



**NDIS process for Dietitians:
From NDIS scheme access to review
of NDIS plans and decisions**

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Purpose:

Dietitians support people with disabilities across their lifespan. Some people with disabilities and/or developmental delays may access the National Disability Insurance Scheme. Dietitians may be requested to support people wanting to join the scheme (known as 'access'), those who receive their first NDIS plan, those who have been on the scheme for a longer period of time and those who feel that they require more or different support and choose to apply to review the decisions made about their NDIS support plan.

This document outlines the NDIS process from NDIS access through to Administrative Review Tribunal (ART) stages, with a focus on outlining the process so that Dietitians know how to support families. Understanding these processes enables dietitians to effectively guide participants and families, contribute appropriate evidence, and support informed decision-making across all stages of the scheme.



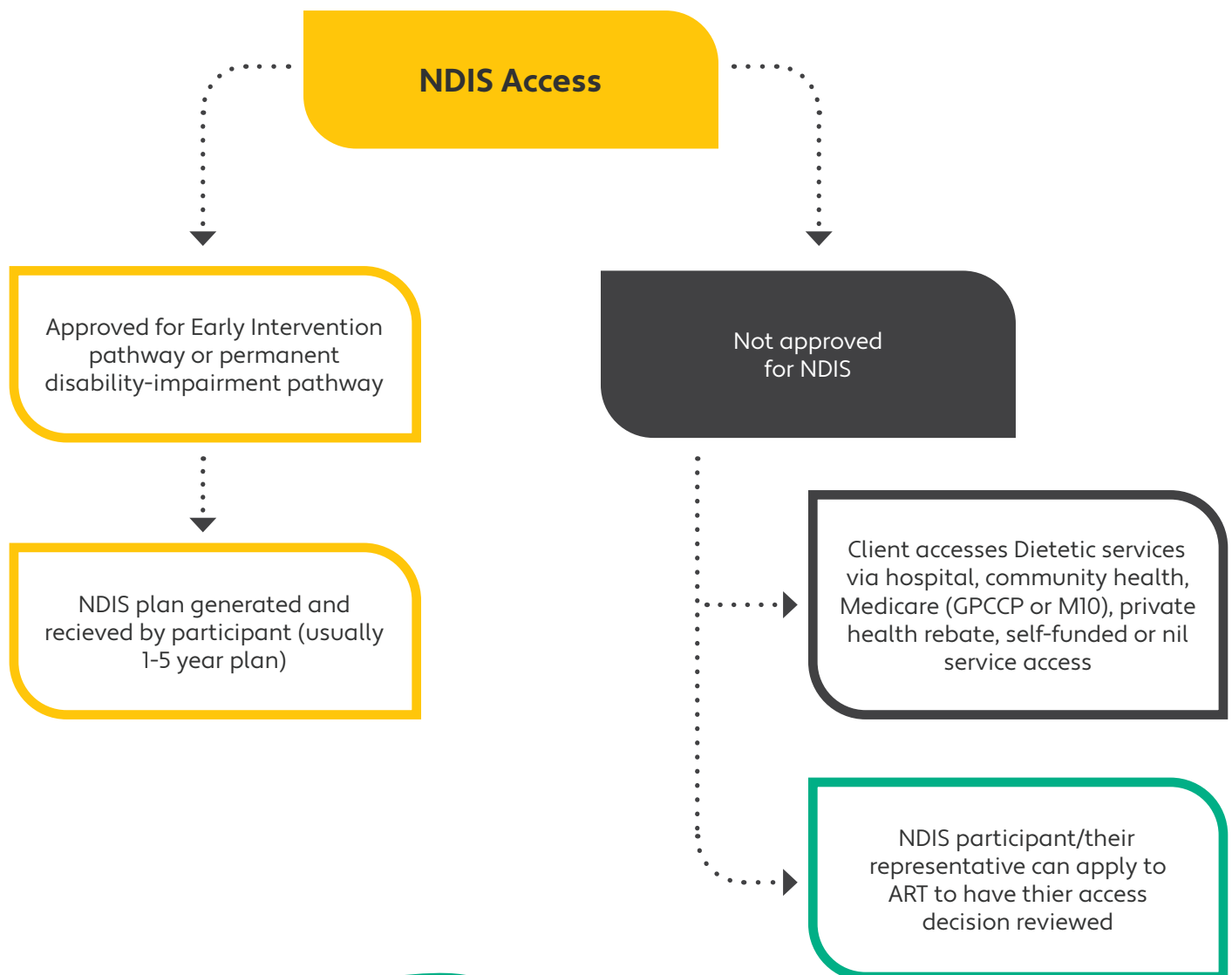
Acknowledgements:

