NDIS Assistive Technology Assessments | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/services/occupational-therapy/assistive-technology/

Details:

An assistive technology assessment is an occupational therapy assessment of equipment or devices that may help you do everyday tasks more safely and independently: bathroom and personal care aids, seating and wheelchairs, beds and pressure care, hoists and transfer equipment. Bloom Healthcare's clinicians look at your abilities, goals, tasks and environment, arrange trials where they are appropriate and available, and write recommendations that explain how an option meets your disability-related needs. Under the NDIS the assessment time usually comes from Capacity Building – Improved Daily Living , while the equipment itself is generally funded separately under Capital Supports and needs its own approval. To start, call 1300 771 465 or make a referral .

An assessment or a recommendation does not authorise a purchase. The NDIA decides whether equipment is funded, and supply, delivery and installation are arranged with the supplier, not included in the assessment.

Who an assistive technology assessment is for

You do not need to have it all worked out before you call. An assessment is usually worth discussing when:

your current equipment is unsafe, uncomfortable or no longer suitable

you need equipment for personal care, mobility, seating or daily routines

you want to compare options or arrange a trial before deciding

a funding request needs clinical evidence

the people who support you need guidance on using equipment safely

The assessment is built around the person, not the product. The right equipment has to fit the person, the activity and the environment it will be used in, which is why the clinician looks at your routines and spaces as well as your body.

Assistive technology is the general term for equipment and devices that help you complete a task you would otherwise find difficult or unsafe. It ranges from simple daily living aids to complex, customised items.

How assistive technology is funded

NDIS: two separate budgets

Two different parts of your NDIS plan are usually involved, and it helps to keep them apart.

The assessment, trials, report and training are occupational therapy work. They are usually funded from Capacity Building – Improved Daily Living , the category that covers assessment, therapy and the reports and recommendations that come out of it.

The equipment itself is generally funded under Capital Supports , in the Assistive Technology budget, though some items may sit under Consumables instead. Equipment funding has its own approval requirements and is not paid for out of your therapy budget.

The NDIA applies the reasonable and necessary test to the equipment request. A report that supports the request generally needs to show that the item is clinically appropriate for your disability and its functional impact, aligned to your goals and participation, cost effective, supportive of safety and independence, and good value for money. The clinician provides that evidence. The NDIA makes the decision.

The NDIA publishes an Assistive Technology, Home Modifications and Consumables Code Guide listing the most widely used supports. It is not a full list of every item. The current version (2025–26, v2.0) took effect on 24 November 2025: NDIS assistive technology, home modifications and consumables code guide (PDF) .

Cost levels, quotes and evidence: check the current rules

You may hear equipment described as low, mid or high cost. How much advice and evidence the NDIA asks for depends on the item, its risk, its cost and the NDIS rules in force at the time, so not every purchase needs a full report. The NDIA sets the cost boundaries and quote requirements, and they change.

Before you buy anything, check:

whether the item is already funded in your plan, and in which budget

whether it needs a written assessment or report, and whether the NDIA wants a quote

whether a trial is expected before the request goes in

how your plan is managed, because that decides who you can buy from

If your plan is NDIA-managed , the equipment supplier must be a registered NDIS provider . If you self-manage or plan-manage , you can also choose unregistered suppliers. Your planner, plan manager or support coordinator can confirm what your plan allows, and current guidance is at ndis.gov.au/participants .

Support at Home: the AT-HM scheme

If you are an older person on Support at Home , equipment runs through the Assistive Technology and Home Modifications (AT-HM) scheme , one of the program's three short-term pathways. It is a separate pathway from the classification that funds your ongoing services. Bloom's occupational therapists and physiotherapists can support assessments and recommendations where this fits your needs and support plan. The amounts and rules for your situation are set out in your support plan, so check them with My Aged Care on 1800 200 422 or with your Support at Home provider rather than relying on a figure from a website. See aged care occupational therapy and the Support at Home hub .

TAC and private funding

For people injured in a transport accident in Victoria, the TAC can pay the reasonable cost of occupational therapy required because of the accident injuries, including assessment and recommendations to prescribe assistive technology. Bloom's TAC service includes assessment-only work such as an assistive technology assessment with a report. Assessments can also be privately funded.

What the assessment can consider

The clinician chooses the assessment tasks and reporting that fit the agreed purpose, your needs and the expertise required. Specialist scope is confirmed before booking.

Daily living and bathroom equipment

Aids for personal care and everyday activities, based on assessed need. This includes items such as shower chairs and commode chairs .

Seating and mobility equipment

Seating, wheelchairs and other mobility equipment. Wheelchair and complex seating work may need a clinician with specialist expertise, and that scope is confirmed before booking.

