

Government of **Western Australia** Department of **Health**

NDIS funded disability-related health supports and mainstream health services

Kate Bullow Spinal Outreach Service 7th October 2019

health.wa.gov.au

Acknowledgement of country

- May I first acknowledge the Wadjuk people of the Noongar nation, the traditional custodians of this land who are resilient in their custodianship
- Let us celebrate their culture today and every day, and note how privileged we are to share this country
- I pay my respects to elders: past, present and emerging

WA Department of Health (DoH)

DoH is one of the mainstream services outlined in the Bilateral Agreement between the Commonwealth and WA for a transition to a National Disability Insurance Scheme (2017).

DoH is:

- Monitoring the impact of NDIS transition
- Planning for services that are transitioning
- Participating in state and national committees relevant to health and NDIS
- Raising policy and patient issues

Clinical Excellence Division – lead division Chief Allied Health Office – lead directorate

A changing system of supports for people with disabilities

State funded programs devolving to NDIS model

Home and Community Care (HACC)

Disability Services Commission accommodation and services funding

Community Aids and Equipment Program (CAEP)

Silver Chain Community Nursing NDIS supports to include disability-related health care supports

Dysphagia Diabetes management Continence Wound and pressure care Respiratory Nutrition Podiatry and foot care Epilepsy

Defining Health and NDIS responsibilities - 2015

Applied principals to determine the responsibilities of NDIS and other services (APTOS)

Health system	NDIS
Diagnosis, early intervention and treatment of health conditions, including ongoing or chronic health conditions	Supports required due to the impact of impairment/s on functional capacity and ability to undertake activities of daily living
Time-limited rehabilitation therapies after a recent medical or surgical treatment intervention, or acquired new disability	Active involvement in planning and transition support prior to hospital discharge
Preliminary assessment and disability diagnosis as required to determine an individual's eligibility for the NDIS	Allied health and other therapy directly related to maintaining or managing a person's functional capacity
Inpatient, outpatient, emergency, sub- acute and palliative care	Aids and equipment to enhance increased or independent functioning in the home and community.

COAG Disability Reform Council meeting June 2019

- Hospital Discharge Delay Action Plan
- Agreement on disability-related health supports able to be funded by NDIS
 - supports which had been considered to be "grey areas" such as catheter change
 - supports which have been determined to be reasonable and necessary through Administrative Appeals Tribunal cases eg insulin administration, funding of supplements
 - much work to be done to drill down to specifics for most supports

How does this work in the NDIS model of individualised funding?

- NDIS eligibility is linked to degree of and permanence of impairment (also to residency status)
- Health supports that can be funded by NDIS must be linked to the disability
- Individualised planning processes
- NDIS is not a service provider role of NDIS is to fund plans of care which are developed to be used flexibly by the person with disability over 6, 12 or 24 months through providers of their choice

Challenges for Health clinicians

- Keeping up with an emerging system
- Opportunities to ask questions and get direction on NDIS
- Providing evidence to support our patients to access the support they need
- Accessing timely support for our patients to meet clinical timeframes
- Access to NDIS plans/understanding NDIS plans
- Risk of gaps

Challenges for WA Health

- Lack of access to NDIA data
- Different price structures between health and disability
- Thin markets for provision of services
- Ability to meet service gaps

Spinal Outreach Service

- SOS is a multidisciplinary (RN, PT, OT & SW) team which provides advice and consultation support via telephone and telehealth to people living with spinal cord injury, their families and carers, and service providers
- Call us on 6152 1153!
- Follow up support to people with newly acquired disability
- Very high rate of NDIS participation
- Support needs include issues which have both health and disability components

- Catheter change was previously funded inconsistently as "capacity building" going forward will be in core supports
- Substantial increase in support for continence consumables under NDIS which has enabled access to greater choice and quality of life
- Complex wound care by Silver Chain
- Ventilator Dependent Quads (VDQ) nursing, care, machines and consumables
- Access to physiotherapy with support variable therapies funding and flexibility

Capacity Building Supports

My Capacity Building supports are intended to build my independence and reduce my need for the same level of support into the future. My progress and outcomes from these supports will be shared at each plan review.

Unlike my Core Supports budget, my Capacity Building Supports budget cannot be moved from one support category to another. Funding can only be used to purchase approved individual supports that fall within that Capacity Building category.

My Capacity Building funding can be spent in the following ways:

Capacity Building Supports	Budget
Improved daily living (CB Daily Activity)	\$12,616.50
Support to help me to achieve my goal/s of increased participation in the community and increased mobility and independence. Reports to be submitted to reportsWA@ndis.gov.au. 6 weeks prior to plan review.	
My Improved daily living funding will be: NDIA-managed and Self-managed	
Total Capacity Building Supports	\$12,616.50

My Capacity Building funding can be spent in the following ways:

Capacity Building Supports	Budget
 Improved Daily Living (CB Daily Activity) This funding includes therapy, equipment and training of use of equipment. flexible funding for therapy services: individual assessment, therapy and/ or training. Therapeutic supports to facilitate my functional improvement through adjustment, adaptation and building capacity to participate in the broader community. Therapists to: Provide any documented health or therapeutic plans that need to be implemented by the support team. Train my support team (as required) to implement therapeutic plans to meet my individual needs. Undertake assessments to monitor, record and review my progress towards my goals to remain independent and maintain my mobility and physical health. Reports to be submitted to enquiries@ndis.gov.au. 6 weeks prior to plan review or as requested. My Improved Daily Living funding will be: \$6,890.88 Self-managed 	\$6,890.88
Total Capacity Building Supports	\$6,890.88

- Difficult to ascertain what funds are available to the person – can be easier if there is a support coordinator or other provider involved
- Local Area Coordinators varying response, cannot make changes to plans
- Participants need to choose their provider;
 - limitations due to type of budget management
 - overwhelming choice vs waiting lists
 - challenges for Health staff advising on services