

M Housing Hub.

Assistive Technology (AT) and how to get it in your home

A guide on Assistive Technology and how it can help you live more independently.



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What is Assistive Technology?

Assistive Technology, often known as 'Assistive Tech' or 'AT', includes a wide range of tools and devices that assist people with disability to achieve their goals in everyday life. AT may increase your independence, make moving around easier, or make supporting you safer. Assistive Technology is tailored to YOUR needs and YOUR goals.

Here are some examples of AT:

Mobility devices and aids – Such as a walker to assist you to move comfortably around your home, or a manual hoist to transfer in and out of your wheelchair or bed if you don't have a built-in ceiling hoist.

Smart home systems – To control features of your home, like lighting, heating and cooling through an app on your phone or iPad, or by speaking.

Adaptive furniture – Such as a height adjustable table so that you can access everyday items more independently, a height adjustable bed, or a lifting recliner chair that assists you to get out of the chair more easily.

Personal care items – Such as a shower chair, grab rails or a bidet that support you to take care of your personal care needs more independently.

Safety and communication aids – To assist you with making calls or alerts to emergency supports in the event of an emergency. This may include alert buttons in the bathroom, a duress alarm, and home automation systems that can make emergency calls by voice commands.

Sensory support adaptations – To assist with sensory needs within your home. This might include tactile signage within your home, high contrast door surrounds, or visual aids.

Home environment controls – To control the temperature in your home, such as automated blinds.

If you are an NDIS participant, the NDIS may pay for AT that will support you to achieve the goals in your NDIS Plan.

At the end of this guide, we have included a big list of AT that you and your team may want to think about.

The difference between AT, Home Modifications and Home Adaptations

Home modifications – Home modifications are structural changes to your home that are designed to improve its accessibility and usefulness for people with disability. Home modifications can include structural changes such as widening doorways and hallways, installing ramps, and modifying bathrooms to increase the bathroom size and make room for specific mobility aids. The main reason to have home modifications done to a home is to create an environment that increases independence and safety for each individual's disability, allowing you to navigate your idea of independence and safety within your home environment. You can learn more about home modifications in this guide.

Home Adaptations – Home Adaptations are small changes to your home that make things easier or safer for you to use. Depending on your needs, this may include things such as grab rails, adjusting the height of a bench, basin or mirror, lever door handles, bigger light and power switches, and smart home technology. Unlike home modifications, home adaptations are things that can be easily changed or added to your home – they are less permanent, more cost effective changes to support your individual needs.

One way of thinking about it is: If it's something you can buy from a shop yourself and have a handy person install, then it's probably a Home Adaptation rather than a home modification.

Sometimes, there are grey areas when it comes to working out what is a home modification and what is Assistive Technology. For example, in non-SDA housing, door automation is considered as home modifications, because this is seen as a modification to your home, rather than a specific device that can be bought and easily installed to support you. So if you don't live in SDA, automatic doors fall under the category of home modifications.

But in an SDA home, door automation is recognised as a form of AT that contributes to the overall accessibility and functionality of the home. High Physical Support (HPS) SDA and Fully Accessible (FA) SDA homes are designed and built with provision for automated doors, so if a person with disability and their occupational therapist (OT) decide that an automatic door would assist with their independence within the home, the automatic door itself falls under the category of AT.

For more info about home modifications and Home Adaptations, see our guide.

Working out what AT you need

Working out what AT can help you within your home can be hard. We recommend working closely with your occupational therapist (OT) and other professional supporters to identify what Home Adaptations and AT would be useful in your home to increase your independence and safety.

If you are starting to think about what types of AT would be good for you, it is important to think about what you want your life to look like, and what things you would like to start doing more independently. Remember, AT is designed to assist you to achieve your NDIS goals, so the right AT for each person will be different. This is where having a good team of professional supporters that understand your goals and needs is crucial to finding the right AT for you.