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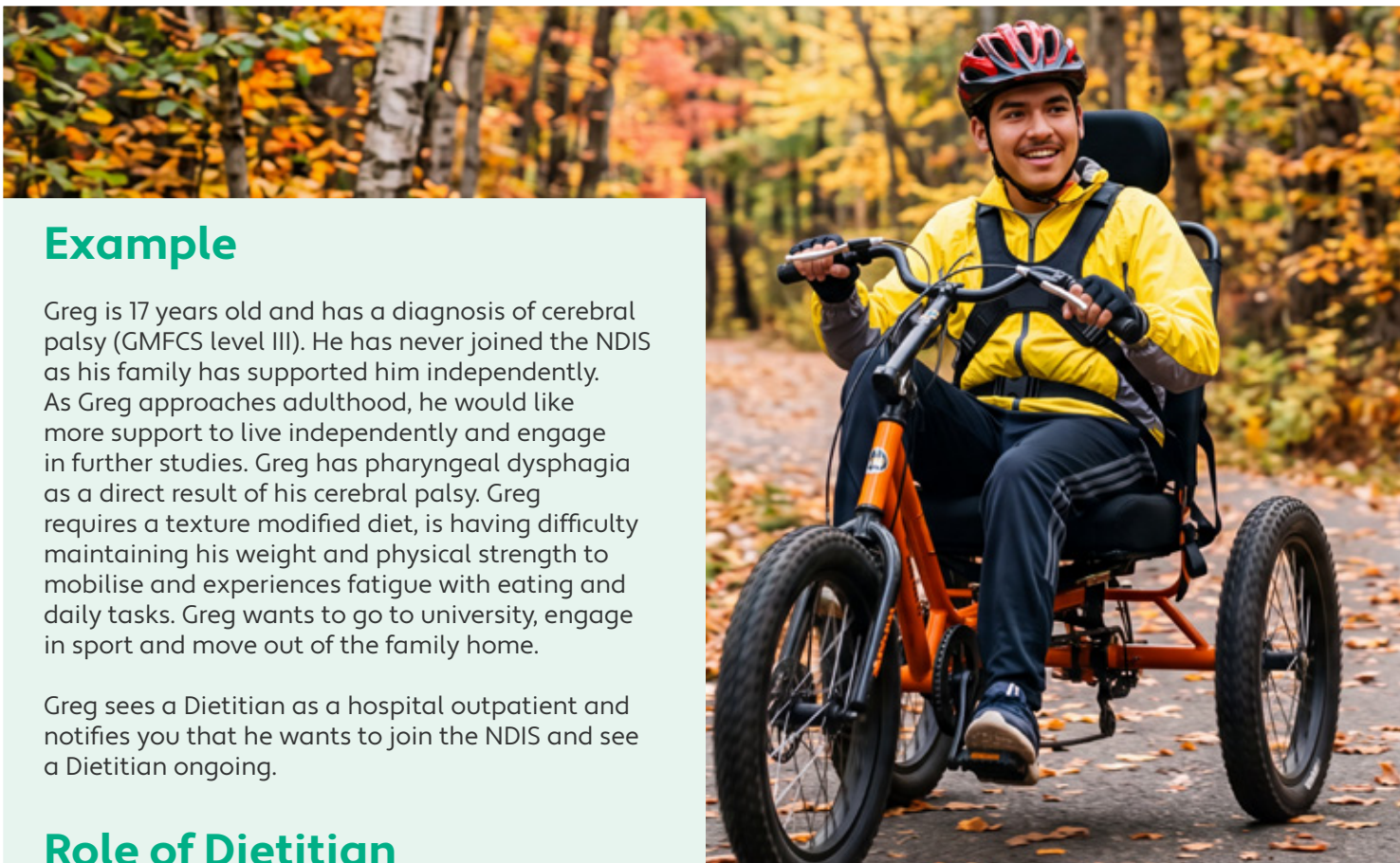
NDIS Access

NDIS access is the first step to becoming a participant in the National Disability Insurance Scheme. It involves checking whether a person meets the eligibility criteria. Dietitians can support this stage by providing evidence about nutrition-related impacts of the person's disability and how these affect their daily functioning, which can help inform access decisions.

