

# Practice Guide - Intensive Super Intensive Participants

Guidance for Planners, LACs and delegates

## Contents

Practice Guide - Intensive/ Super-Intensive Participants .....	1
Application .....	3
Supporting information .....	3
Purpose .....	3
NDIA Stream definitions .....	4
Supported .....	4
Intensive (~ 15%).....	4
Super Intensive (~ 5%) .....	5
Overview .....	5
Background .....	6
Aims .....	7
Anticipated Outcomes of the practice guidance .....	8
Workflow.....	9
Recommended Supports – Moderate and Complex.....	12
Moderate.....	12
Complex.....	12
Reasonable & necessary supports .....	12
Recommended Supports – Behaviour Support Intervention/ 24/07 (BoC) Community High (BoC).....	13
Recommended Supports – Group Homes/ LRC Wraparound Model .....	16
Recommended Supports – Justice Interface.....	19
Working with participants who have Justice/Regulatory Body obligations: .....	19
Feedback.....	24
Version change control.....	24

# Practice Guide

## Application

- Higher Intensity (1:1 support, 24/07 Support, Community High)
- Participants with complex presentations including behaviours of concern
- Justice Participants (moderate and complex support needs)
- Determining Governance (determining jurisdictions such as Child Protection, Justice, Youth Services, Child and Family Services and Health)
- Specialist Disability Accommodation (group settings) – behaviours of concern

## Supporting information

- National Disability Insurance Scheme Act 2013
- National Disability Insurance Scheme Rules
- State and Territory Operational Plans including Working Arrangements
- Transition in-kind arrangements
- Practice Guidance – First Plans & Plan Implementation Monitoring and review
- Work Practices & Task cards – all aspects of the Participant Pathway
- Quality and Safeguards

## Purpose

The practice guidance will support regional staff through inclusion of –

- Considerations for planning, including suggested funded supports for each cohort;
- Range of questions that could be asked by planners to identify need, mainstream supports, risks and service preferences;
- Principles to guide individual service supports for participants while maintaining a consistent approach across the Agency;
- Determining the role and requirements of support coordination to implement the participant's plan;
- Defining clinical governance of the implementation of the participant's plan (determining jurisdictions such as Child Protection, Justice, Youth Services, Child and Family Services and Health)
- Identifying the expectations of the market in providing support to participants with complex needs

## Practice Guide

### NDIA Stream definitions

Trial has taught us that participants differ in their capacity to manage NDIS processes. To ensure participants receive the right support in the participant pathway the Agency has developed 'Streaming'.

Participants are streamed according to the factors that inform the level of support they need in the Pathway. There is criteria that has been developed in agreement between the State, Territories and Commonwealth government on what individual characteristics inform Streaming. For example a participant may be involved with multiple jurisdictions such as Justice, Housing and Health due to their complex needs – they would be streamed into Super-Intensive.

Note: definitions are related to effort required to participate in the Participant pathway not just complexity of functional impairment.

Participant streams are general, supported, intensive and super-intensive.

#### Supported

- s 47E(d)
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

#### Intensive (~ 15%)

- s 47E(d)
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

## Practice Guide

### Super Intensive (~ 5%)

- s 47E(d)
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

All State and Territory working arrangements include definitions and requirements for working with participants with complex support needs. The NDIA has ensured that the streaming definitions are aligned with the States and Territories definitions of complex.

### Overview

This practice guidance has been developed to support the development and implementation of plans for participants who are streamed into Intensive or Super-Intensive and who have complex support needs related to their service context and/or behaviours of concern. (Not complex health needs).

The approach detailed in this practice guidance has been developed and tested during the NDIS trial period in some regional trial sites and supports Positive Behaviour Support and Person Centred Practice. The Agency is committed to introducing consistent and individualised practice approaches across all Regions that builds on trial experience and industry best practice. It is expected that the model and practice guidance will be further developed as more participant's transition into the NDIS. Participants' plans including implementation of their mainstream, community and funded supports will inform the on-going development of the practice model. The implementation of the practice model will also be used to identify market successes and gaps and to guide further market stimulation activities.