Getting NDIS funding for AT

If you are an NDIS participant, the NDIS may pay for AT to support you. Before it will pay for AT, the NDIS will want to be sure that it is reasonable and necessary for you and that the AT you are requesting is the most cost-effective way of supporting you to achieve your goals.

So, you need to get evidence that shows that the AT you are asking for is right for you. Here is the process for getting NDIS funding for the AT you need:

Choosing the right OT

It is important that you feel comfortable and confident working with your OT as you work out what AT may be right for you, because it can often take time and patience to find the devices that are best for your needs.

A good OT should be able to give you expert guidance on the most suitable devices to suit your own individual goals, that will assist you to maximise your independence.

To start with, your OT will work with you to assess your functional abilities and recommend appropriate technology to support your independence. They can also support you with any relevant AT training, to make sure you know how to use any new technology well. They should also give you ongoing support and adjust your AT as needed, to make sure you get the best out of it.

Gathering evidence

To get funding for AT in your NDIS plan, you first have to let the NDIS know that you are looking into AT to help increase your independence and improve your daily life, based on your disability related needs.

Then, working with your OT and other professional supporters, you will need to gather evidence as to why you require the AT and how it will help you improve your independence and wellbeing.

Depending on what AT you need, how much it costs and the risk category it is in, you may need assessments to be done by your OT or other specialist therapists.

You may need to ask the NDIS for capacity building funding to allow you to work with your OT and/or other professional therapists to do these assessments. You can do this when you are due for your planning meeting with the NDIS, or request a change of circumstances if you are not due for a planning meeting but need the AT more urgently.

The evidence you need to gather for the NDIS will depend on whether the AT is low, mid or high cost AT. The NDIS says:

- Low cost AT under \$1,500 per item
- Mid cost AT between \$1,500 and \$15,000 per item
- High cost AT over \$15,000 per item

It will also depend on if the AT is 'low risk' or 'high risk'. The NDIS says low risk AT is:

- Not likely to hurt you or other people
- Available to try and/or you can buy it in a retail store
- Easy to set up and safely use without professional help

The NDIS says High risk AT may be:

- Complex, such as a power wheelchair
- Known to have hurt someone if it wasn't used properly
- Used for a restrictive practice
- Needs professional advice, setup or training for safe use

You also need to give the NDIS different evidence for tablets and computer-based AT.

You can read more about this on the NDIS website here.

NDIS decisions about AT

When you ask the NDIS to pay for AT for you, the NDIS has 28 days to make a decision about low and mid cost AT, and 50 days to make a decision about high cost AT.

If your request for AT funding is refused by the NDIS, but you think the AT is reasonable and necessary for you, you can ask the NDIS to explain why they made their decision.

For more info, see our factsheets about challenging NDIS decisions.

Other types of funding for AT

If your disability was caused by a transport accident, your AT may be funded through Compulsory Third Party (CTP) insurance. All states and territories have CTP insurance, but depending on where you live they are a bit different.

In New South Wales, the ACT, South Australia and Queensland, owners of motor vehicles have to buy CTP insurance from a list of private insurance companies. In other states, CTP is managed through a government agency – the TAC in Victoria, the ICWA in Western Australia, and the MAIB in Tasmania. The info below is about the TAC in Victoria, but it is similar for all states and territories.

If your disability was caused by a transport accident, or you now need AT because your disability was affected by a transport accident, the AT you need should be paid for by the TAC. Any AT you need that isn't related to your accident should be paid for the NDIS. This can sometimes cause problems for people who are both TAC and NDIS participants, because you need to show that you need the AT **AND** that the need for AT was (or wasn't) caused by your accident.

Types of AT such as mobility aids, vehicle modifications, and home modifications may be funded by the TAC if it is found to be directly related to your transport accident injury. TAC participants would usually apply for funding for this AT directly through the TAC.

The NDIS provides funding to people with permanent and significant disabilities, If you have another disability/disabilities or needs that are not directly related to your transport accident, the NDIS may fund appropriate AT that relates other disability needs. TAC participants should talk with both TAC and the NDIS to better understand what scheme will best support them for their required services, supports and equipment needs.