If a person does not receive adequate funding in their NDIS plan that can be used by a Dietitian, they may not be able to access this essential support service. Furthermore, if they do not receive adequate funding for nutrition support products (HEN), they may be at high risk of malnutrition and adverse functional outcomes.



Dietitians may be requested to complete a report for to support a person with a disability or developmental delay to access the NDIS scheme. This is either privately funded by client or provided by a hospital-based dietetic service.



Example

Greg is 17 years old and has a diagnosis of cerebral palsy (GMFCS level III). He has never joined the NDIS as his family has supported him independently. As Greg approaches adulthood, he would like more support to live independently and engage in further studies. Greg has pharyngeal dysphagia as a direct result of his cerebral palsy. Greg requires a texture modified diet, is having difficulty maintaining his weight and physical strength to mobilise and experiences fatigue with eating and daily tasks. Greg wants to go to university, engage in sport and move out of the family home.

Greg sees a Dietitian as a hospital outpatient and notifies you that he wants to join the NDIS and see a Dietitian ongoing.

Role of Dietitian

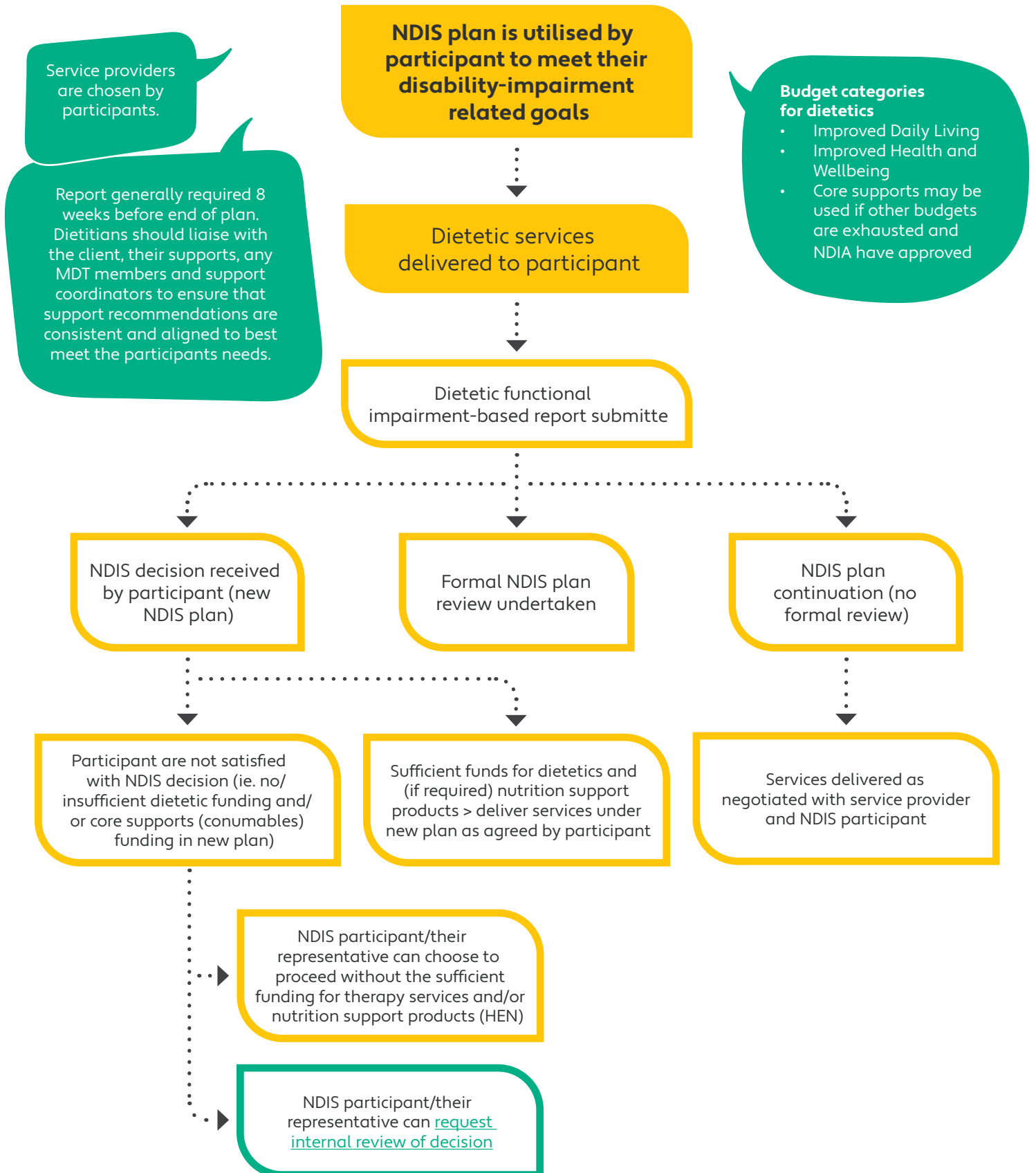
The dietitian plays a key role in supporting individuals to access the National Disability Insurance Scheme (NDIS) by providing clinical evidence of disability-related nutrition needs and their impact on daily functioning.