The practice model will assist planning for the transition of participants from State and Territories to the NDIS ensuring that these participants continue to receive reasonable and necessary funded supports, which are evidence based and represent value for money and are also connected with mainstream and community supports.

# Practice Guide

## Background

The NDIA recognizes that Behaviours of Concern are the result of a person and environment interaction. Behaviours of concern may be a reaction to a range of impacts such as an (but not limited to) inappropriate or poorly matched environment, inability to communicate needs/wants or lack of understanding, low stimulation, overstimulation, boredom, frustration, trauma and/ or sadness. The communicative aspects of Behaviours of Concern may also include protest indicating that a person does not want to do something or be near someone. The health status of a participant must also be considered, as pain or ill health could be a contributing factor to behaviour. Positive behaviour support recognizes that all human behaviour, including behaviours of concern, serve a purpose.

Change cannot be achieved unless the Behaviours are observed and measured and the social and interactive elements are identified. There must be comprehensive analysis of the person's presentation and a full exploration of their environment to identify the factors that are contributing to the situation. Data collection and analysis enables the design and application of evidenced based positive behaviour support interventions that create a better future. Data collected must include the formal and informal systems, support practices and structures around a participant.

There must also be analysis of a Service Provider capability and capacity to meet the needs of participants with complex needs. Thin markets or market gaps may contribute to poorly matched participants and providers. NDIA is committed to enhancing the market through a range of stimulation activities such as (but not limited to) commissioning and investment in market capacity building. The NDIA is also committed to stabilizing current supports and applying risk management strategies to mitigate the risk of service breakdown.

Through the engagement of mainstream and community supports such as Health, Housing and Justice the NDIA also promotes a whole of community response to identify and treat systemic issues faced by participants and their supporters.

To ensure that participants can achieve a Quality of Life through well designed formal, informal, community and mainstream supports, the NDIA is committed to a holistic approach that includes (but is not limited to) -

- Assessments;
- Service and support design informed by evidence;
- Co-design of supports with the participant and their supporters;
- Connection with and access to mainstream and community supports;
- Strengthening the capability and capacity of informal supports;
- Building capacity and capability of the participant;
- Training and support for paid and unpaid supports to develop consistency in interactions and supports for the Participant;
- Training and supervision of paid staff to ensure that supports are being implemented consistently with Support Plans;

## Practice Guide

- Clinical governance – implementation of the Participant’s NDIA plan including connection with mainstream and community supports;
- Development of an environment that enhances the quality of life for the participant;
- Risk mitigation strategies that are the least restrictive option;
- Development of positive reputations for individuals who historically have been impacted by systems, labelling and stereotyping

## Aims

The development of a consistently applied NDIA practice model that supports a Positive Behaviour Support and Person Centred Practice for participants who have complex behavioural support needs will inform and develop -

- Best practice within the National Disability Insurance Scheme framework specific to individual participant’s needs;
- Planned approach to reducing liability to scheme – ensure return on investment through inclusion of capacity building supports in plans;
- Evidence based strategies – supports are beneficial, consider best practice and are based on evidence;
- Enhancement of positive risk = capacity building to increase the participants independence, social and economic participation;
- Risk mitigation strategies while reducing use of increased staff to mitigate risk);
- Service models that are not likely to cause harm to the participant or others;
- Data capture of service gaps;
- Identification of ‘best fit provider’ – match participant need and preference to providers;
- Separation of assessment, service design from service provision which achieves better outcomes through monitoring and transparency of service provision;
- Targeted market stimulation – providing increased opportunity for a range of providers to enter the market;
- Improved governance of service provision – introduce clinical governance to implement plan and monitor progress of supports;
- Systems development – the improvement of all systems involved in supporting participants;
- Measure benefit realization of the approach – this includes the financial, social and emotional benefits to participants and their supporters of implementing a planned approach.

