

**Adenium
Living**

Specialist
Disability
Accommodation

Provider Handbook





Adenium Living

Adenium Living cultivates beautiful, practical accommodation for long-term living – custom-built houses that meet the specific needs and desires of participants. We have a combined experience in disability services and property development of over 40 years.

Our team guide the participant through the process of finding a new home from start to finish. We are led by their preferred locations and oversee a build, keeping all parties informed as it progresses. On a new build we also invite participants to be a part of making finish and fitting selections, where practicable. Adenium Living supports participants with the Specialist Disability Accommodation (SDA) funding application process.

We can connect the participant with providers for support but the final decision is theirs.

Through a central point of contact in our team, we coordinate the transition into their new home. We also manage the ongoing tenancy, all while keeping the same central point of contact for the participant. We pride ourselves on providing somewhere to grow, thrive and belong, helping participants live better lives.



Your Supporting Role in the SDA journey

To assist a person to request eligibility for SDA funding in an NDIS Plan, you must be able to demonstrate that the person has an extreme functional impairment or high support needs.

Five key stakeholders to assist people to request SDA funding:

- The person with disability and/or their authorised representative
- Support Coordinator
- Allied Health Professionals
- SIL Provider
- SDA Provider

We must provide evidence to support the SDA criteria as outlined by the NDIS.

What documents are needed when applying for SDA funding?

If we are assisting the person to request home and living support for the first time, our documentation should clarify the following:

- The person's daily requirements for support and accommodation, detailing the frequency and timing of needed assistance
- The person's functional capabilities and how their disability affects their daily activities and housing necessities. 'Functional capacity' refers to what the person can or cannot do due to their disability
- An overview of alternative home and living arrangements considered, along with reasons why these options do not adequately meet the person's disability-related support needs
- If the person we are assisting needs to modify their existing home and living support, the evidence provided should be dated since their last NDIS plan approval and should address:
 - Notable changes in the person's daily support and housing requirements, including any new abilities or limitations they have encountered
 - Adjustments in their functional capacity and how these alterations impact their everyday life and housing needs

Documentation required for requesting home and living funding for the first time / testing eligibility for SDA funding

A HOUSING GOAL

This could include moving out of where the person currently resides and where they want to live in future, the number of people the person wants to live with, how they want to be supported in their new home and that they want to be able to choose their home and the people they live with. This is usually expressed by the person seeking funding (or their authorised representative).

HOUSING PLAN

This is written by support coordinators for people who want to test their eligibility for SDA funding. It provides evidence to the NDIS that the person they are supporting requires SDA to assist them to reach their goals, gain more independence and participate in the community. The Housing Plan relies on the information contained in the allied health assessments below (or others) to support the person to pursue their home and living goal/s.

HOME AND LIVING SUPPORTING EVIDENCE FORM

This form provides information to the NDIS about the evidence the person has to support their request for funding. While the NDIS states that it is not necessary to complete the form, it is a good way of ensuring all the evidence is collated and available for the NDIS to consider.

FUNCTIONAL CAPACITY ASSESSMENT (FCA)

An FCA is usually written by an Occupational Therapist but can be written by another allied health professional, or by more than one allied health professional. It should outline the person's functional abilities, and their support needs. It serves as a basis for determining the level of funding and types of support required under the NDIS.

BEHAVIOUR SUPPORT PLAN IF REQUIRED (BSP)

A BSP is based on functional analysis and hypothesis formulation to address the needs and support the person in managing their behaviours more effectively. It outlines proactive strategies, as well as reactive strategies, to respond to these behaviours in a constructive and supportive manner. It is written by a Behaviour Support practitioner, in consultation with the person with disability and key people within their support network.

**INCIDENT REPORTS
(AS SUPPORTING EVIDENCE)**

These play a vital role in providing essential information about the person's support needs, safety concerns, and the quality of care and support provided. They further demonstrate the provider's commitment to transparency, accountability, and the person with disability's wellbeing.

