Understanding the National Disability Insurance Scheme

Learning and development for foster and kinship carers



Government of South Australia Department for Child Protection 

# Acknowledgement

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In the spirit of reconciliation, we acknowledge the Traditional Owners of the land on which we meet today and their connections to their land, seas and waters. We pay our respect to their Elders past, present and emerging and extend that respect to all Aboriginal and Torres Strait Islander peoples here today



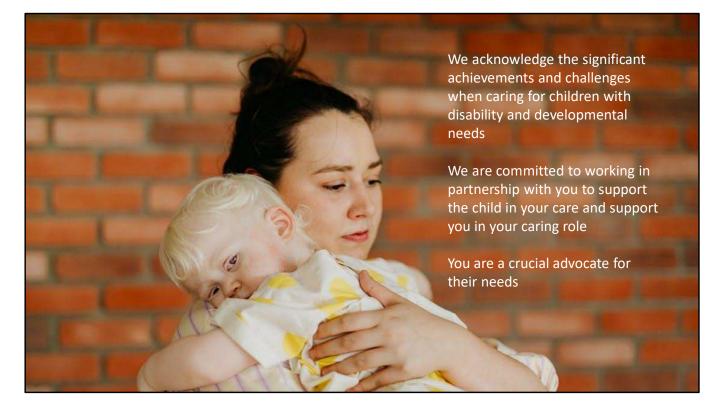
*S*: DCP is deeply committed to working with carers to ensure that you are informed, supported, consulted, valued and respected. Today's session on Understanding the NDIS contributes to how we can support you in your caring role. The care that you provide to the child/ren in your care is so valuable and we thank you for all that you do.



- Welcome carers to today's learning and development module.
- Outline emergency exits and evacuation plan and location of toilets and other facilities.
- Notify carers about break times.
- Encourage carers to make sure their mobile phones are off or on silent. This is about being respectful to each other as well as giving themselves permission to switch off from other tasks so important learning can take place.
- Group norms making space for people to share their thoughts and experiences, privacy and confidentiality.



Highlight that today is an overview of the NDIS and you won't be able to give advice about specific plans.





# Developmental Delay

Every child develops differently and there is a big range of normal when it comes to development

Sometimes, compared to most other children or young people of the same age, you may see differences in a number of important areas:

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- Physical (moving, doing, and co-ordination)
- Emotional (dealing with feelings)
- Cognitive (thinking and imagining)
- Behavioural (actions and engagement)
- Social (being in relationships)

#### **Read slide**

If you'd like to know more about identifying developmental delays you might find this useful.

Hand out Understanding Development Delays: 0-5 years pamphlet. Available on DCP's website: childprotection.sa.gov.au/documents/fact-sheet/Indicators-of-Concern2.pdf



# What to do if you have some concerns

If you are concerned about the development of the child in your care, discuss this with the child's DCP case worker

The DCP case worker is responsible for arranging any assessments and interventions

You can also seek support and advice from your support worker

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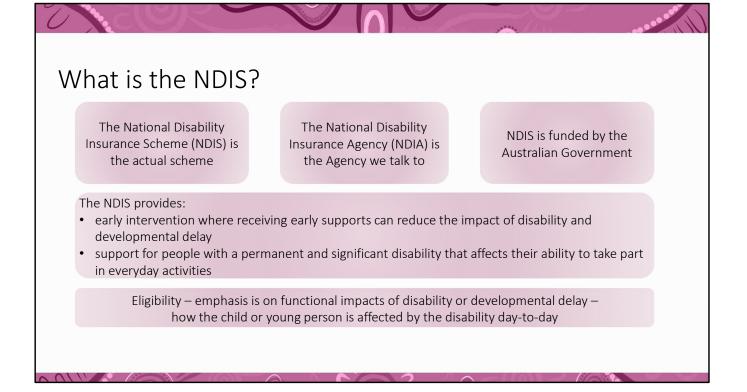
**S:** As a carer you know the child or young person you're caring for in a way that others do not and, if you have concerns about their abilities or development, you can get support with this. You can speak with the child or young person's DCP case worker who is responsible for arranging assessment of your child's developmental needs and any interventions required.