AT in Specialist Disability Accommodation

If you are living in Specialist Disability Accommodation (SDA) but need to have some changes made to your home to make it more accessible for you, there are some things that are good for you to know.

You can watch the SDA Explainer Video Series here.

AT funding is separate to SDA

AT is funded separately to the SDA in your NDIS Plan. Many SDA homes have provision for different types of AT, but the SDA provider usually doesn't have to provide the actual AT. For example, some SDA homes have strong ceilings in the bedroom and bathroom to support a ceiling-mounted hoist. But if you need a ceiling-mounted hoist, you will have to get funding in your plan for it that is separate to your SDA funding. You can read more about this here.

Because AT and SDA are considered separately by the NDIS, you need to submit evidence of your need for each type of AT you are requesting – see the section above 'Gathering evidence'.

You can't get NDIS funding for home modifications if you have SDA funding

The NDIS will not pay for home modifications if you have SDA funding in your NDIS Plan. This is because a home that is in the SDA Design Category you have been funded for should be able to support you without being modified (and because modifications to the home that suit you may not suit another participant with the same type of SDA funding).

If you have SDA funding in your NDIS Plan, your plan will say what SDA Design Category you have been funded for – High Physical Support, Fully Accessible, Improved Livability or Robust. You can learn more about SDA Design Categories here.

But AT is separately funded for people who live in SDA homes, and there are many AT devices out there that can improve your life within your SDA home, without the need for home modifications!

Home adaptations to your SDA home are also possible – see our guide here.

More examples of AT

Here is an example list of aids that fall under the AT category. Depending on your own needs and the eligibility criteria, these examples may be funded through the NDIS to help increase your independence.

Adaptive kitchen utensils and tools

- Electric jar, can and bottle openers
- Easy-grip kitchen utensils
- One-handed kitchen utensils
- Adaptive cutting boards

Dressing aids

- Shoe horns
- Button hooks
- Zipper pulls

Personal care aids

- Shower chair
- Toilet seat risers/frames
- Long-handled sponges or brushes
- Sensored soap/body wash dispenser

Adaptive feeding devices

- Non-spill cups and mugs
- Easy-grip cutlery
- Angled utensils
- Scoop dishes and grip dishes
- Adaptive drinking straws

Bedroom aids

- Height adjustable overbed tables
- Bed rails
- Bed blocks/raisers

Bathroom aids

- Raised toilet seats
- Commodes
- Bidet attachment

Assistive devices for medication management

- Pill organisers and dispensers
- Medication reminders (electronic timers)
- Medication management apps

Safety aids

- Braille signage
- Tactile surfaces
- Visual emergency alert detectors (Visual alerting systems for smoke/emergency alarms)
- Non-slip mats and surface coatings
- Grab bars for showers and toilets
- Motion sensor lights
- Duress alarm

Mobility aids for daily living

- Pick-up stick for reaching/grabbing
- Lightweight walkers
- Walking frames with wheels
- Walking cane
- Mobility aids for transfers (e.g., transfer boards)

Communication aids for daily living

- Communication boards
- Picture-based communication system and devices
- Communication apps for smartphones or tablets

Adaptive clothing and footwear

- Adaptive clothing (Clothing with easy-access features, magnetic closures, etc)
- Velcro and easy-zip shoes

Larger devices and equipment for outside the home that you might need to think about due to storage

- Portable ramp
- Mobility scooter
- Motorised unit for manual chair
- Portable shower chair
- Portable hoist

Be sure to get in touch with your OT, support coordinator or planner to discuss what AT will assist you to be more independent and safe in your home.

Housing Hub:

Home Modifications: Making your home right for you

Housing Hub

hello@housinghub.org.au www.housinghub.org.au/contact

Housing Hub Ltd

ABN 14 663 443 758
PO Box 108
Box Hill, 3128
VIC, Australia
Telephone: +613 9894 7006
enquiries@housinghub.org.au
www.housinghub.org.au



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