

Creating your plan

Quick summary: We will work with you to create your plan. We'll have a conversation with you to help us decide what supports to fund in your plan. We'll also work with you to decide who will manage your funding, and when we'll change your plan.

Note: When we say 'your plan' we mean your NDIS plan. If you're looking for information about community connections, go to <u>Our Guideline – Community Connections</u>.

If you're looking for information about your child's early connections, go to <u>Our Guideline –</u> <u>Early Connections</u>.

What's on this page?

This page covers:

- What principles do we follow to create your plan?
- What is an NDIS plan?
- How do we create your plan?
- How do we decide what supports to include in your plan?
- What are your options for managing your funding?
- How long will your plan go for?
- When will we approve your plan?
- What happens once you have your plan?
- Appendix A: Plan duration guidance

You may also be interested in:

- Applying to the NDIS
- Your plan
- <u>Changing your plan</u>
- <u>Reviewing our decisions</u>

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What principles do we follow to create your plan?

The NDIS was set up as a world first approach to disability support. It puts people with disability at the centre of decision-making, through the principles of reasonable and necessary supports and individual choice and control.

As an insurance-based scheme, we take a lifetime approach to a participant's support needs. We provide assurance to people with permanent and significant disability or developmental delay, and to people who might acquire disability or developmental delay, that they will get the support they need. Individual funding means we help participants to purchase services and supports from a competitive and consumer-driven marketplace.

What supports can we fund?

NDIS supports should complement, not replace, other supports available to you. That's why we consider:

- the things you're able to do for yourself
- support you have from others in your network, including family members, relatives, friends, local community services and mainstream government services.

One of our aims is to help maximise your independence by working with the local mainstream government and community services that help you live an ordinary life. We all do best when we're connected to our communities.

And as an active consumer, it's important you are able to shop for and access providers who meet your needs. We can help you find providers who meet your needs.

Once we've considered your circumstances, we need to follow the rules determined under the law for the NDIS in our planning decisions.¹ We fund supports that are reasonable and necessary.

This means we will only fund a support if it meets **all** of the following criteria:

- the support is related to your disability²
- the support will help you pursue your goals and aspirations³
- the support will help you undertake activities that will increase your social and economic participation⁴
- the support is value for money,⁵ which means that the costs are reasonable:
 - when compared to the benefits to be achieved, for example, whether purchasing the support is likely to reduce the cost of funding other supports in the long term⁶

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- when compared to alternative options that may provide you with the same outcome at a similar or lower cost⁷
- the support is likely to be effective and beneficial for you, having regard to good practice and evidence⁸
- the support is required to complement the informal supports you have available, by considering what is reasonable for families, carers, informal networks, and the community to provide⁹
- the support is most appropriately funded or provided by the NDIS¹⁰
- the support is not more appropriately funded by another service system, agency, person, or body, such as the education system or the health system.¹¹ We can't fund a support if it's the responsibility of another service system.

What supports don't we fund?

We do not fund a support if:12

- it is likely to **cause harm** to you or others¹³
- it is **not related** to your disability¹⁴
- it **duplicates** other supports delivered by the NDIS¹⁵
- it is considered a day-to-day living cost (for example, rent, groceries or utility costs like your water bill) that are not attributable or caused by your disability support needs¹⁶
- providing the support would be **against the law**¹⁷
- it consists of income replacement¹⁸
- it is the responsibility of other service systems to provide (for example, your state government, the education system, or the health system).¹⁹ These different systems have different responsibilities and are designed to complement each other to form a government safety net. Like all Australians, NDIS participants continue to have access to these systems. We can't fund a support if it's the responsibility of another service.

How do we manage the financial sustainability of the NDIS?

The NDIS is an insurance scheme, and one of our core functions is to manage the financial sustainability of the Scheme.²⁰

When we make decisions about the supports we fund in your plan, we must also consider our need to ensure the **financial sustainability of the NDIS**.²¹ This means we must work

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within our funding budget, set through agreements between the Australian, and State and Territory governments.

It's also important to know the NDIS is only one part of the broader National Disability Strategy that supports people living with disability. The overall success and sustainability of the National Disability Strategy relies on:

- people accessing their informal support network to get the help they need from dayto-day
- people using their personal income to pay for their day-to-day living expenses, as is expected of all Australians
- mainstream and community services being available from state and territory governments, and other federal government programs such as Medicare
- a fair distribution of NDIS supports to those who need them, provided within our funding budget.

Staying within our budget ensures the NDIS will be here to support generations of Australians and their families.

What principles do we use to create your plan?

We use the following 7 principles, to create plans that help you get the reasonable and necessary supports you need, and to make sure the Scheme is financially sustainable:

- Fair for everyone, both today and for future generations
- Fair funding to pursue your goals
- Evidence-based best practice
- Fair early investments
- Fair support across service systems
- Fair supports for your disability needs
- Fair assistance from multiple programs

Fair for everyone, both today and for future generations

While we need to consider your individual circumstances and disability needs, we also need to make consistent decisions and treat people fairly.

This means participants with similar circumstances and disability needs should receive similar amounts of supports in their plans. We also need to ensure the total cost of all participant plans are within the overall NDIS budget set by governments.

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Each support in your plan must be reasonable and necessary. They also need to be reasonable and necessary as a package of supports. We approve your whole plan, not the individual supports in your plan in isolation.²² Information about what supports we'd usually include in your plan helps guide this process.

This information also helps to guide the consistency of our decision-making process. We use it to check your overall plan and make sure all your supports make sense together. We'll check your support types and amounts will complement each other to help you fulfil an ordinary life.

We may then increase or decrease the funding in your plan based on:

- information you share with us
- any reports or other information we have
- applying the <u>NDIS funding criteria</u>.

This helps keep the system fair for everyone, and ensure we remain financially sustainable.

Fair funding to pursue your goals

Goals are important.²³ The supports we fund need to help you maximise your independence and pursue your goals.²⁴ This means your supports should help overcome any disability-specific barriers which may be stopping you from pursuing your goals.

This doesn't mean we fund all support costs associated with you pursuing your goals. Also, you may have goals and aspirations we can't fund supports for. This is because helping you pursue your goals is only one of the NDIS funding criteria, so not all supports that help you to pursue your goals will be reasonable and necessary.

Other things to know about when setting your goals:

1. Setting more goals or bigger goals doesn't mean we'll provide more funding or fund more supports. For example, if your goal is to live independently in a house with a swimming pool, we may fund home modifications that address your disability-related needs. This might be a home modification to make your bathroom accessible.

We won't fund the swimming pool because this isn't related to your disability support needs. The funding in your plan might be similar to someone else who has a goal of 'to have a more accessible bathroom'.

2. Setting a goal doesn't mean we have an obligation to fund supports that help you pursue that goal. For example, if your goal is to get a gym membership to get fit, we wouldn't usually fund this. Gym memberships are things that all people, with or without disability, might want or need.

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3. Setting a goal about an explicit type or amount of support you might want doesn't mean we have an obligation to fund that support or provide that amount of funding. For example, you may tell us your goal is 'to get a top model shower commode' and you show us the one you want costs \$4,000.

If there is a shower commode that costs \$3,000, and your occupational therapist confirms this one will meet your needs, we are more likely to fund this one instead because it is likely to deliver the same result at a lower cost. We may also look at alternatives.