You can also speak with your support worker who can help you put together all the observations you have made that worry you into a format that the DCP case worker can understand quickly and effectively.



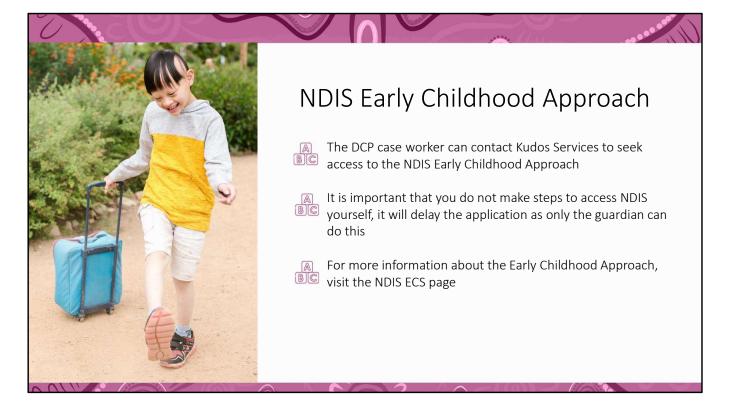
https://youtu.be/qZOjPBJiBPg provided by the NDIS (4.27 minutes).

If you are able to access the internet, show this video from the NDIS which gives a brief orientation to the scheme. If you do not have access to an internet connection or hotspot, progress to the **next slide.** 





*S:* A disability diagnosis is needed for ongoing eligibility past 6 years with developmental delay, or past 7 years with Global Developmental Delay or other early childhood disability condition.



Pause to address any questions that may arise about NDIS access for six-year-olds and under. If you find some questions which are too complex or nuanced to address in a group setting, put them in the parking lot and reassure the asker that they will be addressed by yourself or another appropriate party (like the child or young person's DCP case worker or the support worker).



### Eligibility for NDIS support Children 7 years and over

To receive NDIS funding the child or young person's disability must be:

- Lifelong
- Substantially reduce their ability to participate in everyday activities without the support of another person or assistive technology
- Not be best met through mainstream services (for example, health, justice, mental health care plan, education)
- One of the eligible conditions listed on the NDIS website. Some eligible conditions require additional evidence of functional impact

#### **Read slide**

The NDIS may request information about how the disability or developmental delay impacts on the child or young person's functioning. By this they mean:

#### Communication:

Includes being understood in spoken, written or sign language, understanding others and expressing needs and wants by gesture, speech or context appropriate to age.

#### Social interaction:

Includes making and keeping friends (or playing with other children), interacting with the community, behaving within limits accepted by others, coping with feelings and emotions in a social context. **Learning**:

Includes understanding and remembering information, learning new things, practicing and using new skills. *Mobility*:

This means the ability of a person to move around the home (crawling/walking) to undertake ordinary activities of daily living, getting in and out of bed or a chair, leaving the home, moving about in the community and performing other tasks requiring the use of limbs.

Self-care:

This means activities related to personal case, hygiene, grooming and feeding oneself, including showering, bathing, dressing, eating, toileting, grooming, caring for own health care needs.

#### Self-management:

This means the cognitive capacity to organise one's life, to plan and make decisions, and to take responsibility for oneself, including completing daily tasks, making decisions, problem solving and managing finances.

- Some functional assessments include the ABAS and Vineland and can be completed by allied health professionals. You will likely be asked to provide information to inform these assessments.
- Education and support in school is often requested by carers.

# Roles and responsibilities DCP Case Workers

- Provides consent for the child or young person to access the NDIS or an Early Childhood Support (ECS)
- Works with the carer and service providers to co-ordinate collection of eligibility evidence to support an NDIS access request
- Acts as the contact point for the child or young person for the NDIS
- Works with the planner regarding arrangements for the planning meeting and attends the planning meeting
- Ensures the carer is invited to the planning meeting
- Signs agreements with service providers for supports to be delivered to a child or young person under their NDIS plan



**S:** When a child or young person in care is identified as having significant developmental delay or disability, the Department for Child Protection (DCP) case worker is responsible for ensuring appropriate specialist disability supports are accessed for the child through the National Disability Insurance Scheme (NDIS).

