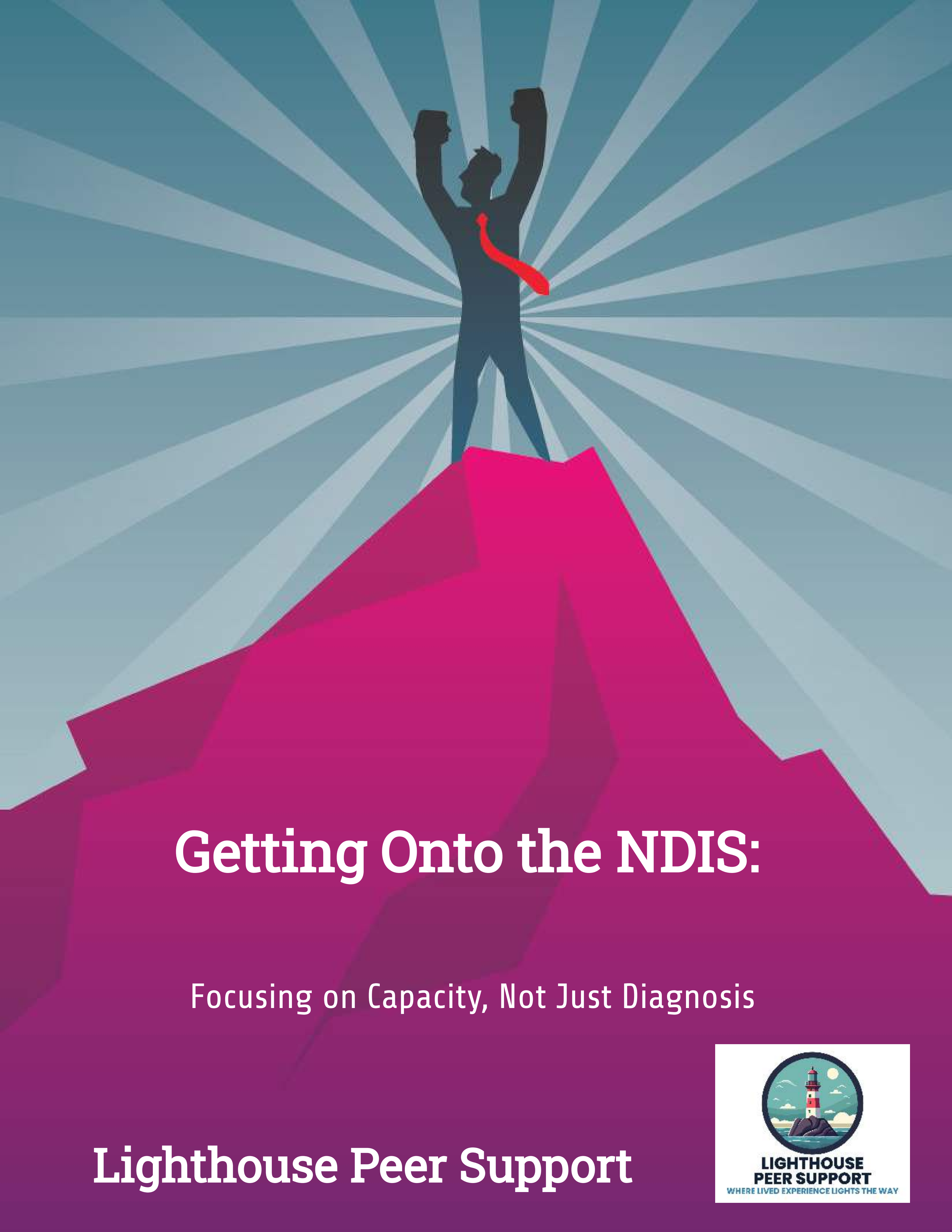

Getting Onto the NDIS:

Focusing on Capacity, Not Just Diagnosis

Lighthouse Peer Support

LIGHTHOUSE PEER SUPPORT
WHERE LIVED EXPERIENCE LIGHTS THE WAY

Table Of Contents

Getting Onto the NDIS: Focusing on Capacity, Not Just Diagnosis

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LIGHTHOUSE
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Getting Onto the NDIS: Focusing on Capacity, Not Just Diagnosis

Important: This chapter is based on how the NDIS works at the time of writing. Rules, forms and program names can change. Always check the latest information on the NDIS website – https://www.ndis.gov.au – or get help from an advocate or community legal centre if you're unsure.

