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Case

Mary is 35 years old and lives with quadriplegia. She lives in a residential aged care facility and wants to live with people closer to her own age.

Mary and her planner work together to understand Mary's daily support needs. They talk about other housing options to suit Mary's needs so she can move out of residential aged care.

A report from Mary's therapist includes a manual handling plan that says 2 carers should assist with her transfers. It includes information about Mary's disability support needs. It also explains risks to her safety and the safety of her carers if a second person is not available during transfers.

Mary wants to move into a home with supported independent living supports and live with 2 friends, Jake and Sarah. Jake and Sarah are also participants. They own the home and have asked Mary if she wants to rent the spare room. Jake and Sarah both use wheelchairs and they share a support worker for their daily activities.

They have similar support needs to Mary but only need 1-to-1 support for their transfers.

Would we fund this?

Yes, we could fund supported independent living supports for Mary's daily activities, and 2-to-1 ratio of supports for Mary's transfers to:

- make sure she and her carers are safe
- support her choice to live with Jake and Sarah with supported independent living in her home.

There will be times each day when Mary shares a support worker with Jake and Sarah. At other times we will fund a second worker for her transfers.

Why would we fund it?

To decide if a support is reasonable and necessary for Mary, we think about the information she has given us against the [NDIS funding criteria](#).

For us to fund 2-to-1 support for Mary's transfers and shared supports for Mary's daily activities, we look at all of the information against the [NDIS funding criteria](#).

We think about if the support:

- is related to Mary's disability
- will help Mary pursue her goals to move in with people closer to her own age
- will help Mary improve her social and work activities
- is something that could be given by Mary's family or friends
- will be, or is likely to be, effective and beneficial in helping Mary live with people closer to her own age and to build her capacity to participate in community activities.
- will be value for money. This means the costs of the increased support, is reasonable when comparing the benefits it will give Mary against the cost of alternative supports
- is an NDIS support for Mary.

What else do we think about?

We think about Mary's other support needs, as well as the support needs of her housemates Jake and Sarah. Mary, Jake and Sarah all have high support needs.

Jake and Sarah need 1-to-1 support for their transfers and for bathing, eating and dressing. They currently share one support worker to help with their other daily activities.

Because Mary's support needs are similar to Jake and Sarah's needs during the day, Mary is able to share this support for her daily activities.

We also think about whether a ceiling hoist or similar assistive technology would mean that one support worker could assist with Mary's transfers. We have evidence in the manual handling report that her transfers need two support workers, so we agree to fund this NDIS support.

When we create your plan, we must think about your NDIS supports as a total package of supports. To help us to do this, we use [the principles we follow to create your plan](#).

Case example

Leifa is 25 years old and has an intellectual disability. She shares a house with another NDIS participant, Tony. Leifa and Tony live in a supported independent living arrangement and share a support worker at times during the day.

Leifa receives care from a support worker in her home through a registered NDIS provider. This care includes a behaviour support plan for the possible physical restraint of Leifa during times of high distress. Leifa and Tony share one support worker at home. The behaviour support plan shows one support worker can manage Leifa's behaviours on their own in the home.

Leifa has a goal to improve her social skills. Her behaviour support practitioner has recommended Leifa attend a weekly community therapy group. Leifa's previous community activities have shown benefits in her overall behaviour.

Leifa's behaviour support plan includes a Community Outing Support plan. It recommends 2 support workers go with Leifa so she can participate in a community therapy group.

The plan includes a functional behavioural assessment showing the possible risk of harm to Leifa and others in less predictable environments.

The plan includes details of the roles for each support worker during the community outings.

We don't fund 2-to-1 support for Leifa at home because she doesn't need the support in her home environment.

However, we could fund a 2-to-1 support for the community activity to help Leifa:

- safely access the community. The support workers will make sure Leifa is safe around traffic during her outing. They'll also manage behaviours of concern that could put Leifa or others at risk.
- reduce her behaviours of concern
- become more involved with social activities.

To decide if a support is reasonable and necessary for Leifa, we think about the information we have against the [NDIS funding criteria](#).

For us to fund a 2-to-1 support, it must meet the all of the [NDIS funding criteria](#). It must:

- be related to Leifa's disability
- help Leifa to pursue her goals
- help Leifa to improve her social and work activities
- not generally be something that could be provided by her family or friends
- be, or is likely to be effective and beneficial in helping her
- be value for money. This means that the costs of the increased support are reasonable when comparing the benefits it will give Leifa against the cost of alternative supports
- be an NDIS support for Leifa.

When we decide whether we should fund 2-to-1 ratio of supports for Leifa's community therapy group we think about:

- other supports available to help her achieve the same outcome
- the risks to Leifa and others in the community when managing her behaviours of concern

If Leifa gives us a new behaviour support plan in the future that shows her behaviours of concern are decreasing and she can monitor and manage her behaviour in the community, she might not need a 2-to-1 ratio of support anymore.

For more information, refer to:

- [Our Guideline – Reasonable and necessary supports](#)
- [Our Guideline – Supported independent living](#)
- [Our Guideline – Disability-health related supports](#)