



If someone has a disability and an NDIS plan, it does not mean the NDIS will fund ALL required supports. A variety of support options are often needed.



## Out Of Hospital Care

**Out Of Hospital Care** packages offer low to medium levels of non-clinical support, including case management and home care services, such as assistance with personal care, housework, meals, transport, respite and social support.

**Community Packages (ComPacks)**  
 ComPacks packages support people who are an in-patient of participating NSW public hospitals and require short-term, coordinated home care services in order to return home safely.

**Safe and Supported at Home (SASH)**  
 SASH packages support people with functional impairment/s who are in the process of applying for the National Disability Insurance Scheme (NDIS), or are continuing to test eligibility after an ineligible outcome from the NDIS.

**End of Life (EoL)**  
 EoL packages support people who are in the deteriorating or terminal phase of their illness or condition, require assistance with daily living tasks, and wish to die in their own home or remain at home for as long as possible.

**Out of Hospital Care supports must relate directly to the health condition for which the person has been deemed eligible to receive support.**

**Supports cannot replace or directly assist with any other services already in place.**

## Community Nursing & Allied Health

**Community Nursing Services** provide a broad range of services that focus on health promotion, disease prevention and management.

This can include generalist services such as wound care and indwelling and supra-pubic catheter management. Also more specialised services such as palliative care, stomal therapy services, and respiratory and cardiac services. Community nurses are unable to provide supports related to social supports and transport.

**Allied Health Professionals** provide essential care for people of all ages including children, older people, people with chronic illnesses and those experiencing disability. GP referrals are required for these health-related services.

- Allied Health services include:
- Nutrition and Dietetics
  - Occupational Therapy
  - Physiotherapy
  - Podiatry
  - Speech Pathology
  - Social Work

**A person who has an NDIS plan will not be eligible for allied health services where the need directly relates to the disability for which they have NDIS support.**

**If a person is receiving support from multiple sources, eg. NDIS and Community Nursing, keep in mind they are funded for specific purposes and should not work together on the same task, e.g. showering the person.**

## National Disability Insurance Scheme

**NDIS Disability-related Health Supports** are supports a person may need to help manage a health condition directly related to their disability, e.g. continence supports for a person with a spinal injury who requires a catheter.

Or it may be support to help manage a person's health or health condition that is not related to their disability, if the functional impacts of their disability prevent them from managing on their own, e.g. a person might have an intellectual disability and struggle to understand and manage their high blood pressure. The NDIS may fund support workers to assist by prompting daily medications.

**The NDIS is responsible for supports that help a person go about their daily life and are relevant to the disability-related impairment/s that reduce functional capacity.** The NDIS fund supports related things a person cannot do or needs assistance with as a result of their disability. This includes ongoing maintenance supports to help a person maintain their body's functions and abilities, including those provided or supervised by healthcare staff. Such supports could include long-term therapy or support, to improve abilities over time and stop functional decline.

Disability-Related Health Supports the NDIS may fund, where directly related to the disability, include:

- Dysphagia supports
- Respiratory supports
- Nutrition supports
- Diabetes management supports
- Continence supports
- Wound and pressure care supports
- Podiatry supports
- Epilepsy supports

## My Aged Care

**Transition Aged Care Program** provides short-term, specialised care and support to help a person regain functional independence and confidence sooner and avoid the need for long-term care and support services.

**Aged Care Packages** are long-term care packages for people 65 years or older, or 50 years or older for Aboriginal or Torres Strait Islander people. **If you have an NDIS plan before you turn 65 years you can remain with the NDIS or apply for an Aged Care Package.**

Supports available under the Aged Care and TACP programs/packages may include:

### Therapy services

- Physiotherapy & Occupational Therapy
- Podiatry, Nutrition & Dietetics
- Speech Pathology
- Counselling Services
- Social Work, connecting you to wider community support

### Nursing support

- Pain management and wound care
- Oxygen therapy and medication assistance
- Dementia support
- Catheter care
- On-call access to specialised nursing services

### Personal care

- Bathing, showering, personal hygiene and grooming. Dressing, undressing, and using dressing aids.
- Maintaining continence or managing incontinence.
- Eating and eating aids.
- Moving, walking, and mobility aids.
- Communication, including challenges with conditions such as dementia.

# Community Support Guide

## CONSIDERATIONS when choosing/determining support pathways

- Does the support the person needs relate to a disability or a health condition?
- If the support relates to a person's disability, is that disability listed on the person's NDIS plan? If not, refer the person to their NDIS Contact in the Community to explore if the disability can be added.
- If the support relates to a health condition, is the condition a direct result of a disability the person has NDIS funding for? Or is the support needed because the person cannot manage their health condition due to their disability?
- Is the support fulfilling a short-term need or is support required on a long-term regular basis?
- Is the support duplicating a service already being provided?
- Is the support replacing a service that is more appropriately provided by informal, mainstream, or community supports.

### Scenario 1 - Tom

25-year-old Tom has a moderate intellectual disability and was involved in a car accident 8 months ago. Tom sustained a spinal cord injury and after 6 months of rehabilitation Tom's functional baseline has been reached and he is ready to return home. Tom currently has an NDIS plan to assist with his needs relating to his intellectual disability. Tom's NDIS plan is in the process of being reassessed to include supports related to his new disability (spinal cord injury), including catheter care and management. Until Tom's new NDIS plan is approved to include catheter care and management, Community Health will be responsible for providing this care in the home. Once the new NDIS plan is approved Community Nurses should transition catheter care and management to an NDIS provider, who can independently employ a Registered Nurse if required. This will ensure there is no duplication of supports.

### Scenario 2 - Sue

40-year-old Sue has significant functional impacts on her daily life from a stroke a few years ago. Some of the daily supports Sue requires include domestic assistance and assistance with personal care, including showering and dressing. Sue's son Luke takes care of her yard and home maintenance. Sue has an NDIS plan which provides regular domestic assistance and personal care. Sue had a fall at home, sustaining a nasty cut and subsequent infection to her leg which eventually required treatment in hospital. After a brief hospital stay, Sue is able to go home with Community Nursing assistance. Moving forward, NDIS services will continue to provide personal care, domestic assistance and assistance with prompting to take ongoing medication if required due to the infection. Community Nursing Services will manage Sue's wound care for her leg. Community Nursing services should not assist with personal care or domestic assistance, as this would be a duplication of supports.



**My Aged Care**  
PH:1800 200 422



**NDIS**  
1800 800 110



**NSW Health**  
(02) 9391 9000



**Carer Gateway**  
1800 422 737



**My Care Space**  
1300 288 893




**NSW Health - Allied Health services**



**Carers NSW**  
(02) 9280 4744



**Disability Gateway**  
1800 643 787



**NSW Health - MNC Community nursing services**