Participant Housing Statement. This document is only required from people who are under the age of 65 years, who have complex disability support needs, whose disability prevents them from living in a mainstream option and are living in Residential Aged Care (RAC) or at risk of living in RAC. The statement should be no longer than 5 pages.

**Documentation required for
requesting a change to current home
and living funding*****A NEW OR REVISED HOUSING GOAL**

This could include moving out of where the person currently resides and where they want to live in future, the number of people the person wants to live with, how they want to be supported in their new home and that they want to be able to choose their home and the people they live with. This is usually expressed by the person seeking funding (or their authorised representative).

HOUSING PLAN

This plan is required if the person does not have SDA funding and wants to test their eligibility for SDA funding. It is written by a support coordinator and provides evidence to the NDIS that the person they are supporting requires SDA to assist them to reach their goals, gain more independence and participate in the community. The Housing Plan relies on the information contained in the allied health assessments below (or others) to support the person to pursue their home and living goal/s.

**HOME AND LIVING SUPPORTING
EVIDENCE FORM**

This form provides information to the NDIS about the evidence the person has to support their request for funding. While the NDIS states that it is not necessary to complete the form, it is a good way of ensuring all the evidence is collated and available for the NDIS to consider.

**UPDATED FUNCTIONAL CAPACITY
ASSESSMENT (FCA)**

An FCA is usually written by an Occupational Therapist but can be written by another allied health professional, or by more than one allied health professional. It should outline the person's functional abilities and limitations, and their support needs. It serves as a basis for determining the level of funding and types of support required under the NDIS.

**IN DATE BEHAVIOUR SUPPORT PLAN
IF REQUIRED (BSP)**

A BSP is based on functional analysis and hypothesis formulation to address the needs and support the person in managing their behaviours more effectively. It outlines proactive strategies, as well as reactive strategies, to respond to these behaviours in a constructive and supportive manner. It is written by a Behaviour Support practitioner, in consultation with the person with disability and key people within their support network.

**ADDITIONAL INCIDENT REPORTS (AS
SUPPORTING EVIDENCE)**

These play a vital role in providing essential information about the person's support needs, safety concerns, and the quality of care and support provided. They further demonstrate the provider's commitment to transparency, accountability, and the person with disability's wellbeing.

PARTICIPANT HOUSING STATEMENT

This document is only required from people who are under the age of 65 years, who have complex disability support needs, whose disability prevents them from living in a mainstream option and are living in Residential Aged Care (RAC) or at risk of living in RAC. The statement should be no longer than 5 pages.

**All documents must be dated after the start date of the person's current NDIS plan.*



What does extreme functional impairment and high support needs mean?

Extreme Functional Impairment is the difficulty a person may have in completing daily living tasks, and the level of support required to complete them. These tasks include mobility, self-care, and self-management. Very High Support Needs is the need of person-to-person support throughout the day. The NDIS will require information on how the person will receive the support, and who is needed to provide the support.

The NDIS will also look at whether SDA will help reduce any safety risks to the participants, their support team, or the community. This may include behaviour support needs or the need for in-home support during an emergency.

Who are allied health professionals and why are they key in the SDA application process?

Allied Health Professionals are:

- Occupational Therapists
- Behaviour Support Practitioners/Psychologists
- Physiotherapists
- Speech Pathologists
- Developmental Educators
- Nurses
- Social Workers
- Other Health Professionals who can provide necessary assessments

These assessments will provide detailed information about the person's support needs and give the NDIS an opportunity to understand how SDA funding will improve the person's daily living and increase independence.



What is the process and who does what?

Person with Disability and/or their Authorised Representative

CREATE A TEAM

If a person with disability requires help or advice to decide on whether they want to change their home and living environment or supports, the first step should be to get a team of people together. This team should include a number of people who are trusted by the person with disability to offer advice and support that is in the best interest of the participant.

