



Overview – Early childhood approach

For early childhood planners and early childhood partners

[ndis.gov.au](https://www.ndis.gov.au) | March 2024

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Session outline

In this session we will cover the following topics:

- **Topic 1:** Best practice in early childhood intervention
- **Topic 2:** The early childhood approach
- **Topic 3:** Eligibility for the NDIS
- **Topic 4:** Functional assessment and screening tools
- **Topic 5:** Case scenarios
- **Topic 6:** A family perspective
- **Topic 7:** Quiz

Learning outcomes

After completing this training, you will be able to:

- Describe the early childhood approach, who it supports and how it benefits a child and family.
- Explain early connections and how they connect children and families to the support they need.
- Describe how the NDIS Code of Conduct, NDIS Practice Standards and National Guidelines-Best Practice in Early Childhood Intervention support the way we deliver the early childhood approach.
- Explain best practice in early childhood intervention to families.
- Explain the eligibility requirements and eligibility reassessment to families
- Identify tools which may be used when considering the developmental level and functional capacity of a child younger than 9.

Topic 4: Functional assessment and screening tools

Developmental milestones

The Developmental milestones and Early Years Framework and the National Quality Standards provides important information about developmental milestones for different age categories from birth to 5 years.

Additional information for children younger than 9 can be found on the Raising Children Network website.

A yellow rectangular banner with white text. The text reads: 'Developmental milestones and the Early Years Learning Framework and the National Quality Standards'.

Developmental milestones
and the Early Years Learning Framework
and the National Quality Standards



Paediatric Evaluation Disability Inventory-Computer Adaptive Test (PEDI-CAT).

The PEDI-CAT is a functional capacity assessment tool.

There are two key applications of the PEDI-CAT:

To help determine functional capacity. The PEDI-CAT is used, together with other information to develop a picture of a child's functional capacity compared to other children of a similar age.

To help measure changes in functional capacity over time in response to early childhood intervention.

Ages and Stages Questionnaire (ASQ)

- The ASQ is a developmental screening tool that is used to gather information about a child's development. It is used for children between the ages of one month to 5 and a half years.
- Early childhood partners use the ASQ, together with other information, to help form an understanding of a child's development. This includes when an early childhood partner is determining if a child has developmental delay or developmental concerns. Gathering such information will help an early childhood partner recommend the best way a child and family are supported. For example, through community and other government supports and services, early supports or applying to the NDIS.
- The results of the ASQ are entered into fields in the Community Connections case in PACE.

Activity: Developmental milestones discussion

- Work in pairs or small groups. Open the [Developmental Milestones and the EYLF and NQS | Department of Social Services, Australian Government \(dss.gov.au\) \(External\)](#)
- Discuss the differences in the examples of what you might observe in the behaviour of a typically developing 2- to 3-year-old compared with a 3- to 5-year-old.

Remember that the Developmental Milestones and EYLF/NQS list examples only and is not for use as a checklist.

Topic 5: Case scenarios

Declan case scenario

Declan is 3 years old and lives with his mother Andrea. He goes to childcare 2 days each week.

Andrea also takes Declan to playgroup once a week where she catches up with friends and Declan plays with other children. When at playgroup Andrea notices that Declan's communication skills are not as well developed as other children his age, and he doesn't get along as well with peers.

During a visit to the paediatrician Andrea mentions her concerns. The paediatrician gives Andrea some strategies to help her continue to support Declan's development. They also suggest Andrea contacts an early childhood partner.

Declan case scenario continued 1

Andrea and Declan meet with an early childhood partner, at their home. Andrea and the early childhood partner discuss Declan's strengths and Andrea's concerns about Declan's development. They also complete an ecomap.

The early childhood partner observes Declan going about his usual activities at home and at childcare. She also talks to Declan's educators and uses tools like the ASQ and PEDI-CAT. The information gathered helps the early childhood partner understand Declan's development, strengths and functional capacity.

The early childhood partner determines that Declan's presentation is best described as developmental concerns and offers early supports, which Andrea accepts.

Declan case scenario continued 2

The early childhood partner provides support through a range of activities during early supports. For example, they:

- Work with Andrea to develop and implement strategies at home and in the community to support Declan build his skills and increase his independence.
- Visit Declan at childcare and talk about strategies with staff to ensure a consistent approach to supporting Declan.
- Support Andrea to connect with community supports such as a local community centre parent support group.
- Deliver group workshops on social skills and communication skills.

Declan case scenario continued 3

After a few months Declan's communication and social skills have improved.

His speech is easier to understand and his interactions with other children have improved.

Andrea and childcare staff feel more confident in supporting Declan's ongoing learning and development. Declan and Andrea no longer require early supports.

Early supports, delivered by the early childhood partner have sufficiently supported Declan and Andrea, without the need to apply to the NDIS.

Activity - Declan case scenario

What are some examples of resources the early childhood partner might have used when supporting Declan and Andrea during early support?

Lucy case scenario

Lucy is four years old. She really enjoys spending time with her younger brother, and her parents, Samantha and John in the backyard and going to the playground.

Samantha notices that Lucy needs help doing some things other children her age can do. She needs a lot more help than other children her age with things at home like the mealtime routine and dressing. She also needs a lot more support than other children her age at childcare with things like staying seated for story time and playing and communicating with friends. Samantha and Lucy's educator discuss the concerns. Lucy's educator suggests that Samantha contacts an early childhood partner.

Lucy case scenario continued 1

The early childhood partner meets with Samantha, John and Lucy at their preferred location, their home. The early childhood partner gathers information from various sources. For example, by speaking with Samantha and John and Lucy's educators and observing Lucy at home and childcare. They also use tools like the ASQ and ecomap.

After meeting with Samantha, John and Lucy several times the early childhood partner suggests that Samantha and John apply to the NDIS on behalf of Lucy because it is likely she meets the NDIS early intervention requirements for developmental delay.

Lucy case scenario continued 2

The early childhood partner also suggests that community support might help Lucy's family. They put the family in touch with a local peer support group so they can meet other families of young children.

Lucy becomes eligible for the NDIS under the early intervention requirements and a NDIS plan is developed. The plan includes the goals Samantha and John have for Lucy and funding to support progress towards goals. The family use funding to get early intervention through a key worker who provides strategies to help Lucy develop her social, self-care and communication skills and increase her participation in daily routines and the community.



Lucy case scenario continued 3

Lucy turns 6. Since becoming a participant, she has made a lot of progress towards the goals in her NDIS plans.

