The contents of this document are

DRAFT – OFFICIAL

Delivered by the National Disability Insurance Agency

123 Four Street
Bakerville NSW 2022

(Current date)

Your support needs assessment report

Participant NDIS number: 500123456

Dear John,

Thank you for taking part in your support needs assessment.

During your assessment, we spent time learning about you and your daily life. We talked about what is important to you, the supports you have now, and the supports you may need.

Before we prepare your NDIS plan, we are sharing your support needs assessment report. This report summarises what you talked about with your assessor during your supports needs assessment conversation. It outlines the support you need in different areas of your life.

This support needs assessment report replaces the previous one we shared with you.

What you need to do

You don’t need to do anything unless you think there are errors in your support needs assessment report. If you think there are errors, you can contact us in any of the ways listed under the **We’re here to help** section of this letter.

What we will do

We'll use the support needs assessment report to work out your NDIS budget, using the method set out in the NDIS rules. We will decide how long your plan will be, your funding periods and how you will manage your NDIS funding when we approve your plan.

Next steps

If you want to, you can have a conversation with the person who approves your plan. This is an optional step if you would like to go through your plan and budget.

You can also choose to have a plan implementation meeting to help you start using your plan.

If you would like to have a plan conversation meeting to talk about your plan or a plan implementation meeting, you can contact us in any of the ways listed under the **We're here to help** section of this letter. You can find more information on our website. Visit the NDIS website (ndis.gov.au).

If you have any questions or want to talk to us, please contact us in any of the ways listed under the **We're here to help** section of this letter.

Yours sincerely,

(NDIA signature block)

We're here to help

Online

- NDIS website ndis.gov.au
- Internet Relay Users accesshub.gov.au
- NDIS mailbox enquiries@ndis.gov.au
- Portal my.gov.au
- NDIS Service Hub myndisportal.ndis.gov.au/s/guest-service-hub

Phone

- NDIS National Contact Centre **1800 800 110**

- TTY Users **1800 555 677**
- Speak and Listen Users **1800 555 727**
- If you need help with English **131 450**

In Person

- You can find your closest **local area coordinator**, **early childhood partner** or **NDIS office** on our website. Go to ndis.gov.au, select **Contact**, then under **Offices and contacts in your area** you can **search your area**.

Has your situation changed?

If so, this may change your NDIS plan or supports. It is important that you contact us about any change in your circumstances.

A change could include:

- compensation you are applying for or have received
- significant changes to your disability support needs
- starting school
- changes to your home and living situation
- looking for work
- no longer wanting to be a part of the NDIS.

John Smith's NDIS Support Needs Assessment Report

Your support needs assessment report includes:

1. Your support needs assessment

John Smith's information

NDIS number: 500123456

Impairment category information: Cognitive and Physical

Address: 123 Four Street, Bakerville NSW 2022

Age at the assessment: 49

Assessment information

Assessor name: Katherine

Date(s) of assessment: 27/01/2026, 30/01/2026

Attendees: John, Patrick (brother)

Assessment location: In person

Reason for the assessment: To identify your disability-related support needs and prepare your NDIS plan.

About you

Your living arrangements

You currently live in Private home, which is your usual living arrangement.

Your informal supports

Your main informal support: Work or study full time

Your employment and education

You are not currently employed and not looking for work.

You are not currently studying.

You do not plan to do further study, like university, college or TAFE.

Your assistive technology

You do currently use assistive technology.

Your current assistive technology fits under the following categories: toileting and bathing.

Your assistive technology items include:

Handrail. You've had this item: 2 to 3 years

If applicable to you, you have not supplied a report that identifies a need for specialist driver training and that you are eligible to hold a driver's licence.

Communication

You do not need support with communication.

Remoteness

Your home address is used to work out if we need to apply any special considerations due to you living in a remote area. We use the Modified Monash Model (MMM) classification to do this. Your MMM classification is MMM1, major city.

Access to a partner in the community

You are supported by a partner in the community.

Identify as Aboriginal and/or Torres Strait Islander

No

Degenerative condition

Your condition for which you meet the disability or early intervention requirements is not degenerative.

Guardianship, administrative, or protection order

You do not have a guardianship, administrative, or protection order.

Psychosocial recovery coaching supports

You do need psychosocial recovery coaching supports.

Targeted support needs assessment

You did require a targeted support needs assessment. You can find more information in the Your targeted support needs section of your report.

Your support needs

In your support needs assessment, we talked about your everyday life, your strengths, your disability support needs and the people who support you.

We used this information to identify how much and how often you need the following types of supports.

Mobility

Transfer and positioning

Frequency of support: Daily (3)

Level of support: Managed (1)

You can independently transfer from one surface to another. In the bathroom you use a grab rail to transfer on/off the toilet.

