the last 12 months.
How do you provide it?	We have two dog guide assessment templates you can use to give us the information we need. There are different templates for first time or experienced handlers. Your assessor doesn't have to use the assessment template, but should provide all of the information described in the template. Otherwise, we might not have enough evidence to decide to include funding for dog guides in your plan.
Where can you learn more?	• Our Guideline – Assistance animals including dog guides • What are assistance animals • How to ask for funding for assistance animals • Dog guide provider list

Assistive technology (AT)

When we talk about assistive technology, we mean equipment, technology and devices that help you do things you can't do because of your disability. Or things that help you do something more easily or safely. Assistive technology involves things made to improve your daily life and help you do everyday things.

We fund assistive technology differently depending on if it is low cost, mid cost, or high cost.

Low cost assistive technology

Low cost assistive technology is less than $1500 per item.

If we decide to include low cost assistive technology in your plan, the funding for the support will be included in your consumables budget. You might be able to use your core funding flexibly to buy the supports you need without asking for a plan variation or reassessment.

Table 3 – Low cost assistive technology (AT)

Question	Answer
What will we ask you about?	We'll check what assistive technology you currently use. We'll also talk with you about any new assistive technology you may need.
What evidence do we need?	We usually don't need specific written evidence to include funding for low cost AT. We suggest everyone gets advice before buying assistive technology, even if it's low cost. Some low-cost assistive technology items can be higher risk. You need written evidence from an assistive technology advisor for higher risk assistive technology.
Who can provide it?	If we need written evidence, this can be provided by an assistive technology advisor or assistive technology assessor.
How recent should this information be?	Within the last 12 months. Where your needs are changing quickly, we may need more recent reports.
How do you provide it?	For most low cost AT, you can tell us what you need without giving us specific written evidence. If you need written evidence, we have assistive technology assessment templates your assistive technology advisor or assessor can use.

Question	Answer
	Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for assistive technology in your plan.
Where can you find out more?	• Our Guideline – Assistive technology • What is low-cost assistive technology • What is higher-risk assistive technology.

Mid cost assistive technology

Mid cost assistive technology costs between $1500 and $15,000 per item.

Table 4 – Mid cost assistive technology (AT)

Question	Answer
What will we ask you about?	We'll check what assistive technology you currently use. We'll also talk with you about any new assistive technology you may need.
What evidence do we need?	You'll need to give us written evidence that includes: • what item you need • how the item helps with your disability support needs • if the item is safe for you • why the item is the best value way to help you pursue your goals • a reliable cost estimate for the item.
Who can provide it?	An assistive technology advisor or an assistive technology assessor.

Question	Answer
How recent should this information be?	Within the last 12 months. Where your needs are changing quickly, we may need more recent reports.
How do you provide it?	We have assistive technology assessment templates your assistive technology advisor or assessor can use. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for assistive technology in your plan.
Where can you find out more?	• Our Guideline – Assistive technology • What is mid-cost or high-cost assistive technology • What is higher-risk assistive technology

High cost assistive technology

High cost assistive technology costs more than $15,000.

Table 5 – High cost assistive technology (AT)

Question	Answer
What will we ask you about?	We'll check what assistive technology you currently use. We'll also talk with you about any new assistive technology you may need.
What evidence do we need?	You'll need to provide us with an assistive technology assessment and a quote for the item. In some cases, we may need two quotes to check the item is value for money. We'll let you know if you need to give us another quote.

Question	Answer
Who can provide it?	An assistive technology assessor.
How recent should this information be?	Within the last 12 months. Where your needs are changing quickly, we may need more recent reports.
How do you provide it?	We have assistive technology assessment templates your assistive technology assessor can use. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for assistive technology in your plan.
Where can you find out more?	• Our Guideline – Assistive technology • What is mid-cost or high-cost assistive technology • What is higher-risk assistive technology.

Assistive technology – Maintenance, repairs and rental

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

We'll usually include funding for assistive technology maintenance, repairs or rental when we include assistive technology in your plan. If you need more funding to cover unexpected maintenance, repairs or rental, we can usually add this through a plan variation.

Table 6 – Assistive technology – Maintenance, repairs and rental

Question	Answer
What will we ask you about?	We'll check what assistive technology you currently have and talk with you about any assistive technology you may need. We'll ask if any of the equipment you have needs maintenance.

Question	Answer
What evidence do we need?	We'll usually include funding for assistive technology maintenance, repairs or rental when we include assistive technology in your plan. If you need more funding to maintain, repair or rent AT, we can usually add this through a plan variation. If you need rental AT for a trial, we can use the 'Guide for minor trial and rental funding' available at How to trial assistive technology | NDIS for any item under $1,500. If the item costs between $1,500 and $15,000, you don't need to give us a quote. You do need to give us written advice from your assistive technology adviser. If the item is likely to cost more than $15,000, you'll need to give us a quote and an assessment from an assistive technology assessor.
Who can provide it?	An assistive technology advisor can give us information about your assistive technology repair needs. If you need a quote for a trial, this needs to come from your assistive technology provider.
How recent should this information be?	Information from your assistive technology advisor should be within the last 12 months. If we need a quote, it needs to be valid. Quotes are usually valid for between 30 and 90 days but this can vary between providers.
How do you provide it?	If you need written evidence, we have assistive technology assessment templates your assistive technology advisor or assessor can use.