The DCP case worker is the parental representative and is responsible for the NDIS access request, planning, plan implementation and review processes. They will:

**Read slide** 

# Roles and responsibilities DCP Regional Disability Consultants

Disability consultants support DCP case workers to:

- Consider the developmental or disability needs for children in care and new children entering care
- Support access requests including gathering evidence required
- Attend planning meetings and/or help with pre-planning
- Source appropriate service providers
- Understand what NDIS consider reasonable and necessary supports and whether a request for a review is indicated
- Support the transition of young people from care with the most appropriate supports



*S:* DCP has specialist regional disability consultants who work in each DCP regional office - the regional disability consultants role is to support and provide advice on gaining and implementing the disability supports to meet the young person's needs.

#### **Read slide**

# Roles and responsibilities Carers

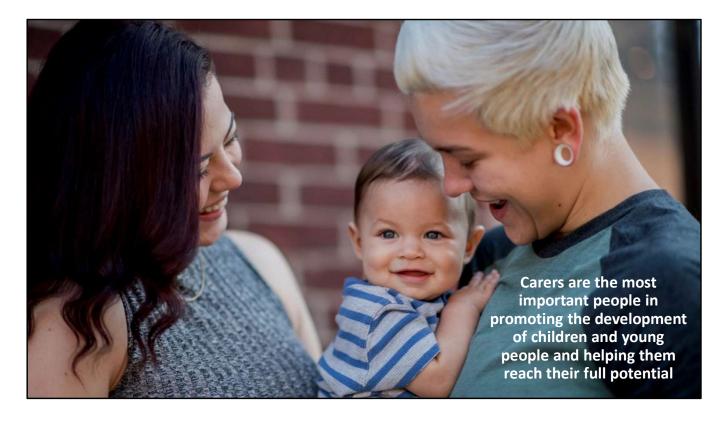
- Providing information to the DCP case worker that will assist in identifying developmental concerns and understanding the needs of the child you care for
- Supporting the development of goals for the child or young person's NDIS plan
- Attending the planning meeting with the DCP case worker
- Keeping the DCP case worker updated on any changes in the child or young person's needs
- Assisting children and young people to attend therapeutic appointments

**S:** Carers have so much valuable information about the child's unique strengths and needs. You are the key to unlocking the supports that will enable the child to develop to their own full potential. As with all children, the needs of children with disability change over time and you will be important in keeping the DCP case worker and the NDIS planner updated on what the child needs.

Carers do many things to support children and young people with disability or developmental delay. When it comes to the NDIS, your role includes:

#### **Read slide**

Pause to address any questions that may arise about division of roles in the DCP context. If you find some questions which are too complex or nuanced to address in a group setting, put them in the parking lot and reassure the asker that they will be addressed by yourself or another appropriate party (like the child or young person's DCP case worker or the carer's support worker).



*S*: As a carer, your role goes far beyond engaging with the NDIS. Your relationship with the child or young person that you are looking after shapes how they learn and grow.

From birth, children need the adults around them to meet their physical and emotional needs. When caregivers are able to provide safe and nurturing care, children can focus their attention and energy on playing, exploring, and learning all about themselves, others, and the world.

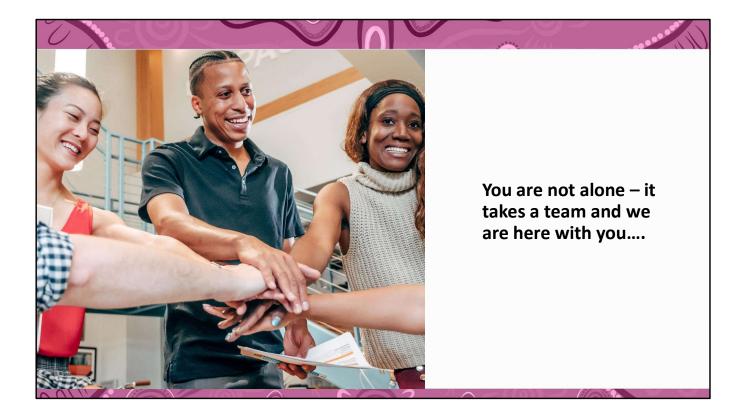
*Children also need caregivers to help them understand and organise their feelings, needs, and experiences. This helps them learn more efficiently and further supports their development.* 

