



Discussing the NDIS – access talking points for providers

This resource provides possible responses to frequently asked questions about the NDIS. It is designed to use when talking to potential NDIS participants. You are encouraged to modify your answers to suit different circumstances.

Q: How can the NDIS help me?

We strongly recommend talking to your colleagues about NDIS successes to have some examples up your sleeve, picking things that suit the needs or preferences of the person you are working with.

You might like to talk about how the NDIS can support your clients to:

- meet other people or learn some new skills, for example via group programs
- access a support worker for help to feel more confident out in the community or for assistance at home
- attend events or activities with a support worker that they might not have felt confident going to in the past on their own
- work on managing their money, e.g. to work towards a goal of moving into their own place, going on a holiday etc.
- find work or get involved in volunteering, e.g., by being linked into training options, having help to feel more comfortable in a new environment etc.
- work on their health and wellbeing, e.g. by learning to cook healthy meals or finding some good exercise options.

See our [‘Reasonable and necessary in the NDIS’](#) training module for more information on the types of services the NDIS can fund.

Q: I am happy with my current services, why would I need to apply?

‘Some services may be changing because of the NDIS and you will need to apply to the NDIS so you can keep using these services.’ [Only relevant for providers that are transitioning from block funding to NDIS only funding.]

‘In the NDIS you can choose your own services. You can think about what you enjoy about your current services and use that to find new services as well.’



Q: I have heard negative things about the NDIS, why would I want to apply?

'We are here to support you through the process. We can talk to the NDIA on your behalf, so you don't need to work with them if you don't want to.' [You will need consent.]

'The NDIS is changing the way they do things and they listen to feedback, so some things that might have happened in the past [like long wait times] aren't happening as much anymore. The NDIS is very personalised – everyone will have different experiences. Again, we are here to help you with managing this.'

Q: I am worried about not being eligible for the NDIS. What happens if they say no?

'The NDIS is for people with really high support needs. If they decide you don't need that much support, it doesn't mean that you will lose your support, it means that there are other services that may suit you better than the NDIS. We can make sure that you are linked in with those services.'

Q: I don't think I have a disability; is the NDIS for me?

'The decision to apply for the NDIS is up to you, but some of the things that the NDIS might be able to help you with include ...' [See list of possible NDIS supports under 'How can the NDIS help me?' above. It's best to pick ones closest to what the client has already used or might benefit from. Remember: managing expectations is important – NDIS plans determine what a person is funded for.]

'The NDIS use the word "disability" when people's health or mental health conditions make some parts of their life more difficult than for other people. Are there things that you find harder because of your mental health that you might want some help with?'

Q: I am worried about sharing personal information. Who will I be sharing information with and what will they do with that information?

'The NDIA will ask for your age, name, residency and contact details. They will also ask you to share information to help them decide whether you are eligible for an NDIS plan. This will include some medical information like a diagnosis of your mental health condition [if applicable], what type of treatments you have had, and a description of how the condition impacts your life. Some of this information will already be recorded in other systems [like at your doctors], some might be new. We can go through the information together before you send it in.'

'If there is something you don't want shared with the NDIA, we can chat about what that is and see if it is necessary to include.' [Note: If the information is critical, an access decision may not be able to be made without it; however, you may be able to find a workaround. It is not necessary to provide trauma histories to the NDIS.]

'The NDIS have confidentiality policies that stop them from sharing information about you with other people unless they are required to by law. They may share information with Medicare or Centrelink to help them provide their services, but it won't impact your DSP or other allowances/services.'



Q: Will I lose my disability support pension?

'You will not lose your DSP if you get into the NDIS. You can have both at the same time.'

Q: Will I lose my mobility allowance?

'You won't get to keep your mobility allowance if you are in the NDIS but there are lots of ways the NDIS can help you with transport so we can arrange for something similar.'

Further discussion points

Prompts for gathering evidence for an access request

'Who have you seen about your mental health in the past and who are you seeing now? Did you see your GP or maybe a psychologist or a counsellor? Was this recently?'

'Have you ever been in hospital for your mental health? Did you stay overnight? Do you remember which hospital it was?'

'When did you first start talking to people about your mental health? It doesn't have to be a psychiatrist, you might have talked to your doctor, or a friend. Maybe a school counsellor or teacher (if the person is young)?'

'What other services or supports are you using at the moment?' [Aim to identify mental health specific ones].

'Who helps you day to day?' [Identify carer and main informal supports]

'Tell me about your day. Does anyone come to your house to help you do things? Does anyone help you to get out of the house for example to the shops or to the doctor?' [You might have to prompt by asking about specific activities to work out which are related to the person's disability, which are formal supports, and which are informal.]

You might also consider who you have linked the person with, during the time you have been working together. Or, your organisation might have records of this if the person has been assisted by other support workers.

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