The dietitian's report could include:

- **Assessing nutrition-related functional impact**
Conduct a comprehensive assessment of the participant's nutritional status and dietary intake, including the impacts associated with cerebral palsy such as fatigue, swallowing difficulties, difficulties with food preparation, increased energy requirements due to dystonia (involuntary muscle movements) or joint contractures. It can be helpful to highlight and link the risks of reduced functional outcomes due to disability-related malnutrition (i.e. malnutrition that occurs due to the impacts of a person's disability)
- **Linking impairment to functional limitations**
 - Clearly describe how nutrition-related impairments affect the participant's ability to perform activities of daily living, such as eating safely, maintaining adequate nutrition, sustaining energy levels, and participating in education, sport, and independent living.
- **Providing supporting evidence for access**
Ensure that the person has written documentation (e.g. reports or letters) that align with NDIS access requirements, demonstrating that they have a permanent and significant disability, that their functional impacts have been identified by a multidisciplinary team (including a medical professional and allied health professionals)
- **Identify any risk and recommend dietetic and nutrition support needs**
Identify clinical risks (e.g. aspiration, malnutrition, fatigue) and explain how these impact overall health, safety, and independence without appropriate intervention.
- **Supporting participant goals**
Link nutrition needs to the participant's stated goals (e.g. attending university, engaging in sport, and living independently), demonstrating how dietetic input is essential to achieving these outcomes.
- **Recommending reasonable and necessary supports**
Justify the need for ongoing dietetic services, including monitoring, dietary modification, and interdisciplinary collaboration, to support the participant's goals and functional outcomes. Ensure your recommendations for support align with the NDIS 'reasonable and necessary' legislation (section 24 or 25 - www.legislation.gov.au/C2013A00020/latest/text). Be clear to recommend enough hours for a community-based dietetic support. This includes funding for (but not limited to):
 - Face to face appointments
 - Travel
 - Non-face-to-face work (such as nutrient analysis, prescription of HEN, arranging ordering of HEN and HEN feeding consumables, development of tailored meal plans, reports, multidisciplinary team working)
 - HEN (oral and enteral nutrition support products and enteral feeding consumables)

NDIS Plan Implementation

If a person meets the access criteria, they will become an NDIS participant and receive a funding support plan. This can include dietetic support to assist them to achieve their disability-related goals and aspirations.



Example

Greg was approved for NDIS access and received an NDIS plan which included dietetic supports. Greg sought out a disability-focused Dietitian to support him with his nutrition and diet-related needs. Greg's Dietitian completed an assessment and provided intervention supports to Greg on an ongoing basis. Greg's Dietitian completed a function-based report 8 weeks before the end of his current NDIS plan and submitted this to the NDIS to support Greg's NDIS review.

If Greg is comfortable that his new plan meets his disability-related needs (or does not wish to challenge the decision), he can continue to access the supports in his new plan.

