

Health Practitioners: What to include in a report for an NDIS planning meeting

About this resource:

This resource is designed for health practitioners to use in writing a report for supports for autistic children before an NDIS planning meeting.

Advice about the language to use in a report

Use the language of diagnosis, medical or health system terminology with specific examples including functional assessments and their results.

Relate these directly to the person's daily and community activities and participation using NDIS language.

See glossary on page 3.

Use your expertise as a health practitioner to

Clearly state the person's health condition and the specific impairment/s

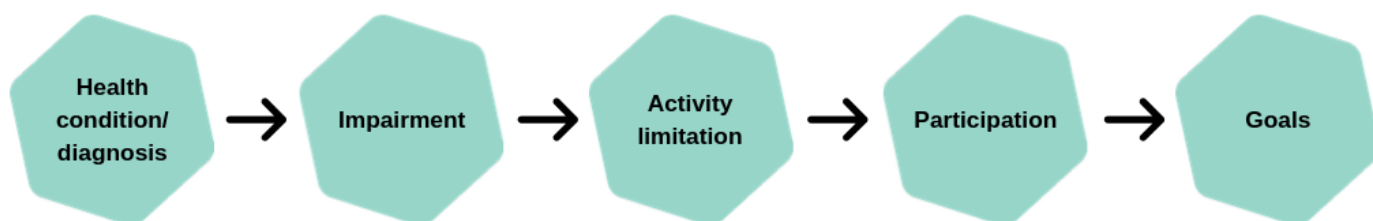
Describe the impact on the person's ability to do tasks or activities (activity limitation)

Describe the impact on the person's ability to participate in activities (participation)

Recommend specific supports and the quantity of them needed to achieve the required outcome

Link the identified support requirements to the person's goals

Model



Examples of excerpts from reports

Chris is Autistic, resulting in a permanent cognitive-communication impairment. She has difficulty with comprehension and is non-verbal. Her social functioning is impaired, limiting her social participation. She is able to respond to a limited range of hand signals and visual cards. I recommend 2 hours of speech therapy per week to assist Chris to support her goal of improving her ability to communicate with family and friends by expanding the range of hand signals used.

Another example

Rani is Autistic, with sensory processing disorder, specifically sensory discrimination disorder and sensory modulation disorder. These result in impairments to cognitive functioning, reducing his ability to interpret sensory information accurately. This limits his ability to perform daily activities and at 5 years old is unable to wash and dress himself. Rani's sensory defensiveness was assessed using PSDET and identified difficulties with loud noises and bright lights, making it problematic for him to attend school, shopping centres or other typical social and community events. I recommend a concentrated series of intensive remedial interventions with an occupational therapist of 2 hours per day for 1 week, then reinforcing sessions of 1 hour per week for the next 6 months, with reassessment using PSDET to ascertain next therapeutic interventions required, if any to meet his goal of commencing at school next year.

Amaze acknowledges the high quality resources used in developing this template: VALiD's '[10 Steps to excellent therapy reports](#)' and the NDIS's 'Writing for the NDIS' resource (no longer available). For further assistance with writing NDIS reports, please refer to the available former resource or the relevant College of Practice.

Glossary

Capacity building: NDIS funded support that enables a person to build daily care and independence skills as part of their goals.

Capital: NDIS funded equipment, assistive technology, modifications or specialist accommodation to support a person.

Core: NDIS funded support that enables a person to complete daily activities.

Formal support: support that can be funded by the NDIS, is bought from a service provider and is usually booked in advance.

Functional capacity: the level of ability a person has to do everyday activities. The NDIS requires a 'lifelong and substantially reduced functional capacity' to communicate, interact socially, learn, be mobile, or care for themselves, as a result of an impairment.

Functional impact: the impact a disability or condition has on the person's life – how much help they need performing everyday activities such as eating, dressing, communicating and accessing their community.

Functional impairment: a recognized intellectual, cognitive, neurological, sensory, physical or psychiatric condition leading to loss or damage to physical, sensory or mental function.

Informal support: support that is not NDIS funded, is provided by families, carers, friends or someone in a formal volunteer role.

Reasonable and necessary: supports that will assist the person to undertake activities to meet social and economic participation goals and aspirations. The supports must:

- Show value for money – the cost is reasonable, similar to alternate therapies, and provides sufficient benefit
- Assist the person to achieve their goals
- Show current good practice in efficacy and benefit
- Take into account expected reasonable provision of supports by families, carers, informal networks and the community
- Be appropriately funded through the NDIS, rather than other funding.

Support worker: also known as a 'paid carer' is a person who is paid to provide formal supports for daily care and activities.

Support coordinator: a person who is funded under a NDIS plan when the participant is not able to implement and coordinate their own plan.

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