Improved Health and Wellbeing

Physical well-being activities are activities to support and maintain wellbeing to support, maintain or increase physical mobility. These activities promote and encourage improved physical capacity and support where the physical and wellbeing difficulties are directly attributable to their disability to assist them to participate in community activities

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| Therapy Services | Therapeutic supports provided for a participant with an established disability that has reached its maximum medical improvement and is to facilitate functional improvement through adjustment, adaptation and building capacity to participate in the broader community |
| Various treatment modalities are appropriate to this model of disability management such as:   * Aids and equipment * Skill mastery * Ergonomic adjustment * Functional education * Workplace assessment |
| Therapists will be accepted to provide progress reports to the participant and the NDIS at agreed times |
| Ongoing funding for therapy is subject to a detailed plan with expected further progress or change |
| Providers develop this plan with the participant and it should clearly state the expected therapy outcomes and demonstrate a link to the participants goals, objectives and aspirations |
| Dietician Consultation & Diet Plan Development | Individual advice to participants on managing diet for health and wellbeing due to the impact of their disability |
| Dietician (Group) | Group sessions (3) that provide specialist dietary advice on managing diet for wellbeing due to the impact of their disability |
| Exercise Physiology | Individual advice to the participant regarding exercise required to the impact of their disability |
| Exercise Physiology (Group) | Advice to participants regarding exercise required due to the impact of their disability in a group session (3 people) |
| Personal Training | Personal training provided to a participant required due to the impact of their disability |
| Non-Skilled Care | The NDIS may fund training for non-skilled personnel as part of the usual daily personal care for participants whose medical condition, illness or disease requires a particular treatment to maintain the functioning of a body part of slow/prevent the deterioration. For participants where such treatment can only be met through skilled rather than non-skilled care, this treatment is to be funded through medical funds not NDIS. |
| Maintenance Therapy | Maintenance therapy is funded as part of ongoing direct support hours (delivered by carers who can be trained in this if required), not funded as ongoing therapy. |
| Funding can include the development of a plan and training for a therapy assistant or for informal or funded carers as part of usual care where a skilled therapist is involved in establishing a therapy program for a participant. |
| The NDIA’s approach will include capacity building with family and carers to undertake therapy or exercises under the supervision of the skilled therapist so that the benefit for the participant is not solely limited to therapy sessions |
| Funding of a skilled therapist can be considered where monitoring and adjustment may be required to a program delivered by carers |
| Massage Therapy | Massage is considered to be more appropriately provided by the health system and is therefore not funded by the NDIS |
| Physiotherapist | A physiotherapist should be funded to teach regular attendants to assist the person to achieve greater levels of comfort on a daily basis where mobilisation and positioning helps a participant to be more comfortable |
| A participant with such difficulties should not have to rely on occasional input from a therapist |
| Multidisciplinary Team Intervention | A multidisciplinary team enables a coordinated multidisciplinary approach to be delivered to participants beyond the age covered by Early Childhood Early Intervention approach |
| All team members will claim against a single support item, thereby increasing flexibility in service delivery to reflect the changing needs of a participant |

**Model of Disability Adjustment**

Aids and equipment

Skill mastery

Ergonomic adjustment

Functional education

Workplace assessment