1. What the NDIS is for

The National Disability Insurance Scheme (NDIS) is meant to do one main thing:

Give people with permanent and significant disability the support they need to live an ordinary life.

The NDIS can fund support to help you with things like:

- everyday activities – getting dressed, showering, preparing meals, cleaning;
- getting out and about – going to appointments, shopping, social and community activities;
- work and study – support to get and keep a job or to study;
- independence – building skills so you can do more for yourself; and
- health and wellbeing – disability-related therapies, equipment and aids.

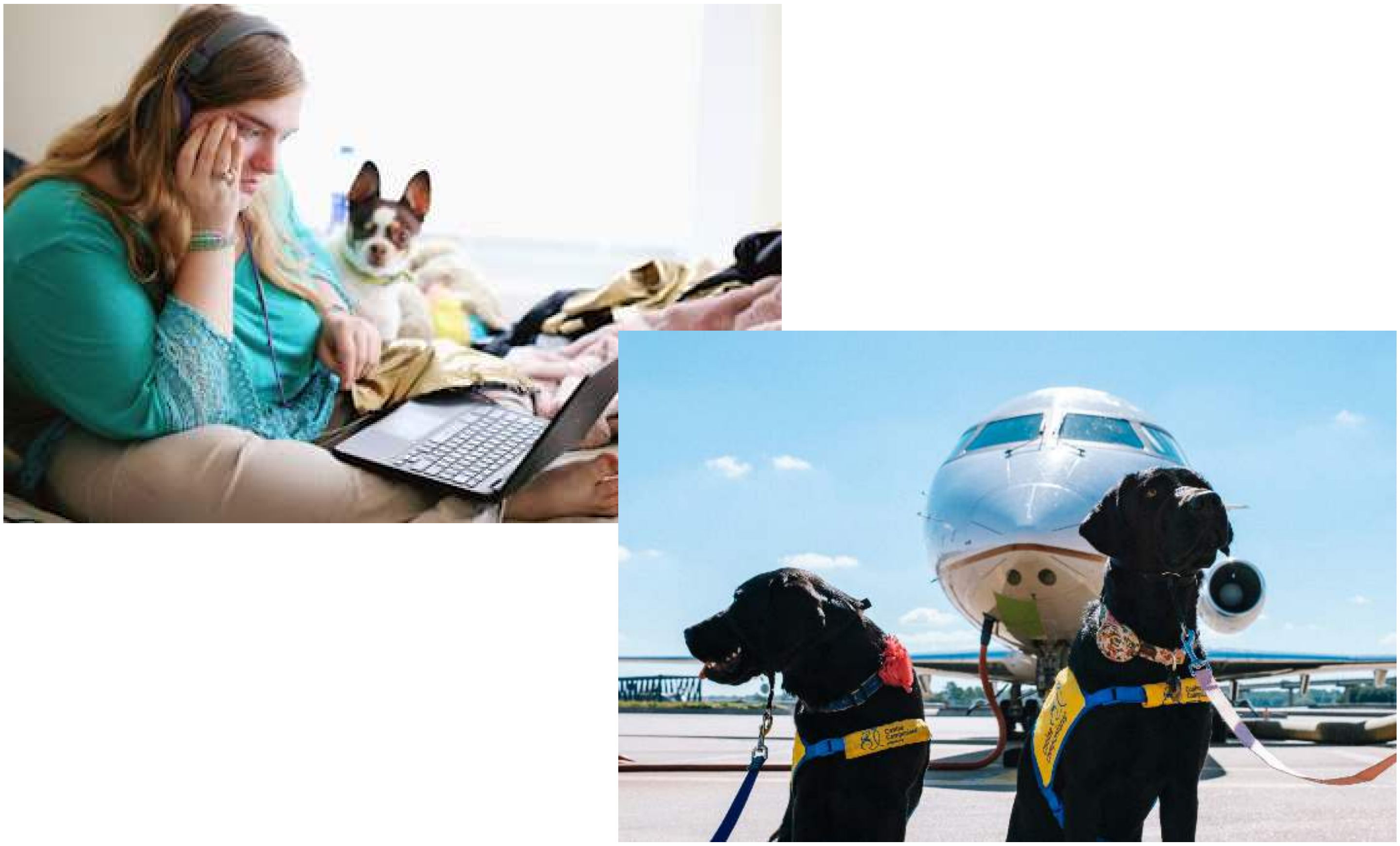
The NDIS is not a general welfare payment, and it doesn't replace Medicare or the public health system. It is a disability support scheme, not a "top-up" for everyone who is struggling.