She started school and Samantha is pleased with the additional support she is getting with learning. Her teacher says she has settled in, taking part in all activities and getting along well with her new friends. She is much more independent in completing daily routines at home too.

The key worker has worked with Samantha and John to develop strategies they can continue using at home to support Lucy.

Lucy case scenario continued 4

The early childhood partner has had many conversations over the last two years with Samantha and John about the eligibility requirements of the NDIS.

They understand that Lucy no longer meets the early intervention requirements for developmental delay. They also understand that Lucy is unlikely to meet the early intervention requirements or disability requirements for any other reason. Lucy does not have an impairment that is likely to be permanent. However, they do not want Lucy to leave the NDIS.

Lucy case scenario continued 5

The early childhood partner revisits the conversation about eligibility reassessments with Samantha and John and refers Lucy for an eligibility reassessment. They also confirm that Lucy, Samantha and John continue to remain well connected with community and other government supports and services.

The eligibility reassessment determines that Lucy is no longer eligible. Lucy and her family are supported to leave the NDIS. Samantha and John are prepared for this given the many conversations they have had with the early childhood partner and planner delegate about the eligibility requirements.

Lucy remains well supported by her family, school and the community.

Lucy case scenario continued 6

- Lucy became eligible for the NDIS because she met the early intervention requirements for developmental delay.
- Over time her support needs changed. She no longer requires support from the NDIS.
- Also, a participant can only access the NDIS for developmental delay until they are 6.
- Lucy leaves the NDIS and remains well supported by her family, school and the community.

Activity - Lucy case scenario

Work in pairs or small groups.

Discuss how you would explain to Samantha and John why Lucy is no longer eligible for the NDIS.

To support your discussion, you can refer to:

[Our Guideline - Applying to the NDIS \(External\)](#) and

[EC: Guide – Eligibility conversations for children younger than 6 with developmental delay \(External\)](#).

Lin case scenario

Lin is 3 and lives with her parents Simone and Thai. Lin becomes eligible for the NDIS under the early intervention requirements, for developmental delay.

Lin's first plan is approved, and Simone and Thai speak with several early childhood intervention providers to choose one. They contact Nully Early Childhood Services (Nully). The early childhood partner and planner have provided Simone and Thai with information on best practice in early childhood intervention. Simone and Thai are pleased that the supports Nully offers is in line with best practice. They also feel that the early childhood professionals from this service understand Lin's needs and are best able to support them.

Lin case scenario continued 1

Simone and Thai use funding from Lin's NDIS plan to pay for supports from Nully.

This helps them work towards the goals in Lin's NDIS plan.

Simone and Thai work with the key worker to develop strategies to support Lin. Strategies are updated regularly as Lin's skills develop and they are shared with her early childhood educators.

Lin and her family are well supported by community and other government supports and services too. Lin is now 5, attends preschool and she is getting ready to go to school next year.

Lin case scenario continued 2

Over the last two years, Lin has made good progress towards the goals in her NDIS plan. It appears her presentation no longer meets the developmental delay definition in the [NDIS Act 2013 \(External\)](#).

This is because her functional ability in most areas now appears to be like her peers. The remaining concern her family have is that Lin is sometimes fussy with her food choices.

Lin case scenario continued 3

The early childhood partner meets with Simone and Thai and revisits the conversation about eligibility. Some examples of things the early childhood partner includes in the conversation are:

- Lin's progress towards goals.
- Lin's current functioning and support needs. They use this information when referring to the eligibility requirements to explain why she is likely not to continue to be eligible.
- Confirmation that sufficient community and other government supports and services are in place. They discuss the role of the health and education systems in providing ongoing support.
- Whether Lin's family would like Lin to voluntarily leave the NDIS.

Lin case scenario continued 4

Simone and Thai decide Lin will voluntarily leave the NDIS. They let the NDIS know of their decision by completing a form which is available on the NDIS website. They also could have done this by sending a letter or email if they preferred.

They will continue to get support from their general practitioner and community health dietician to manage Lin's diet and nutritional needs.

They will also continue to be supported by preschool this year, and school next year.

If Simone and Thai had not chosen to voluntarily leave, the early childhood partner would have referred Lin for an eligibility reassessment.



Lin case scenario continued 5

- Lin became eligible for the NDIS because she met the early intervention requirements for developmental delay.
- Some participants remain eligible for the NDIS for developmental delay until they are 6.
- Over time Lin's functional capacity increases. When she is 5, she no longer meets the early intervention requirements for developmental delay.
- Lin leaves the NDIS and remains well supported by her family and community and other government supports and services.

Activity: Lin case scenario

Discuss the case scenario about Lin in small groups or pairs.

Include in your discussion how you would explain to Simone and Thai the option of voluntarily leaving the NDIS.

Beth case scenario

Beth is 6 years old. She really enjoys gymnastics, and dancing around the house with her siblings. Ballet classes are the highlight of her week.

Beth became a participant of the NDIS following an autism diagnosis. Her parents have been using funding from Beth's NDIS plan for early childhood supports from a registered NDIS provider, Bright Children's Services. The key worker has been working with Beth's parents to develop strategies to support Beth to build her social, communication and fine motor skills and also with strategies to help her with emotional regulation.

Beth's parents, school and Bright Children's Services have been sharing strategies to ensure there is consistency in the way they support Beth across all environments. She has been progressing towards the goals in her NDIS plan.

Now that Beth has commenced school her parents have both moved to working full time. Since then, the key worker has solely been providing support through seeing Beth at school and sharing strategies with her educators.



Activity- Beth case scenario

What are some of the things you could say to Beth's parents about this?

In your response, consider the [NDIS Practice Standards and Quality Indicators](#) and the [Best Practice Guidelines](#).

Version control

Version	Created by	Status	Date
V0.1	SRP102	Draft	Jan 2024
V1.0	SRP102	Final	05/02/2024
V2.0	SRP102	Final	01/03/2024

Overview- Early childhood approach

Learner Workbook

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Question	Answer
became eligible for the NDIS because they met which criteria?	
Question 3: An 8-year-old child with Rett syndrome became eligible for the NDIS because they met which criteria?	Write here
Question 4: A participant who does not have evidence of an impairment that is likely to be permanent turns six. They became eligible for the NDIS for developmental delay. Following an eligibility reassessment, what will happen?	Write here
Question 5: A 5-year-old participant who became eligible for their NDIS, for developmental delay, has built their capacity and their presentation no longer meets the definition for developmental delay. They also do not have an impairment that is likely to be permanent. After discussions with the family about the eligibility requirements the family do not wish their child to voluntarily leave. What should happen next?	Write here
Question 6: A 4-year-old participant became eligible for the NDIS for developmental delay. They are fully participating in daily and community activities and their family feel they no longer require support from the NDIS. What should the family do?	Write here
Question 7: A participant who met eligibility under the early intervention requirements for	Write here

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Question	Answer
developmental delay turns six. Since becoming a participant, they have been diagnosed with autism, level 2. What should happen next?	