Evidence-based best practice

We only fund supports that will be, or are likely to be, effective and beneficial for you, having regard to current good practice.²⁵ This means we consider if there is evidence that the support is effective and beneficial for someone with similar disability support needs.

For example, we may already have information about whether the support is widely accepted to suit someone with your disability support needs.²⁶ The primary source of evidence we rely on, and give the greatest weight to, is evidence from sources that are reliable and widely recognised. This includes published and refereed literature, and any consensus of expert opinions. If there is no evidence to show a support is reasonable and necessary,²⁷ we won't fund the support.

You can find the types of evidence we need on our website, and in Our Guidelines.

Fair early investments

Having access to capacity-building supports early in your NDIS journey is considered to be an early investment. This early investment is intended to help increase your independence and reduce your reliance on NDIS funding over time.

This is an important concept we consider when we create your plan, and again at future plan reassessments. When we reassess your plan, we reassess all the supports you require to meet your disability support needs at that time.

Over time, your capacity building supports may no longer be reasonable and necessary, in regard to any of the following:

- your current functional capacity
- the effectiveness of the capacity building supports²⁸
- value for money.²⁹

When we say functional capacity we mean the things you can and can't do for yourself.

Your overall funding amount could go down from one plan to the next. This may be because you no longer need the same type or amount of supports, such as capacity building

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supports. Also, if the capacity building investment has been successful at building your independence, then your need for other supports may also decrease. For example, as you develop your skills you may not need as many Core supports.

So other things being equal, you should expect your overall plan value to reduce over time as the benefits of capacity building are realised.

Fair support across service systems

The support you need may be the responsibility of another government service, like education or health. We don't fund these services. We need to think about the supports you should receive from these services when we determine the supports in your plan.

Fair supports for your disability needs

When we make decisions about which supports we can fund, we consider whether a support is reasonable and necessary for you and apply the <u>NDIS funding criteria</u>. Sometimes, you might ask for supports to help with impairments that were not part of your Access eligibility assessment. When this happens, we need to make sure the support will help you address the needs that arise from an impairment that meets the same eligibility requirement we consider at <u>Access</u>.

You don't need to make a new Access request if you ask for supports to help with an impairment which was not part of your Access eligibility assessment. We'll work out if you need the support to address an impairment which would meet our eligibility requirements. We may ask you to provide evidence to help us work this out. We will decide if the requested support is reasonable and necessary. We'll apply the NDIS funding criteria based on the impairments which meet our eligibility criteria.

We fund the right disability supports for your permanent impairments which meet our Access criteria. By doing this we make sure the system is fair for everyone, and the NDIS remains financially sustainable.

Fair assistance from multiple programs

NDIS funding can't duplicate other funding or supports you may receive due to your disability.

For example, you may have received a lump-sum payment or receive regular payments as a form of compensation for an accident. Or, you may be receiving ongoing supports from another program or insurance scheme, for example Work safe, Lifetime Care and Support or the Transport Accident Commission.

We don't duplicate this funding, or these supports. We may reduce the total value of your NDIS plan to account for compensation you receive, or we may not fund certain supports.

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What is an NDIS plan?

Once you're an NDIS participant, we will work with you to create your NDIS plan. You can find out more about how to become a participant in <u>Applying to the NDIS</u>.

Your NDIS plan sets out your goals and the supports that will help you pursue those goals. We create your plan based on the support needs directly related to your disability. Your plan will be just for you. You can have as many goals as you want in your plan, and they can be as long as you want.

Your plan will include information about:³⁰

- you and your living situation
- your goals, or things you want to work towards
- who supports you, for example your family, friends, community, and other government services
- any NDIS supports we fund
- how you can use your NDIS funding
- who will manage your NDIS funding
- when we'll change your plan.

This guideline is about how we make decisions when we create your plan

How do we create your plan?

We create your plan based on your individual situation and disability support needs. We'll use the information you give us about your lived experience, and the evidence you give us about how your disability impacts your day-to-day life. We will:

- get to know you and discuss your situation
- think about what supports community and other government services can provide to help you pursue your goals and live as independently as possible
- think about if you need any NDIS funded supports, and if they meet the <u>NDIS funding</u> <u>criteria</u>
- ask for further information about your support needs if we need to
- meet with you to approve your plan
- send your plan to you.

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You can ask other people to help you if you want to. For example, you can have friends, family or an advocate join any conversation we have with you. They can also help you make your own decisions about your plan.

If you need someone else to make decisions for you about your NDIS plan, we can help you set this up. This may be:

- a <u>plan nominee</u> if you're an adult
- a <u>child representative</u> if you're under 18 years old.

We'll create your plan within **21 days** after you become an NDIS participant.

What can you expect from us when we create your plan?

We'll create a plan that will:31

- be personalised and directed by you
- respect the role of family, carers and other people who are important to you
- build the capacity of families, carers, and your community to support you, where appropriate
- consider the support your friends and family provide, and the support services available to everyone in the community
- respect your right to have control over your life and make your own choices
- help you participate in the community, and help you study or find and keep a job, if you want to
- focus on choice and flexibility when it comes to your goals, needs and your supports.

What information do we look at?

The information you give us helps us decide what NDIS funded supports to include in your plan.

We look at:

- the information you gave us when you talked to us about applying to the NDIS
- any support you may get through community connections
- any reports from your doctors or allied health professionals
- other assessments you give us, for example from other government agencies or disability service providers
- other relevant information we have about your support needs

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• any other information you give us, including about your lived experience.

To learn about your life and the supports you need, we'll also look at:

- your goals
- where you live, and your living arrangements
- how you move around your home and your community
- who supports you now, like your family, friends, or service providers
- support available from community and other government services to help you learn new skills and become more independent
- what self-care support you need
- if you use or need <u>equipment, technology or devices</u>, also known as assistive technology
- what social and recreation activities you'd like to do now or in the future
- if you need help to build friendships or connect with your family
- if you'd like to work or study now or in the future
- what support you need to build your skills and do more things yourself.

We will keep your personal information safe and secure.

You can ask to change your plan at any time.

How do you set the goals in your NDIS plan?

We need to know your goals so we know how we can help you.

Your goals are your own and tell us about the things you'd like to do. You can have as many or as few goals as you want.

Your goals can be big or small, short term or long term, simple or complex. They can be about anything you want to work towards.

You may express your goals broadly, or you may have specific goals. For example, one of your goals might be to 'live independently', and another might be 'to have an accessible bathroom'.

You can set any goals you like, even if they're about things we won't fund.

How can you tell us your goals and the information about you?

The first part of your plan has information about:³²

• your daily life and living situation

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- your social, work and study life
- the people who support you
- your goals.

You, or your plan nominee or child representative, set your goals and tell us what information you want to include about your life. This is sometimes called the 'participant's statement of goals and aspirations'.³³

If you want, your family and friends who support you can also give us information about their life.

You can tell us about your goals at any time before we approve your plan. If you tell us your goals in person or over the phone, we'll write them down for you.³⁴

They are your goals, and we'll write them down in your own words. We can't change your goals or choose them for you. But we can help you choose what words to use if you want us to.

Learn more about setting your goals.

Will we always fund supports for your goals?

Your NDIS funding aims to provide you with the supports you need for your disability.

These supports may help you maximise your independence and pursue your goals. You can also get support through <u>mainstream and community services</u>, or informal supports you can get through family and friends.

