

DCJ Leaving Care Planning for Young People with Disability who are Participants of the NDIS

Both DCJ and the National Disability Insurance Scheme (NDIS) play an important role in providing supports for eligible children and young people with disability who are in the care of the Minister. Whilst DCJ provides care and protection, the NDIS supports the additional needs that a child or young person may have due to their disability. As part of the care and protection role, supporting a child or young person to obtain the best possible NDIS plan to meet their disability support needs is important across and throughout the full age spectrum. In the early years the focus of NDIS supports is on early intervention, meeting specific disability needs and providing the supports that families/carers need as a result of the child's disability. From around age 13 there is an added focus on capacity building and developing independence for later adult life as demonstrated through the diagram below.

FOCUS AREAS FOR NDIS PLANNING BY AGE STAGE

0-12

- early intervention
- specific disability needs met
- family support

The NDIS plan focus at this life stage is on early intervention, supporting the child's specific disability needs and providing the supports that families need as a result of the child's disability.

To identify the type of supports the NDIS might fund for each child, consider what a child of a similar age without a disability can do and explore supports needed due to disability to enable the child to participate in everyday activities.

As it is usual for young children to be cared for by a parent or caregiver at all times 'respite' type supports are often not funded within NDIS plans unless the child's disability needs are very high.

13-15

- developing greater independence both at home and in the community

Where there is a functional need due to disability an added NDIS plan focus at this age stage is on developing greater independence both at home and in the community. The goal is to work towards developing skills that can prepare the young person (YP) well for later adult life. As is the case for young people without disability, this is a period where we start to see reduced reliance on family in areas of daily life and learning to be more independent.

During this age stage it is important to check that NDIA have all relevant information about the disability support needs of the CYP (such as any new diagnosis / assessments) so that plans are built appropriately, especially in preparation for leaving care.

16

- robust focus on capacity building and readiness for independent living

With less than two years until leaving care a greater focus on capacity building is expected within the NDIS plan.

Some key areas to explore:

- How well the YP is linked into their community.
- Whether the YP can independently travel or has the capacity to learn.
- Plans for where the YP will live post leaving care.
- What skills or capacity the YP has for independent living and are we strengthening them.
- Access to financial support through Centrelink.
- [Employment](#) or further training/education.
- Whether the YP needs decision making support after leaving care eg. a Public [Guardian](#) and/or financial manager.

Check that [support coordination](#) has been included in the YPs NDIS plan to support NDIS leaving care planning.

17

- living arrangements post 18 explored and determined

As the YP turns 17 the focus is on considering options for where the YP will live after care. Funding should be available in the YP's NDIS plan for a specialist assessment that explores their current and future functional capacity. The assessment needs to explore the YP's skills and abilities in activities of daily living, clearly outlining what they can do independently and areas they need assistance with. It should outline levels of support needed post care considering the least restrictive model of support in line with their disability support needs, as well as any additional areas for capacity building.

Where the assessment recommends [supported accommodation](#), ask the Support Coordinator (SC) to complete a ['Home and Living Supporting Evidence'](#) form and submit this at the NDIS planning meeting. Also ask the SC to explore and identify accommodation options in readiness for leaving care. Consider options for [social/community housing](#) where assessments suggest that the YP has capacity for independent living with support.

18-25

- settling into life as an adult supported by informal support systems, the NDIS and the wider community

Whilst Community Services caseworkers may continue to play a role in providing aftercare support for the YP, supports are now primarily the responsibility of the YP's informal support system, the NDIS and the wider community. If the YP does not have a sustainable informal support system their Support Coordinator (SC) will take a lead role in assisting them to manage and utilise their NDIS plan, supported by their Public Guardian.

Important note: if the current NDIS plan will end after the YP turns 18 ask the SC to assist you to obtain a [plan reassessment](#) meeting for the YP by submitting a ['change of situation'](#) form. Always seek a plan reassessment for YP leaving care in their 17th year unless the supports in the current plan are sufficient to meet their needs after care. Start this process well before their 18th birthday - ideally 6 months prior.

Providing each young person in care with a planned transition towards independence and opportunities to build on their strengths and skills in preparation for leaving care is a key responsibility of DCJ. And whilst the standard DCJ leaving care planning process needs to be completed for all young people, the table below provides some more specific areas to focus on within NDIS plans from age 13 to assist our young people with a disability to make a positive transition.