## Practice Guide

### Anticipated Outcomes of the practice guidance

The outcomes of implementation of this practice model will be -

- More consistent decision making across NDIA regions;
- Ongoing development of positive business relationships with providers;
- Identified market gaps, market success and market failures;
- Market stimulation – increase in variety and availability of specialist providers;
- Development of National and local Strategic partnerships with jurisdictions (Public Advocates, Senior Practitioners, Justice, Health);
- Benefit realization – evidence based measurement of economic, social and emotional improvements for participants and their supporters;
- Return on Scheme Investment;
- Improved Quality of Life outcomes for participants;
- Cost reduction in plans – Scheme liability (documented cases with reduction of funded supports and increase in participant outcomes and improved Quality of Life)
- Increased data capture of successful interventions;
- Improved satisfaction level of participants with both Agency and service provision;
- Improved confidence and performance of service providers in supporting participant's to implement their plan.



# Practice Guide

## Workflow

This workflow is to be implemented in each NDIA region. It is expected that there will be supporting activities within each region such as regional coordination meetings and/ or regional implementation meetings (State/ Territory and NDIA) that will complement this practice model.

1. As detailed in the relevant State and Territory working arrangements the State or Territory will provide information regarding the participant to the NDIA (minimum data set) and to the NDIA Planner;
2. The information provided will be used solely to inform the development and implementation of the participant's plan;
3. The NDIA will ensure that they liaise with any person nominated by a State and Territory to inform the development of the plan;
4. NDIA will forward any issues or queries that cannot be resolved at the regional coordination level, as detailed in the relevant State and Territory Working Arrangement;
5. The NDIA Planner (or Agent) will complete the First Plan or plan review with the participant and their supporters. This includes completion of all forms required in the Planning or plan review process;
6. The plan developer will then consider the individual's circumstances, all available other information including (but not limited to) Assessments, Support Plans, Orders, Legacy Supports. The plan developer will place additional funded supports by line item as per the recommendations in this Practice Guidance and as detailed in the Task Card;
7. The Planner will refer to this practice guidance to inform the inclusion of additional funded supports in the participant's plan. The additional supports must be within NDIA Guidelines including the Act, the Rules, State and Territory working arrangements especially in-kind agreements;
8. The Planner will liaise with the Regional Subject Matter Expert on plans that
  - Funded supports relate to Behaviours of concern; and/or
  - Contain 'Legacy Supports' that fall outside of NDIA Operational Guidelines; and/or
  - Involve multiple jurisdictions; and/or
  - Include in-kind supports; and/or
  - Participants are identified as a risk to themselves or others.
9. The Regional Subject Matter Expert should consult with the Technical Advisory Team on all plans that include 1:1 (or greater) support and/or 24/07 support.

## Practice Guide

10. It is recommended that capacity building supports linked to Behaviour Interventions are NOT self-managed. This ensures the use of registered providers who must adhere to quality and safeguards that minimize risk to participants and others;
11. Capacity building supports linked to Behaviour Interventions and Specialist Support Coordination will be purchased as 'Stated supports' – Stated support means the supports described as STATED must be purchased by the participant in the way described in the participant's plan. This ensures the Agency and Support Coordinator are able to monitor reporting timeframes, plan expenditure patterns and outcomes for a potential reduction of 1:1 and/or higher intensity supports;
12. The plan developer will complete the 'justification' in the plan and submit for approval.
13. Once approved, the Plan Delegate will contact the Participant and Support Coordinator and handover the plan along with a letter regarding the approval and/or decline of supports. The 'Plan Handover' meeting is where the following matters related to plan implementation should be discussed:
  - Informal Supports  
Arranging and implementing their informal supports
  - Mainstream and Community Supports  
Reviewing their plan requirements
  - Coordinating their mainstream and community supports  
How the funds will be managed  
Choosing their support providers  
Entering into agreements with providers  
Delivery of supports  
Coordinating their reasonable and necessary (funded) supports  
Understanding how to use supports that have flexible funding  
Understanding how to check the funds that have been claimed and paid on the participant's plan
14. For participants that are streamed as Intensive and whose plans include Behaviour Intervention Supports, or participants who are Super-Intensive, the NDIA will require a Support Coordinator to obtain information from the current or prospective service providers to develop a service proposal outlining the Proposed Service. This will enable pro-active monitoring of plan implementation and identification of areas of success and also areas requiring attention. Depending on the complexity of the