The supports we fund should help you pursue your goals,³⁵ but you don't need a specific goal for every support in your plan. When we decide if a support will help you pursue your goals, we think about your whole situation.

We look at the barriers related to your disability that prevent you from pursuing your goals, and how the support will address your disability support needs.

There are some things to remember when setting goals:

- Setting more and bigger goals doesn't mean we'll fund more and bigger funded supports.
- Setting a goal doesn't mean we have an obligation to fund supports that help you pursue that goal.
- Setting a goal about an explicit type or amount of support you might want doesn't mean we have an obligation to fund that support or in that amount.

This is because helping you pursue your goals is only one of the NDIS funding criteria.³⁶ A support must meet all of the <u>NDIS funding criteria</u> to be funded under the NDIS. So not all

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supports that help you pursue your goals will be reasonable and necessary supports we can fund in your plan.

For example, you might be ready to look for work and have a goal to find a job. <u>Disability</u> <u>Employment Services</u> help people a with disability look for jobs, so we might not be able to fund this support.

But we can help you connect with a Disability Employment Service and consider what supports we could fund to help build your job skills. Learn more about <u>work and study</u> <u>supports</u>.

Learn more about how we consider your goals when we decide what supports to include in your plan.

Who can help you set your goals?

You can ask other people for help to set your goals if you want to. For example, your friends, family, or My NDIS Contact can help you.

You can also change your goals at any time, even after we approve your plan.

We'll talk with you about what your goals will mean for your NDIS plan. For example, we could talk about:

- what your goals will look like for you
- how you can work towards your goals
- when you'd like to work on your goals
- what supports you need to work towards your goals. But just because you have a goal doesn't mean we have to fund supports for it.
- where you might get supports to work towards your goals, for example community or mainstream services
- if we'll fund supports to help you work towards your goals
- how you could develop skills and talents you haven't focused on before
- what supports you need to overcome any challenges in working towards your goals
- if you'd like to include smaller goals as part of a big goal
- if you'd like to add a few steps to work towards your goals.

For example, you might choose a goal, 'I want to go on a holiday next year'. You might also choose to add steps like saving up money for your travel and hotel, towards achieving your goal.

Learn more about preparing your goals.

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How do we think about risks when we create your plan?

You have the right to decide what you do each day and to make your own life choices. For all of us, our choices come with some risks. We all make our own choices about how much risk we want to take in our lives. You should also be able to choose how much risk you want to take in your life.

We'll work with you to understand areas of risk in your life and things that may increase risk of harm to you. This includes being aware of your individual situation, the transitions in your life and recognising your own experience.

We'll help you think about supports that help you live your life the way you want to.³⁷ We balance your right to take reasonable risks in pursuing your goals, with your safety and the safety of other people.³⁸

When we create your plan we'll talk with you about how we can help you reduce risks. There are a few things we could do to reduce risk and make sure your plan meets your needs. For example, we could:

- check in with you regularly about how your plan is meeting your disability support needs and if you need any changes
- fund supports to help you build your support network, for example to help you make friends or build relationships in your community
- set up regular chats with your My NDIS Contact
- make sure any providers using restrictive practices are NDIS registered and follow the <u>NDIS Quality and Safeguards Commission</u> requirements
- let you know about how you can make a <u>complaint</u> about your service providers or about our service if there are any issues
- include funded supports to help build your skills so you can manage the funding in your plan.

The NDIS Quality and Safeguards Commission also manages <u>NDIS worker screenings</u> to check if a worker is safe for you to use. If you self-manage your funding, you can check if workers you employ are already cleared with an NDIS worker screening check. You can also ask providers, employees or contractors providing you with supports to do an NDIS worker screening check. If you're using registered providers, workers should already have an NDIS worker screening check.

We'll support you to make your own choices wherever possible. But we can't fund supports that are likely to risk harming you or someone else.³⁹

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Some of these risks might affect what we can fund in your plan, or who manages your NDIS funding. For example, there might be risks to your personal safety, your personal money, or your NDIS funding.

We think about if there are any risks with your current support arrangements. For example, there might be risks to your family or friends' health if they keep supporting you when they get older. If so, we could look at including NDIS funded supports to reduce these risks.

We also consider any risks around your safety and wellbeing. For example, there could be risks if you're socially isolated, or rely only on providers for support. Or there could be risks of physical injury to you or the people who support you.

How do we decide what supports to include in your plan?

NDIS supports are the services, items, and equipment we fund or provide under the NDIS. An NDIS support is the practical description of how we help you under the NDIS.⁴⁰

There are two types of NDIS supports:

- the general supports we provide to you
- the reasonable and necessary supports we fund in your plan.

General supports

General supports are those we provide to you, like a local area coordinator or early childhood partner.

We help you develop your plan and connect with supports and activities in your area. For example, we can help you connect with:

- **informal supports** like your friends, family, or other people you know in your community
- **community supports** that are open to everyone in the community, like sporting clubs, activity groups or libraries
- **mainstream supports** other government services like the health or education systems.

General supports are not funded through your NDIS plan.

General supports can be provided by:

- an <u>early childhood partner</u> for children younger than 9 learn more in <u>Our Guideline –</u> <u>Early connections</u>
- a <u>local area coordinator</u> for people aged 9 or older learn more in <u>Our Guideline -</u> <u>Community Connections</u>

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- <u>Remote Community Connectors</u>
- Aboriginal Disability Liaison Officers
- community organisations through the Department of Social Services Information, Linkages and Capacity Building program.

We can provide these general supports to everyone with a disability, including people who are not NDIS participants.⁴¹

Reasonable and necessary supports

Reasonable and necessary supports are the disability supports we fund in your plan. You can use this funding to buy supports from service providers.

All NDIS supports funded in your plan need to meet the <u>NDIS funding criteria</u>. For example, they need to directly relate to your disability, be value for money, and effective and beneficial.

We also consider how your supports will work together as a package to address your disability support needs, or to achieve an outcome. The supports we fund must be reasonable and necessary individually, but they must also be reasonable and necessary as a package of supports.⁴²

If you need a new support, which now means your overall package of supports doesn't meet the NDIS funding criteria anymore, we may either:

- not include the new support in your plan
- include the new support in your plan, but also reduce the other supports in your plan.

For example, a home modification may reduce your need for other supports. We'll need to take any planned home modification into account when we think about what other supports you need. For example, you might need less supports for care at home.

We look at all the information we have when we decide what supports to include in your plan.

Check out <u>Our Guideline – Reasonable and necessary supports</u> to learn how we decide what supports to include in your plan, and how we describe them.

We also consider our <u>Participant Service Charter</u> and <u>what you can expect from us when we</u> <u>create your plan.</u>

We have detailed information on how we make decisions about different types of supports. Learn more about supports we can fund.

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How we describe the supports in your plan

We divide your supports into 4 different budgets:

• Core supports

These supports help you with everyday activities, like helping you to take part in activities in the community. This budget is mostly flexible so you can use funding from one support category to pay for something in another support category.

• Capacity building supports

These supports help you build your skills and maximise your independence, and reduce the need for the same level of support in the future. Your progress and outcomes from these supports will be shared at each plan reassessment. Capacity building supports are stated so you won't be able to use funding from one support category to pay for something in another support category.