Beds and pressure care

Positioning, bed access, beds and mattresses , and pressure-management equipment within the clinician's expertise.

Hoists and transfer equipment

Hoist and sling assessment and prescription , looking at the person being transferred, the people doing the transfer, and the space it happens in.

Trials and comparison

Trials where they are available, documenting how each option actually performs in your context. The aim is to compare what is on the market and find the most suitable and cost-effective option.

Reports and implementation

Agreed recommendations, plus the supplier, setup, training and review requirements needed before the equipment is used.

What this assessment does not cover

Supplying the equipment. Supply, delivery, installation and maintenance are arranged with the relevant supplier and are not automatically part of the assessment.

Approving the purchase. Only the NDIA (or your Support at Home or TAC arrangements) can approve funding.

Structural changes to the home. Rails, ramps, bathroom changes and access changes are a home modification assessment . Equipment, or a different way of doing the task, is considered before structural changes.

Communication devices. These usually need speech pathology input. See AAC and communication assessment . Tell us what the device is for so the enquiry goes to the right discipline.

Where you live and who supports you. Questions about living arrangements and daily assistance, including SIL, SDA and ILO, belong in a home and living assessment .

Physiotherapists also assess and prescribe equipment, particularly for mobility, and the two disciplines often work together on complex prescriptions. See physiotherapy .

How it works, step by step

Define the equipment need. Tell us the task, your current equipment, your location and your funding pathway. We check that a clinician with the right expertise is available and agree the scope.

Service agreement. Scope, fees, delivery setting and timing are agreed before the service begins, and a service agreement is signed before delivery and billing start. Complex equipment and trials can involve several steps, so the estimate covers assessment, report work and any travel.

Assess and explore options. The clinician considers your function, safety, environments and current support arrangements, and liaises with suppliers and the people involved in your support.

Trial and document. Where appropriate and available, equipment is trialled and options compared. The agreed report explains the recommendation and the reasoning behind it.

Plan safe implementation. Purchase approval, supplier setup, training and review are discussed. These are confirmed separately where needed. Prescribing a hoist without training the people who will use it is not a finished job.

A member of the team will be in contact within 24 hours of receiving your referral, and Bloom aims to hold the initial meeting within 5 business days where possible, once the intake form is returned and the service agreement is signed.

What to prepare

Have these ready if you can:

details of your current equipment

previous reports, especially earlier assistive technology or occupational therapy reports

the key tasks that are difficult and your goals

relevant measurements, if you have them

your NDIS plan dates and how the plan is managed

The clinician will explain anything else that is needed.

What you get in writing

The agreed report documents:

the functional need and how it relates to your disability

the options considered and how they compared, including trial findings

the recommended item and why it is suitable

setup, training and follow-up requirements

Reports are written to be used: by you, by your plan manager or support coordinator, and by the NDIA when it considers the request. If you need the report by a particular date, such as a plan reassessment, say so in the referral, because report time has to be planned and funded.

Where Bloom delivers assistive technology assessments

Bloom's primary delivery method is in the community: your home, school, day program or other everyday setting. Some discussions and observations can happen by telehealth . Equipment fitting, transfers, environmental measurements and trials usually need an in-person visit, and your clinician confirms the right approach.

Bloom works across New South Wales, Queensland, South Australia, Tasmania, Victoria, Western Australia and the Australian Capital Territory. Availability of specialist equipment expertise and supplier trials varies by location, so ask about your suburb when you enquire. See all locations .

Common questions about NDIS assistive technology assessments

Who can assess assistive technology?

The assessor needs qualifications and experience relevant to the particular equipment. Bloom checks the clinical scope required before booking. Complex equipment, such as wheelchairs and specialised seating, may need a clinician with specialist expertise.

Do I need an assessment for every item?

Not necessarily. The advice and evidence required depend on the item, its risk, its cost and current NDIS rules. Ask about your specific need rather than assuming every purchase needs a full report.

Which part of my NDIS plan pays for the equipment?

The equipment is generally funded under Capital Supports, in the Assistive Technology budget, and needs its own approval. Some items may sit under Consumables instead. The occupational therapy time for the assessment, trials and report usually comes from Capacity Building – Improved Daily Living. Check your plan statement, or ask your planner or plan manager.

Can I trial equipment before deciding?

Where it is clinically appropriate and available, yes, and a trial can help show whether an option is suitable. Supplier access, location, trial terms and any costs need to be confirmed first.

Does Bloom supply the equipment?

No. Bloom provides the clinical assessment and recommendations. Equipment supply, delivery, installation and maintenance are confirmed with the relevant supplier and are not automatically included in the assessment.

Does a recommendation mean the NDIA will fund it?

No. The report is evidence. The NDIA decides whether the item meets the reasonable and necessary test and whether it is funded. Do not order equipment until you have checked your plan arrangements and any approval requirements.