In fact, the back and forth between a child and their caregiver where the child signals a need and the caregiver helps them to meet it builds the foundation that all other development happens in.

In this way, carers are the most important and influential piece of the support structure that wraps around children and young people in care.

Meeting the needs of children and young people who have experienced trauma who may also have disability or developmental delay can look quite different from the type of care that you may have expected to be providing and that is ok. Bringing an attitude of curiosity and acceptance to the situation will help you to keep your relationship strong as you start to understand what is happening for the child or young person that you look after and how you can help them to thrive.

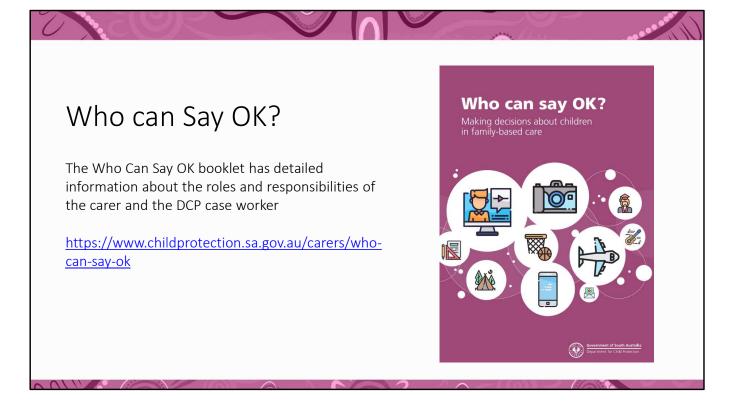
- Some of the ways that caregiving in this context can be different might include:
  - Organising and attending allied health and specialist appointments
  - Doing special activities or routines at home to help learn skills
  - Taking time to read about or watch educational videos about the child or young person's needs
  - Letting go of expectations you may have had about how the child or young person 'should' be at their age and stage of life sometimes we don't even know that we **have** these expectations until they aren't met!
  - Having special equipment or aids around your home that help the child or young person
  - Feeling different or particularly visible when you go out and about together
  - Providing information about the child or young person's behaviour and development to the rest of their care team especially as things change over time
  - Being an advocate for the child or young person in the child protection, health, and education systems
  - Changing your approach as the child or young person grows and develops
  - Contributing to long term planning and transition out of care.



**S**: Of course, as we've been learning, although carers play a very key role in supporting the development of children and young people you are not **alone** in this important work. There are a team of other people that you can rely on to do their part in order for the child or young person you are caring for to be able to grow and thrive. In addition to the folks we have already discussed today, it's likely that this team will include specialists and experts who can help you understand the child or young person's needs and experiences and how to best support them.

It's also important for carers to have a team around themselves! Caring for children who have experienced trauma and have a disability or developmental delay can be challenging. Also, we know that many carers look after multiple children with complex needs at the same time. Knowing who to go to for your own support needs, who you can talk to, and who can help with daily life stuff, is an important part of being able to stay strong over the long term. It's also important to have some strategies for maintaining and rebuilding your own resilience over time. If you'd like to explore that further please have a chat about it with your support worker who can help you take a look at who is caring for the carer.

Finally, it's important to know that while disabilities can impact on the way that children and young people develop skills and abilities that other children their age do, there is still a lot of other growth and learning that they can do in order to be their most confident and secure selves. It's important not to let a label stop us from getting to know and experience a child or young person as the individual that they are and exploring what their unique skills and abilities are going to be.



#### Hand out copies of the Who Can Say Ok? Booklet

*S*: There is information in this booklet that is specific to roles and responsibilities in relation to the NDIS.