Capital supports

These supports include high cost assistive technology, equipment, vehicle modifications, home modifications and specialist disability accommodation. Capital supports are stated. You can only use this funding to buy approved individual supports in this support category.

• Recurring supports

These supports are paid by us on a regular basis, so you don't need to claim for these. Your funding for recurring supports will be paid regularly to your nominated bank account. This funding is not included anywhere else in your budget and includes mainly transport supports.

Each budget is divided into a number of support categories. Support categories have more detail about what supports you can buy with your funding. We can describe the support categories in your plan as one of the following:

- **Flexible**: Under the law for the NDIS, this is when we describe the support generally. Most support categories are flexible so you have greater flexibility over what disability supports you can buy within the flexible support categories.⁴³ When we describe your support categories as flexible, you can usually choose what supports you buy within the descriptions for each support category.
- **Stated**: Under the law for the NDIS, this is when we describe the supports in the support category specifically. It means you must buy the support in the way we have described in your plan.⁴⁴ We'll be clear when we describe a support category as stated in your plan.

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We describe most support categories as flexible when we can. You have greater flexibility over the support you can buy in your flexible budgets. When support categories are described as stated, you have less flexibility.

Some stated budgets are more specific than others. More specific budgets have less items you can spend your funding on.

Your Core supports budget is the most flexible. You can usually use your funding across all the support categories in the Core supports budget if:

- we described the supports as flexible
- you have the same plan management options for all your Core supports.

Learn more about the support budgets and support categories in your plan.

We also consider our <u>Participant Service Charter</u> and <u>what you can expect from us</u> when we create your plan.

We look at all the information we have when we decide what supports to include in your plan.

Check out <u>Our Guideline – Reasonable and necessary supports</u> for how we decide what supports to include in your plan and how we describe them.

What if we need more information?

Sometimes we might ask for more information.

We can ask you to:

- give us more information that we need to approve your plan⁴⁵
- get an assessment of your support needs, usually from an allied health professional, and send us the report⁴⁶
- get a medical, psychiatric, or psychological examination and send us the report.⁴⁷

For example, we might need more information if you have complex care needs. We could ask you to get an assessment from an occupational therapist. This will help us understand your support needs at home and in the community. It also helps us work out what supports to fund in your plan.

We can also ask someone else to give us information we need to create and approve your plan.⁴⁸ For example, we can ask your doctor, or the people who support you, to give us information.

When we ask for more information or to get an assessment, we'll tell you:

• what you need to do

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- what information we need
- how you can send us the information
- when you need to give us the information.

We must give you a reasonable opportunity, and a reasonable amount of time, to give us this information.⁴⁹ The sooner you can give us the information, the sooner we can create and approve your plan.

Your plan will include funding for any assessments or examinations we ask for. If we need independent information about you, we avoid any conflicts of interest as much as possible. This means we usually won't choose an assessor you know.

We only ask for an assessment or examination if:

- it will help us create your plan
- we don't already have the information
- the benefits outweigh the time and cost.

You don't have to give us this information or get these assessments. But without them, we might not have enough information to understand and approve the supports you need.

Sometimes, we might need to approve your plan before you give us this information.⁵⁰ We could then change your plan once you have the assessments and reports for other supports, such as high cost assistive technology.

Learn more about changing your plan.

What are your options for managing your funding?

You have three options for how you can manage the funding in your plan.⁵¹

- <u>Self-managed</u>: you, or your plan nominee or child representative, manage the funding and pay your providers.
- <u>Agency-managed</u>: we manage the funding and pay your providers.
- A <u>registered plan manager</u> manages the funding and pays your providers.

You can also choose a mix of these options. For example, you might like to manage some of the funding yourself, and we'll manage the rest.

There are different benefits for each plan management option.

Self-management gives you the most flexibility. You can choose any provider and pay them more than the <u>NDIS Pricing Arrangements and Price Limits</u>.

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Using a registered plan manager provides you with support and assistance to manage your funding.

Having your funding Agency-managed means you'll have less things to do when it comes to managing your funding.

You might want to manage every decision when it comes to your NDIS funding and the supports you receive. Or you may want someone to help you manage some or all of your funding.

Whether your funding is managed by you, us, or a registered plan manager, managing NDIS funding means:⁵²

- buying the supports in your plan, including paying taxes
- receiving and managing your NDIS funding, including paying for supports on time
- keeping track of what you buy with your funding, including keeping receipts and invoices
- spending your funding according to your plan.⁵³

We're committed to helping you have more choice and control when it comes to managing your funding, if that's what you want.

We'll talk to you about what you want and what suits you when it comes to managing your funding.

We'll talk more about the different plan management options in the following sections.

Your plan will say who manages your NDIS funding.54

Learn more about ways to manage the funding in your plan.

There are a few other things to remember when you choose who manages your funding:

- You must use <u>NDIS-registered providers⁵⁵ if your funding is Agency-managed</u>. If you self-manage your funding or use a registered plan manager, you can use either NDIS-registered providers or unregistered providers.
- If your funding is Agency-managed or managed by a registered plan manager, your providers or your plan manager can't claim more than the <u>NDIS Pricing Arrangements</u> and <u>Price Limits</u>. If you self-manage your funding, you can pay more than the <u>NDIS</u> <u>Pricing Arrangements and Price Limits</u>, as long as you don't spend more than the total funding for the support in your plan.
- If you use a registered plan manager to manage your funding, we'll always include funding in your plan to cover plan-management costs.

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How do we decide who manages your funding?

We'll ask you who you want to manage your funding. We'll discuss strategies to help you do this the way you want to. We'll let you know what your plan management options will mean for you.

You can also ask your friends or family for advice.

If you're under 18, your <u>child representative</u> can choose how to manage your plan funding.⁵⁶

If you want to self-manage your funding or use a registered plan manager, we'll agree to your request, unless:⁵⁷

- you want to self-manage the funding but that would be an <u>unreasonable risk to you</u>
- you already have a <u>plan nominee</u>, in which case we'll talk to your nominee about your plan management options
- your plan nominee wants to self-manage your funding but that would be an unreasonable risk to you⁵⁸
- you want to self-manage the funding but you, or your plan nominee or child representative, are <u>bankrupt or insolvent under administration</u>
- you want a registered plan manager to manage your funding but that would be an <u>unreasonable risk to you</u>
- it's for <u>in-kind supports</u>, or <u>cross-billing payments</u> for younger people in residential aged care.

If we don't agree to your request, we'll let you know our decision and explain our reasons. We'll talk to you about the risks, and if there are ways we can help you <u>manage the risks</u> in the future.

If you're not happy with the decision we make, you can ask for a review of our decision.

Learn more about requesting a review of decisions we make.

How can you change how you manage the funding in your plan?

You can ask us to change how you manage your plan at any time. You might want more control of your funding. Or there may be a change in your situation which may mean you need to manage your funding differently for a period of time. There are no restrictions on how often you can ask to change your plan management.

If you want to change how you manage your funding, you'll need to ask us to change your plan.⁵⁹ If this is the only change you want, we may be able to vary your plan without completing a full plan reassessment. Learn more about <u>changing your plan</u>.

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What does it mean to self-manage your funding?

We're committed to helping you manage your own funding if that's what you want to do. Managing your own funding can give you more choice and control over how the funding in your plan is used.