Question	Answer
	Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for assistive technology in your plan.
Where can you find out more?	• Our Guideline – Assistive Technology • How to urgently repair assistive technology | NDIS • How to trial assistive technology | NDIS

Assistance with daily life

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

Table 7 – Assistance with daily life

Question	Answer
What will we ask you about?	We'll talk to you about your current daily living goals and what type of supports you need. We'll talk with you about any other help you may need with your day-to-day tasks.
What evidence do we need?	If you need support for day-to-day tasks, you may need to give us reports or assessments. If you need a high level of support for day-to-day tasks or an increase in your support hours, we need to understand why you need these supports. When we say high level of support, we mean you need a lot of help from other people with your day-to-day activities. This includes the people that help you, your assistive technology and modifications. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high level of support.

Question	Answer
	We'll let you know if you need to give us more detail about your support needs.
Who can provide it?	If we ask for reports or assessments, you can get these from a treating professional. Your treating professional should: • have relevant qualifications • be working within their scope of practice to give us information about your disability support needs • work within the standards set by their professional registration body.
How recent should this information be?	Reports need to show your current level of functioning or disability support needs and need to have been completed within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can you find out more?	• Guide to the NDIS for GPs and health professionals | NDIS • Guide to report writing | NDIS • NDIS pricing schedule

Assistance with social, economic and community participation

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

Table 8 – Assistance with social, economic and community participation

Question	Answer
What will we ask you about?	We'll talk to you about what activities you do in the community and for recreation. We'll talk to you about any work or study you do or plan to do. We'll talk to you about your goals and work out who is best to provide support for this. We'll also ask: • if you need help to get out of the house so you can do these activities • about any barriers you face when taking part in community activities • what help you currently get and if this support meets your needs • whether there have been any recent changes to your support needs
What evidence do we need?	If you need support for day-to-day tasks, you may need to give us reports or assessments. If you need a high level of support for day-to-day tasks, you may need to give us more evidence to understand why you need these supports. This could include assessments, reports, or other supporting documentation.

Question	Answer
	When we say high level of support, we mean you need a lot of help from other people with your day-to-day activities. This includes the people that help you, your assistive technology and modifications. For example, we'll ask for this evidence if you need continuous active support for day-to-day tasks or a high level of support. We'll let you know if you need to give us more detail about your support needs.
Who can provide it?	You or a person acting on your behalf, like a family member, friend, or guardian. If we ask for reports or assessments, your treating professional can provide these. They should have relevant qualifications and experience to provide information about your disability support needs. They should work within the standards set by their professional registration body.
How recent should this information be?	Reports need to reflect your current level of functioning or disability support needs and be from within the last 12 months.
How do you provide it?	You give us this information when you talk about your lived experience. You generally won't need to give us any reports or evidence in a specific format, as long as it includes the information we need.
Where can you learn more?	• Our Guideline – Social and recreation supports • Our Guideline – Work and study supports • Guide to the NDIS for GPs and health professionals • Guide to report writing

Behaviour support and improving relationships

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

Table 9 – Behaviour support and improving relationships

Question	Answer
What will we ask you about?	We'll talk with you about how your disability affects your ability to manage behaviours of concern. We'll also ask about what supports you might need to improve your relationships.
What evidence do we need?	If you have existing funding for positive behaviour support, we need a report or a copy of your current behaviour support plan (BSP) from your treating professional. This report should confirm that the supports in your plan: • are appropriate for your needs • have evidence they will work for you • comply with relevant Commonwealth, State and Territory laws and policies. If you don't currently have funding for behaviour support, we'll need to confirm you need positive behaviour support strategies. Once your treating professional has completed either your interim or comprehensive BSP, you'll need to give us a copy.
Who can provide it?	If you don't have funding for behaviour support, you can give us information about your support needs from your: • parents or informal carer • education provider, including before or after school care and vacation care • day centre or day program provider

Question	Answer
	• treating professionals • supported independent living provider or other NDIS support provider. If you have funding for behaviour support, we need the information from your behaviour support practitioner.
How recent should this information be?	The information you give us needs to be from the last 12 months. It should show us your current level of functioning or disability support needs. If you give us an interim behaviour support plan, it needs to be no more than 6 months old when we develop your plan. If you give us a comprehensive behaviour support plan, it needs to be no more than 12 months old when we develop your plan.
How do you provide it?	Your behaviour support practitioner can choose to use these templates for your behaviour support plan: • interim behaviour support plan • comprehensive behaviour support plan. They don't need to use these templates, but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for behaviour supports in your plan.
Where can you learn more?	• Our Guideline – Behaviour support • NDIS Quality and Safeguards Commission