It also contains broader information about all responsibilities relating to decision making.

If you have any other questions about who makes what decisions for the child in your care, talk to the DCP case worker or your support worker.



Break

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*S:* Every child is an individual with different needs and wants, this is the same for their NDIS plan.

- At the NDIS planning meeting, the DCP case worker, you as the carer, DCP regional disability consultant (if required) and the child (where possible and appropriate) will meet or talk over the phone with an NDIS planner to develop the child's plan. The plan is only approved by the NDIA, not DCP or the carer, and can remain current for one to three years.
- Discussions and decisions will be made regarding what is included in the child's plan and what is not. The NDIS funds reasonable and necessary supports which relate to the disability(ies) for which the child is accessing the NDIS - think in terms of what a parent would ordinarily provide for a child – these things will not be funded by the NDIS.
- Where a child is on a short-term order, where reunification is intended or where a young person will shortly be transitioning from care the DCP case worker should notify the NDIA and the NDIS plan should be designed accordingly.

- Note that the NDIS planners work for NDIA and are employed to assess and write up plans.
- Other people such as Local Area Coordinators (LACs) or Early Childhood Partner workers may also conduct Planning meetings and gather the information, but the NDIA is responsible for approving all plans.



# NDIS Planning Meetings Role of Carers

Carers provide very valuable information about how the child's disability or developmental delay affects their day to day life

Areas to consider are:

- Daily living
- Mobility/movement
- Communication
- Cognitive
- How the child forms and maintain relationships

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- Behavioural difficulties
- Goals for the child or young person

*S*: As the legal guardian, the DCP case worker organises the NDIS planning meeting making sure that you are invited to attend. They will attend the meeting with you collate all of the information about the child or young person that the NDIS might need to know. They will also provide legal consent for the child or young person to access their NDIS plan.

As a carer, you have a key role in providing information about the child or young person's disability or developmental delay and how it affects their day to day life:

- ability to undertake the tasks of daily living (eg bathing, toileting, dressing, eating meals, sleeping)
- mobility and movement skills including walking, running, and use of fine movements of the hands
- ability to communicate with others
- cognitive ability to learn and retain skill.
- ability to form and maintain relationships
- behavioural difficulties.

Work with the child or young person and the DCP case worker to consider the child's goals and aspirations for the next 12 months and how these could be supported.

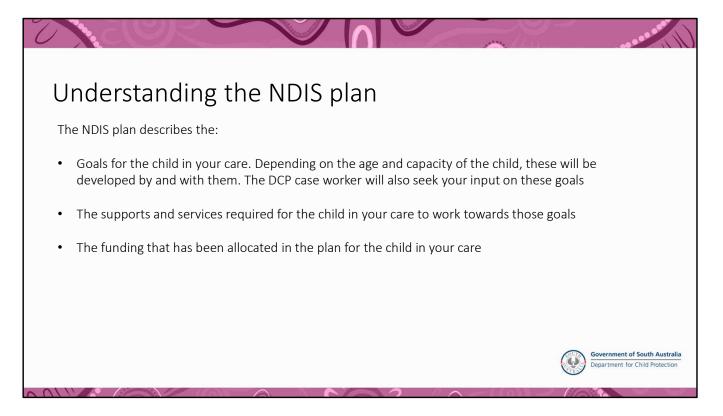
You could also provide information on:

- the services and supports the child already receives
- additional supports or services the child or young person requires to develop their skills for participation in day-to-day life at home or in the community
- *be an active part of the planning and implementation process.*



*S:* Describe how the disability impacts the child's daily functioning. For example, a child with autism who runs away will need more support at a community event, a child with autism who has trouble making friends could benefit from some social skills development.

Keep in mind no matter what language you use, the NDIS will still refer to their own operational guidelines and use reasonable and necessary criteria for deciding on what is funded.