Self-managing your funding means you'll have the choice to decide what supports you buy in line with your plan. You can decide who provides these supports, and how they are delivered. You can also negotiate costs above or below the <u>NDIS Pricing Arrangements and</u> <u>Price Limits</u>. This can help you arrange your supports in a way that gives you the best value.

You'll also be responsible for receiving your funding, arranging your supports and paying your providers on time. You'll need to keep records of invoices and receipts for 5 years, and meet your obligation as an employer if you choose to <u>employ staff directly</u>.

You might want to self-manage only a part of your funding. This can be a good way to develop your skills, and help you self-manage more of your funding in the future if you want to.

How can you learn how to self-manage your funding?

You might want to learn or improve your skills to help you manage your NDIS funding. For example, you might want to build your skills to:

- budget and keep records of your purchases
- choose your supports and get the most out of your plan
- claim your NDIS funding, pay providers, and make service agreements.

You can check out our <u>guide to self-management</u>, and learn more about <u>self-managing</u> and <u>how to claim from your plan</u> on the NDIS website.

If you have enough money available in your Core supports budget, you can use this flexibly to help you learn how to self-manage. For example, you might buy book-keeping services to help with payroll for staff you employ. Or you might buy an online training package to help with things like learning to budget and keeping records.

If you need support to build your skills to manage your funding, we might be able to fund support. If it meets the <u>NDIS funding criteria</u> we can include funding in your plan for capacity building and training in self-management. Talk to your My NDIS Contact about this.

You might use this funding to get your support coordinator or plan manager to help build your skills. You might choose to use the funding on training with another organisation. As you build your capacity in self-managing, you're likely to need less of this support in the future.

We can also answer questions about self-management and help you problem-solve when you start out.

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We'll talk to you about whether there are any <u>mainstream and community supports</u> which could support you. These are the supports you get outside the NDIS, and are available to everyone, whether or not they have a disability. Supports outside of the NDIS can help you build your skills to manage your own finances and learn about self-management.

You might speak with your informal supports, and other participants who self-manage to learn more about self-management. Community supports can help connect you to important and practical information about self-management. You'll need to decide if information from outside the NDIS is reliable and if you want to use it.

We know you might be nervous about self-managing funds. We understand making mistakes can be an important part of learning to self-manage, and sometimes things can go wrong. If you have any issues, you can always <u>contact us</u> and we'll work with you to fix them.

Self-management and NDIS registered providers

If you self-manage your funding or use a registered plan manager, you can generally use any provider. But you must use an <u>NDIS-registered provider</u> if they provide:

- specialist disability accommodation
- behaviour support
- supports where the use of restrictive practices occur or are likely to occur

Sometimes we might also say in your plan which provider you need to use.

A registered provider meets the <u>NDIS quality and safety standards</u>. Workers with registered providers also undergo an <u>NDIS worker screening check</u> to make sure a worker is safe for you to use.

If you choose a provider that isn't registered, you'll need to make sure they have the right qualifications, training, and safety checks. You can ask providers, employees or contractors providing you with supports to do an NDIS worker screening check.

Self-management and NDIS Pricing Arrangements and Price Limits

If you self-manage your funding, you can agree to pay more or less than the <u>NDIS Pricing</u> <u>Arrangements and Price Limits</u>. But you always need to make sure you have enough funding in your plan to last for the whole plan period.

When can't you self-manage your funding?

You, or your plan nominee or child representative, can self-manage your funding unless:⁶⁰

- you, or your plan nominee or child representative, are currently <u>bankrupt or insolvent</u> <u>under administration</u>
- there's an <u>unreasonable risk</u> if you self-manage your funding.

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Are you bankrupt or insolvent?

You can't manage your NDIS funding if you're currently insolvent under administration.⁶¹ Your plan nominee or child representative also can't manage your funding if they're insolvent under administration.⁶²

Insolvent generally means you can't pay your debts when they are due.

Your NDIS funding can't be self-managed if you, or your plan nominee or child representative:

- are currently <u>bankrupt</u> contact the <u>Australian Financial Security Authority</u> if you're not sure
- have property under the control of people you owe money to,⁶³ for example, your bank or the Australian Financial Security Authority
- have a <u>personal insolvency agreement</u> to repay money you owe, and you haven't followed the agreement⁶⁴
- have a <u>debt agreement</u> to repay money you owe.⁶⁵

This also applies if you, or your plan nominee or child representative, are an insolvent under administration in another country.

You might be able to self-manage your funding if you are no longer insolvent under administration. But we'll consider if there might be an unreasonable risk if you manage your funding.

Your plan nominee might be a company or body corporate, like a service provider or advocacy organisation. If so, they can't be insolvent either.

A company or organisation can't manage your funding if they are under <u>voluntary</u> <u>administration, liquidation, or receivership</u>.

How do we decide if there is an unreasonable risk to you?

You have the same right as all Australians to take reasonable risks in managing your money. We respect your right to take reasonable risks in self-managing your NDIS funding. But it's also important to understand any risks self-managing your funding might create for you.

In most cases, risks will be small, or can be managed. We'll work with you to address risks and support your request to self-manage your plan as much as possible. But you can't self-manage your funding if this would create an unreasonable risk to you.⁶⁶ Your plan nominee or child representative also can't manage your funding if that would be an unreasonable risk to you.⁶⁷

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If we decide self-managing your funding will create a risk to you, we need to decide if this is an unreasonable risk to you. We will only decide a risk is unreasonable if there are no suitable safeguards or supports available to manage the risk of harm to you.

If you want to self-manage your funding, we'll consider if this could put you at risk. For example, we'll consider if someone might pressure you to do something.⁶⁸

When we look at the risks to you of self-managing your funding, we think about:

- how well you make decisions about your money⁶⁹. We'll look at things like how well you:
 - o manage your everyday finances
 - schedule your supports and manage things like agreements and payments with your providers
 - use peer support or similar networks
 - understand employer obligations, such as when employing staff and considering health and safety issues
- if you have the capacity to manage finances⁷⁰
- if you were previously bankrupt or insolvent under administration, how well you manage your money now⁷¹
- if your informal supports could help you reduce any risks, for example if they help you manage your money.⁷²

We'll talk with you about any reasons which might make self-managing difficult for you. We'll discuss if you need <u>strategies which might reduce the risk for you</u>.

How do we decide if there is possible physical, mental, legal, or financial harm to you?

When thinking about risks to you, we'll look at if there is evidence of possible physical, mental, legal or financial harm to you. Evidence of possible harm won't always mean there is an unreasonable risk to you if you want to self-manage your funding. We know it can be difficult to talk about this information. We'll only talk about it to make sure we can identify any possible risks. We can then work out together if you need help from us to manage risks.

Examples of physical harm might include if there is evidence of:

- you being injured from a reckless or intentional act, caused by you or another person, like a fracture, contusion, wound, burn or concussion
- you being physically assaulted by a carer, support person, family member or member of the community which causes serious harm or injury

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- serious unexplained injury to you while receiving NDIS supports
- you having a history of habitual or continued substance abuse within the last 12 months.

Examples of mental harm might include if there is evidence of a family member, carer, or support person:

- denying you food as 'punishment'
- threatening to harm you
- abandoning you by denying support permanently
- consistently not letting you go out and do activities
- secluding or restraining you.

An allegation of you being subject to offensive, abusive, or demeaning language by a family member, carer, or support person, may also create an unreasonable risk to you.