Funding for a registered plan manager (choice and control)

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

Table 10 – Choice and control

Question	Answer
What will we ask you about?	We'll talk with you about whether you need help to: • develop your financial and plan management skills • pay your providers • increase your choice of providers We'll discuss whether you want to use a registered plan manager.
What evidence do we need?	We use the information you share with us to decide whether we can include this type of NDIS support. Usually, we don't need specific information when you want a registered plan manager to manage the supports in your plan. Depending on your situation, we may also ask you for any reports or assessments from your treating professionals. These tell us about any supports you may need to manage your plan and pay for services, like a functional capacity assessment.
Who can provide it?	You or a person acting on your behalf, like a family member, friend or guardian can give us this information. If we ask for any reports or assessments, they will need to come from the appropriate person. For example, a functional capacity assessment would usually be provided by your Occupational Therapist.
How recent should this information be?	Within the last 12 months.

Question	Answer
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• What is a plan manager

Consumables

This support helps you purchase consumable items you use every day. Consumables is a budget category in your flexible core budget that includes funding for:

- Low cost assistive technology
- Disability related health supports.

Disability-related health supports

Disability-related health supports are supports linked to the things you can and can't do because of your disability. If you need help to manage a health condition because of your disability, we may provide you with funding for disability-related health supports.

Learn more about disability-related health supports in Our Guideline – Disability-related health supports.

Disability-related health supports can include:

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

Dysphagia supports

These are supports to help you eat, drink or swallow on a daily basis. They can include equipment, technology, products or support to help you eat, drink and prepare specific foods that are safe for you.

Table 11 – Dysphagia supports

Question	Answer
What will we ask you about?	We'll talk to you about what dysphagia supports you currently get, who you get them from and how often you use them.
What evidence do we need?	The evidence you give us needs to confirm that, because of your disability, you need: • thickener products • assistive technology to help you eat or drink • support to prepare meals or to help you eat and drink safely. If you have a mealtime management plan, sometimes called an oral eating and drinking care plan, you need to give us this too.
Who can provide it?	Your treating professional or speech pathologist.
How recent should this information be?	Within the last 12 months.
How do you provide it?	Your assessor can choose to use the Nutrition and dysphagia assistive technology assessment template to give us this information.

Question	Answer
	Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for dysphagia supports in your plan.
Where can I learn more?	• Our Guideline – Dysphagia supports • What is a nutrition and dysphagia assistive technology supports assessment

Nutrition supports

These are supports which help you get nutrition if your disability affects the type of nutrition you need and how you eat.

Table 12 – Nutrition supports

Question	Answer
What will we ask you about?	We'll talk to you about what nutrition supports you currently get, who you get them from and how often you use them. We'll also check if you're expecting any changes in who provides these supports.
What evidence do we need?	The evidence you give us needs to confirm that, because of your disability, you need: • support to help you follow a meal plan • products to help you eat safely • enteral feeding and percutaneous endoscopic gastrostomy (PEG) equipment. If you have a nutritional plan, you need to give us this too.
Who can provide it?	Your treating professional. For example, a GP or dietitian.

Question	Answer
How recent should this information be?	Within the last 12 months.
How do you provide it?	Your assessor can choose to use the Nutrition and dysphagia assistive technology assessment template to give us this information. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for nutrition supports in your plan.
Where can I learn more?	• Our Guideline – Nutrition supports including meal preparation • What is a nutrition and dysphagia assistive technology supports assessment

Continence supports

These are supports to help you manage incontinence. They can include products or help from someone to support you to manage your incontinence.

Table 13 – Continence supports

Question	Answer
What will we ask you about?	We'll talk to you about what continence supports you currently use, and how often you use them. We'll ask who helps you with these supports and check if you'd like someone else to provide this support instead.

Question	Answer
What evidence do we need?	The evidence you give us should include a continence assessment. It needs to also confirm that, because of your disability, you need continence supports. These could be products or help from someone to manage your incontinence. If you have a continence management plan, you need to give us this too.
Who can provide it?	Your continence nurse or registered nurse.
How recent should this information be?	Within the last 12 months.
How do you provide it?	Your assessor can use the continence related assistive technology assessment template to give us this information. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for continence supports in your plan.
Where can I learn more?	• Our Guideline – Continence supports • What is a continence-related assistive technology assessment

Diabetes management supports

These are supports to help you manage diabetes, which is very important to prevent long-term health problems. This might include support from a nurse or a support worker.

