Guide to Reasonable and Necessary (R & N) decisions

Example 1: Home and living – Degenerative condition

A degenerative condition is a disease or condition that gradually causes permanent loss of function. This means the things you can do change and your ability to do tasks reduces over time.

Case

Neil is 43 years old and lives with his wife and 12-year-old daughter in a home they own. Neil lives with primary progressive multiple sclerosis and has high physical support needs because of his degenerative condition.

Neil's plan includes funding for up to 6 hours of support each day to help him with his self-care. Neil's motor control, memory function and bladder and bowel control are getting worse. He is experiencing problems with his balance, problem solving and concentration as well as fatigue and heat sensitivity. He needs extra help with his personal care and mobility in his home. Neil also needs help so he doesn't wander from home and to safely transfer in and out of bed and his wheelchair.

Neil's goal is to be as independent as possible in his home and community. Neil's allied health practitioners have completed an updated functional capacity assessment. The assessment shows Neil now needs more help with all his bathing, dressing and eating activities. It recommends extra NDIS support because of his neuropsychological function, like help to remember to turn off the stove. The report recommends a hoist to assist with Neil's transfers. Modifications might be needed to make sure his home is accessible now and in the future. A second person is needed to help with his transfers to make both Neil and his carers are safe.

Would we fund this?

Yes, we could fund rental of a hoist while a more permanent solution is investigated. We could also fund more personal care supports and 2 people to help with Neil's transfers while we investigate if modifications need to be made to Neil's home. This is to help him:

- remain in his home

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- function safely in his home
- maximise his independence and his functional skills.

Why would we fund this?

To decide if a NDIS support is reasonable and necessary for Neil, we think about the information he has given us against the NDIS funding criteria.

For us to fund more supports for Neil they must meet all of the NDIS funding criteria. They must:

- be related to Neil's disability
- help Neil to pursue his goals to remain at home and be more independent
- help Neil improve his social and work activities
- not generally be something that could be given by Neil's family or friends
- be, or is likely to be effective and beneficial in helping Neil
- be value for money. This means that the costs of the increased support, is reasonable when comparing the benefits it will give, against the cost of alternative supports. We think about whether the increased supports achieve the same independence and functional outcomes for Neil as alternative available supports
- be an NDIS support for Neil.

What else do we think about?

When we decide whether we should fund these NDIS supports for Neil, we think about:

- his supports as a total package. For example, equipment or assistive technology may be needed to help with his personal care
- other options like flexible equipment rental or NDIS supports to build Neil's capacity to remain in his own home
- if it's appropriate for informal supports to provide personal care
- if the extra NDIS support for Neil's personal care will make sure Neil is safe in his home
- Neil's future needs and whether he can stay in his home in the long term. We may need to fund home modifications for Neil in the future.

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The planner decides:

- providing additional personal care to Neil is not the responsibility of his family and friends. Neil's planner increases the hours of personal care to 8 hours a day
- to include funding for a 2:1 ratio of supports in his plan for 3 hours a day for safe transfers
- a package of flexible equipment rental is cost effective for Neil's immediate support needs, and as his needs change
- to include funding for an occupational therapist assessment to explore whether any home modifications would support Neil to remain in his home in the future
- to schedule regular check-ins with Neil to make sure his current plan has the right NDIS supports as his needs change.

When we create a plan, we must think about NDIS supports as a total package of supports. To help us do this, we use the principles we follow to create your plan.

For more information, refer to:

- Our Guideline – Reasonable and necessary supports
- Our Guideline – Assistive Technology
- Our Guideline – Including Specific Types of Supports in Plans

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Example 2: 24-hour individual support

Case

Theodore is 54 years old and lives with Motor Neurone Disease (MND). MND is a condition that affects the nervous system. He shares a house with his friend, who is also an NDIS participant, and he wants to keep living there. Theodore's goal is to keep living with his friend in their home, while staying safe and maintaining his independence.

Theodore's symptoms started with mild leg weakness and over time affected his arms, breathing, speech and swallowing. He now needs help with all his daily activities and personal care. His occupational therapist reports that Theodore can no longer move independently and needs help with transfers, showering and dressing. Theodore also needs help to change position every 3 hours to prevent pressure injuries.

Theodore needs regular suctioning to manage swallowing difficulties and prevent choking to keep him safe. He receives enteral feeding overnight, which must be supervised, and needs monitoring afterwards to watch for signs of reflux.

Theodore has asked for 24-hour individual support to be included in his plan so he can continue living with his friend, stay safe and maintain his quality of life and independence.

Would we fund this?

Yes. In Theodore's case we would typically fund 24-hour individual support in his plan. He needs continuous support to manage his disability-related health needs and daily tasks. Sharing supports would not be safe or reasonable in Theodore's situation.

Why would we fund this?

To decide if a NDIS support is reasonable and necessary for Theodore, we think about the information he has given us against the NDIS funding criteria.

For us to fund 24-hour individual support for Theodore, it must meet all of the NDIS funding criteria. It must:

- be related to Theodore's disability
- help Theodore to pursue his goals of living with his friend and maintain his independence
- help Theodore improve his social activities and work activities
- effectively reduce the risk to the health and wellbeing of Theodore and his support workers

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- be value for money. This means that the cost of the support should be reasonable compared to the benefits and outcomes it provides, and more effective than other available options
- not generally be supports that could be given by Theodore's family or friends
- be an NDIS support for Theodore.

What else do we think about?

When we decide whether we should fund this NDIS support for Theodore, we also think about:

- whether sharing supports could be a risk to Theodore's safety or the safety of others
- whether Theodore displays any behaviours of concern that occur frequently and over a long period of time. These behaviours may lead to injury, the use of restrictive practices or limit his participation in daily activities and increase social exclusion
- how quickly Theodore's support needs are changing
- whether assistive technology or other supports could help maintain his independence
- whether Theodore's disability-related health requirements need constant monitoring
- whether his condition is likely to continue to progress over the next 6 to 12 months.

Several of these considerations apply to Theodore:

- He needs continuous line-of-sight support for suctioning and monitoring after feeding to prevent choking and aspiration. These needs are high intensity and potentially life-threatening.
- His condition is degenerative and progressing quickly, meaning his support needs are increasing and likely to continue changing.
- He has Motor Neurone Disease, which significantly impacts his ability to manage daily living and health needs independently.

We also need to make sure the in-home support we fund does not duplicate the social and community participation support we are funding too. For example, if Theodore receives 4 hours of individual support each day in the community, his 24-hour in-home support package will need to be reduced to reflect this.

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The planner decides

Based on the evidence, Theodore's planner decides that his support needs have increased due to the progression of his disability. His NDIS funding is increased to include 24-hour individual support. This funding is included in his Core budget across both assistance with daily living budget and his assistance with social and community participation budget. The planner sets regular check-ins to make sure Theodore's plan continues to meet his changing needs.

Theodore can continue living with his friend in their shared home, with the support he needs to stay safe and maintain his independence.

When we create a plan, we must think about NDIS supports as a total package of supports. To help us to do this we use the principles we follow to create your plan.

For more information, refer to:

- Our Guideline – Reasonable and necessary supports
- Our Guideline – Supported independent living
- Our Guideline – Assistive Technology

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