Read slide – answer any questions that come up (we will be exploring this in more detail in the coming slides)



*S:* Reasonable and necessary is the basis on which all NDIS funding decisions are made. Supports must be deemed as:

- Value for money. Is there a similar service that can provide same support at a lower cost? Will support now reduce costs in the future?
- Effective and beneficial and current good practice. Is supported by literature? For example, we know that early therapy intervention can make a huge difference to children's future abilities
- What is reasonable to be expected of the family carer or other support? It is normal for a parent to provide substantial support to a young child? A 15-year-old?
- Are supports appropriately funded or provided through the NDIS or another service eg health fund rehab services, diagnostic reports
- It must not pose a risk to the person, others or break a Commonwealth or state law
- It must be related to a person's disability-supports required due to experiences of trauma will not be funded. Things such as swimming lessons, IPad's, trampolines, laptops will not be funded. These items are typical items children with/without disability often own
- NDIS will not cover day-to-day living costs-rent, food, entertainment, medication

• NDIS is obligated to fund above what is 'typical for a normal child' due to higher support needs as a result of their impairment eg carers may be funded for respite from the NDIS as they are unable to leave their child alone with other family members or need to provide active support overnight.



**S:** Each child or young person is a unique and will have a different range of support needs. Therefore, NDIS plans are all different and tailored for the needs of the child or young person that they relate to. The specific details of individual plans are outside of what today's workshop can cover but this is an overview of the types of things you might see.

The general types of support that can be funded by the NDIS include:

#### Read slide giving examples

For more information we encourage you to have a look at the NDIS website at <u>https://www.ndis.gov.au/participants/creating-your-plan/plan-budget-and-rules.</u>



# Choosing service providers

The DCP case worker is responsible for the implementation of the child or young person's NDIS plan in consultation and collaboration with you

Considerations include:

- The NDIS registration of the provider
- The credentials of service providers to ensure safe and effective services
- The ability of a provider to meet the child or young person's specific disability support needs
- The location and accessibility of a provider
- The availability of an Aboriginal Community Controlled NDIS provider



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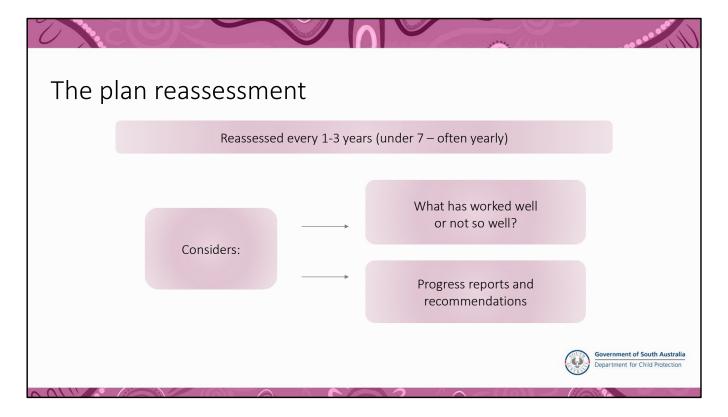
# High quality and respectful support

Children and young people receiving services through the NDIS are deserving of high quality and respectful supports. There is a Code of Conduct for NDIS support providers which includes things like:

- Providing a physically, verbally, and emotionally safe space
- Only supplying services they are qualified and trained to supply
- Being honest, clear, and realistic about the service
- Being transparent about their service delivery fees
- Respecting the child's background, beliefs, gender and sexuality

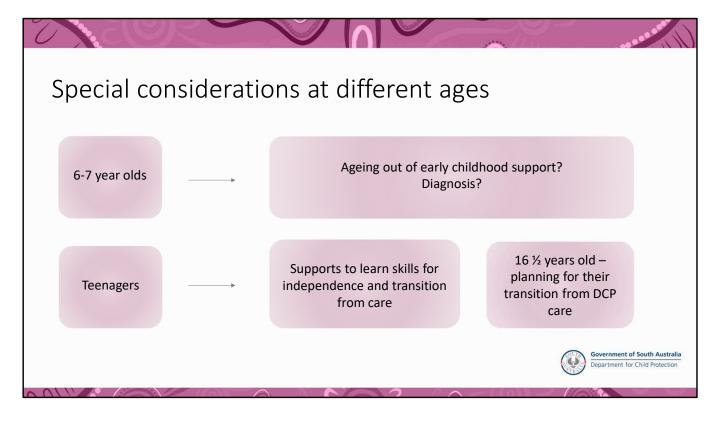
**S:** The DCP case worker will sign agreements with the support providers and be responsible for following up and maintaining these. If carers have concerns about a support provider not meeting any of these criteria, or any other worries about the service they are providing, they should bring these to the attention of the DCP case worker so that they can be addressed.