2. Who the NDIS is for (basic access rules)

Not everyone with a disability will be found eligible for the NDIS. In simple terms, to get access you generally need to show that:

- you have a permanent condition – it is likely to be with you for life, even if it changes or goes up and down;
- your condition has a significant impact on your everyday life – it substantially reduces your ability to do things compared to other people the same age; and
- you need ongoing support from the NDIS to live an ordinary life.

There are also age and residency rules. For example, you usually need to be under 65 when you first apply, and live in Australia as a citizen, permanent resident or on an eligible visa. The details are on the NDIS website.



3. What the NDIS usually funds

The NDIS uses a phrase you'll see everywhere: "reasonable and necessary supports". In plain English, this means supports that are connected to your disability, are good value for money, are likely to help, and are not the responsibility of another system like health, education or housing.

Examples of supports the NDIS may fund include:

- personal care – help with showering, dressing, toileting, eating and getting in and out of bed;
- daily living – help with cooking, cleaning, laundry and shopping (when the help is needed because of disability);
- support workers – to help you get into the community, attend appointments and build social connections;
- therapies – psychology, occupational therapy (OT), speech therapy, physiotherapy and other allied health when they are disability-related;
- assistive technology – mobility aids, communication devices, specialised beds or seating and some sensory equipment;
- home modifications – rails, ramps, bathroom changes and other modifications to make your home safer and more accessible; and
- capacity-building supports – help to build skills in budgeting, planning your day, using public transport and managing your mental health.

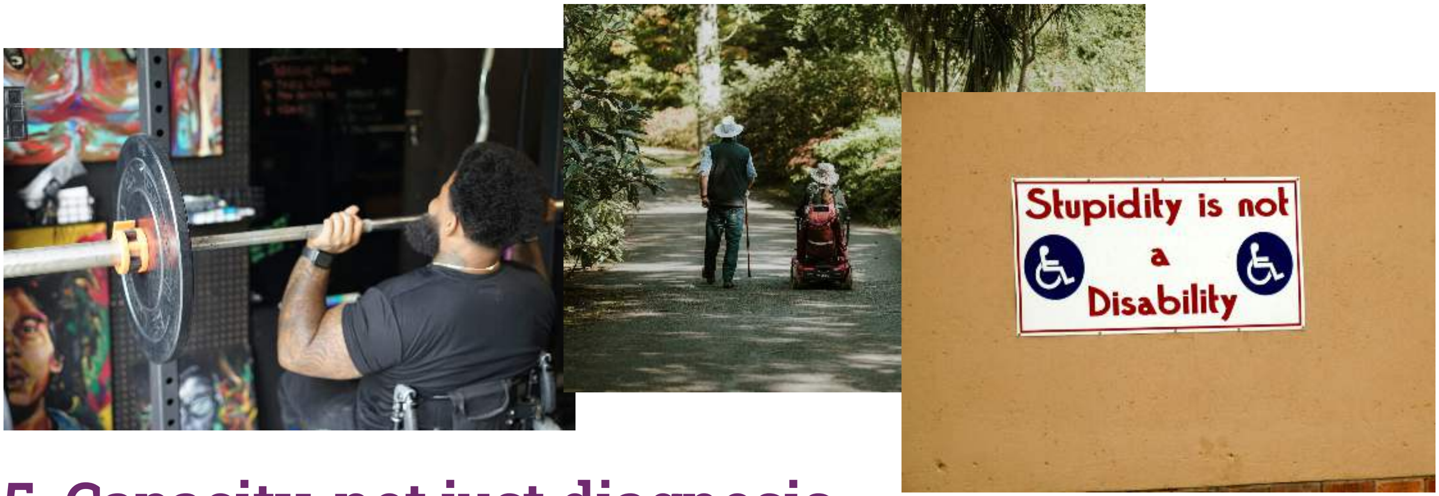
Every person's plan looks different. The key is that the support relates to the impact of your disability and helps you work towards your goals.

4. What the NDIS generally won’t fund

Generally, the NDIS will not fund:

- everyday living costs that everyone has, unless the extra cost is directly because of your disability – for example, rent or mortgage, normal groceries and standard power and water bills;
- things that are the responsibility of another service system, such as Medicare and public hospitals, education or mainstream mental health services;
- supports that are not related to your disability, or are mainly about lifestyle rather than disability needs; or
- anything that is unsafe, illegal or likely to cause harm.