Carrying, moving and handling objects

Frequency of support: Weekly (2)

Level of support: Minor (2)

You can independently carry items such as the bag you take to your community participation program. You can experience difficulty with opening jars and some packaging. When this happens a supporter will help to loosen the lid or open the item.

Walking and moving

Frequency of support: Never (0)

Level of support: Independent (0)

You can independently mobilise around the home and in the community.

Transport

Frequency of support: Daily (3)

Level of support: Extensive (4)

You access the community in the A+ Ability Services van. Your supporters at A+ Ability Services drive the van and arrange the transport for you to access the community, your community participation program and any appointments.

Domestic life

Domestic life - Goal 1

You would like to assist your brother with mowing the lawn and growing vegetables at his own house.

Start date: 20/02/2026

Review date: 20/02/2028

Frequency of support: Weekly (2)

Level of support: Moderate (3)

Shopping

Frequency of support: Weekly (2)

Level of support: Moderate (3)

You like to go shopping for personal items. Your supporters help you to write a list before you go shopping. With verbal prompting you can select the correct items from the shelf.

Cooking

Frequency of support: Daily (3)

Level of support: Moderate (3)

You like to help cook. There is a weekly meal plan displayed on the fridge and a roster that tells you the day of the week that you get to help. For recipes that you have cooked previously you can get the items you needs out of the fridge or pantry. You can peel and chop items like potatoes and carrots with verbal prompting. You can stir items on the cooktop with supervision and prompting. All other food preparation tasks are completed on your behalf. On weekdays you make a sandwich to take to your community participation program. Your supporters lay out the ingredient options and provide verbal prompting and physical assistance as required.

Cleaning and domestic tasks

Frequency of support: Weekly (2)

Level of support: Moderate (3)

You can sort your washing and place it in the washing machine with verbal prompting. Your supporters select the correct wash cycle and let you know when the load has finished. You can hang the washing out, bring it in, fold it an put it away with prompting from your supporters.

Household maintenance

Frequency of support: Occasionally (1)

Level of support: Extensive (4)

All household maintenance tasks are completed on your behalf.

Self care

Eating and drinking

Frequency of support: Daily (3)

Level of support: Minor (2)

You can feed yourself. You use built up cutlery and always drink from a mug. You will eat quickly and need to be reminded to slow down. You have a current mealtime management plan which was developed by your Speech Pathologist.

Personal care

Frequency of support: Daily (3)

Level of support: Managed (1)

You can shower yourself and apply moisturiser. You have a visual aid in the bathroom to remind you of each of the steps involved.

Toileting

Frequency of support: Never (0)

Level of support: Independent (0)

You are continent of urine and faeces. You can clean yourself after opening your bowels.

Dressing

Frequency of support: Occasionally (1)

Level of support: Minor (2)

You can independently dress yourself. You like to choose your own clothes. You will often choose thongs and shorts in winter but will happily change into more weather appropriate clothing when your supporters remind you that it is going to be a cold day.

Community, social and civic life

Community, social and civic life - Goal 1

You would like to access increased support when you participate in community programs to increase your engagement. You would like to have your outings scheduled around your medications and care routine.

Start date: 20/02/2026

Review date: 20/02/2028

Frequency of support: Weekly (2)

Level of support: Minor (2)

Money and economic life

Frequency of support: Weekly (2)

Level of support: Extensive (4)

You can use your debit card to "tap and go" for purchases under $100. Your supporters check the amount is correct before you pay. Your brother Patrick is your financial manager and manages all other financial affairs on your behalf.

Community life

Frequency of support: Weekly (2)

Level of support: Moderate (3)

You attend the Life Choices community participation program 5 days a week from 9am-3pm where you participate in group activities. You can participate in these activities with supervision. Your supporters from Life Choices have reported that your level of engagement has reduced in the last 12 months and there are times that you need reassurance and redirection.

Leisure and recreation

Frequency of support: Occasionally (1)

Level of support: Extensive (4)

You enjoy watching Home and Away and listening to country music. When you are at home you can turn on the television or choose a CD to listen to on your CD player. You also enjoy going to concerts at the local club. You have 1:1 time once a fortnight with your key worker and you often enjoy a meal and concert together.

Advocacy

Frequency of support: Occasionally (1)

Level of support: Extensive (4)

Your brother Patrick is your best advocate. Patrick advocates on your behalf when you need him to.

Mental and emotional health

Mental and emotional health - Goal 1

You would like to access a psychologist to support you to develop skills with regulating your mood.

Start date: 31/03/2026

Review date: 31/03/2027

Frequency of support: Weekly (2)

Level of support: Minor (2)

Mood

Frequency of support: Daily (3)

Level of support: Moderate (3)

You become withdrawn sometimes. When this happens, your supporters reassure you and direct you to a preferred activity.