Table 14 – Diabetes management supports

Question	Answer
What will we ask you about?	We'll ask you how your disability affects your ability to manage your diabetes by yourself. We'll also ask if your diabetes is stable. We'll talk with you about the diabetes management supports you currently get, who you get them from and how often.
What evidence do we need?	The evidence you give us should confirm that, because of your disability, you need: • support to manage your diabetes. This could include testing blood sugar levels, support to eat regular balanced meals or help to follow your diabetes care plan • a nurse or trained support worker to help you manage your diabetes, or • support to manage your diabetes that could be delegated to someone else, like a family member or friend. If you have a diabetes care plan, you need to give us this too.
Who can provide it?	Your treating professional, diabetes nurse or an endocrinologist.
How recent should this information be?	Within the last 12 months.

Question	Answer
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Diabetes management supports

Seizure supports

Table 15 – Seizure supports

Question	Answer
What will we ask you about?	We'll ask how your disability affects your ability to manage your seizures yourself. We'll ask what seizure supports you currently have, who you get supports from and how often. We'll also talk to you about what supports you might need.
What evidence do we need?	The evidence you give us should confirm that, because of your disability, you need: • training for support workers to help you follow your epilepsy management plan (EMP) or emergency medication management plan (EMMP) • support to monitor your seizures • assistive technology to help manage your seizures • support coordination to link you with epilepsy support services. If you have an epilepsy management plan (EMP) or emergency medication management plan (EMMP), you need to give us this too.

Question	Answer
Who can provide it?	Your treating professional. This may be your doctor or a specialist, such as a neurologist.
How recent should this information be?	Within the last 12 months.
How do you provide it?	Your assessor can use the General assistive technology assessment template to give us this information. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for seizure supports in your plan.
Where can I learn more?	• Our Guideline – Disability-related health supports • What is a disability-related health support

Wound and pressure care supports

These are supports that help prevent damage to your skin that may be caused by pressure or swollen limbs, and to manage wounds. You might have an increased risk of skin damage or pressure injuries if your disability means it's hard for you to move, or shift your position, by yourself.

Table 16 – Wound and pressure care supports

Question	Answer
What will we ask you about?	We'll talk to you about how your disability affects your ability to manage your wound and pressure care by yourself. We'll ask what wound and pressure care supports you currently have, who you get them from and how often.

Question	Answer
	We'll also talk with you about what other supports you might need.
What evidence do we need?	The evidence you give us should confirm that, because of your disability, you need: • wound consumables like gauze, bandages, and dressings • support to help you with your wound management plan • items to prevent wounds like pressure relief cushions, moisturiser, and barrier creams. We also need quotes for wound care consumables and prevention supports. If you have a pressure care plan or wound management plan, you need to give us this too. If you've been diagnosed with lymphoedema, we may also need a lymphoedema management plan to confirm you need repositioning supports or drainage massages.
Who can provide it?	A treating professional. This could be a doctor, registered nurse, specialist or clinical nurse consultant. A physiotherapist or occupational therapist may also support with pressure care plans. For lymphoedema supports, information should be provided by a lymphoedema-trained practitioner. This could be from a suitably qualified physiotherapist, occupational therapist, nurse or other health professional with relevant training and experience.
How recent should this information be?	Within the last 3 to 6 months.

Question	Answer
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Would and pressure care supports • What is a disability-related health support

Podiatry and foot care supports

These are supports to help you manage conditions that affect your feet, ankles and legs. They could be provided to you by a podiatrist or a support worker.

Table 17 – Podiatry and foot care supports

Question	Answer
What will we ask you about?	We'll talk with you about how your disability affects your ability to manage your foot care. We'll ask what podiatry and foot care support you currently get, who you get it from and how often. We'll also talk to you about supports you might need but don't currently have.
What evidence do we need?	The evidence you give us should confirm that, because of your disability, you need: • foot care, like, toenail cutting or callus removal to prevent foot-related problems • regular reassessment and the development of a podiatry care plan • assistive technology, including orthoses like a brace or splint, or medical grade or custom footwear. If you have a podiatry care plan, you need to give us this too.

Question	Answer
Who can provide it?	A podiatrist or other suitably qualified treating professional.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Podiatry and food care supports • What is a disability-related health support

Early childhood supports

Early childhood supports are for children younger than 9. Our early childhood approach is for children younger than 6 with developmental delay, or younger than 9 with disability. These NDIS supports are evidence-based, early childhood intervention supports to help families achieve better long-term outcomes for their child.

Table 18 – Early childhood supports

Question	Answer
What will we ask you about?	We'll ask you about your child's development and goals. We'll talk about the information, tools and help you need to support your child's development and participation. We'll regularly check in to understand your child's progress. We'll talk about the transitions your child will go through in their early years. Before they turn 9, we'll talk with you about either: • leaving the NDIS and maintaining your connections with mainstream and community services

Question	Answer
	• continuing support through a local area coordinator or planner when your child turns 9.
What evidence do we need?	We'll ask for reports or letters from your doctor, child health nurse, paediatrician or other suitably qualified treating professional about your child's developmental delay or disability. For example, we'll ask for evidence about: • your child and family's progress towards their goals • the things your child can and can't do because of their disability • their ability to take part in day-to-day life • the support needed for your child's independence • your future goals and recommendations.
Who can provide it?	We'll ask you for this information. Your doctor, child health nurse, paediatrician or other suitably qualified treating professionals can provide reports and letters.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need. Your assessor can use How to write an early childhood provider report to give us this information. This template has been developed to align with the delivery of best practice in early childhood intervention, and the NDIS Practice Standards and Quality Indicators.