People in this team may include other people with disability who have gone through this process, family members, friends, trusted support providers, an independent advocate, a really good support

coordinator, and allied health professionals who have proven experience in supporting people to apply for (and obtain) Home and Living support funding.

CONSIDER THE OPTIONS

Talk to the trusted people above to find out what their thoughts are and what potential solutions are available.

CREATE A HOUSING GOAL

This could include moving out of where the person currently resides and where they want to live in future, the number of people the person wants to live with, how they want to be supported in their new home and that they want to be able to choose their home and the people they live with.



Work with the providers and agencies to meet their deadlines

- Consider funding allocation to other providers before engaging with new providers to complete assessments and write reports. Ensure there is sufficient funding in the NDIS plan to pay for these
- Work with the Support Coordinator to reallocate funding if required
- Engage a Support Coordinator to assist by submitting the application to the NDIS for Home and Living support
- Be available for and work with the providers so that they can meet the deadline for the Support Coordinator to submit Home and Living support requests within 100 days of the current NDIS plan reassessment date
- Follow up with the Support Coordinator if there is no new plan 56 days from the request being submitted to the NDIS

Search for a new home

- Work with the Support Coordinator to find a suitable home or engage with Adenium Living to discuss our housing options
- Select your new home, negotiate the Service Agreement and move in
- Ensure that all documents, terms and conditions are understood
- Engage with an independent advocate if required to help to explain the terms
- Submit all documentation required by the SDA provider and ensure that rent is paid on time

SUPPORT COORDINATOR

In the absence of funding for assessment reports to evidence the person's home and living support needs, the Support Coordinator will assist the person with disability to express and determine their home and living support needs. They will outline for the NDIS any assessments required for the person and request appropriate funding for those supports in an NDIS Plan. If the person is seeking SDA, the Support Coordinator will complete a Housing Plan which is submitted to the NDIS to test the person's eligibility for SDA.

Support the person to understand their obligations to work with providers to achieve their housing goal/s

Funding permitted, the Support coordinator will assist the person to find Allied Health Professionals to conduct appropriate assessments and work closely with them.

The NDIS can provide specific funding for the purpose of an SDA application including writing a housing plan and looking for appropriate housing.

Submit all documents to the NDIS when all assessments have been completed. The NDIS will not be able to fund people for home and living support if the application is incomplete or if they do not have all of the information they need.

Allow 49 days for a decision by the NDIS. Diarise the date in a calendar and follow up if there is no response by the due date. Funding must be applied within 7 days to a new NDIS plan.

Coordinate meetings between providers to ensure that all providers and the person's support network are aware of what will be expected of them to ensure a safe and enjoyable transition for the person with disability and their family.

ALLIED HEALTH PROFESSIONALS

The NDIS may provide specific funding for allied health professionals to conduct assessments related to housing goals, support needs and skill development as well as whether the person is eligible for SDA.

ACCOMMODATION

There are several criteria Allied Health Professionals will need to include in their report/s:

- A detailed assessment of the person's capacity and specific needs according to your expert field
- The person's current supports summary – duration and frequency
- Previous therapies trialled
- Outlined plan for increased independence and skill development
- Recommendations for improved support plan model – barriers and challenges review (evidence based)
- Additional supports review linked to outcomes and NDIS goals
- Will the recommended supports improve outcomes, be of long term benefit and represent value for money (reduce the cost of funding supports)

Detailed outline of how the person meets SDA eligibility criteria (extreme functional impairment or very high support needs)

- Transition Plan (if applicable)
- Recommended SDA design category, building type and location
- Preferred SDA Provider and dwelling type



SIL PROVIDER

The SIL Provider assists the person with day-to-day supports and separate SIL funding will need to be obtained for the person based on their daily support needs. If the person is already receiving support from a SIL Provider, they can assist by providing evidence for the NDIS. Such evidence could include the SIL provider's support plan/s, incident reports, shift notes, ABC charts, participant goal progress reports, Roster of Care, and/or a SIL Report including support provided, the goals worked on and changes to the support plan that arose out of changing needs of the person with disability or the effectiveness of the supports provided.