CHECKLIST FOR GOOD NDIS PLANNING FROM AGE 13 WITH A FOCUS ON LEAVING CARE

AGE	LC FOCUS AREA	PLANNING STAGE	NDIS PLANNING CONSIDERATIONS CHECKLIST FOR CS STAFF	COLLABORATE WITH	
13+	Developing greater independence both at home and in the community. <i>Do this each plan review cycle, then add in the elements identified below at age 16 & 17</i>	Preparation (for each new CYP and 6 months prior to plan end date)	<ul style="list-style-type: none"> ✓ Develop an understanding of the skills, capacity, outcomes and strengths of the young person (YP) through review of assessments and school and other information gathered so far. ✓ Engage with the YP around their disability support needs ensuring that those with verbal or cognitive communication challenges are able to make their views known eg using communication tools. 	Support Coordinator (SC)* YP, school, carer/s, providers <i>*although most will, not all young people in the care of the Minister will have support coordination funded in their plan</i>	
		Pre NDIS planning meeting (do this 3 months prior to end date of the current plan)	<ul style="list-style-type: none"> ✓ Convene a pre-NDIS planning meeting to review areas of success and consider/agree on disability supports that can assist to strengthen capacity/skills to put forward for the new plan (consider home, school and community). ✓ Compile evidence to support requests for additional and continued disability supports which can assist with capacity/skill building e.g. assessment from allied health provider, letter from school, behaviour report/data (only include incident data if there is no other evidence such as a recent behaviour assessment report). Provide these to the NDIA via enquiries@ndis.gov.au as soon as the evidence is available and compile to take to the plan reassessment meeting. ✓ Check that NDIA have you listed as the child representative. 		
		NDIS planning meeting	<ul style="list-style-type: none"> ✓ Attend the NDIS planning meeting as the lead advocate (as the parental representative it is critical that the CS caseworker is the lead advocate for the young person, in collaboration with any carer and that the YP is involved). ✓ Discuss success of the prior NDIS plan and present ideas for disability supports that can assist strengthen capacity and skills as agreed at the pre-meeting. Present the collated evidence in support. ✓ Ensure that all relevant disability information has been provided to NDIA (eg. new diagnosis/assessments) 		Carer/s, YP
		Post NDIS planning meeting	<ul style="list-style-type: none"> ✓ Follow up on any agreed actions from the NDIS planning meeting and monitor that you receive the new plan. ✓ Review the plan when it arrives and if any issues are identified contact the NDIS planner to discuss (where possible). Follow up with your Engagement & Family Support team representative to discuss any remaining concerns. ✓ Work with the young person and all stakeholders to implement and monitor the plan and its outcomes. 		NDIA planner, YP, carer/s, SC*
16	Robust focus on capacity building and readiness for independent living.	Pre NDIS planning meeting (add to the above conversations)	<ul style="list-style-type: none"> ✓ Add readiness for independent living to the conversation. Explore opportunities to increase capacity through improved daily living skills (eg. travel training, budgeting) and increase focus on social/community participation so they can be well linked into an ongoing support system. Start to consider plans for where the young person might live after care and supports needed. If there is no funding in the plan to support this, seek a plan reassessment. ✓ Start to consider options for employment or further training post school. ✓ Consider the need for appointment of a Public Guardian and/or financial manager. 	SC* YP, school, carer/s, providers	
		NDIS planning meeting	<ul style="list-style-type: none"> ✓ Even if the young person has a strong informal support system, a Support Coordinator (SC) will be required to assist with NDIS preparation for leaving care. If there is no SC budget in the NDIS plan, seek a plan reassessment. 		SC* YP, carer/s
17	Living arrangements post 18 explored and determined.	Upon turning 17	<ul style="list-style-type: none"> ✓ Determine whether an independent functional assessment will be required to assist identify the disability supports / model needed for the young person post leaving care. If yes, make the referral NOW (or even before they turn 17). 	SC* YP <i>^ the YP is likely to have capacity for independent living where the assessment shows that the YP needs less than 6 hours a day of direct support.</i>	
		As soon as the assessment result is received	<ul style="list-style-type: none"> ✓ Review the assessment when it arrives and clarify any issues with the relevant health professional. ✓ Where the assessment recommends supported accommodation, ask the SC to complete a 'Home and Living Supporting Evidence' form. Submit this to the NDIA at the next NDIS planning meeting (see 'important note' on page 1). Ask the SC to explore and identify accommodation options in readiness for leaving care. Consider options for social/community housing where assessments suggest that the YP has capacity for independent living with support^. 		
		Pre NDIS planning meeting	<ul style="list-style-type: none"> ✓ Ensure that all review reports and/or new assessments have been forwarded to the NDIA enquiries email address. ✓ Check that NDIA have you listed as the child representative on their system. 		
		Post NDIS planning meeting	<ul style="list-style-type: none"> ✓ Check that accommodation (as applicable) and/or other appropriate supports have been included. ✓ Assist the YP to understand their NDIS plan and who can support them into the future. 		