Can assistive technology be assessed by telehealth?

Some discussions and observations may be suitable online. Equipment fitting, environmental measurements and safety checks usually need an in-person assessment. Your clinician confirms the right approach for the equipment involved.

What if I need a communication device?

Communication devices usually need speech pathology input. Contact Bloom so the enquiry can go to the right discipline, rather than assuming an occupational therapy assessment covers all communication equipment. See AAC and communication assessment .

I am over 65 and on Support at Home. Can I still get equipment assessed?

Yes. Under Support at Home, equipment runs through the Assistive Technology and Home Modifications (AT-HM) scheme, which is separate from your ongoing budget. Bloom's occupational therapists and physiotherapists can support assessments and recommendations where this fits your support plan. Check your support plan or call My Aged Care on 1800 200 422 for the rules that apply to you.

What does the assessment cost?

Fees, travel and report time are agreed in a service agreement before any service starts, and NDIS services are charged within the NDIS Pricing Arrangements and Price Limits. Because complex equipment and trials can take several steps, ask for the estimate for your specific need on 1300 771 465 or see pricing .

How long until someone contacts me?

A member of the team will be in contact within 24 hours of receiving a referral. Bloom aims to hold the initial meeting within 5 business days where possible, once the intake form has been returned and the service agreement signed.

More on assessments and occupational therapy

NDIS occupational therapy

Home modification assessments

Home and living assessments

Functional capacity assessments

Falls prevention and home safety

Information for support coordinators and referrers

Who can perform an NDIS assistive technology assessment?

The assessor needs qualifications and experience relevant to the particular equipment. Bloom Healthcare checks the clinical scope required before booking, and complex equipment such as wheelchairs and specialised seating may need a clinician with specialist expertise.

Does every piece of equipment require a full assessment?

Not necessarily. The advice and evidence required depend on the item, its risk, its cost and current NDIS rules, so it's best to ask about the specific need rather than assuming every purchase needs a full report.

Which part of an NDIS plan funds assistive technology equipment?

The equipment is generally funded under Capital Supports, in the Assistive Technology budget, and needs its own approval (some items may sit under Consumables instead). The occupational therapy time for the assessment, trials and report usually comes from Capacity Building – Improved Daily Living. Participants should check their plan statement or ask their planner or plan manager.

Can I trial assistive technology equipment before purchasing it?

Yes, where it is clinically appropriate and available, a trial can help show whether an option is suitable. Supplier access, location, trial terms and any costs need to be confirmed first.

Does Bloom Healthcare supply the assistive technology equipment itself?

No. Bloom Healthcare provides the clinical assessment and recommendations only. Equipment supply, delivery, installation and maintenance are confirmed with the relevant supplier and are not automatically included in the assessment.

Does a Bloom Healthcare recommendation guarantee NDIA funding for the equipment?

No. The report is evidence, but the NDIA decides whether the item meets the reasonable and necessary test and whether it is funded. Equipment should not be ordered until plan arrangements and any approval requirements have been checked.

Can assistive technology assessments be done via telehealth?

Some discussions and observations may be suitable online, but equipment fitting, environmental measurements and safety checks usually need an in-person assessment. The clinician confirms the right approach for the equipment involved.

What should I do if I need a communication device assessed?

Communication devices usually need speech pathology input, so you should contact Bloom Healthcare so the enquiry can go to the right discipline rather than assuming an occupational therapy assessment covers all communication equipment.

Can people over 65 on Support at Home still get equipment assessed?

Yes. Under Support at Home, equipment runs through the Assistive Technology and Home Modifications (AT-HM) scheme, which is separate from the ongoing budget. Bloom Healthcare's occupational therapists and physiotherapists can support assessments and recommendations where this fits the support plan; people should check their support plan or call My Aged Care on 1800 200 422 for applicable rules.

How much does an assistive technology assessment cost and how soon will Bloom Healthcare make contact?

Fees, travel and report time are agreed in a service agreement before any service starts, and NDIS services are charged within the NDIS Pricing Arrangements and Price Limits; people can call 1300 771 465 for an estimate. A team member will be in contact within 24 hours of receiving a referral, and Bloom aims to hold the initial meeting within 5 business days where possible, once the intake form has been

returned and the service agreement signed.

What types of equipment does an occupational therapy assistive technology assessment cover, according to the broader service description?

Assessments can cover daily living aids, seating, beds, pressure care and hoists, as well as mobility aids (wheelchairs, walkers, modified trikes, standing frames), adaptive bathroom equipment (shower chairs, mobile hoists), sensory regulation tools, and smart home technology that promotes independence; communication devices typically require speech pathology rather than occupational therapy input.