This supporting documentation should be submitted at least 3 months prior to the date the funding will be required. (Please note this can take a longer period and if not completed in time may delay the move in date for the participant). Ideally, a Support Coordinator will be engaged to submit all forms and supporting documents to the NDIS on behalf of the person with disability. Inclusion of the Support Coordinator in the process gives them an opportunity to review the documents and to ensure that consistent information is presented to the NDIS.

A SIL Provider may be able to identify if a person they are already providing services to requires alternative accommodation e.g., Specialist Disability Accommodation instead of their current housing.

Whilst an SDA Provider can assist in the process, participant matching and assessments are primarily done by the SIL Provider. The SDA Provider will still require copies of key documentation such as the current NDIS Plan, BSP and all relevant OT Reports as this ensures the house is built to the specific requirements of the participant/s.

Final approval of SDA offer and occupation is determined by both the SIL Provider and SDA Provider.

It is important to link a participant with a building project by an SDA Provider as early as possible in the process so both the SDA Provider and SIL Provider can assist in all stages of the SDA journey. This may include writing additional letters of support to assist the person with disability to obtain the appropriate funding for SDA and SIL. Early engagement may also contribute to the long-term tenancy of the person with disability by ensuring the SIL provider can support the individual needs of the participant, while ensuring the SDA provider can incorporate any home modification requirements into the build process to address concerns closer to move in date.

SDA PROVIDER

SDA Providers build and/or manage specialist disability accommodation – the “bricks and mortar” and receive the SDA funding portion as outlined in the person's NDIS Plan.

Ensuring they are designing and building quality houses for people with high support needs, the SDA Provider must meet the criteria as outlined by the NDIS to have the dwelling SDA approved and enrolled. They must also ensure that the dwelling is appropriate for the person with disability. For this reason, the SDA Provider must have all relevant information about the participant, including their most recent Positive Behaviour Support Plan and capacity/needs assessment reports.

The SDA Provider is the property manager and organises ongoing maintenance and repair. The SIL Provider, participant/s and SDA Provider must work together to ensure they are communicating and resolving any concerns about the SDA and maintenance aspects of the property.



SDA Categories



Improved Liveability

Designed to improve 'liveability' by incorporating a reasonable level of physical access and enhanced provisions for people with sensory impairment, intellectual impairment or cognitive impairment.



Robust

Designed to incorporate a reasonable level of physical access provision and be very resilient, reducing the likelihood of reactive maintenance and reducing risk to participant and community.



High Physical Support

Designed to incorporate a high level of physical access provision for people with significant physical impairment and requiring very high levels of support.



Fully Accessible

Designed to incorporate a high level of physical access provision for people with significant physical impairment.

Housing Plan – what is important?

THE HOUSING GOAL

- Previous and Current living/housing arrangements
- Daily Activities – Community Participation and work/day placement
- Current search for housing options
- Allied Health Professional assessments and report
- Any other supporting documentation

CHOICE AND CONTROL

People with disability must have choice and control over their supports and have their voice heard. Housing and living arrangements can sometimes seem out of a person's control especially if they are living in an environment that does not feel like their own. This is why it is important to find an SDA provider who will work with the participant and their support team to find the perfect solution.

Moving house always means change and its imperative that the person is well supported and involved in every step of the journey including familiarising themselves with the new location, meeting other people they may live with, organising the actual move and maybe even purchasing new furniture for their bedroom. It is therefore important to engage with the person early.

Specialist Disability Accommodation houses are "commercial builds" and take longer to complete. The benefits of this are:

- It will be designed to ensure that all the participant's requirements are met
- It allows for an appropriate transition period
- It gives time to source and match housemates (where relevant)
- It ensures that there is enough time to have funding confirmed
- It ensures staff are sourced and trained appropriately



Participant Eligibility

The NDIS defines SDA as housing for people with extreme functional impairment or very high needs. It is designed to be more accessible and tailored to the support needs of the individual to assist with living independently and safely.