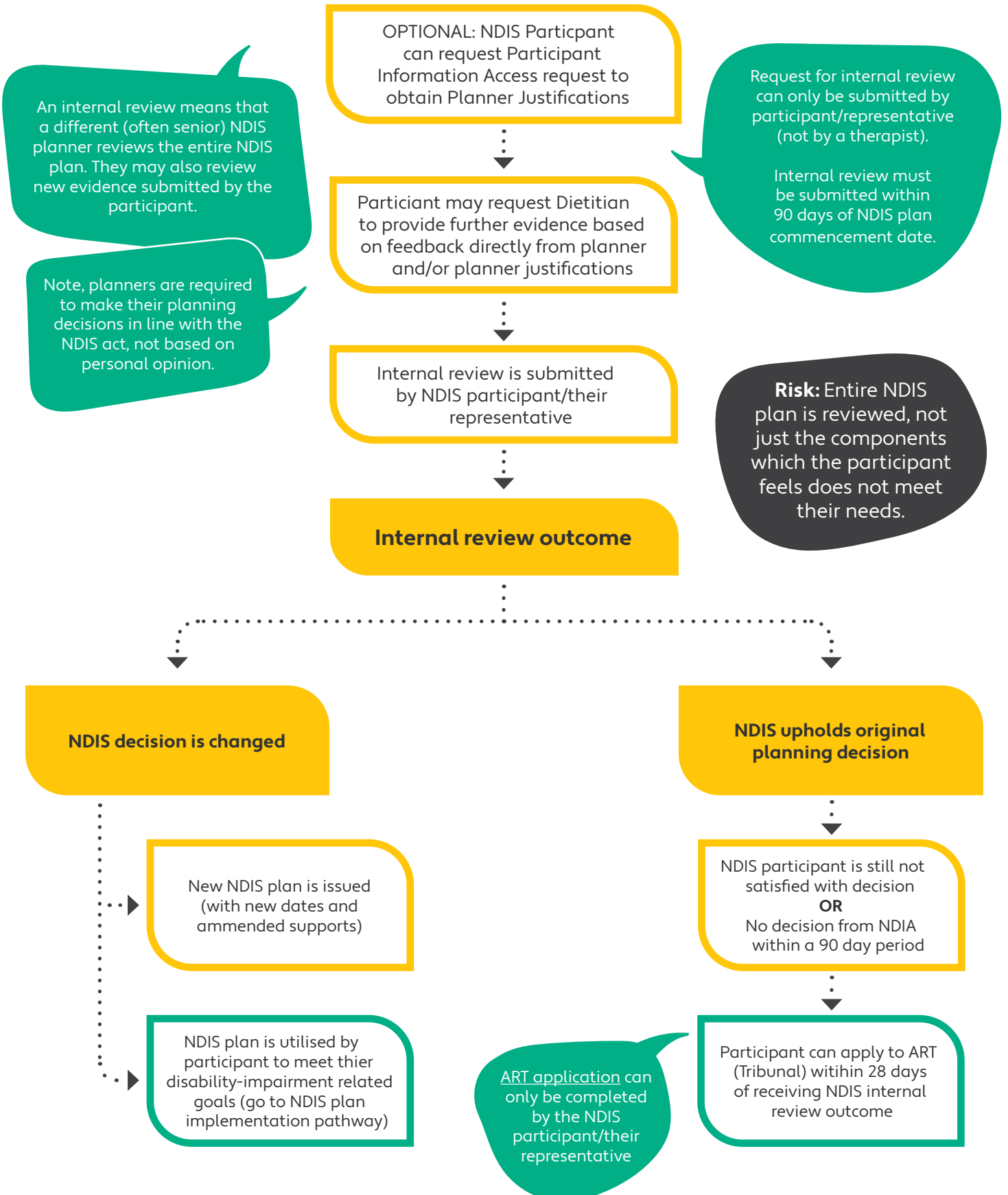
If Greg is not satisfied that his funding support plan meets his needs, he can request a review of the decision/s. Note, this process must be completed by the NDIS participant or their representative, not by a provider. Greg may request that a Dietitian support him with additional evidence for the internal review process.