## Practice Guide

participant's supports and interventions the proposal should include some of or all of the following -

- Model of support;
- Full costing of proposal;
- Program aims and objectives;
- Rationale around Model of Support;
- Rationale – Desired Outcome – Progress updates (expected timeframes);
- Capacity building goals – Inc. strategies, expected outcomes with specific timeframes
- Reduction of 1:1 supports over an agreed timeframe;
- Strategies for connection with mainstream and community supports;
- Risk matrix and management strategies;
- Reporting timeframes;
- Daily life tasks and skills – separation of core supports and capacity building supports
- General and Mental health supports;
- Supports for maintaining, establishing or re-establishing informal supports;
- Incident reporting – all incidents related to case are forwarded to planner;
- Clinical governance – roles and responsibilities of all parties;
- Legal considerations – Treatment Orders, Guardianship, Administration etc.
- Reportable Restrictive Interventions if applicable.

15. The participant's plan, will be monitored by the Support Coordinator, however, monitoring activities of a participant's plan may be conducted by the Actuarial team and/or through participant file reviews undertaken by the NDIA, and will vary depending on the individual's circumstances and could include any one or more of the following:

- Checking whether claims are being made;
- Checking the participant's funding is being drawn down at an appropriate rate (i.e. there is nothing to indicate that the participant is not receiving the funded supports or that they will run out of funding before the end of the plan)

16. For participants listed in (8), the Support Coordinator will ensure that NDIA receive copies of all assessments and reports related to the funded supports to ensure they are considered in any planning.

## Practice Guide

### Recommended Supports – Moderate and Complex

The recommended amounts and clusters of supports are grouped in 'moderate' or 'complex' according to Participant need. The level of additional supports applied in a participant's plan will be either at the moderate or complex level.

#### Moderate

Moderate support could be a combination of the following need:

- Risk of homelessness,
- Behaviours of concern reducing sustainability of care to be provided in the home,
- Limited engagement in social engagement due to presentation/behaviours of concern.
- Variety of providers supporting the person, yet no consistency in the strategies being used to build capacity for inclusion.

#### Complex

Complex Support requiring intensive assistance could be a combination of the above, however may require additional assistance due to:

- Extreme behaviours of concern that could require restrictive intervention.
- Lack of services willing to engage with the participant due to presenting behaviours and risk to staff/participants/community.
- Significant change of participant circumstances that will result in withdrawal of service support and need for immediate intervention.

#### Reasonable & necessary supports

Before specifying any general support, or reasonable and necessary support, in a participant's plan the delegate has to:

1. Be satisfied that all the criteria set out in s.34(1) of the NDIS Act are met in respect of each funded support before it is included in a participant's plan,
2. Ensure the support:
  - Will not cause harm to the participant or pose risk to others,
  - Is due to the effect of the disability on the participant and does not duplicate supports available from other systems,

Does not relate to day to day living costs (e.g. rent, groceries, utility fees) unless directly attributable to the impact of the disability on the participant

## Practice Guide

### Recommended Supports – Behaviour Support Intervention/ 24/07 (BoC) Community High (BoC)

A behaviour of concern, or challenging behaviour refers to any behaviour/s that causes physical harm to the participant or another person in their home or in the community. It can often result in the destruction of property, self-injurious behaviour, and engagement in unsafe social participation.