Question	Answer
	Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for early childhood supports in your plan.
Where can I learn more?	• Our Guideline – Early childhood approach • How to write an early childhood provider report

Home and living

There are several different types of NDIS supports we might include in your plan under home and living.

Different types of home and living supports will suit different people. We want to provide the best option for support in your home, now and in the longer term. We can help explain the different home and living supports available. We'll work with you to find the best mix of NDIS supports that will help you live as independently as possible.

Individualised living options

An Individualised Living Option (ILO) helps you use your funded supports to live the way that suits you. Individualised Living Option supports are typically added to your plan in 2 stages.

- Stage 1 is all about exploring and designing your support package.
- Stage 2 is when we add your ILO supports to your NDIS plan.

Table 19 – Individualised Living Options

Question	Answer
What will we ask you about?	We'll talk with you about your home and living goals to see if they include exploring an ILO. We'll talk with you about: • what you're thinking about for your future living arrangements

Question	Answer
	• what support you need when you're at home, • how your informal supports will contribute to the success of your ILO arrangement • exploring alternatives to some of your formal supports • if you're willing to invest time and effort towards creating your future living arrangements • who else might be part of your ILO. We'll use this information to help decide if ILO is the right for you, or if your support needs are better met through an alternative model of support.
What evidence do we need?	For ILO explore and design to be included in your plan, we need to get: • a functional capacity assessment • your behaviour support plan, if relevant • a manual handling plan • disability-related health supports plan, if relevant. This might be for wound and pressure care, epilepsy, podiatry, nutrition or mealtime management • lived experience letter from you or your informal supports • any relevant information about your previous, current or proposed living arrangements. When you explore and design ILO supports, you, your family and friends may work with a support provider. You can work out where you want to live and how you want to be supported. During the explore and design stage, we'll ask you to complete an ILO service proposal in line with your recommended ILO support budget. This will tell us: • about your current living arrangements

Question	Answer
	• if you've worked out where you want to live, who with and what support you'll need • how your support will be organised and delivered, and by who • how much ILO will cost to deliver and monitor • how ILO supports will work with your other NDIS supports.
Who can provide it?	To explore and design ILO supports, you can work with your family, friends and service providers. To get ILO supports funding in your plan, you'll need to complete an ILO service proposal with help from an ILO provider.
How recent should this information be?	ILO service proposal within the last 6 months. Reports within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Individualised living options • How to ask for home and living supports

Medium term accommodation

Medium term accommodation (MTA) is for funding you can use to live somewhere for up to 3 months, or 90 days. It's only available in specific circumstances.

Table 20 – Medium term accommodation

Question	Answer
What will we ask you about?	Before we include medium term accommodation in your plan, we'll talk with you about your other home and living support needs.

Question	Answer
	When we talk to you about your home and living supports, we'll also ask for any reports from your suitably qualified treating professional which tell us your daily support and accommodation needs. We need to make sure that: • you can't move into your long-term home yet because your disability supports aren't ready • you can't stay in your current accommodation while you wait for your long-term home. We can include funding for assessments in your plan.
What evidence do we need?	Where relevant, we need either: • A letter from your specialist disability accommodation, supported independent living provider or landlord which confirms the date you can move in and the reason for the delay • A letter from your home modifications provider which details the scope of works and the expected date they'll be complete • A letter from your assistive technology provider which tells us the expected delivery date • A letter from your builder with the expected build completion date.
Who can provide it?	You or a person acting on your behalf, like a family member, friend or guardian, can request and provide information to us about your home and living supports. Your suitably qualified treating professional can complete reports about your daily support and accommodation needs.
How recent should this information be?	Reports should show us your current level of functioning. Look at the various support types in this document for further guidance.

Question	Answer
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Medium term accommodation • What is medium-term accommodation (MTA)

Supported independent living

Supported independent living (SIL) is one type of support to help you live in your home. It includes help or supervision with daily tasks, like personal care or cooking meals. It helps you live as independently as possible, while building your skills.

