# Disability-related health supports

Participant case studies



The advice in this document is general only. These case studies have been designed to provide general information about how the National Disability Insurance Agency (NDIA) will make decisions related to disability-related health supports.

For further information, please discuss your situation with your Local Area Coordinator or NDIA Planner.

# **Meet John**

John is 59 years old and lives in a privately owned home with his wife.

John has a spinal cord injury and is quadriplegic. This has resulted in a complete loss of movement and sensation to the lower body and major loss of function to his upper limbs.

John currently receives funding from NDIS for a variety of disability-related supports including his wheelchair and vehicle modifications.

John has heard about the possibility that some of his health supports will now be funded under the NDIS.

John was born with diabetes which is managed via daily blood glucose testing and subcutaneous insulin injections. John's diabetes is currently quite stable.

# **Discussion**

John asks his NDIA Planner to have his diabetes medication and testing kit funded for by the NDIS.

The NDIA Planner explains that insulin is covered under the pharmaceutical benefits scheme (PBS). Testing kits are also funded through the National Diabetes Services Scheme (NDSS), so are not funded by NDIS.

The NDIA Planner explains to John that he can visit his General Practitioner to have a Medicare billed diabetic management plan written and reviewed annually, if required.

#### Outcome:

John does not receive NDIS funding for his insulin or testing kit because the insulin is a pharmaceutical support funded under the PBS and the testing kit funded under NDSS.

# Change of circumstances

During the planning session, the NDIA Planner learns that John's wife administers his diabetes medication injection several times a day.

John's wife would like to be able to attend appointments and any other daily activities, however cannot make some of these outings due to needing to administer John's medication.

The NDIA Planner determines that John's need for support with his medication is a result of his disability, is regular and is best provided by the NDIS when his wife is not available.

#### Outcome

John will receive support in administering his insulin medication from a support worker funded by the NDIS when his informal supports are not available.

# **Meet Phillipa**

Phillipa lives in Central Australia and lives at home with her grandparents; Rose and Dave and her 10 year old sister.

Phillipa is 13 years old and was born with cerebral palsy. She receives support and care from her family.

Phillipa joined the NDIS three years ago and currently receives funding for a variety of supports including her walking aids and splints, and receives regular physiotherapy and occupational therapy.

Phillipa has recently had difficulty in managing her foot care.

Phillipa has developed thick skin callouses on her feet due to her walking pattern, that are unable to be managed by her or her grandparents.

#### Discussion

Phillipa and her grandparents are having their plan review and asks the NDIA Planner about receiving funding to help with her foot care.

Through a discussion, the NDIA Planner determines that Phillipa's foot care difficulties are directly related to her disability and is best provided by the NDIS.

The NDIA Planner explains that this care would be best provided by a podiatrist.

## Outcome:

Phillipa receives foot care by a Podiatrist, as her foot care difficulties are directly related to her disability and are best provided by the NDIS.

# Change of circumstances:

A few days after the plan review meeting the NDIA Planner receives a frantic phone call from Phillipa's grandparents.

Rose and Dave explain that a few days after the plan review Phillipa collapsed and was taken to hospital in an Ambulance. The doctors are currently running tests to work out why Phillipa collapsed.

Rose and Dave ask the NDIA Planner if the NDIS can fund the costs of the ambulance and any tests.

The NDIA Planner explains that these types of supports are not best provided by the NDIS.

The NDIA Planner sends Rose and Dave e-mails with more information on who to ask regarding funding.

#### Outcome

Phillipa does not receive funding support for the Ambulance and tests, as these types of health supports should remain within the health system.

## **Meet Alec**

Alec is 31 years old and lives with his older brother named Brodie.

Alec was very active through university and represented his State in National Basketball.

Alec obtained a spinal cord injury two years ago and now uses a wheelchair for mobility.

Alec is independent in a manual wheelchair, but is now finding it difficult to manage his weight. Alec has no other health or disability conditions.

#### **Discussion**

Alec wants support with his diet, however Alec is not due for a plan review for five months so he is unsure how to access funding for this support. Alec still has some unspent funds available in his core budget of his plan.

Alec checks the NDIS website to see if he can spend his unspent funds for dietetic supports.

He sees that he can use his unspent funds to fund dietetic consultations until his next plan review.

There is no need for Alec to contact NDIS, he is now able to use his unspent funds to purchase services related to dietetic consultations, as this support is related to his disability and deemed reasonable and necessary.

### **Outcome**

Alec was able to use his unspent funds for dietetic consultations because these supports are directly related to his disability, resulting from his spinal cord injury.

He discusses his ongoing need for dietetic supports as part of his plan review.

# **Meet Thomas**

Thomas is 47 years old and lives with his three teenage children, who are 12, 14 and 17 years old. Thomas receives support from his family.

He was diagnosed with Multiple Sclerosis (MS) four years ago. Thomas has noticed a gradual decline in his function with weakness in his arms and legs.

He also has bladder incontinence which is now being managed with use of a catheter.

Thomas does not have any other disabilities or health conditions and has come to NDIA to discuss what is available to him.

#### **Discussion**

In his planning meeting, Thomas mentions to his NDIA Planner he has some bladder incontinence. Thomas explains that he has a support worker come to his house twice a week to change the catheter bag and tubing when his family are unable to.

Thomas also attends the local medical clinic every 6 weeks to have a nurse change his catheter.

NDIA Planner decides that Thomas's continence supports are regular and are directly related to his disability.

#### Outcome

Thomas receives continence supports included in his NDIS plan, as his continence needs are regular and directly related to his disability. Supports include the provision of continence consumables and nursing supports to change the catheter as needed.