Physical health

Skin and related functions

Frequency of support: Never (0)

Level of support: Not applicable (0)

Your skin can become dry and itchy. You can independently apply moisturiser as part of your daily personal care routine when you follow the visual schedule for your personal care routine. This has been scored under your personal care domain in this report.

Circle of support

Circle of support member

Description: You see your brother Patrick on weekends. Patrick is your decision maker, financial manager and advocate.

Who provides the support: Brother

Frequency of support: Weekly

Your targeted support needs

This section of your report identifies your support needs in a specific area, like disability-related health or assistive technology (AT). It also lets you know if the information you gave us met our requirements to identify a new support need.

Disability-Related Health Supports (DRHS)

We considered if you have DRHS support needs in **Wound and pressure care and lymphoedema supports, Respiratory supports, Epilepsy and seizure supports, Diabetes supports, Dietary/nutrition supports.**

We assessed your support needs for the following types of DRHS: **Wound and pressure care and lymphoedema supports, Respiratory supports, Epilepsy and seizure supports, Diabetes supports.**

We did not assess your support needs for the following types of DRHS: **Dietary/nutrition supports.**

Wound and pressure care and lymphoedema supports outcome

The information you gave us met our requirements. We've used it to assess your support needs. We considered your support needs in the following areas: **Pain, Sensory, Other physical health.**

AT supports

No new assistive technology needs were identified.

DRHS consumables

Pressure garment consumables: Level 1

Wound care consumables: Level 2

DRHS therapy

DRHS therapy (physiotherapy or occupational therapy) needs were identified.

In-home community supports (IHCS)

High intensity in-home community supports (high intensity support worker) needs were identified.

Nursing in-home community supports: Level 1

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Respiratory supports outcome

The information you gave us met our requirements. We've used it to assess your support needs. We considered your support needs in the following areas: **Eating and drinking, Mouth, voice and speech, Other physical health.**

AT supports

We identified you have a need for the following AT supports:

- **Ventilators – invasive ventilation** – purchased, including custom trial or rental
- **Aspirator / Suction machines** – long term rented, including standard trial or rental

DRHS consumables

Level of DRHS consumables: Level 5

DRHS therapy

DRHS therapy (respiratory physiotherapy) needs were identified.

In-home community supports (IHCS)

High intensity in-home community supports (high intensity support worker) needs were identified.

24 hour/continuous in-home community supports needed: Yes

Overnight in-home community supports needed: Yes, active overnight

Nursing in-home community supports: Level 8

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Epilepsy and seizure supports outcome

The information you gave us met our requirements. We've used it to assess your support needs. We considered your support needs in the following areas: **Other physical health.**

AT supports

No new assistive technology needs were identified.

In-home community supports (IHCS)

High intensity in-home community supports (high intensity support worker) needs were identified.

24 hour/continuous in-home community supports needed: No

Overnight in-home community supports needed: Yes

Nursing in-home community supports: Level 2

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Diabetes supports outcome

The information you gave us met our requirements. We've used it to assess your support needs. We considered your support needs in the following areas: **Other physical health.**

In-home community supports (IHCS)

High intensity in-home community supports (high intensity support worker) needs were identified. This is for support in subcutaneous injection to administer insulin.

Nursing in-home community supports: No support

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Dietary/nutrition supports outcome

The information you gave us did not\ meet our requirements. We couldn't use it to assess your support.

Assistive technology (AT)

We considered if you have assistive technology support needs **for Recreation and leisure, Personal mobility and transfers, Assistance animals, Dog guide, Prosthetics and orthotics.**

We assessed your support needs for the following types of assistive technology: **Personal mobility and transfers, Assistance animals.**

We did not assess your support needs for the following types of assistive technology: **Recreation and leisure, Dog guide, Prosthetics and orthotics.**

Recreation and leisure outcome

AT supports

No new Assistive Technology needs were identified.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Personal mobility and transfers outcome

Support needs were identified in the following areas of your assessment: **Walking and moving, Transport, Community life, Daily routines, Pain.**

AT supports

We identified you have a need for the following AT supports. Your plan will say if you need to get a quote for any of these items:

- **Frame or Walker** – purchased, not including trial or rental
- **Wheelchair – Manual – Folding Basic** – long term rented, including standard trial or rental
- **Scooter – Indoor/Outdoor use** – purchased, including non-standard trial or rental
- **Standing or walking frame accessory – powered (including myo-electric)** – purchased, not including trial or rental

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Assistance animals outcome

A comprehensive external report related to assistance animals is not required.

Support needs were identified in the following areas of your assessment: **Daily routines, Community life.**

AT supports

We identified you need an **assistance animal**, including non-standard trial.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Dog guide outcome

The need for dog guides has not been identified. A comprehensive external report is needed so we can assess your support need for a dog guide or dog guide supports. We will provide you with more information about how to get this report.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Prosthetics and Orthotics outcome

The information you gave us did not meet our requirements. We couldn't use it to assess your support needs.