Examples of legal or financial harm might include if there is evidence of:

- you being financially exploited
- frequent changes in a child representative or nominee
- an appointment of a trustee or guardian to manage your money by a court or tribunal⁷³
- you, your child representative or nominee having a gambling addiction
- you, your child representative or nominee being the victim of coercion, such as being coerced to sign for a loan or power of attorney
- you, your child representative or nominee being previously insolvent under administration in the past 5 years
- deliberate misuse of, or fraud, in relation to plan funds, by you, your child representative or nominee
- you, your child representative or nominee having been involved with the criminal justice system in relation to funds management or fraud.

What supports or strategies can we use to reduce risks?

We'll talk to you about how we can support you to manage any risks with self-managing your NDIS funding. We'll think about if there are supports and strategies available that reduce the risk to you before we make a plan management decision. In many cases this means you, your plan nominee or your child representative will still be able to self-manage part, or all of your funding. We just need to make sure the risk to you is not an unreasonable risk.

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We'll consider the specific risk to you and look at suitable ways to help you manage the risk.

We can give general advice and information about self-managing your funding which might be enough to manage any risks to you. This includes information on things like employing your own staff and working with providers. If you're new to self-management, we can work with you to try and solve any problems you have. We might be able to fund a support coordinator or a registered plan manager to help you get started. Or funding for training in self-management.

Other strategies we can consider to reduce risks to you include:74

- giving you a plan with a shorter length of time
- having regular check-ins with you
- stating how a support in your plan needs to be purchased. For example, there might be only a few providers who can safely provide a very specialised support.

When we think about risks, we also think about the types of supports you want to manage. If there is an unreasonable risk for you to self-manage some supports, you might be able to manage others. You might also be able to manage some of your funding now and manage more in the future if you're ready.

For example, you may want to self-manage your funding but haven't done it before. You may be unsure how to set up your budget and pay your providers. It might be a good idea to start small. We could support you to link to a peer support network to get information from other self-managers about how they manage their payments. You might be able to start with selfmanaging the social and community participation funding in your Capacity Building budget.

At regular <u>check-ins</u> you can let us know if you need any help to self-manage your funding, or if you want to manage more of your funding. Once you're familiar with the process of paying providers and keeping records, you might be ready to self-manage other parts of your funding.

What if you have a plan nominee or child representative?

If you have a plan nominee or child representative, they may be able to manage your plan funding if it's part of their nominee arrangement. We can decide to let your plan nominee or child representative manage your plan funding, unless they're insolvent under administration or it presents an unreasonable risk to you. We consider risk in the same way as if you want to self-manage your plan funding.

If your plan nominee or child representative wants to manage your funding, we'll consider if this creates risks to you. We'll think about:

• their capacity to manage your finances

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- if any business or other interests might affect how they manage your money
- if we believe they will use your NDIS funding according to your plan
- if any safeguards or strategies in your plan could help reduce any risks to you.

We'll think about what strategies could reduce any risks of your plan nominee managing your plan funding. We'll talk to you and let you know our decision and explain our reasons.

Your plan nominee may also be able to request who manages your plan funding. They can do this if their nominee arrangement allows them to make decisions about parts of the preparation, management or changes to your plan.

Your plan nominee has to work out what you want. They need to make decisions that help your personal and social wellbeing.⁷⁵

Learn more about nominees or child representatives.

What does it mean when a registered plan manager manages your funding?

You can choose a registered plan management provider to assist and support you to manage your NDIS funding. They can buy supports on your behalf from the funding you provide them from your plan.

A plan manager can help you:

- increase your financial and plan management skills
- pay providers
- increase your choice of providers
- get NDIS plan budget reports and help you monitor your budget

If you use a registered plan manager to manage your funding, we'll always include funding in your plan to cover plan-management costs.

If your funding is managed by a registered plan manager, your providers or plan manager can't claim more than the <u>NDIS Pricing Arrangements and Price Limits</u>.

Having a registered plan manager can reduce risks involved with managing funding in your plan. But there can still be risks to you that we need to consider.

You'll still need to make sure any provider you choose provides supports that are safe and meet your needs. If there are no suitable safeguards or supports available to manage the risk of harm to you, the risk may be unreasonable.

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We respect your right to take reasonable risks in having a registered plan manager manage your NDIS funding. We'll talk to you about what might help reduce any risks with having a plan manager manage your funding.

We'll agree to a registered plan manager managing your funding unless it would be an <u>unreasonable risk</u> to you. We'll then decide if supports need to be Agency-managed.

When we think about if there is an unreasonable risk to you, we'll consider if there is evidence of possible physical, mental, legal, or financial harm to you. We consider unreasonable risk and the strategies available to reduce risk, in the same way for a registered plan manager as we do for self-managing funding.

We also consider whether a provider has delivered supports to you in a way that has caused you physical, mental, legal, or financial harm. Or, if someone might pressure you to do something.

We can help you change your registered plan manager if you need to.

What does it mean when your funding is Agency-managed?

You can choose for your funding to be Agency-managed. This means we will pay registered providers directly, from funding in your plan, for services on your behalf.

We may also decide to make parts, or all, of your funding Agency-managed when we approve your plan.⁷⁶ We'll do this if you don't choose who you want to manage your funding. Or <u>if you can't</u>, or don't want to, self-manage or use a registered plan manager for any parts of your funding.

When we decide if your funding should be Agency-managed, we think about your goals, supports and the providers you want to use. For example, if your funding is Agency-managed you'll need to use <u>NDIS registered providers</u>⁷⁷. If you prefer to use providers that aren't NDIS registered, we'll discuss your options with you. You might agree to use NDIS registered providers or consider self-managing or using a registered plan manager.

If your funding is Agency-managed, your providers can't claim more than the <u>NDIS Pricing</u> <u>Arrangements and Price Limits</u>.

What if the supports have already been paid?

In some rare cases, other government agencies have already paid for supports through funding outside your plan. These supports have already been paid for, so you won't be able to manage the funding for these supports.

These include:

• in-kind supports

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• cross-billing payments to the Department of Health and Aged Care if you're a <u>younger</u> person in residential aged care.

How long will your plan go for?

Everyone has different goals, living situations, and circumstances. So, we'll work with you to decide how long it will be before we create your next plan. This will be based on your individual situation.

We think about how long you want your plan to go for. We'll try to make the plan length what you want, where we can.

If you're not happy with how long your plan goes for, you can ask for a variation to your plan. Learn more about <u>changing your plan</u>.

Your plan will say when we must do a plan reassessment, if we haven't reassessed your plan before this.⁷⁸ This is called the 'plan reassessment due date'. We could write this as:

- a date, for example '1 January 2024'
- a circumstance or milestone, for example 'when Constantine starts school'
- both a date and a milestone, for example 'when Macey starts her new job, or 1 July 2023: whichever happens first'.

We have more information in <u>Appendix A</u> on how long we usually make your plan.

When will we give you a longer plan?

If your support needs are stable and your situation will likely stay the same, we generally give you a 3-year plan. Your plan can be up to 5 years if:

- you know how to use your NDIS plan
- your disability support needs are stable
- you have strong informal supports and living arrangements
- your work or study situation is stable.

Example

Sarah is 35 years old and has had several plans. Her previous plans worked well. She has the Core supports she needs and it's unlikely her support needs likely will change soon.