Eligibility reassessment resources

Here are the links to some useful knowledge articles.

Remember you can also search for knowledge articles once you have access to PACE.

Make some notes about the key messages.

[EC: Guide – Eligibility conversations for children younger than 6 with developmental delay | Salesforce \(mcas.ms\)](#) and

[EC: Guide – Evidence sources to demonstrate if an impairment is likely to be permanent for children who previously met access for developmental delay | Salesforce \(mcas.ms\)](#)

Notes:

Topic 4: Functional assessment and screening

Read about developmental milestones and the Raising Children Network and make some notes about the key messages.

Fill in the reference and notes and questions table below.

Reference and notes and questions table

References	Notes and questions
Developmental Milestones and the EYLF and NQS (external)	Write here

References	Notes and questions
Department of Social Services > Our Responsibilities > Families and Children > Publications & Articles > Developmental Milestones and the EYLF and NQS	
Raising Children Network (external) . raisingchildren.net.au	Write here

Activity: Developmental milestones discussion

Work in pairs or small groups. Open the [Developmental Milestones and the EYLF and NQS \(external\)](#)

Discuss the differences in the examples of what you might observe in the behaviour of a typically developing 2- to 3-year-old compared with a 3- to 5-year-old.

Remember that the Developmental Milestones and EYLF/NQS list examples only and is not for use as a checklist.

Topic 5: Case scenarios

Let's have a look at some case scenarios.

Declan case scenario

Declan is 3 years old and lives with his mother Andrea. He goes to childcare 2 days each week.

Andrea also takes Declan to playgroup once a week where she catches up with friends and Declan plays with other children. When at playgroup Andrea notices that Declan's communication skills are not as well developed as other children his age, and he doesn't get along as well with peers.

During a visit to the paediatrician Andrea mentions her concerns. The paediatrician gives Andrea some strategies to help her continue to support Declan's development. They also suggest Andrea contacts an early childhood partner.

Andrea and Declan meet with an early childhood partner, at their home. Andrea and the early childhood partner discuss Declan's strengths and Andrea's concerns about Declan's development. They also complete an ecomap.

The early childhood partner observes Declan going about his usual activities at home and at childcare. She also talks to Declan's educators and uses tools like the ASQ and PEDI-CAT. The information gathered helps the early childhood partner understand Declan's development, strengths, and functional capacity.

The early childhood partner determines that Declan's presentation is best described as developmental concerns and offers early supports, which Andrea accepts.

The early childhood partner provides support through a range of activities during early supports.

For example, they:

- work with Andrea to develop and implement strategies at home and in the community to support Declan build his skills and increase his independence.

- visit Declan at childcare and talk about strategies with staff to ensure a consistent approach to supporting Declan.
- support Andrea to connect with community supports such as a local community centre parent support group.
- deliver group workshops on social skills and communication skills.

After a few months Declan's communication and social skills have improved. His speech is easier to understand and his interactions with other children have improved.

Andrea and childcare staff feel more confident in supporting Declan's ongoing learning and development. Declan and Andrea no longer require early supports.

Early supports, delivered by the early childhood partner have sufficiently supported Declan and Andrea, without the need to apply to the NDIS.

Question: What are some examples of resources the early childhood partner might have used when supporting Declan and Andrea during early support?

Notes:

Lucy case scenario

Lucy is four years old. She really enjoys spending time with her younger brother, and her parents, Samantha and John in the backyard and going to the playground.

Samantha notices that Lucy needs help doing some things other children her age can do. She needs a lot more help than other children her age with things at home like the mealtime routine and dressing. She also needs a lot more support than other children her age at childcare with things like staying seated for story time and playing and communicating with friends. Samantha and Lucy's educator discuss the concerns. Lucy's educator suggests that Samantha contacts an early childhood partner.

The early childhood partner meets with Samantha, John and Lucy at their preferred location, their home. The early childhood partner gathers information from various sources. For example, by speaking with Samantha and John and Lucy's educators and observing Lucy at home and childcare. They also use tools like the ASQ and ecomap.

After meeting with Samantha, John, and Lucy several times the early childhood partner suggests that Samantha and John apply to the NDIS on behalf of Lucy because it is likely she meets the NDIS early intervention requirements for developmental delay.

The early childhood partner also suggests that community support might help Lucy's family. They put the family in touch with a local peer support group so they can meet other families of young children.

Lucy becomes eligible for the NDIS under the early intervention requirements and a NDIS plan is developed. The plan includes the goals Samantha and John have for Lucy and funding to support progress towards goals. The family use funding to get early intervention through a key worker who provides strategies to help Lucy develop her social, self-care and communication skills and increase her participation in daily routines and the community.

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Lucy turns 6. Since becoming a participant, she has made a lot of progress towards the goals in her NDIS plans.

She started school and Samantha is pleased with the additional support she is getting with learning. Her teacher says she has settled in, taking part in all activities, and getting along well with her new friends. She is much more independent in completing daily routines at home too.

The key worker has worked with Samantha and John to develop strategies they can continue using at home to support Lucy.

The early childhood partner has had many conversations over the last two years with Samantha and John about the eligibility requirements of the NDIS.

They understand that Lucy no longer meets the early intervention requirements for developmental delay. They also understand that Lucy is unlikely to meet the early intervention requirements or disability requirements for any other reason. Lucy does not have an impairment that is likely to be permanent. However, they do not want Lucy to leave the NDIS.

The early childhood partner revisits the conversation about eligibility reassessments with Samantha and John and refers Lucy for an eligibility reassessment. They also confirm that Lucy, Samantha, and John continue to remain well connected with community and other government supports and services.

The eligibility reassessment determines that Lucy is no longer eligible. Lucy and her family are supported to leave the NDIS. Samantha and John are prepared for this given the many conversations they have had with the early childhood partner and planner delegate about the eligibility requirements.