Families can have difficulty in sustaining caring responsibilities due to the potential risk of harm to the participant or other family members in the home. A participant displaying behaviours of concern may be prevented or limited to pursue social, education, economic or recreational activities.

Without appropriate Positive Behaviour Support, a participant will be restricted from participating in meaningful and inclusive activities due to the significant risk of harm and safety to self or others.

To assist the participant and their supporters to identify the ways to best support their presenting behaviours, it is recommended they be referred to a Psychologist, Occupational Therapist or suitably qualified professional for a Behaviour Support Plan Assessment. This assessment is the process of collecting historic and holistic information which identifies settings, triggers, actions and results according to the behaviours displayed. Patterns of behaviour are recorded and monitored to identify successful strategies for replacement behaviour.

The BSP (Behaviour Support Plan) will include participant goals, the actions required by persons assisting the participant, how progress and actions are measured and by whom and a date for goal achievement. The BSP will also include a range of strategies used to support the person's behaviour, including proactive skill development to build on the participant's strengths and increase their capacity to participate in more meaningful life activities.

It is during the BSP Assessment that the qualified therapist will also identify whether any additional assessments might be required. For example, if a person is displaying behaviours around 'ripping off their clothes' or 'hitting or kicking people in noisy rooms', a Sensory Assessment might be appropriate, to determine the participant's response to sensory information and process to reduce the impact it has on their daily lives.

Where there are specific strategies that require intensive support to implement in the participant's environment, training in behaviour management for family, carers and direct support networks can be provided by the Behaviour Support specialist and will be included in their NDIS plan.

Usually, the BSP requires specific intervention that can only be provided by qualified specialists, therefore the funding in the participant's plan will be referred to as a 'Stated Support'. This means that the NDIS has identified a reasonable and necessary decision that only the provider 'Stated' on the participant's plan can be used for this particular assessment.



PRACTICE GUIDE

Practice Guide

Support Item	Price per hour	Support Description	Description of Assessment	Recommended Hours
Specialist behavioural intervention support	\$192.71	Highly specialised intensive support interventions to address significantly harmful or persistent behaviours of concern. Development of behaviour support plans that temporarily use restrictive practices, with intention to minimise use of these practices.	s 47E(d) [Redacted]	s 47E(d) [Redacted]
Behaviour management plan, training in behaviour management strategies	\$175.57	Travel for behaviour therapist. Consider hours for transport to deliver behaviour support plan and perform behaviour support assessment with current therapists, care team and support providers.	s 47E(d) [Redacted]	s 47E(d) [Redacted]
Behaviour management plan, training in behaviour management strategies	\$175.57	Training for carers and others in behaviour management strategies required due to the persons disability.	s 47E(d) [Redacted]	s 47E(d) [Redacted]



## Practice Guide

Support Item	Price per hour	Support Description	Description of Assessment	Recommended Hours
Individual assessment, therapy and/or training (includes assistive technology)	\$175.57	Assessment completed by a psychologist/ occupational therapist.	§ 47E(d)	§ 47E(d)
Individual social skills development	\$55.07	Social skills development with an individual, for participation in community and social activities.	§ 47E(d)	§ 47E(d)

### Recommended Supports – Group Homes/ LRC Wraparound Model

If a participant is presenting with behaviours of Concern and lives with other people with disabilities, it is recommended that any interventions be applied in a ‘whole of house’ or ‘wrap around’ approach. This approach ensures that there is analysis of the environment and interactions of all residents and service provision, that guides the development of person centered capacity building service delivery. This aids in ‘resetting’ the environment so all participants’ essential needs are met. The application of funded supports in this manner also enables the application of the Insurance principles of Return on Investment and Value for Money.

The supports below provide a guide to providing ‘wrap-around’ behaviour support interventions. The recommended supports include environmental/ ecological assessments, communication assessments, program development, staff training and coordination that include all members of the household. This ensures that the needs of all residents can be met in their current living environment. It also aids in informing future planning and service provision by the identification of the individual participant’s needs and preferences. It also provides an opportunity to monitor the performance of the provider in reducing behaviours of concern, building capacity of residents resulting in an improved quality of life. A wrap around model also provides evidence of good practice, return on investment, market success and failure.