She asks for a longer plan as she knows what supports she needs. Her planner decides to approve a 5-year plan.

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When will we give you a shorter plan?

We'll only give you a shorter plan if your needs might change over the next year or two. This includes if you:

- are likely to leave the NDIS in the next 3 years, including if you were eligible for the NDIS under the early intervention requirements
- are younger than 7
- have changing support needs, such as if your disability gets worse over time
- might change your work or study in the next year or two
- don't have a strong support network, or there are risks to your safety or your personal money
- have very high support needs, or need behaviour supports
- need assessments to determine your disability support needs
- need high cost assistive technology or home modifications
- need disability-related health supports.

See <u>Appendix A</u> for when we might give you a shorter plan.

We might also give you a shorter plan if you need extra help to link in with supports. Or you might need extra help to use your funding according to your plan.

For example, we could give you a shorter plan and include funding for support coordination. A support coordinator could help you use the right amount of funding each month. When we next change your plan, we can check if you're linked in to the supports you need. And, we'll check if you're using the right amount of funding.

If you're a <u>younger person in residential aged care</u>, we usually give you a one year plan and we'll <u>check in</u> with you regularly. We'll discuss how we can help you move out of aged care if you want to, or whether your supports work for you if you want to stay. We may be able to give you a longer plan if you want one.

Remember, you can always talk to your support coordinator or My NDIS Contact if you want to move out of residential aged care.

Example

Joe is 16 and will finish school in 18 months. We give Joe a 17-month plan. He'll have the chance to set new goals before he gets his next plan.

When it's time to create his next plan, we can have another look at his supports. His next plan will include his goals and support needs after he leaves school.

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When will we approve your plan?

We'll approve your plan as soon as we reasonably can based on your situation.⁷⁹ We may take longer to approve your plan if we need you to give us more information or get an assessment.

For children younger than 7, we aim to approve your plan within 90 days after you become a participant.

If you're 7 or older, we aim to approve your first plan within 56 days after you become a participant.

What do we think about when we approve your plan?

When we approve your plan, we must:

- think about your goals⁸⁰
- consider any assessments about your support needs⁸¹
- decide that each support meets the <u>NDIS funding criteria</u>, and as a package of supports⁸²
- decide if we need to reduce the amount of funding in your plan because you can get <u>compensation</u> outside the NDIS⁸³
- consider the principle that you should manage your plan as much as you want to⁸⁴
- think about how your previous plans have worked for you, including how well they met your disability support needs.⁸⁵

We also consider the principles about plans.⁸⁶ These principles include things like:

- Your plan is just for you.
- Your plan will work alongside other supports you can get outside the NDIS, like informal, community and mainstream supports.
- Your plan should give you as much choice and independence about your life as possible.

You can read the full list of principles about plans in the <u>NDIS Act</u>.

What happens once you have your plan?

Once we approve your plan, you'll get a copy within **7 days**.⁸⁷ We'll ask how you'd like to receive your plan.

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We usually send it out by mail. You can also find it on the <u>myplace participant portal</u> and my NDIS app as soon as we approve it.

If you have a nominee or child representative, they'll get a copy too. You can also ask us to share it with other people. We can only share your plan where you ask us to. Learn more about <u>your privacy and information</u>.

Once you have a plan, you can start using it to buy your supports. Your plan officially 'starts' on the day we approve it.⁸⁸ Your My NDIS Contact or support coordinator can help you start using your plan.

We can only pay for supports you buy after your plan starts.

Your plan ends when we create a new one, or you <u>leave the NDIS</u>.⁸⁹ Your plan doesn't expire or stop, even if we haven't created a new plan by the plan reassessment date. You are never left without funding or supports.

Sometimes we'll need to suspend your plan. This usually happens when:

- you're overseas for more than 6 weeks there are some situations where we can extend the 6-week period
- <u>you don't claim compensation</u> you're entitled to after we ask you to, for example after you've sustained an injury.

Learn more about plan suspensions.

What happens during a check-in?

During your plan, we'll check in with you to see how you're going, and how your plan is working for you. We may check in with you:

- at regular intervals, for example each year
- if we think your plan might not be working for you, for example if you're using too much or too little of your supports.
- if you would like help to use the supports in your plan.

We usually talk with you about:

- how you're going with your goals
- if your plan and funding is working well for you
- if your situation has changed.

After our check-in, we may need to vary or create and approve a new plan for you. This might be because your plan is due for reassessment or because your plan doesn't meet your needs. Learn more about <u>changing your plan</u>.

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If your plan is working well for you and your supports still meet the <u>NDIS funding criteria</u>, we could give you a new plan with the same supports. Your new plan might also have less supports if there are some you no longer need. Or you might need a plan with more support.

We'll make this decision based on your support needs, the principles we follow to create your plan and the <u>NDIS funding criteria</u>.

We'll check each support is reasonable and necessary, as well as when considered as a package.

Learn more about check-ins in Our Guideline – Your plan.

Can you change your plan?

Once it's approved, your plan can be changed. We can also create a new plan if you need one.⁹⁰

If you want to change the information about you and your goals, we can change your plan to include this.⁹¹ This new plan will have the new statement about you and your goals. It'll have the same supports.⁹²

You can also request a change to your plan at any time. Please get in contact with your My NDIS Contact or support coordinator if you'd like to request one. We also have <u>a form you</u> <u>can complete</u>.

Learn more about changing your plan.

What if you don't agree with your plan?

If you're not happy with your plan, you should talk to your My NDIS Contact.

They may be able to explain the decision, clarify how you can use the funding, or help you fix any problems.

It's a good idea to do this soon after you get your plan.

We'll give you written reasons on why we made the decision. <u>Contact us</u> if you'd like to discuss the reasons for our decision.

If you don't agree with our decision to approve your plan, you can ask for an internal review. Your My NDIS Contact or support coordinator can help you ask for an internal review. We also have <u>a form you can complete</u>.

Having an internal review means someone who wasn't involved in creating your plan will review our decision to approve your plan. They'll consider if we made the right decision under the laws for the NDIS. An internal review is different to a change or plan reassessment after a check-in or when your situation changes.

Once you get your plan, you have 3 months to ask for an internal review.93

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Learn more about reviewing our decisions.

Appendix A: Plan duration guidance

Below is a guide on how long we usually make your plan before we must reassess it. When we decide the plan reassessment date, we always consider:

- how long you want your plan to go for before we change your plan
- your current situation.

For children younger than 7, we recommend a plan length of one year. This is due to the major changes in early childhood. Sometimes, we can do a plan for up to 3 years for young children, if it is better aligned with important transition points and milestones. Learn more in <u>Our Guideline – Early childhood approach</u>.

During your plan, we'll check in with you to see how you're going, and how your plan is working for you. Remember you can ask to change your plan at any time.