Table 21 – Supported independent living

Question	Answer
What will we ask you about?	We'll talk with you about your goals and if they include home and living supports. To help us understand your needs, we'll ask you about: • your current living arrangements and supports • what supports you might need in the future • what home and living supports you've looked at before • your independent living skills and how you might build on these • information about your day-to-day support needs • if there might be other home and living options that better suit your needs • any support you need when you move out of a forensic hospital, facility, or correctional centre. We'll also ask about any orders you need to follow, such as a community treatment order or mental health treatment order.
What evidence do we need?	You'll need to give us:

Question	Answer
	• any assessments of your disability-related support needs. For example, a functional capacity assessment. • any reports from your suitably qualified treating professional about your daily support needs. For example, a behaviour support plan, disability related health supports, an assistive technology assessment or your hospital discharge plan. • lived experience letter from you (optional) • your roster of care from your supported independent living provider, if you have one. If we need more information to make a decision, we may ask for other assessments of your home and living needs. We'll generally include funding in your plan if we ask for these assessments. Your evidence should explain: • your daily support and housing needs, including how often and when you need the support each day • the things you can and can't do because of your disability, and how this impacts your daily life and housing needs • what other home and living options you've explored, and why they don't meet your disability-related support needs.
Who can provide it?	We'll talk to you to understand what supports you'll need. You can give us this information when you talk about your lived experience. Your suitably qualified treating professional can provide reports or assessments about your support needs. Your registered SIL provider will complete a roster of care once we include SIL funding in your plan.

Question	Answer
How recent should this information be?	Reports should show your current level of functioning. Look at the various support types in this document for further guidance.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Supported independent living • What is supported independent living (SIL) • How to ask for home and living supports

Home modifications

Home modifications are changes to your home to help you safely access or move around your home. Home modifications can be minor changes, like widening a doorway. Or they may be more complex, like combining your bathroom and toilet to give you more room to use a hoist or shower chair.

Table 22 – Home modifications

Question	Answer
What will we ask you about?	We'll talk with you about: • your home and living goals • how home modifications may help you do things you find difficult because of your disability • if you're happy where you currently live • if you have any difficulties getting around your current home.
What evidence do we need?	**All** home modifications require written approval from the legal homeowner and relevant bodies (if any) before we can include home modifications in your plan. **All** home modifications to a rental property require evidence of tenancy.

Question	Answer
	Simple home adaptations These cost less than $1,500 each and are easy to set up and use. These are usually funded as low cost assistive technology. **Minor home modifications** Minor home modifications are changes to your home that are straightforward and don't affect the structure of your home. • For category A minor home modifications, any occupational therapist can do your assessment, including your usual occupational therapist. • For category B minor home modifications, we need a home modification assessor to do your assessment. • Quotes are usually not required for minor home modifications. We use set budget levels for NDIS budget minor home modifications. **Complex home modifications** Complex home modifications are changes to your home that affect its structure or need custom or more technical work. For complex home modifications, you need to give us an assessment from a home modification assessor. This assessment typically includes: • Complex home modifications assessment form • Floor plan of the home • Diagrams of the existing and proposed modification • Photos of the area/s to be modified • 2 itemised quotes including the minimum standard quote information for builders included in appendix 1 of the NDIS Guidance for builders and designers

Question	Answer
	More information is available on the NDIS website about How to provide a home modification assessment. This website also contains links to two different home modification assessment templates which have been developed to help with home modification assessments. These include 'Minor home modifications assessment template' and 'Complex home modifications assessment template'. Your assessor doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for home modifications in your plan.
Who can provide it?	You're responsible for getting approvals for home modifications and giving them to us. Written approval for home modifications needs to come from the legal homeowner, landlord, or relevant bodies if in a building with shared ownership. An occupational therapist or a home modification assessor can provide an assessment. More information is available on the NDIS website at What is a home modification assessor. Your qualified occupational therapist can refer to the Guide to providing home modifications for guidance on what information is needed for home modifications.
How recent should this information be?	Within the last 12 months. Where your needs are changing quickly, we may need more recent reports.
How do you provide it?	This information can be in any format, as long as it includes the information we need.

Question	Answer
Where can I learn more?	• Our Guideline – Home modifications • Guide to providing home modifications

Improved daily living skills

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

It includes:

- Therapy supports
- Early childhood supports
- Some disability related health supports
- Specialised driver training

Improved living arrangements

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

Table 23 – Improved living arrangements

Question	Answer
What will we ask you about?	We'll ask you about your current living arrangement and if it meets your needs. We'll talk to you about your home and living goals, where you live now and would like to live in the future. For plan changes, we'll also ask you what has recently changed with your living arrangements.
What evidence do we need?	If we need more information to make a decision, we may ask for other assessments of your home and living needs. We'll generally include funding in your plan if we ask for these assessments.

Question	Answer
Who can provide it?	You or a person acting on your behalf, like a family member, friend, or guardian. Suitably qualified treating professionals can provide assessments or reports. If we ask for further assessments, we'll let you know who can provide them.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Home and living

Specialist disability accommodation

Some people living with disability have very high support needs. This could mean they need to live in a specially designed house. We call this specialist disability accommodation (SDA).