CHECKLIST TOOL FOR GOOD ANNUAL NDIS PLANNING, WITH A FOCUS ON LEAVING CARE

STAGE	TIMING	ACTIVITY		
1. Preparation	12 weeks prior to plan end date	RESEARCH	<input type="checkbox"/>	Develop an understanding of the skills, capacity, outcomes and strengths of the young person (YP) through review of assessments and school and other information gathered so far.
		ENGAGE	<input type="checkbox"/>	Engage with the young person around their disability support needs ensuring that those with verbal or cognitive communication challenges are able to make their views known eg using communication tools.
2. Pre NDIS planning meeting	8-12 weeks prior to plan end date	MEETING SET	<input type="checkbox"/>	<i>You should have received a phone call to set up a date for the meeting by now– if not, follow up with NDIA</i>
		PRIORITIES AGREED	<input type="checkbox"/>	Convene a pre-NDIS planning meeting with all stakeholders to review areas of success and consider and agree on disability supports that can assist to strengthen capacity and skills to put forward for the new plan. Consider this in context of home, school and in the community.
		EVIDENCE COMPILED	<input type="checkbox"/>	Compile evidence to support requests for additional and continued disability supports which can assist with capacity/skill building e.g. assessment from allied health provider, letter from school, behaviour report/data (only include incident data if there is no other evidence such as a recent behaviour assessment report). Provide these to the NDIA via enquiries@ndis.gov.au as soon as the evidence is available and compile to take to the plan reassessment meeting
			<input type="checkbox"/>	Ensure that all relevant disability information has been provided to NDIA (eg. new diagnosis/assessments). Also check that NDIA have you listed as the child representative
	From age 16	CAPACITY BUILDING / FUTURE OPTIONS EXPLORED	<input type="checkbox"/>	Add readiness for independent living to the conversation. Explore opportunities to increase capacity through improved daily living skills (eg. travel training, budgeting) and increase focus on social/community participation so they can be well linked into an ongoing support system. Start to consider plans for where the young person might live after care and supports needed. If there is no funding in the plan to support this, seek a plan reassessment.
			<input type="checkbox"/>	Start to consider options for employment or further training post school.
			<input type="checkbox"/>	Consider the need for appointment of a Public Guardian and/or financial manager.
	Upon turning 17	CHECK PLAN END DATE	<input type="checkbox"/>	Identify the end date of the current plan and if it ends after the YP turns 18 (or too close to it), seek a plan reassessment by submitting a 'change of situation' form. Start this process well before their 18th birthday - ideally 6 months prior or more.
		LIVING OPTIONS EXPLORED & DETERMINED	<input type="checkbox"/>	Determine whether an independent functional assessment will be required to assist identify the type of supports or model needed for the young person post leaving care. If yes, make the referral NOW (or even before they turn 17).
			<input type="checkbox"/>	Where the assessment recommends supported accommodation, ask the SC to complete a 'Home and Living Supports Request' form. Submit this to the NDIA at the next NDIS planning meeting (see 'important note' on page 1). Ask the SC to explore and identify accommodation options in readiness for leaving care. Consider options for community housing where assessments suggest that the YP has capacity for independent living with support^.
REVIEW PREP		<input type="checkbox"/>	Ensure that all review reports and/or new assessments have been forwarded to the NDIA enquiries email address. Also that NDIA have you listed as the child representative on their system.	
3. NDIS planning meeting	At the meeting	INFORM NEW PLAN	<input type="checkbox"/>	Attend the NDIS planning meeting as the lead advocate (as the parental representative it is critical that the CS caseworker is the lead advocate for the YP, in collaboration with any carer and that the YP is involved).
			<input type="checkbox"/>	Discuss success of the prior NDIS plan and present ideas for disability supports that can assist strengthen capacity and skills as agreed at the pre-meeting. Present the collated evidence in support (also anything sent to the enquiries box).
	From age 16	ADDED SC SUPPORT	<input type="checkbox"/>	Even if the young person has a strong informal support system, a Support Coordinator (SC) will be required to assist with NDIS preparation for leaving care. If there is no SC budget in the NDIS plan, seek a plan reassessment.
4. Post NDIS planning meeting	Within 4 weeks of the meeting	REVIEW PLAN ADEQUACY	<input type="checkbox"/>	Follow up on any agreed actions from the NDIS planning meeting and receipt of new plan. Review plan and if any issues are identified contact NDIS planner to discuss (where possible). Contact your Engagement & Family Support team representative to discuss any remaining concerns.
	ongoing	IMPLEMENT & MONITOR	<input type="checkbox"/>	Work with the young person and all stakeholders to implement and monitor the plan and its outcomes.
	From age 17		<input type="checkbox"/>	Assist the YP to understand who can support them into the future to implement their NDIS plan.