Lucy remains well supported by her family, school, and the community.

- Lucy became eligible for the NDIS because she met the early intervention requirements for developmental delay.
- Over time her support needs changed. She no longer requires support from the NDIS.

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- Also, a participant can only access the NDIS for developmental delay until they are 6.
- Lucy leaves the NDIS and remains well supported by her family, school, and the community.

Activity: Work in pairs or small groups. Discuss how you would explain to Samantha and John why Lucy is no longer eligible for the NDIS.

To support your discussion, you can refer to:

[Our Guideline - Applying to the NDIS \(external\)](#) and

[EC: Guide – Eligibility conversations for children younger than six with developmental delay.](#)

Notes:

Lin case scenario

Lin is 3 and lives with her parents Simone and Thai.

Lin becomes eligible for the NDIS under the early intervention requirements, for developmental delay.

Lin's first plan is approved, and Simone and Thai speak with several early childhood intervention providers to choose one.

They contact Nully Early Childhood Services (Nully).

The early childhood partner and the planner have provided Simone and Thai with information on best practice in early childhood intervention.

Simone and Thai are pleased that the supports Nully offers is in line with best practice.

They feel that the early childhood professionals from this service understand Lin's needs and are best able to support them.

Simone and Thai use funding from Lin's NDIS plan to pay for supports from Nully.

This helps them work towards the goals in Lin's NDIS plan.

Simone and Thai work with the key worker to develop strategies to support Lin. Strategies are updated regularly as Lin's skills develop and they are shared with her early childhood educators.

Lin and her family are well supported by community and other government supports and services too. Lin is now 5, attends preschool and she is getting ready to go to school next year.

Over the last two years, Lin has made good progress towards the goals in her NDIS plan.

It appears her presentation may no longer meet the developmental delay definition in the NDIS Act 2013.

This is because her functional ability in most areas now appears to be like her peers. The remaining concern her family have is that Lin is sometimes fussy with her food choices.

The early childhood partner meets with Simone and Thai and revisits the conversation about eligibility. Some examples of things the early childhood partner includes in the conversation are:

- Lin's progress towards goals.
- Lin's current functioning and support needs. They use this information when referring to the eligibility requirements to explain why she is likely not to continue to be eligible.
- Confirmation that sufficient community and other government supports and services are in place. They discuss the role of the health and education systems in providing ongoing support.
- Whether Lin's family would like Lin to voluntarily leave the NDIS.

Simone and Thai decide Lin will voluntarily leave the NDIS.

They let the NDIS know of their decision by completing a form which is available on the NDIS website.

They also could have done this by sending a letter or email if they preferred.

They will continue to get support from their general practitioner and community health dietician to manage Lin's diet and nutritional needs.

They will also continue to be supported by preschool this year, and school next year.

If Simone and Thai had not chosen to voluntarily leave, the early childhood partner would have referred Lin for an eligibility reassessment.

- Lin became eligible for the NDIS because she met the early intervention requirements for developmental delay.

National Disability Insurance Agency

[ndis.gov.au](https://www.ndis.gov.au)

Telephone 1800 800 110

Webchat [ndis.gov.au](https://www.ndis.gov.au)

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For people who need help with English

TIS: 131 450

For people who are deaf or hard of hearing

TTY: 1800 555 677

Voice relay: 1800 555 727

National Relay Service: relayservice.gov.au

Version Control

Version control table

Version	Amended by	Description	Status	Date
V0.1	SRP102	New	Draft	11/12/2023
V1.0	SRP102	Updated	Draft	05/02/2023
V2.0	SRP102	Updated	Final	01/03/2024



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CI Connect – Severity Tools

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Make sure protective markings and instructional text are removed before external publication.

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1. CI Connect – Severity Tools

Accessibility Options

Lesson 1 of 6

Accessibility options

- To navigate through the course simply use the **previous** or **next** buttons at the bottom of each screen. [For screen reader keyboard navigation instructions please follow this link.](#)
- All videos use closed captions
- All hyperlinks will open in a new browser

Severity Indicator - Setting the Scene

Lesson 2 of 6

Pre-planning

Pre-planning is where you gather information from a participant or their carers and nominees. Your conversations are integral to deliver a positive participant experience. Your conversations help you to get the right information about the way a participant lives their day-to-day life, what they can do, their goals and supports.

You are all aware of the five Engagement Principles from our Participant Service Charter. They are:



Two are particularly important in the application of the content of this CI Connect module.

Responsive – We will respond to individual needs and circumstances

Respectful – We will recognise your individual experience and acknowledge you are an expert in your own life

When applying the “must dos” of Pre-Planning, it is very important to remember our Engagement Principles and that you deliver a quality, strengths based, participant-

centred conversation so that the participant feels listened to, respected and empowered at the end of the conversation.

The Update the Severity Tools task is one of two Pre-Planning tasks that contribute to the generation of the Typical Support Package (TSP). These two tasks are:

- Update Severity Tools
- Update the Guided Planning Questions

The primary disability is the disability with the greatest functional impact. The primary disability also contributes to the generation of the TSP. It is important at the Pre-Planning stage to confirm that the primary disability is correct and that evidence is available to confirm the primary and any secondary disability.

Correct severity tool choice, correct scoring and recording, correct responses to the Guided Planning Questions and a correct primary disability, ensures the integrity of the participant's Typical Support Package and plan. Data from quality checking of recently approved plans demonstrates that when this information is correct and evidence based, the funding decisions are more likely to meet all criteria in Section 34.1 of the NDIS Act 2013.

Note that for children 7 years and under the Guided Planning Questions are used to guide decision-making, not generate a TSP.

Does the TSP matter?

You may recall that the first principle Fair for everyone, both today and for future generations from the document "[Principles we follow to create your plan](#)" discusses the Typical Support Package. The information below is written for participants, however, it is a reminder for plan developers that the two Pre-Planning tasks that generate a Typical Support Package do matter and must be correct.

"The Typical Support Package gives us **an indication of what supports we'd usually expect to include in your plan** based on the participant's situation and disability support needs.

Each support in a plan must be reasonable and necessary, but they also need to be reasonable and necessary as a package of supports. We approve your whole plan, not the individual supports in a plan in isolation. The Typical Support Package **helps guide this validation process**.