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*S*: Plans are generally reassessed every 1-3 years, this depends on the needs of the child and could happen more frequently for example when a child is reunified or moves placement.

- Plan rollovers are also possible when the plan is working well and there are no changes for the child.
- If a reassessment of a plan doesn't happen in time, the plan will auto extend for 365 days to ensure no gap in funds.
- The DCP case worker and carer should always be present at a reassessment meeting with the NDIA planner.
- Before attending the reassessment meeting, the DCP case worker it is helpful to think about:
  - which supports are helping the child and which are not
  - the strengths, interests, opportunities and challenges for the child
  - current informal, mainstream, funded and community supports the child accesses
  - the child's goals and what they want to achieve.



**S:** There are certain key points when special considerations must be undertaken according to the child or young person's age. For example, if a child has been on the NDIS Early Childhood Approach, will be turning 7 at their next birthday, and will need ongoing support it is important to make sure that assessments have been done to ensure they will be eligible for the supports to continue.

Another example is the need to focus on long term arrangements, living skills, and supported independence for young people who will be transitioning out of DCP care in the future. It is important for the DCP case worker and carers to work together around these points to support continuity of care and ongoing access to support for children and young people.

If a child has a diagnosis on developmental delay, DCP will need to seek an assessment before 6 years old.

DCP is committed to transition from care planning for young people in care from the age of 15 years, however, in regards to NDIS planning, it is recommended that assessment of the young person's support needs relevant to their disability is commenced. This is to ensure that an accurate needs assessment is completed and plans are in place prior to the young person turning 18 years.

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Internal reviews	
If you and DCP disagree with a decision made about funding in the NDIS plan an internal review can be requested within 90 days of the date of the plan	
DCP case workers discuss all reviews with the regional disability consultant to determine if a review is appropriate	3
The NDIS plan can still be used while waiting for a review	
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# Change of situation

A change of situation can be requested if a child or young person's disability support needs change

The Regional Disability Consultant must review all change of situation requests prior to submission to the NDIS

A change of situation is not appropriate if the plan has been spent too quickly and more funding is needed without any change in the young person's disability support needs

The DCP case worker can complete a *Change of Situation form* at any stage of the plan



*S*: Please note that a change of situation is not appropriate if the plan has been overspent and the team want/need more funding. There must be a genuine change in the child or young person's needs to apply or NDIS will reject it.

## Transition from care

For young people with an NDIS plan, transition planning involving the NDIA begins at 16 ½ years

A functional capacity assessment will be completed, generally by an occupational therapist

If housing is needed at 18, a *Home and Living form* will be completed in conjunction with DCP case worker, NDIS support coordinator and regional disability consultant

An updated functional capacity assessment will be done even if the young person is remaining with carers to inform their needs post 18



*S*: For a young person turning 18 and leaving DCP care is an important milestone. The regional disability consultant supporting the office can provide guidance regarding the NDIS process required

Once a young person reaches 16.5 years of age there needs to be regular discussions with DCP case worker, DCP regional disability consultant, carer, young person (if appropriate) and the NDIS specialist support coordinator. It takes months of planning. It is not something DCP or NDIS can make happen in the last few months before 18. Discussions need to occur about post 18 living arrangements.