NDIS Plan Review pathways

If NDIS participants are not satisfied with NDIS planning decisions, they can apply to have these decisions reviewed. The decision must be submitted internally to the NDIA first, and it may then be submitted for external legal review via the ART.

Step 1: Review of internal decision (internal review)





Example

Greg was only provided with a minimal budget for dietetic support (4 hours) and was not approved for clinically recommended oral nutrition support product (HEN) in his new plan. Greg initiated an internal review and requested that his Dietitian provide further written evidence based on the reason the supports were declined by the NDIA.

Greg's Dietitian provides further written evidence, ensuring that the support needs address the 'reasonable and necessary' legislation (section 24 or 25 www.legislation.gov.au/C2013A00020/latest/text).

Note, if Greg was not provided with any dietetic funding in his new plan, the Dietitian would need to discuss how this additional report would be funded (examples could include paid for privately by the person or completed on a pro bono basis).

Administrative Review Tribunal (ART)

The Administrative Review Tribunal reviews decisions made by Australian Government agencies (such as the NDIA), departments and ministers.

NDIS participant/their representative applies to the ART

If the participant/their representative has not done so already, they may wish to engage legal representation.

NDIS participant/their representative receives "T documents"

Case conference whereby issues are clarified and next steps are identified

Evidence is prepared - Dietitians may be contacted to clarify and/or provide further specific information

If a Dietitian is requested to provide further evidence by the ART, this is not funded by the NDIA. Dietitians should discuss payment for time with ART or participant or can choose to provide pro bono support.

NDIA might offer a settlement offer to the participant prior to case conference or tribunal hearing.

You may want to recommend that a participant seeks the assistance of their local member for parliament. A participant can find their local member [here](#)

Tribunal hearing where final decisions are handed down by ART

NDIA to implement decisions made by ART

NDIS participant utilises plan

Example

The ART requested further written information be provided by the George's Dietitian.

The ART particularly focussed on how George's impairments translated to his real-world situation, ensuring the supports clinically recommended aligned with the reasonable and necessary legislation, that Dietetic support was not a duplication of supports between different allied health disciplines, risks of not having the support and evidence/likelihood of the support being effective.

The dietitian prepared a written report which outlined the following:

1. Functional impact evidence

Specific examples of how the participant's condition affects George's daily life, such as:

- Ability to eat and drink safely
- Maintaining adequate nutrition, strength, mobility and cognition
- Fatigue impacting study, mobility, or participation
- Capacity for independent living

2. Justification for "reasonable and necessary" supports

- Why dietetic intervention is a clinical requirement
- What risks exist without support (e.g. malnutrition, reduced function, reduced participation, reduced economic contribution)
- How the support is directly related to George's disability-related impairments (intellectual, cognitive, neurological, sensory, physical, or psychosocial)

3. Evidence of outcomes and alignment of participant goals

- Evidence of what has been trialled so far, and outcomes of these interventions (any measurable improvements for George)
- Whether there has been any functional decline without the supports
- Alignment with participant goals (i.e. what can George do when the support is in place vs what he is not able to do without the support)

4. A breakdown of the clinically recommended frequency, type and duration of supports

- A breakdown of all functions required to provide the supports to George. This included:
 - a. Telehealth review appointments
 - b. Prescription of oral HEN products
 - c. Nutrient analysis
 - d. Ongoing monitoring of nutritional status and progress with goals
 - e. Multidisciplinary team support to George and his family
 - f. Development of individualised nutritional plan to support George's increased energy needs

Tip: Wait until you are requested to provide information by the ART before providing more written evidence. Ensure that the evidence that you provide links to the 'reasonable and necessary' legislative criteria (section 24 or 25 www.legislation.gov.au/C2013A00020/latest/text). Ensure that you highlight any risks (financial, social, participation, functional, health) associated with insufficient funding for supports, and highlight what could be achieved with sufficient funding.

Useful resources

- > www.art.gov.au/help-and-resources/advocacy-and-disability-support
- > www.art.gov.au/after-applying/after-you-apply
- > askizzy.org.au/disability-advocacy-finder
- > www.ndis.gov.au/participants/request-review-decision
- > www.ndis.gov.au/about-us/access-information/participant-information-access-request
- > www.health.gov.au/our-work/ndis-appeals-program?language=en
- > <https://electorate.aec.gov.au>