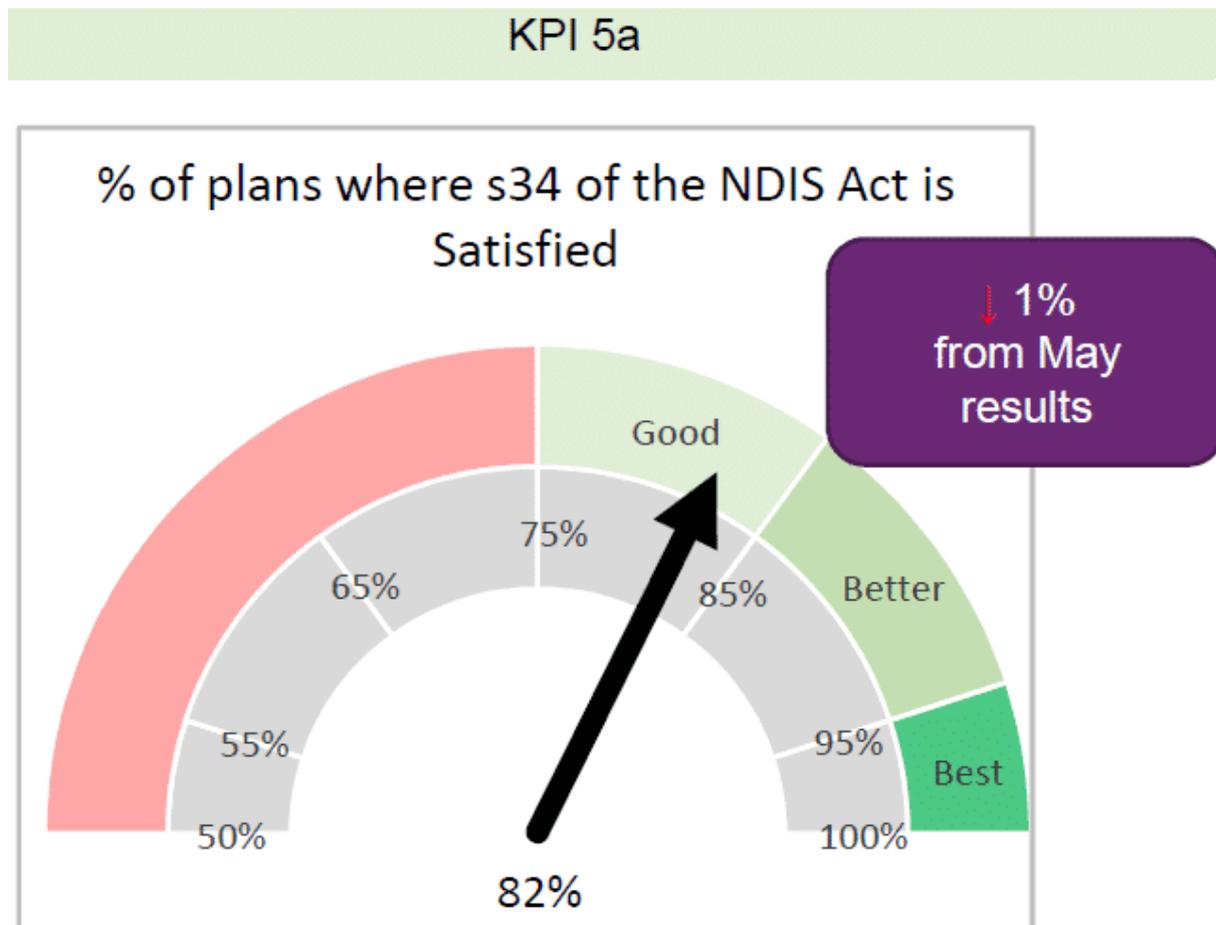
The Typical Support Package also **helps to guide the consistency of our decision making process**. We use these to check the overall plan to make sure that all the supports make sense together, and that the support types and amounts will complement each other to help participant's fulfil "an ordinary life."

The Problem - What does the data show?

Lesson 3 of 6

What does the data tell us?

The graph below shows the June 2021 result for KPI 5a - % of plans where Section 34.1 of the NDIS Act is satisfied. Good, better and best ranges are represented by colours. This graph was used in all the previous CI Connect modules. We are in the good range at 82% nationally for Reasonable and Necessary decision-making.



Severity Tools and WHODAS - Percentage of compliance

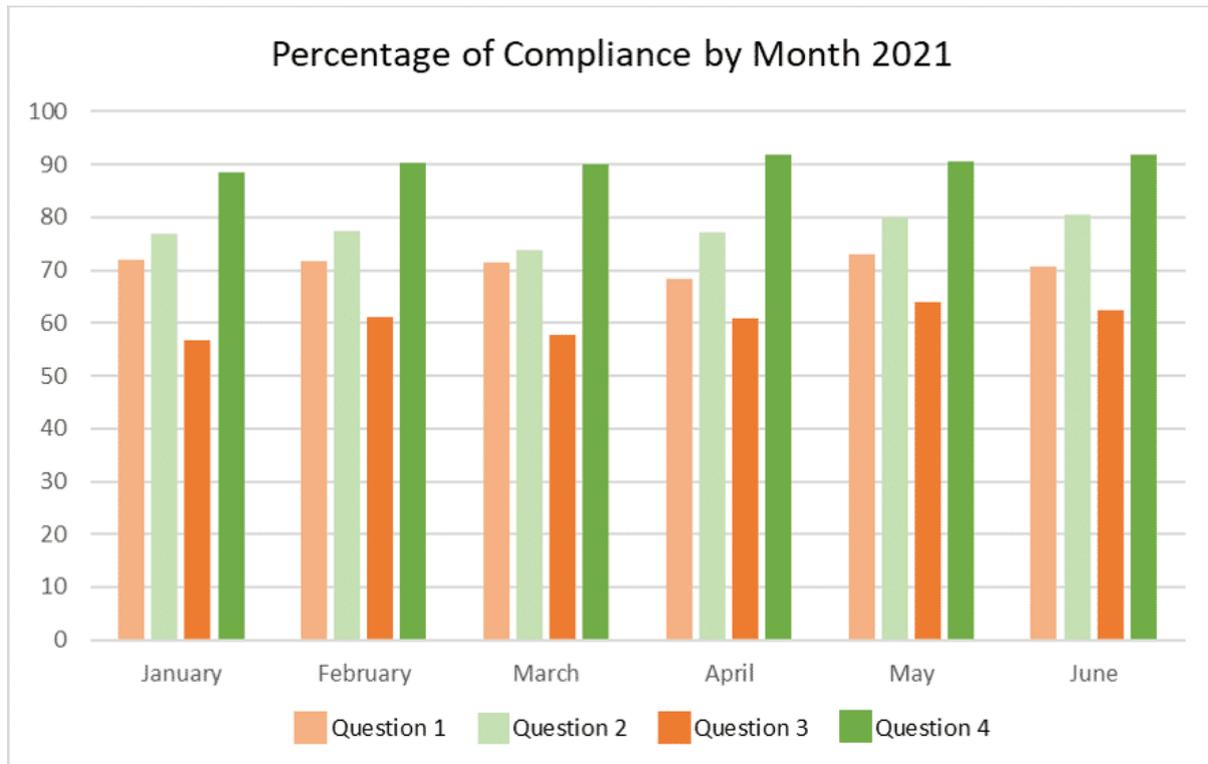
The graph below shows the results from 500 - 600 approved plans from January to June 2021 for three Pre-Planning tasks, as well as for whether the primary disability is correct.