SDA can be a house shared with a small number of people or a person on their own if it meets their disability support needs and circumstances. The rent paid is usually called "reasonable rent contribution" and the participant pays other day-to-day living costs such as bills.

How to be eligible for Specialist Disability Accommodation

The NDIA has designed SDA to work together with a number of different funded supports and when they assess for eligibility, they will consider the other supports needed and how they will work together. They will only fund SDA if it's a better option for the participant's disability support needs than other supports alone. The participant must have a home and living goal in their NDIS plan.

The NDIA will then review the application and supporting documentation (i.e. OT assessment, housing plan, etc.) to identify appropriate home and living supports to assist them to achieve their goals. SDA is only available to people who need to live in a specialised home and if very high levels of person-to-person direct support is needed.

What Questions will the NDIA ask them?

Do you have an extreme functional impairment?

This means *"Do you have a lot of trouble doing daily tasks on your own or do you find it difficult to do them at all and need support?"* The NDIA will confirm they have an extreme functional impairment if lots of support from someone else to complete daily tasks is needed.

Daily tasks include:

- Mobility – such as walking, climbing stairs, getting in and out of a bed or a chair, carrying or moving items, and getting out of the house
- Self-care – such as bathing, going to the toilet, getting dressed, eating, drinking, talking and taking medication

- Self-management – such as housework, following routines, making friends and relationships, maintaining boundaries and behaviour support

Do you have very high support needs?

This means *"Do you need a lot of person-to-person support for a significant part of the day?"*.

The NDIA will also need to know that either:

- Their family or friends can't give them this support or maintain the level of support they need. They might not have enough informal supports, or the usual informal support network can't support them anymore
- SDA will help reduce any safety risks to them or to others around them

For example, if they need help right away to leave home in an emergency or if they have behaviours of concern that are a safety risk to themselves or others around them (they'll need to give the NDIA a current Behaviour Support Plan).

How do the NDIA work out if they have extreme functional impairment or very high support needs?

The NDIA will review the information provided to them to confirm if the participant has extreme functional impairment or very high support needs. They will then be able to understand the current support circumstances, strengths, barriers and daily support needs. They may also need other assessments such as allied health professional reports and reports about daily support and living needs. This will include an OT assessment and other reports including incident reports which will provide evidence and support their eligibility for SDA funding.

A Support Coordinator or LAC will be able to help to gather all the information required and service provider/s (Supported Independent Living, Community Participation, Assistance with Daily Living/Activities, etc.) will be able to provide incident reports and other information.

The NDIA will include funding in the participant's plan to assess their home and living needs if they require more information.



SIL Provider Collaboration Journey

Relationship Expectations

1

How we will work together to ensure optimal communication, maximise the participant 's experience and fill vacancies

Discussion

2

Current demand for SDA and future planning

Collaboration Agreement

3

Expectations and guidelines about how we work together

Participants

4

Filling vacancies and sharing information

Marketing Partnership

5

Identify, reach and engage with audiences via multiple channels

Journey to Completed Build

6

Progress updates and communication

Moving In

7

The relationship continues with maintenance/repairs and feedback

Standard Inclusions on Adenium Living Houses

Indoors

- Lounge and dining areas
- Furnishing of all common areas
- White goods
- Individual controlled air conditioning
- Onsite Overnight Assistance (OOA) room
- Ensuites to all bedrooms

Outdoors

- Height adjustable clotheslines
- Outdoor undercover areas
- Professional landscaping and garden maintenance

Plus

- Fire sprinkler systems
- Class 3 high level design features
- Wheelchair charging room in HPS houses
- Adjustable kitchen bench and wardrobe in FA and HPS houses

Inclusions may vary e.g. Robust housing requirements





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This information is correct as the time of publication. More information can be found on the NDIS website: **www.ndis.gov.au/participants/home-and-living/requesting-home-and-living-supports**