It is expected that the assessments, training and monitoring will be provided by a provider other than the residential service. It is expected that the support coordination (plan implementation) will be provided by a provider other than the residential service.

A group wraparound model has been identified as required where (example):

- There is currently Intensive support (high level staffing ratio’s) required in the home due to the dynamics of the environment and current model of support being implemented;
- High staff burnout within the home, resulting in escalated behaviours of the residents;
- Frequent incidents such as assaults, restraint or seclusion occurring in the house;

A request from the accommodation support provider to increase support hours/funding due to the significant risk some participants are placing on staff/individuals in the home;





Practice Guide

Support Item	Price per hour	Support Description	Description of Assessment	Recommended Hours
Specialist behavioural intervention support	\$192.72	Highly specialised intensive support interventions to address significantly harmful or persistent behaviours of concern. Development of behaviour support plans that temporarily use restrictive practices, with intention to minimise use of these practices	s 47E(d) [Redacted]	s 47E(d) [Redacted]



Practice Guide

Support Item	Price per hour	Support Description	Description of Assessment	Recommended Hours
Behaviour management plan, training in behaviour management strategies	\$175.57	Training for carers and others in behaviour management strategies required due to the persons disability.	<p>\$ 47E(d)</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p>	<p>\$ 47E(d)</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p>

## Recommended Supports – Justice Interface

### Working with participants who have Justice/Regulatory Body obligations:

- Where participant has been confirmed as eligible for NDIS
- Due to be released on parole and requires support to reengage with the community.
- Requires support to understand their regulatory obligations post release.
- May require support to identify with suitable community/mainstream accommodation.
- Adequate supports for support coordinator to assist with linking the participant into appropriate mainstream and community supports (primarily) and funded supports (where participant requires support to develop capacity)
- If a participant is eligible for the scheme and they are going to be released on parole or straight release into the community, it would be reasonable for a Support Connector/Coordinator to commence working with the participant up to 6 weeks prior to release.
- If a participant is eligible, however does not have a plan, the Support Connector/Coordinator will be 'reimbursed' with **s 47E(d)** applied to the participants plan to assist the participant with their linkages into the community (while waiting plan approval by the NDIA delegate).



Practice Guide

Support Item	Price per hour	Support Description	Funded Supports for Consideration	Consider the following hours
Assistance with accommodation and tenancy obligations	\$56.61	Support is provided to guide, prompt, or undertake activities to ensure the participant obtains/retains appropriate accommodation. May include assisting to apply for a rental tenancy or to undertake tenancy obligations.		<h1 style="text-align: center;">§ 47E(d)</h1>
Support Connection	\$56.61	Assistance to strengthen participant's abilities to coordinate supports & participate in the community. This includes resolving points of crisis, developing capacity & resilience in a participant's network & coordinating supports from a range of sources.		



Practice Guide

Support Item	Price per hour	Support Description	Funded Supports for Consideration	Consider the following hours
Coordination of supports	\$92.27	Further qualifications/experience required to strengthen a higher needs participant's ability to coordinate their supports & participate in the community. This may include resolving points of crisis, & developing resilience in the participant's network.		<h1>S 47E(d)</h1>
Life transition planning including mentoring, peer support and individual skill development.	\$56.61	Establishing volunteer assistance within the participant's home or community to develop skills. For instance, assistance in attending appointments, shopping, bill paying, taking part in social activities and maintaining contact with others.		
Specialist support coordination	\$175.57	Refer to: Specialist Support Coordination Recommended supports		



# Practice Guide

Support Item	Price per hour	Support Description	Funded Supports for Consideration	Consider the following hours
Individual assessment, therapy and/or training (includes assistive technology)	\$175.57	Individual training provided in the home for general life skills to increase independence.	<h1>§ 47E(d)</h1>	<h1>§ 47E(d)</h1>
Individual skills development & training, includes public transport training & support	\$42.79	Individual training provided in the home for general life skills to increase independence.		
Assistance with decision making, daily planning, budgeting	\$42.79	Provision of time limited support to assist a person to develop and maintain daily budget, including assisting in planning purchases.		