The vertical axis shows percentages.

The horizontal axis shows the different months from January to June 2021.

The four colours represent four questions, and also where they are situated in the good, better, best range (as shown by the KPI 5a graph above). Orange means not yet in that range while green means they have achieved a good or better range.

The bar graphs below represent the results of quality checks for each question from January to June 2021.



The four questions are as follows:

Question 1 – Have the Guided Planning Questions been fully completed and do these responses appropriately reflect available information?

The pale orange bar graph shows the percentage of compliance with this question from January to June 2021. That is guided planning questions are fully completed and reflect the information on the participant record. The bar graphs shows that we are achieving about 70%.

These results have not quite reached the good range of 75 to 85%.

Question 2 – If there has been a change in guided planning, is there sufficient evidence to justify this change?

The light green bar graph shows the percentage compliance where guided planning questions are changed and whether there is sufficient evidence on the participant record to justify the change. The bar graphs show that we have crept up to 80% over

the last few months. This tells us that for about 20 of 100 approved plans, the evidence available in the participant record does not support the change to the guided planning questions.

These results have reached the good range of 75 to 85%.

Question 3 – Is the participant’s level of function supported by appropriate evidence?

The dark orange bar graph shows whether the participant’s level of function is supported by appropriate evidence. These bar graphs directly relate to the Update the WHODAS and the Update Severity Tools task – that the severity tool chosen is correct, the score is recorded correctly and information in the severity tool is consistent across the participant record. The results show about 60% compliance, meaning that about 40 out of 100 plans for participants 7 years and older have a level of function recorded that is not supported by appropriate evidence.

These results have not reached the good range of 75 to 85%.

Question 4 – Has the primary disability been recorded correctly based on available evidence?

The dark green bar graph shows whether the primary disability is recorded correctly based on the available evidence. In the last CI Connect module about sustainability, we mentioned this result in relation to Rules for Participants 5.1b – supports are related to the participant’s disability. The graphs show that we are consistently at about 90% compliance, indicating that about 10 of every 100 plans does not have a correct primary disability recorded.

This result is in the better range of 85 to 95%. There is opportunity for improvement to reach the best range for this question.

Further analysis of June data

Further analysis of the June data to explore whether compliance with the Update the WHODAS and Update Severity Tools task (Question 3) influenced KPI 5a - the % of plans where Section 34.1 of the NDIS Act is satisfied, demonstrated that:

- Correct completion of the Update the WHODAS or Update the Severity Tool task resulted in funding decisions that met Section 34.1 in 87% of plans – 5% above the national result for KPI 5a.
- Incorrect completion of the Update the WHODAS or Update the Severity Tool task resulted in funding decisions that met Section 34.1 only 74% of the time, well below the national result of 82% for KPI 5a in June 2021.

What does it mean?

It means that there is an opportunity to improve the Update the WHODAS and Update the Severity Tools task by:

- Paying closer attention to the chosen severity tool
- Carefully considering evidence
- Scoring and recording the tool correctly
- Substantiating and justifying all changes in an interaction - General - Update Severity Tools.

The data tells us that correct evidence based scoring in the Update Severity Tool task (and the WHODAS when appropriate) and the Update the Guided Planning Questions task results in better Reasonable and Necessary decision-making.

Better decision-making ensures a sustainable scheme now and into the future.

Severity Indicator – Video Transcript

[See Appendix](#)

Lesson 4 of 6

Overview - Video

A short introduction and overview of the use of the Severity Tools and their importance to the participant's journey and the planning process.

<https://youtu.be/oZQfOzTwMsw>

Resources - Things to read before the discussion

Lesson 5 of 6

Resources

The following resources examine the Severity tools in more detail and include SOPs and documents. of interest.

[Complete the Update Severity Tools task](#)

[Complete the WHODAS](#)

[Complete the Guided Planning Questions](#)

Tools

[Cerebral Palsy Severity Tool: Gross Motor Functional Classification](#)
[Hearing Severity Tool:Functional Impact of Hearing Loss](#)
[Multiple Sclerosis Severity Tool:Patient Determined Disease Steps](#)
[Stroke Severity Tool:Modified Rankin Scale](#)
[Hearing Severity Tool:Functional Impact of Hearing Loss](#)
[Vision Severity Tool:Functional Impact of Vision Loss](#)
[Conversation Style Guide](#)

Interaction Template

[Interaction templates - General](#) - Severity indicator updated, Request to change primary disability and Primary disability change complete.

Discussion and Examples

Lesson 6 of 6

Discussion Starter

Solution based questions for your team engagement session

Use any or all of the questions below to help facilitate the Severity Tool task Team Facilitation session.

You may decide to choose questions that you consider are more relevant to your team/State or Region.

You can choose to discuss questions as a whole group, in small groups, in partners or individually depending on the size of your team. Similarly, you can choose to use the same questions or designate different questions to groups to promote further discussion.

*Remember this session is an hour in duration and you need to allow time for a debrief.

[Severity Indicator Discussion Questions.docx](#)

Debrief and Next Steps

Debrief meetings allow you to formally conclude a discussion, identify key learnings and talk about next steps.

In concluding the team facilitation session, cover off expectations for weeks 2 - 4 as part of the CI Connect Program.