Plan duration criteria	Recommended plan duration Aged 7 and older	Recommended plan duration Younger than 7
Your living situation and support needs are stable.	3-5 years	1-2 years
You are in an unstable living situation, for example if you are homeless or in temporary accommodation.	1 year	1 year
You are likely to leave the NDIS in the next year. For example, if you were eligible for the NDIS through the early intervention requirements., You may have built your skills, or still need to finish some skill development.	1 year	1 year
You might need a 1 year plan if you still need to finish your skill development		
You need more than \$25,000 per year in Capacity Building supports.	Not applicable	1 year
You need more than \$15,000 per year in Capacity Building supports	1 year	Not applicable

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Plan duration criteria	Recommended plan duration Aged 7 and older	Recommended plan duration Younger than 7
You have used less than 20% of your NDIS funding in your current plan.	1 year	1 year
You currently receive compensation or may be eligible for compensation.	1 year	1 year
You are a younger person in residential aged care aged under 65, or Indigenous and under 50, and you:	1 year	Not applicable
 have a goal to change your living situation or move home 		
 only have cross-billing fees, or have additional aged care related fees that are likely to change 		
 are living in, at risk of entering, or transitioning out of an aged care facility. 		
You live in residential aged care and are 65 years or older, or you are Indigenous and aged 50 years or older, and you:	2 years	Not applicable
want a 2 year plan		
 only have cross-billing fees in your plan 		
have stable support needs and circumstances		
 are using the right amount of funding in your plan 		
 don't have a goal to explore alternate housing goals. 		

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Plan duration criteria	Recommended plan duration Aged 7 and older	Recommended plan duration Younger than 7
You need disability-related health supports and:	1 year	1 year
• your health support needs are unstable		
 your function is expected to change in the next year 		
 we ask you to get an assessment so we can understand your support needs. 		
You need behavioural support.	1 year	1 year
Your plan will include in-kind supports.	1 year	1 year

Reference list

- ³ NDIS Act s 34(1)(a).
- ⁴ NDIS Act s 34(1)(b).
- ⁵ NDIS Act s 34(1)(c).
- ⁶ NDIS (Supports for Participants) Rules r 3.1(c).
- ⁷ NDIS Act s 34(1)(c); NDIS (Supports for Participants) Rules r 3.1(a).
- ⁸ NDIS Act s 34(1)(d).
- ⁹ NDIS Act s 34(1)(e).
- ¹⁰ NDIS Act s 34(1)(f).
- ¹¹ NDIS Act s 34(1)(f).
- ¹² NDIS (Supports for Participants) Rules part 5.
- ¹³ NDIS (Supports for Participants) Rules r 5.1(a).
- ¹⁴ NDIS (Supports for Participants) Rules r 5.1(b).
- ¹⁵ NDIS (Supports for Participants) Rules r 5.1(c).
- ¹⁶ NDIS (Supports for Participants) Rules r 5.1(d).
- ¹⁷ NDIS (Supports for Participants) Rules r 5.3(a). ¹⁸ NDIS (Supports for Participants) Rules r 5.3(b).
- ¹⁹ NDIS Act s 34(1)(f).
- ²⁰ NDIS Act s 118(1)(b).
- ²¹ NDIS Act s 4(17)(b).
- ²² NDIS Act s 33(2).

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¹ NDIS Act and delegated legislation made under the NDIS Act, especially NDIS (Supports for Participants) Rules and NDIS (Plan Management) Rules.

² NDIS (Supports for Participants) Rules r 5.1(b).



²³ NDIS Act s 33(5)(a). ²⁴ NDIS Act s 34(1)(a). ²⁵ NDIS Act s 34(1)(d). ²⁶ NDIS (Supports for Participants) Rules r 4.1(d). ²⁷ NDIS Act s 34(1). ²⁸ NDIS Act s34(1)(d); NDIS (Supports for Participants) Rules, r 3.2-3.3. ²⁹ NDIS Act s34(1)(d); NDIS (Supports for Participants) Rules, r 3.2-3.3. ³⁰ NDIS Act s 33. ³¹ NDIS Act s 31. ³² NDIS Act s 33(1). ³³ NDIS Act s 33(1). ³⁴ NDIS Act s 33(8). ³⁵ NDIS Act s 34(1)(a). ³⁶ NDIS Act s 34(1)(a). ³⁷ NDIS Act s 4(4). ³⁸ NDIS Act s 118(1)(a)(v). ³⁹ NDIS (Supports for Participants) Rules r 5.1(a). ⁴⁰ McGarrigle v National Disability Insurance Agency (2017) 157 ALD 520 at [88]. ⁴¹ NDIS Act s 13. ⁴² NDIS (Supports for Participants) Rules r 2.4; NDIS Act s 33(5)(c) ⁴³ NDIS Act s 33(3); NDIS (Plan Management) Rules r 6.2. ⁴⁴ NDIS Act s 33(3); (NDIS (Plan Management) Rules r 6.3. ⁴⁵ NDIS Act s 36(2)(a). ⁴⁶ NDIS Act s 36(2)(b)(i). 47 NDIS Act s 36(2)(b)(ii). 48 NDIS Act s 36(2)(a). 49 NDIS Act s 36(3). ⁵⁰ NDIS Act s 36(3). ⁵¹ NDIS Act s 42(2). ⁵² NDIS Act s 42(1). 53 NDIS Act s 46(1). ⁵⁴ NDIS Act ss 33(2)(d); 42(2). 55 NDIS Act s 33(6). 56 NDIS Act s 74(2). ⁵⁷ NDIS Act ss 43(2), 44. ⁵⁸ NDIS Act s 43(6)(e). 59 NDIS Act s 47A 60 NDIS Act 43(2). ⁶¹ NDIS Act s 43(3)(c). 62 NDIS Act ss 43(6)(d), 74(4)(a). ⁶³ Bankruptcy Act 1966 (Cth) s 50, pt X div 2. ⁶⁴ Bankruptcy Act 1966 (Cth) pt X. 65 Bankruptcy Act 1966 (Cth) pt IX. 66 NDIS Act s 43(3)(d). 67 NDIS Act ss 43(6)(e), 74(4)(b)(i) 68 NDIS (Plan Management) Rules rr 3.8(a)-(b). 69 NDIS (Plan Management) Rules rr 3.8(c)-(d). ⁷⁰ NDIS (Plan Management) Rules r 3.8(d). ⁷¹ NDIS (Plan Management) Rules r 3.8(d).

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⁷² NDIS (Plan Management) Rules r 3.8(f). ⁷³ NDIS (Plan Management) Rules r 3.8(e). ⁷⁴ NDIS (Plan Management) Rules rr 3.8(f)(ii), 3.9. ⁷⁵ NDIS Act s 80(1); NDIS (Nominees) Rules rr 5.3-5.6. ⁷⁶ NDIS Act s 43(3)(4). 77 NDIS Act s 33(6). ⁷⁸ NDIS Act s 33(2)(c). ⁷⁹ NDIS Act s 33(4). ⁸⁰ NDIS Act s 33(5)(a). ⁸¹ NDIS Act s 33(5)(b). ⁸² NDIS Act, ss 33(5)(c), 34, NDIS (Supports for Participants) Rules. ⁸³ NDIS Act, s 33(5(d), NDIS (Supports for Participants – Accounting for Compensation) Rules. ⁸⁴ NDIS Act, s 33(5)(e). ⁸⁵ NDIS Act, s 33(5)(f), ⁸⁶ NDIS Act s 31. ⁸⁷ NDIS Act s 38. 88 NDIS Act s 37(1). ⁸⁹ NDIS Act s 37(3). ⁹⁰ NDIS Act s 37(2). ⁹¹ NDIS Act s 47(1). ⁹² NDIS Act s 47(2). ⁹³ NDIS Act s 100(2).

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