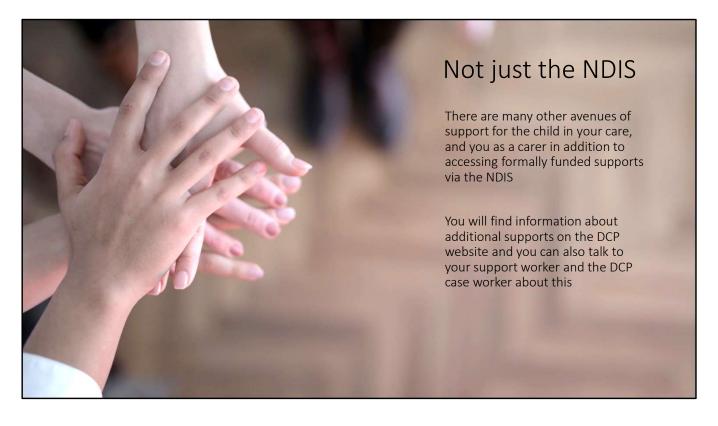


**S:** The functional capacity assessment will occur regardless of the pathway and if the young person is remaining with their carer. The purpose of a functional capacity assessment is to provide written evidence in a report stating the ability and skills of the individual and the areas of their day that still needs support and development.

- Functional assessments assists DCP and NDIA to work out the best transition pathway to help the young person achieve as much independence as possible
- The assessment is usually conducted by an occupational therapist
- The NDIS Home and Living Supporting Evidence form needs to be completed for any young person who requires accommodation supports post 18. The DCP regional disability consultant must review this form before it is submitted
- The Home and Living form needs to be completed in conjunction with the functional assessment to determine the young person's specific support needs
- The Home and Living form should be submitted to NDIA by the time the young person turns 17 years of age.

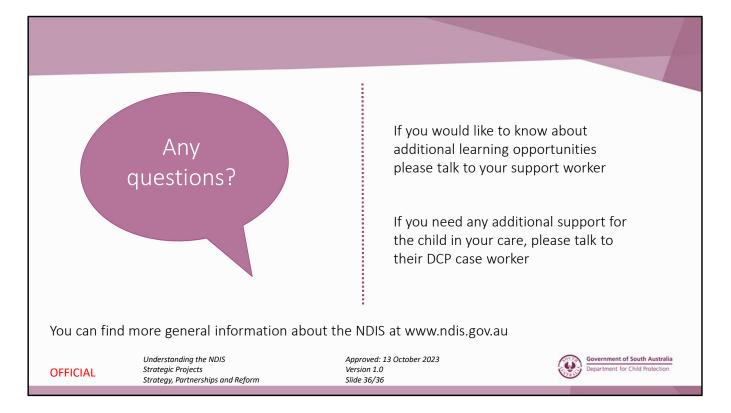
#### Housing options:

- Family Based Care young person remains with carer
- Supported Independent Living (SIL) Share house with 1-3 other young people with day time and overnight supports
- Individualised Living Options (ILO)
- Core Supports young person only requires minimum supports to live independently in their own home. SAHA; community housing; private rental.



#### List the following:

- Companion Card (carer attends activities/events free)
- Carers Allowance/Payment Under 16, Over 16
- Disability Support Pension (DSP)
- Variety the Children's Charity, Little Heroes, Lions, Kiwanis etc.
- Medicare (Chronic Disease Management Plan, Mental Health Care Plan)
- Although minimal, there are still a few services outside of NDIS (early intervention, commonwealth carers)
- The Guardian for Children and Young People
- Extended carer payment if the young person remains living in the home post 18 years.



**S:** We really hope that you have all enjoyed and got something useful out of our time together today. If anyone has any questions which haven't already been covered we'd like to invite you to share them with us now. Any questions we cannot answer today will be put in the 'parking lot' and sent back to the Disability and Development Program for a response.

We would like to thank you sincerely for the time you've given us today, for participating in our many exercises and discussions, and for your openness and willingness to share. These sessions are only as effective as the participants who attend them and we really value the knowledge and learning that you bring to the table. Before you leave we'd like to draw your attention to the session evaluation form in front of you. If you could please fill those out before you leave that would be great. We use the feedback carers share with us to improve the program over time. Thanks again for being with us today, we look forward to seeing you again for more learning in the future.

(Remain available for 10-15 minutes for follow questions and concerns from participants who don't feel able to speak up whilst in a group setting)