2. CI Connect – Severity Tools Knowledge Check

Accessibility Options

Lesson 1 of 5

Accessibility options

- To navigate through the course simply use the **previous** or **next** buttons at the bottom of each screen. [For screen reader keyboard navigation instructions please follow this link.](#)
- All videos will use closed captions
- All hyperlinks will open in a new browser

What You Will Need

Lesson 2 of 5

Before you begin

- Take your time to answer the questions and refer to all available material via Intranet.
- The knowledge check is found in the next block. They are presented as true or false, multi choice, multi answer questions and match responses.
- You are required to correctly answer all questions to complete the module. You will be provided with a statement that your answer is either correct or incorrect. You must get a correct feedback statement on each question to proceed to the next question.
- Where you receive any incorrect feedback you will have the option to either review the module section or to take the question again. You can undertake the question as many times as you need until you get a correct feedback statement.

Knowledge Check- Severity Tools

Lesson 3 of 5

<https://forms.office.com/Pages/ResponsePage.aspx?id=ZYt3zS11SkWHz7mZD-WJk3-inbY1Qx1Iti3MlgjtkndUQ01QREo5VjBST1JVRVo1SIJSWIZJVkRMRy4u>

Click the button to go to a survey form. When you are finished return here to complete the rest of the knowledge check.

Knowledge Check

According to this module, which two of the five engagement principles are particularly important in the application of the content in this module?

Transparent & Respectful

Empowering & Connected

Respectful & Empowering

Responsive & Respectful

SUBMIT

TAKE AGAIN

According to this module, the Update the Severity Tools task is one of two Pre-Planning tasks that contribute to the generation of the Typical Support Package (TSP). The other task is...

Update the Guided Planning Questions

Update the WHODAS

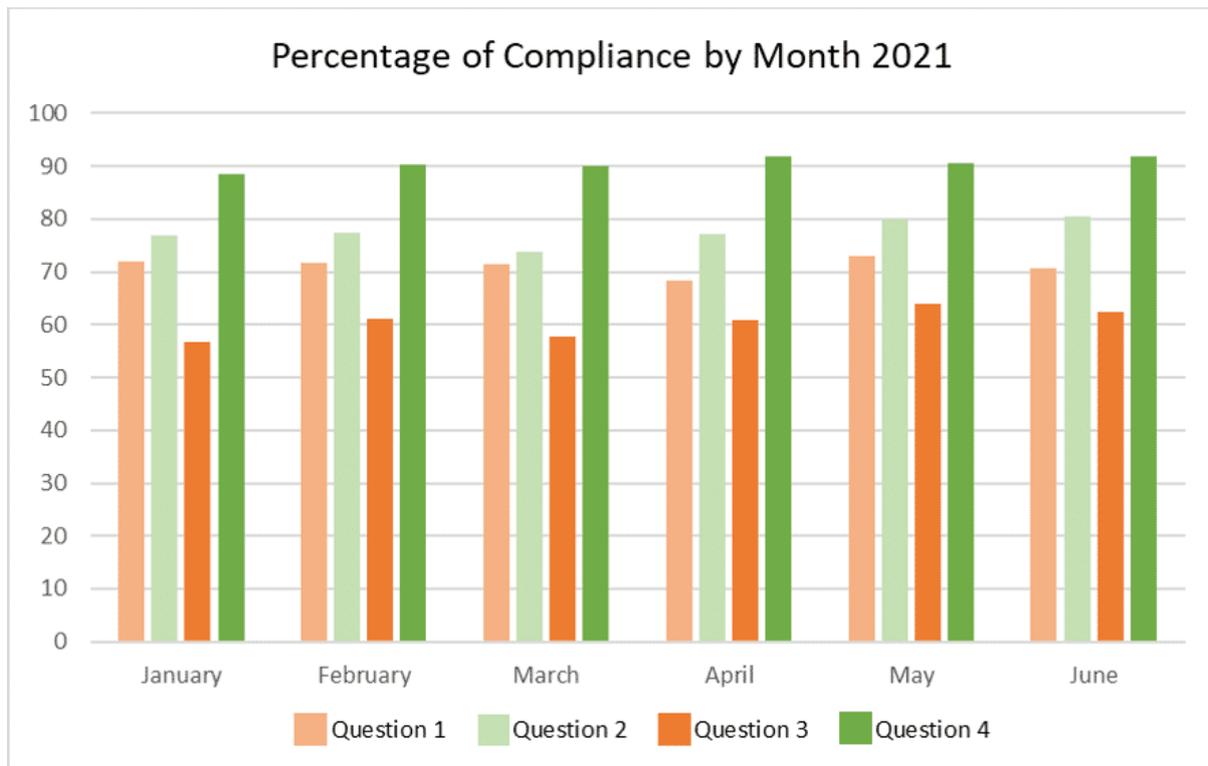
Update the Typical Support Package

Update the Percentage of Compliance

SUBMIT

TAKE AGAIN

Look at the following image



Which of these results have consistently reached the **good** range (ie. **not** the better or best range)

Question 1

Question 2

Question 3

Question 4

SUBMIT

TAKE AGAIN

The Standard Operating Procedure - Update the Severity Tools Task contains information about when plan developers are required to complete the Update the Severity Tools task. Here are some of the circumstances.

Which one of these is **not** one of the circumstances listed in the module?

The participant provides you with an updated functional capacity assessment

You are completing a plan review for a participant who is 0-6 years of age

The participant has a physical disability which has consistent outcomes over a period of time.

A severity score was not entered as part of the access process.

SUBMIT

General Survey

Lesson 4 of 5

Before you begin

Below is a general Survey about CI Connect.

- Take your time to answer the questions and think about your responses.
- The questions are multi choice, multi answer questions and free text responses. If you wish to change your responses then do so before clicking submit.
- There are no incorrect answers. Please be honest. The survey is anonymous.

Survey Link

Survey

Click this link to go to the survey

[General Survey](#)

Exit

Lesson 5 of 5

Course Completed.

Appendix

Video Transcript

The Update the Severity Tools task or Update the WHODAS task is one of the essential building blocks of planning and supports the integrity of funding decisions. Understanding the functional impact of disability and a participant's individual circumstances are integral to the way the NDIA approaches planning. The severity tool choice and scoring represents a participant's level of function. The scoring must be evidence based as it contributes to the Typical Support Package, guides decision-making and is the basis of the justification of funded supports included in a participant's plan.

For most participants the Update Severity Tools task is informed entirely by standardised functional assessments, scores and reports completed externally by a participant's treating health professional/s. They are submitted to the NDIA and attached to the participant's record.

These assessments constitute evidence for the planning process. The scores demonstrate the level of impact a participant's disability has on their everyday activities. Your conversation with a participant builds from these scores so that you fully understand what a participant can do and how they live their life.