## Practice Guide

### Incarcerated – Sentenced for long term period

The NDIS will consider supports for individuals with longer custodial sentences (over 18 months) on a case by case scenario.

There may be opportunities for participant's to have their current plan 'extended' to ensure they are able to continue to access funding within their plan (where a new plan is unable to be created with the participant).

As the NDIS is a voluntary scheme, the participant may chose not to receive NDIS supports while incarcerated or when living back in the community.

Six weeks prior to the participant's release date, the participant can reengage with their Support Coordinator to complete a new NDIS Plan. Planning can be conducted face to face or via video conferencing (where technology is available).

It is anticipated the Support Coordinator will be able to liaise with the Correctional Facilities' Disability Liaison Officer to conduct the review and have support to arrange appointments or visits with the participant.

- The new NDIS plan will focus on linking the participant into appropriate mainstream and community supports and identifying the participant's goals and aspirations to successfully transition back into the community.
- It is important that Support Coordinators access individual State community and mainstream services in the first instance.
- The Support Coordinator will work with the participant to create a plan that will build their capacity to live as autonomously as they can in the community.

If a participant has been sentenced to a facility that is outside of the region, it is not seen as reasonable and necessary that a support coordinator travel long distances to maintain engagement. It is, however, reasonable for Video Conferencing or Telephone calls as required.

The participant can request that the Support Coordinator link them in with a service/support that can maintain regular connection and provide the **s 47E(d)** support to sustain informal and community connectedness.

### Incarcerated, Remand, to be released on parole with/without conditions

Where the participant has a current NDIS plan, they will be able to continue to utilise up to **s 47E(d)** per month from their Support Coordinator or preferred support person.

The intention of this support is to ensure the participant is able to:

- Sustain vulnerable family/informal support networks
- Maintain engagement with a familiar worker where there has been trust and rapport developed
- Sustain engagement with services for release into the community
- Remain engaged with participant to discuss goals and aspirations post release

## Practice Guide

- Support the participant to successfully transition back into the community

There may also be situations where a participant has been identified as requiring assessments to be completed prior to their reengagement into the community. The NDIS will consider funding of assessments that are directly linked to a participant's disability specific need – i.e.: Armadillo Assessment (To determine whether the participant will be a risk to self or others in the community)

If it has been identified (by the correctional facility) that a person may be eligible for the NDIS, it is proposed that the Judicial System will support the participant to apply for NDIS access and assist them engage with informal and mainstream supports to obtain relevant evidence and assessments to determine eligibility.

### Released from facility, Parole and Straight Release

Once the participant has successfully engaged with their Support Coordinator approximately 6 weeks prior to their release date, they will be able to link in with appropriate mainstream and community support networks. The NDIS plan that will be created at the end of their custodial period will be focussed on a successful transition into the community.

During these transition periods, it has been identified that participants will utilise more funding in their plans for Support Coordination – to support their positive mainstream linkages and re-engagement into the community. It is anticipated that during the transitional planning stage that more intensive supports/funding will be utilised by the participant and subsequently needs to be considered by the planner, along with other supports that may be required, such as tenancy and accommodation or referrals for specialist assessments.

## Feedback

If you have any feedback about this Practice Guide please email [Practice Implementation](#). In your email remember to include the title of the product you are referring to and to describe your suggestion or issue concisely.

## Version change control

Version No	Amended by	Brief Description of Change:	Status	Date
1.00	s 47F	Creation of <i>Practice Guide – Intensive Super Intensive – v1.00</i>	APPROVED	2016-10-20