Table 24 – Specialist disability accommodation

Question	Answer
What will we ask you about?	We'll talk with you about your goals and if they include home and living supports. To help us understand your needs, we'll discuss whether this type of support can help you to: • improve or maintain your ability to do things with less support • reduce or maintain your need for person-to-person supports

Question	Answer
	• create better connections with your family, community, health services, education, and employment. To confirm you're eligible for SDA, we need evidence to work out if: • you have an extreme functional impairment or very high support needs • you have a SDA needs requirement • SDA meets the NDIS funding criteria for you.
What evidence do we need?	We'll ask for information from a suitably qualified treating professional that shows us how SDA is more cost-effective than other supports. These are things like home modifications, assistive technology or more person-to-person support. This could include: • information about the housing options you have explored, such as modifying your current home, private rental or public housing • information about why your current housing can't be modified or adapted to meet your disability support needs • a functional capacity assessment (FCA) • a behaviour support plan (BSP) and incident reports, including analysis and raw data if relevant • a manual handling plan • information on why your current housing can't be modified to suit your needs • lived experience letter from you • evidence about your disability related health supports.
Who can provide it?	Your suitably qualified treating professional can give you reports about your daily support and housing needs.

Question	Answer
How recent should this information be?	Reports need to show your current level of functioning or disability support needs and be from within the last 12 months. If you're providing a behaviour support plan we might need more recent information. Where your needs are changing quickly, we may need more recent reports.
How do you provide it?	This information can be in any format, as long as it includes the information we need. An FCA or BSP may be provided in a standard format or report.
Where can I learn more?	• Our Guideline – Specialist disability accommodation • How to ask for home and living supports

Support coordination and psychosocial recovery coaches

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

Table 25 – Support coordination and psychosocial recovery coaches

Question	Answer
What will we ask you about?	We'll ask you if you need ongoing help to arrange and manage your NDIS supports. We'll also talk about how much help you may need. We'll ask you about any support you currently get and if this meets your needs.

Question	Answer
What evidence do we need?	We'll ask for: • a report from your support coordinator or recovery coach that shows us how your supports are working for you • any reports or assessments you have from your treating professionals about support you may need to manage your NDIS supports. This might be a functional capacity assessment, a speech therapy report or a psychology report. There is more information and report templates on our website at What are support coordinator reporting requirements. Our website also has links to other templates, including support coordinator and recovery coach implementation and progress reports. Your provider doesn't have to use the assessment template but should give us all the information described in the template. Otherwise, we might not have enough evidence to decide whether to include funding for support coordination and psychosocial recovery coaches in your plan.
Who can provide it?	Your support coordinator or recovery coach. You or a person acting on your behalf, like a family member, friend, or guardian.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.

Question	Answer
Where can I learn more?	• What is a support coordinator • What is a recovery coach

Therapy supports

Therapy supports can also be called therapeutic supports. They're supports you may need because of your disability to help build your level of functioning and independence.

Table 26 – Therapy supports

Question	Answer
What will we ask you about?	We'll talk with you about the type of therapy support you might need and why you need it. We'll discuss the type of allied health professional that can provide this support, and if it's a type of support we can fund. We'll ask you whether therapy supports have helped you: • manage the impact of your disability in the past • pursue your goals.
What evidence do we need?	We'll help you understand the assessments and progress reports we need. These should describe: • the type of therapy support you need and why you need it • the possible therapy approach and who could provide it • what outcome the support can give you • how long and how often you'll need the support to achieve the expected outcome • evidence of previous treatments you've had and what the results were

Question	Answer
	• how your informal, community and mainstream supports will help you to pursue your goals • how the therapy support will increase or maintain your independence • how the therapy support will help you pursue your goals and take part in your community, work, and study • how your gains or expected outcomes will be measured Therapy support needs to be evidence-based.
Who can provide it?	Only suitably qualified treating professionals can deliver therapy supports. They need to be either: • registered with the Australian Health Practitioner Regulation Agency (AHPRA) • a member accredited by a relevant peak body for self-regulated professions
How recent should this information be?	Recommendations for new therapy supports within 12 months. Progress report for existing funded therapy supports should be within 3 months where possible.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Therapy supports

Transport

Transport supports include supports that enable participants to build capacity to independently travel, including through personal transport-related aids and equipment, or training to use public transport. A participant's transport supports may also include the reasonable and necessary costs of taxis or other private transport

options for participants who are not able to travel independently, as well as transport to and from school for students. This transport funding can be included in your flexible core budget or as recurring transport.