When do you need to complete the Pre-Planning task Update Severity Tools?

The Standard Operating Procedure - Update the Severity Tools Task contains information about when plan developers are required to complete the Update the Severity Tools task. Here are the circumstances:

- There is a change in the participant's functional capacity
- The participant provides you with an updated functional capacity assessment
- You are completing a plan review for an adult or child who has met access based on disability or early intervention
- You are completing a plan review for a participant who is 0-6 years of age
- The participant has a degenerative disability such as motor neurone disease or an fluctuating disability like psychosocial disability where functional capacity may change

- A severity score was not entered as part of the access process.

Twelve of the most common disabilities and the NDIA preferred Severity Tool and a second or third option if the first severity tool option is not available is explained in the SOP - Update the Severity Tools task. It explains when to use the WHODAS and it outlines how to enter the score correctly in the NDIA Business System.

What is evidence?

Information taken from an external or internal assessment and recorded in the Update the Severity Tools task constitutes evidence. Severity Indicator information comes from three sources. In order of preference for plan development purposes these are:

- [Disability specific assessments](#)
- [Internal disability specific Severity Tools](#)
- [Assessments not specific to a disability type.](#)

Disability specific assessments:

- Treating health professionals complete these assessments
- Partner or NDIA staff **cannot** complete these assessments

Includes the Diagnostic and Statistical Manual of Mental Disorders, Fifth edition (DSM-5) for Intellectual Disability and Autism

Internal disability specific severity tools:

- Partner and Agency staff can complete these assessments

Includes the Gross Motor Function Classification Scale (GMFCS) for Cerebral Palsy, Modified Rankin Scale (mRS) for Stroke, Disease Steps for Multiple Sclerosis, Hearing and Vision tools

Assessments not specific to a disability type:

- Partner and Agency staff can complete these assessments

Includes the PEDI-CAT – Paediatric Evaluation of Disability Inventory Computer Adaptive Test and WHODAS 2.0 World Health Organisation Disability Assessment Schedule

When collecting functional capacity assessment information the score of an **external assessment** needs to be provided by the participant, their nominee, their child representative or their treating health professional.

Plan developers must:

- Sight a copy of the assessment report before the score is entered into the Update Severity Tools section of the NDIS Business System
- Attach the evidence in the NDIA Business System

Plan developers can complete the WHODAS assessment if an external functional capacity assessment is not available in the participant's record or if there is no other preferred NDIA severity tool.

What are the evidence requirements if there is no preferred external assessment tool and plan developers apply or change an internal disability specific severity tool? (This can include the WHODAS, PEDI-CAT, Gross Motor Function Classification Scale (GMFCS) for cerebral palsy, the Modified Rankin Scale for stroke, the Disease Steps for multiple sclerosis and hearing and vision tools)

There are four points for plan developers to note:

- You must sight evidence of the impact of a participant's disability or sight evidence of a change in function.
- Changes to severity scores must be justified in an Interaction General – Severity indicator updated
- Scoring information must be consistent across the participant record, including provider reports, Guided Planning Questions and the Planning Conversation Tool
- All evidence of function must be attached to the participant's record.

Evidence can be supplied in the form of a signed letter or a letter on formal letterhead from the participant's treating health professional. Evidence of the severity of the disability should include:

- type of disability
- date disability diagnosed
- how long the disability will last
- available treatments

- how the disability impacts the participant's everyday life. For example, mobility/movement skills, communication, social interaction, learning, self-care, self-management.

When completing the Update Severity Tools task or the Update the WHODAS task in Pre-Planning plan developers can ask themselves: Is the participant's level of function recorded in the severity tool supported by appropriate evidence? That is:

Is the chosen severity tool correct?

Is the score recorded correctly?

Is the information in in the severity tool consistent with other information in the participant record such as the Planning Conversation Tool, Guided Planning Questions, the Participant Statement or provider reports?

In addition, check that the primary disability is correct, that there is evidence attached to the participant record that confirms the primary disability (and secondary disability), that responses to the Guided Planning Questions are correct and that all information is consistent across the participant's record.

Pre-Planning tasks require careful attention to scores, evidence and participant information. They are the foundation of plan development. It is equally important that your information gathering conversation with a participant, their carer or nominee is dynamic and strength-based, uses open-ended and probing questions to focus on what the participant can do and how they live their day-to-day life.

This is quality Pre-Planning and leads to sound and sustainable funding decisions and a good participant experience.



OFFICIAL

CI Connect – Severity Tools: Team Facilitation Discussion Questions

The contents of this document are OFFICIAL.

Please note, this security marking also appears in the header and footer of this document.

Make sure protective markings and instructional text are removed before external publication.

CI Connect – Severity Tools: Team Facilitation Discussion Questions	1
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2. Pre-Planning Update the Severity Tools Task	4

1. Improving Participant Experience

As a team, **how might we** prevent the issues outlined below affecting decision-making, sustainability and the participant's experience?

- The WHODAS has captured information related to conditions other than the eligible primary and secondary impairments.
- An Agency administered assessment was completed but the results are not consistent with other information about function in the participant's record.
- An internal disability specific severity tool was used and the score has been recorded incorrectly in the NDIA Business System
- The WHODAS has been used when a disability-specific assessment is available.
- An external assessment report does not match the score entered into the Severity Indicator tool.
- A child (0 -16 years of age) where a suitable functional capacity assessment is attached or referenced but has not been recorded, with only the PEDICAT completed.

2. Pre-Planning Update the Severity Tools Task

Let's start thinking about opportunities for improvement. Think about:

- Standard Operating Procedures and Tools
- Internal assessment tools to choose from
- How to use the internal assessment tools correctly
- The human element (operator error)
- How can we support each other to get this right?
- Innovations or enhancements

What might we change, modify or build to ensure that we complete this task correctly and that it is evidence based?

- How do we ensure that scores entered or changed for internal severity tools can be justified by appropriate evidence? Where do you record your decision to change scores?
- When responses to guided planning questions are changed how can you ensure you have appropriate evidence to justify the change.
- When circumstances require a change to the Severity tool, what does 'sufficient evidence' look like in order to justify this change?
- If the Severity Tool has not been updated in line with the primary disability but rather in line with the associated impairments, what are the consequences for the participant? Section 34.1 a-f? Sustainability?
- What are the consequences for the participant when the WHODAS is used but a more specific assessment tool is more appropriate?