There are some grey areas. In those cases the NDIS looks at whether the extra cost is solely and directly because of your disability, and whether it meets their “reasonable and necessary” rules.



5. Capacity, not just diagnosis

The NDIS does not approve or deny people just because of a particular diagnosis. What matters most is your functional capacity – what you can and can’t do, because of your disability, in everyday life.

For psychosocial disability (mental health–related disability), the NDIS especially looks at how your condition affects areas such as self-care, self-management, social interaction, learning, communication and mobility.

When you apply, it is not enough to simply say “I have schizophrenia” or “I have PTSD”. You need to show how those conditions affect your life. Your diagnosis opens the door; your functional impact is what actually gets funded.

6. What to focus on in your access request

When you fill in an NDIS access request or provide supporting evidence, it helps to focus on three things:

- Your worst days and your typical weeks – describe what a really bad day is like, what a normal week looks like, and what happens if you don’t get support.
- The main life areas – self-care, self-management, social interaction, learning, communication and mobility. For each area, think about what you cannot do without support, what goes wrong when you try, and what supports make a difference.
- Evidence that matches your story – ask your GP, psychiatrist, psychologist, OT, social worker or support worker to write about how your condition affects your day-to-day life, not just to list your diagnosis.

The NDIS has a page called “Providing evidence of your disability” that gives guidance and forms for health professionals.

7. Common traps to avoid

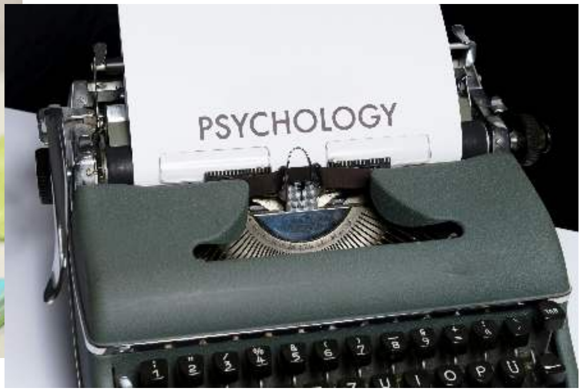
Common traps when applying for the NDIS include:

- talking only about diagnosis, not impact – always try to link your condition to what you can't do without support;
- describing only your best days – the NDIS needs to understand your usual and worst days to make a fair decision;
- masking or pushing yourself in assessments – it's natural to want to look "okay", but this can hide how much support you really need; and
- letting professionals write very short or vague letters – ask them to be specific about your functional difficulties and the support you require.

8. You are not asking for a favour

It can feel shameful or scary to ask for NDIS access, especially if you've been dismissed or knocked back before. But the NDIS is not a personal favour – it exists because people with disability and families fought for years for a better system.

You are not greedy or ungrateful for asking for the support you need to live an ordinary life. You are simply saying: "This is how my disability affects what I can and can't do. These are the supports I need so I can be safe, stable and part of my community."



Getting Onto the NDIS – Easy Read

This section explains the main ideas from “Getting Onto the NDIS: Focusing on Capacity, Not Just Diagnosis”.

1. What is the NDIS?

- NDIS means National Disability Insurance Scheme.
- It is support for people with disability.
- The NDIS is there to help you live an ordinary life.

The NDIS can help you with:

- everyday tasks – showering, dressing, cooking, cleaning;
- going out – shopping, appointments, social activities;
- learning new skills; and
- work or study – when you need extra help because of disability.

The NDIS is not a Centrelink payment. It is extra help because of your disability.

2. Who can get the NDIS?

You may be able to get the NDIS if:

- you have a disability that will not go away (permanent);
- your disability makes everyday life hard most of the time; and
- you need support most days to live safely and as independently as you can.

You also need to:

- live in Australia; and
- be an Australian citizen, permanent resident, or have the right visa; and
- usually be under 65 when you first apply.

If you are not sure, you can look at the NDIS website – https://www.ndis.gov.au – or ask a support worker, advocate or community legal centre to help you check.

3. What can the NDIS pay for?

The NDIS can pay for supports that:

- are because of your disability;
- are good value for money;
- help you reach your goals; and
- are not meant to be paid by other systems (like hospitals or schools).