Recurring transport

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

Table 27 – Recurring transport

Question	Answer
What will we ask you about?	We'll ask about any help you may need with transport. For example, if you attending a day program, work or study, and how often you do this. We'll talk about what help you currently get or what else is available. For example, informal support, community support and taxi subsidy schemes. We'll ask you if your existing support meets your needs. If you're eligible for NDIS transport funding, we may also talk to you about setting up regular payments into your nominated bank account for transport.
What evidence do we need?	To be eligible for recurring transport funding, we need evidence you have significant difficulty with travel, or using public transport independently, because of your disability. We also need evidence it's likely you'll continue to have difficulty after you've explored alternative supports. Examples of alternative supports could be personal transport-related aids or equipment and travel training. If you meet this criteria, there are generally 3 levels of funding for transport: • Level 1: $1,784 per year for participants who aren't working, studying or attending day programs but want to improve their community access

Question	Answer
	• Level 2: $2,676 per year for participants who are currently working or studying part time (up to 15 hours per week), participating in day programs and for other social, recreational or leisure activities • Level 3: $3,456 per year for participants who are currently working, looking for work or studying for at least 15 hours per week. To set up regular payments for transport, we'll need your bank account details.
Who can provide it?	You or a person acting on your behalf, like a family member, friend or guardian. Where required, your treating professionals can provide information to us about the outcomes, or likely outcomes, of alternatives explored. This may be an occupational therapist or other practitioner depending on your disability needs.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• What are recurring supports

Vehicle modifications and specialised driver training

You may need changes made to a vehicle because of your disability so you can drive it or travel in it. We call these vehicle modifications. Vehicle modification supports don't include buying or leasing a vehicle. We may also fund other NDIS supports that provide specialised driver training.

Table 28 – Vehicle modifications and specialised driver training

Question	Answer
What will we ask you about?	We'll ask whether any of your current goals are about transportation and using vehicles for your transportation needs. We'll clarify if you access transport as a passenger only, or as a driver. If you drive yourself, we'll ask if you have a valid driver's licence. We'll also ask if you have any impairments that may affect your driving, and if you've been assessed by an occupational therapy driving assessor. If you only travel as a passenger, we'll ask whether an occupational therapist has assessed your: • passenger access needs in a private vehicle • need for modifications to your own vehicle.
What evidence do we need?	For **all** vehicle modifications, we need to confirm that the vehicle is suitable to modify. The vehicle's age determines the evidence we need. • New vehicles, or those less than 5 years old, are usually covered by warranty. We need evidence of this warranty. • Vehicles over 5 years old need to have a vehicle condition report from the relevant State or Territory's motoring organisation. It's important to understand that this is different to a roadworthy certificate. For **passenger modifications**, your treating occupational therapist needs to give us a clinical justification for your modified transportation needs. This includes evidence of your vehicle trial and how it meets your needs.

Question	Answer
	You can find more information at How to get a vehicle modified. This page has a link to our vehicle modification assessment template' to help with these assessments. Your occupational therapist doesn't have to use the template, but the evidence you give us needs to include all the information described in the template. For **driver modifications**, your occupational therapy driving assessor needs to provide: 1. A completed vehicle modification assessment template or equivalent which includes: • evidence and justification of your need for vehicle modifications based on the occupational therapy driving assessment process • prescribed vehicle modifications and evidence of trial and suitability during the on-road driving assessment • a specialised driver training program which they'll oversee and review with a specialised driving instructor. This isn't the same as a mainstream driving instructor. 2. An occupational therapy driving assessment report, which includes both off-road and on-road assessment findings. Your assessor needs to make sure you're medically cleared to drive, including your vision function, before they complete the assessment.
Who can provide it?	For passenger modifications, your occupational therapist can provide evidence. For driving modifications or specialist driving lessons, your occupational therapy driving assessor can provide evidence.

Question	Answer
	For a vehicle condition report, your State or Territory motoring organisation can provide the evidence. This needs to be completed by a licensed vehicle modifier or certifier. A vehicle condition report is not the same as a roadworthy certificate.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Vehicle modifications and specialised driver training

Work and study supports

Work and study supports can help you move from school to further education and include training and advice. They also include NDIS supports to help you find and keep a job.

Table 29 – Work and study supports

Question	Answer
What will we ask you about?	We'll talk to you about your work and study goals. We'll look at the kind of things you're good at and what NDIS supports you might need. We'll also talk to you about what informal, mainstream and community support you may be able to access. For example, a Disability Employment Service.
What evidence do we need?	To help us work out the work and study supports to include in your plan, you can give us:

Question	Answer
	• letters from your place of work • letters or reports from your school • a functional capacity assessment • therapy assessments or progress reports • a report from your support coordinator • a behaviour support plan • work experience reports • Centrelink Job Capacity Assessments or Employment Services Assessments.
Who can provide it?	Your suitably qualified treating professionals can provide this information to you. Your place of work or study can give you a letter or work experience report.
How recent should this information be?	Within the last 12 months.
How do you provide it?	This information can be in any format, as long as it includes the information we need.
Where can I learn more?	• Our Guideline – Work and study supports

National Disability Insurance Scheme

ndis.gov.au

Telephone 1800 800 110

Webchat ndis.gov.au

Follow us on our social channels

Facebook, Twitter, Instagram, YouTube, LinkedIn

For people who need help with English

TIS: 131 450

For people who are deaf or hard of hearing

TTY: 1800 555 677

Voice relay: 1800 555 727

National Relay Service: accesshub.gov.au/