Behaviour support

Outcome

We identified you have a need for behaviour support. You need **Behaviour Support (Level 2)**, including active overnight supports.

In-home and community supports: Not needed

Support ratio needs: 1:2 support

The supports are not likely to involve the use of a regulated restrictive practice.

These support needs relate to the following areas: **Community life, Social skills, Manage relationships, Hurtful to self, Disruptive or offensive behaviour.**

Evidence provided: Written account from mother

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Outcome (alternative, no need but evidence provided example)

We did not identify any Behaviour Support needs in this assessment area.

Evidence provided: Written account from mother

Assessor's comments

John's mother provided written accounts of times when behaviour supports were needed.

Outcome

We did not identify any Behaviour Support needs in your assessment area.

The information you gave us did not meet our requirements. We couldn't use it to assess your support needs. We still considered your support needs in this area based on other information available to us.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Home modifications

Outcome (no evidence)

The information you gave us did not meet our requirements. We couldn't use it to assess your support needs.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Outcome (no needs identified)

The information you gave us met our requirements. We've used it to assess your home modifications needs.

We did not identify any home modification needs in this assessment area.

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Outcome (needs identified in different categories of home modifications, no safety concerns)

The information you gave us met our requirements. We've used it to assess your home modifications needs.

Support needs identified

We identified you need the following home modifications: **Minor home modifications, Complex home modifications, Miscellaneous home modifications, unspecified home modifications.** Your plan will say if you need to get a quote for any of these items.

Minor home modifications needed
Bathroom

There are no safety concerns identified if these minor home modifications are delayed until a quote is received.

Complex home modifications needed
Kitchen -complex

Miscellaneous home modifications needed
Building modifications to repair damage from assistive technology or equipment use

Unspecified home modifications needed
We identified a need for home modifications other than minor, complex and miscellaneous home modifications.

Repairs and maintenance funding

Standard repairs and maintenance support needs were identified for: **Airconditioning**.

Custom repairs and maintenance support needs were identified for: **Bidet.**

Housing assistance

Home modifications rental assistance: Custom rental

template.

Medium term accommodation (90 days) needs were not identified.

Support needs areas

Support needs were identified in the following areas of your assessment: **Transfer, Walking.**

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Specialist Disability Accommodation (SDA)

Outcome (Home Environment Supports form didn't meet requirements)

SDA suitability

Your current SDA situation: Living in SDA – returned Home Environment Supports Form

You are not currently part of the Specialist Disability Accommodation (SDA) transition cohort.

The information you gave us did not meet our requirements. We couldn't use it to assess your support needs.

Outcome (not part of transition group, already living in SDA)

SDA suitability

Your current SDA situation: Living in SDA

Number of bedrooms in your current SDA: Three bedrooms, two residents

More information isn't needed about your home and living supports. SDA is appropriate.

You aren't currently part of the Specialist Disability Accommodation (SDA) transition cohort.

SDA support needs

SDA that matches the following specifications would best meet your support needs.

Category: Fully accessible (onsite shared support suitable)

Building type: Apartment (extra room needed)

Location: Current residential area, at postcode 2600

Medium term accommodation (90 days) needs to move into SDA were not identified.

Support needs areas

Support needs were identified in the following areas: **Community life, social skills, manage relationships.**

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

Outcome (part of transition)

SDA suitability

You are currently part of the Specialist Disability Accommodation (SDA) transition cohort.

SDA support needs

SDA accommodation that matches the following specifications would best meet your support needs.

Category: Robust

Building type: House

Location: Current residential area at postcode 2077

Medium term accommodation (90 days) needs to move into SDA were identified.

Support needs areas

Support needs were identified in the following areas: **Community life, social skills, manage relationships.**

Assessor's comments

The needs assessor will use this section to explain any requirements that were not met, or any parts of the professional's recommendation that were not supported by the evidence required in the rules. The assessor usually won't need to complete this section where all recommendations have been funded.

2. Your assessed supports

We've identified based on your support needs assessment that you need these types of supports:

- Daily Supports (flexible)
- Travel and transport arrangements (flexible)
- Assistive technology (stated)
- Home modifications (stated)
- Specialist Disability Accommodation (stated)

We'll use the information in this report to work out how much funding you need for these types of supports.

You might also be able to use your flexible funding for supports that aren't listed here. Refer to your plan and ndis.gov.au for what you can spend your funding on.

3. How to use your support needs assessment report

You can use this report to better understand your support needs and to help explain them to others. You may choose to share it with someone you trust, such as a family member, allied health professional, or support provider, if you want to.

We use the information collected in your support needs assessment report to create your NDIS plan, including your reasonable and necessary budget.

You can find more information about support needs assessments and how this report is used at www.ndis.gov.au.