



# COMPLETING THE NDIS ACCESS REQUEST FORM

A guide for health professionals

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## WHAT IS THE HEALTH PROFESSIONAL'S ROLE?

As a health care professional, you may be asked by a patient to help them to complete an NDIS Access Request Form (ARF). The ARF is the form they need to complete to determine their eligibility for entry into the NDIS.

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## WHAT INFORMATION DO YOU NEED TO SUPPLY?

- information relating to your patient's primary disability (the disability that has the greatest impact on their life)
- other disabilities that affect them.
- copies of recent reports or assessments illustrating your patient's level of functional impairment are also important.

**Given the fluctuating nature of multiple sclerosis, it's important that you provide information based on your patient's worst day managing their multiple sclerosis symptoms.**

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The NDIS wants to know how someone's disability results in substantial functional impairment in six key areas.

- **Mobility** – their ability to walk around the home and community, does their fatigue or lower body strength limit their ability to walk any distance before needing to rest, is their balance or strength compromised, do they experience tremor or spasticity, are they affected by heat intolerance, do they need a physiotherapy assessment to build their strength and mobility?
- **Communication** – their ability to speak and write, and whether they can express their needs adequately; do they have trouble with their speech or finding the right words in conversation?
- **Social interaction** – their ability to interact within their local community, to manage emotions and make and keep friends. Consider if they are socially isolated because of their MS? Do symptoms such as fatigue, cognition, heat intolerance or incontinence limit their ability to maintain family and community connections?
- **Learning** - their ability to remember, learn and practice new skills. Is their cognition affected by multiple sclerosis?
- **Self-care** – their ability to independently shower, dress, eat and care for their own health. Do they have continence issues and need a continence assessment or equipment, do they have difficulty swallowing, are they able to clean their home, prepare and cook meals, look after other family members?
- **Self-management** - their ability to make decisions, manage their own finances and remember to complete everyday tasks such as paying bills or getting to appointments.



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## USING THE RIGHT LANGUAGE IS IMPORTANT

DO SAY	DON'T SAY
Unable to walk more than 10 metres	Uses a wheelchair when out and about
Balance issues	Uses a walking stick or walker
Requires support to access his/her home	Is independent because the bathroom is modified
Can't attend social events/the community because of incontinence/urgency	Has incontinence issues
Significant fatigue effects ability to access the community, maintain the home, keep a job, learn and communicate	Gets tired and needs to rest

## ARFS ARE OFTEN REJECTED

- when 'no, does not need assistance' boxes are all ticked
- when the focus is on the intervention not the deficit
- when 'every day' examples of the deficit are not included
- when the focus is not on a 'bad MS day'
- when there is not enough detail in the comments boxes

If you have any questions call **MS Connect** on 1800 042 138 or email [msconnect@ms.org.au](mailto:msconnect@ms.org.au)