Examples:

- a support worker to help you shower, dress, cook, clean, go to appointments, shopping or social activities;
- therapy – psychology, OT (occupational therapy), speech therapy, physiotherapy;
- equipment – wheelchairs, walkers, communication devices, special beds or chairs;
- changes to your home – ramps, rails, bathroom changes; and
- help to build skills – budgeting, cooking, catching buses, planning your day.

Your support will look different to someone else's. Your plan should match your life and your goals.

4. What will the NDIS not pay for?

The NDIS will not pay for:

- everyday costs that everyone has, like rent or mortgage, normal food and groceries, and usual power and water bills;
- things that belong to other systems, like school teaching, hospital treatment and most medicines, and general mental health services run by the state;
- things that are not safe, illegal or harmful; or
- things that are mainly lifestyle choices, not disability needs.

Sometimes it is not clear. The NDIS asks: "Is this cost only because of your disability?"

5. The NDIS looks at your capacity, not just your label

The NDIS does not say yes or no only because of your diagnosis.

Having a label like bipolar, schizophrenia, PTSD or autism is not enough.

The NDIS wants to know:

- what you can do;
- what you cannot do; and
- what you need help with most days.

This is called your functional capacity.

Examples of areas they look at:

- self-care – washing, dressing, eating, staying clean;
- self-management – money, medication, appointments, planning your day;
- social interaction – talking to people, leaving the house, being in groups;
- learning – remembering, focusing, following instructions;
- communication – understanding others and explaining what you need; and
- mobility – getting around safely at home and in the community.

Your stories are important. For example:

- “Because of my anxiety, I cannot make phone calls. My support worker calls with me.”
- “Because of my psychosis, I forget to eat and shower unless someone prompts me every day.”

6. What to say in your NDIS access request

When you apply, try to:

- talk about your worst days and your usual week – do not only talk about your best days;
- think about what happens if you do not get support; and
- use the life areas – self-care, self-management, social interaction, learning, communication and mobility.

You can say things like:

- "I need help to shower because …"
- "I cannot manage my medication or appointments because …"
- "I avoid leaving the house or talking to people because …"
- "I forget instructions and need them repeated because …"
- "I can't travel alone safely because …"

Ask your GP, psychiatrist, psychologist, OT, social worker or support worker to write letters that match your story. Ask them not to just write "X has anxiety". Ask them to write "Because of anxiety, X cannot do … without support."

7. Common mistakes to avoid

Try not to:

- only talk about your diagnosis;
- talk only about your good days;
- hide how bad things get; or
- accept very short letters that don't explain your real life.

It is okay to say "I am not coping", to tell the truth about how bad things can be, and to ask your doctor or worker to rewrite a letter.

8. You are not asking for a favour

It is normal to feel ashamed, “too much” or scared of being judged when you ask for help.

But the NDIS exists because people with disability fought for it. You are not greedy for asking for support.

You are allowed to say: “This is how my disability affects me. These are the supports I need to live safely and be part of my community.”

Links from this guide

You can tap or click these links (or copy and paste them into your browser) to go straight to official information mentioned in this guide.

NDIS – main website: https://www.ndis.gov.au

NDIS – Understanding the NDIS: https://www.ndis.gov.au/understanding

NDIS – For participants: https://www.ndis.gov.au/participants

NDIS – Reasonable and necessary supports: https://www.ndis.gov.au/understanding/supports-funded-ndis/reasonable-and-necessary-supports

NDIS – Would we fund it?: https://www.ndis.gov.au/understanding/supports-funded-ndis/reasonable-and-necessary-supports/would-we-fund-it

NDIS – Providing evidence of your disability: https://www.ndis.gov.au/applying-access-ndis/how-apply/information-support-your-request/providing-evidence-your-disability

Getting Onto the NDIS

"Getting Onto the NDIS" is an essential guide for individuals navigating the complexities of the National Disability Insurance Scheme. It emphasizes the importance of focusing on functional capacity rather than mere diagnosis, providing practical insights on securing the support necessary for a fulfilling life. Packed with vital tips and resources, this book empowers readers to advocate for themselves and understand their rights within the NDIS framework.

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Lighthouse Peer Support (LPS) is a Northern Tasmanian, lived-experience-led service that believes no one should have to struggle alone with money stress, mental health or the NDIS. We are working to create therapeutic, farm-style respite and support options for people with psychosocial disability, while also offering clear, practical information that anyone can access for free. Our focus is on real connection, community before profit, and helping people understand their rights and options so they can make decisions that feel safe and right for them.