NDIS Home and Living Assessments | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/services/occupational-therapy/home-and-living-assessment/

Details:

A home and living assessment is a targeted occupational therapy assessment of how your disability-related needs affect where and how you live. Bloom Healthcare's occupational therapists look at your daily activities, the assistance and supervision you need, safety, your environment, your preferences and your existing supports, then write a report with evidence relevant to your specific home and living question, such as a supported independent living (SIL) , specialist disability accommodation (SDA) or ILO enquiry. The assessment is usually funded from Capacity Building – Improved Daily Living in your NDIS plan. To start, call 1300 771 465 or make a referral .

An assessment informs planning. It does not approve SIL, SDA or ILO funding, and it does not secure a housing placement. The NDIA decides whether proposed home and living supports meet the applicable criteria.

Who a home and living assessment is for

You do not need to know which pathway applies before you call. An assessment is usually worth discussing when:

you are planning to move or live more independently

your current living arrangements no longer meet your support needs

you need evidence about daily assistance or supervision

a home and living discussion with the NDIA needs updated clinical information

you want your preferences and support needs considered together

Bloom also delivers home and living assessments for NDIS participants in forensic settings, to help determine appropriate and sustainable housing pathways on discharge from custody.

SIL, SDA and ILO: three different things

These terms are often used as if they were interchangeable. They are not, and funding for one does not automatically mean funding for another.

Supported independent living (SIL) concerns assistance or supervision with daily tasks in the home. It is about the support, not the building.

Specialist disability accommodation (SDA) concerns specialist housing for eligible participants with particular needs. It is about the dwelling, not the daily support.

ILO concerns an individualised support arrangement built around the person.

Providers of SIL and SDA must be registered with the NDIS Commission. That rule is about the provider delivering the support or the housing.

Because the pathways have different purposes and criteria, the referral question matters. Tell us whether the enquiry concerns SIL, SDA, ILO or another pathway, and the clinician can target the assessment to the evidence that pathway needs.

How the assessment is funded

NDIS: home and living assessment and reporting are occupational therapy work, usually funded from Capacity Building – Improved Daily Living . The supports that may follow, such as SIL or SDA, are separate NDIS supports with their own criteria, and the NDIA decides whether they are funded.

Fees: NDIS services are charged within the NDIS Pricing Arrangements and Price Limits , and Bloom tells you the price before the service is delivered. The estimate, including report work and travel, is agreed in a service agreement before anything starts.

Pricing for SDA itself is set by the NDIA through separate SDA pricing arrangements. That is a matter for the SDA provider and the NDIA, not part of the assessment fee.

If you are already an NDIS participant when you turn 65, your NDIS-funded services continue; you are not automatically moved to Support at Home.

If you are unsure whether your plan has enough Capacity Building funding for the assessment and report, check your plan statement or ask your plan manager or support coordinator before booking.

What the assessment can consider

The clinician selects assessment tasks and reporting to suit the agreed living question, your needs and the expertise required.

Daily assistance and routines

Personal care, meals, domestic tasks and everyday support needs: which tasks need help, when, how much and in what context.

Functional observation

Observing relevant activities, and considering how your abilities vary across environments and circumstances.

Current support arrangements

The paid and informal supports you have now, whether they are sustainable, and your preferences about who supports you and how.

Living environment needs

The access and environmental features that are clinically relevant to the way you live.

Home and living evidence

Functional evidence relevant to the requested support pathway. Whether Bloom can accept a particular specialist home and living request depends on clinician expertise, which is checked before booking.

Collaboration and reporting

Working with authorised supporters, such as family, support coordinators and current providers, and preparing recommendations linked to the referral question.

How this differs from other assessments

Functional capacity assessment

A functional capacity assessment usually gives a broader picture of everyday function across many areas of life. A home and living assessment targets living arrangements and the assistance or environmental needs connected with them. If you are not sure which one you need, Bloom can help clarify the scope.

Home modification and assistive technology assessments

If the question is about changing the home you already live in, such as rails, ramps or bathroom access, that is a home modification assessment . If it is about equipment, such as a hoist, bed or shower chair, that is an assistive technology assessment . A home and living assessment may identify that one of these is needed, but it does not replace them.

What this assessment does not cover

Housing placement. Bloom does not find accommodation.

Daily support workers. Bloom does not provide an ongoing daily support-worker service. SIL and other daily supports are delivered by separate providers.

Funding decisions. The NDIA decides whether proposed supports meet the criteria. An occupational therapy report is one part of the evidence.

Managing the funding or housing process. You and your authorised team, such as a support coordinator, manage the process after the report.

How it works, step by step

Agree the question. Tell us your living goal and whether the enquiry concerns SIL, SDA, ILO or another pathway. We check that a clinician with the required scope is available.

Service agreement. Scope, fees, delivery setting and timing are agreed, and a service agreement is signed before delivery and billing begin.

Understand everyday life. The occupational therapist gathers relevant information, observes activities and, with your consent, consults the people who support you.

Assess and document. Findings describe your function, the assistance you need and relevant environment needs, with recommendations and any limitations of the assessment stated plainly.

Explain the next steps. The clinician discusses the report with you and any further evidence that may be needed. You and your authorised team then manage the funding or housing process.

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

your living goal, in your own words

a description of your current living arrangement and what is not working

examples of the assistance you need and when you need it

relevant previous reports, such as functional capacity, occupational therapy or behaviour support reports

your NDIS plan dates, how the plan is managed and any deadline, such as a plan reassessment

Use the approved secure pathway for clinical records. Ask the team which one to use.

Who can refer

Anyone can refer: the participant, family members and carers, support coordinators, plan managers, SIL providers and other services already working with the person, and GPs and other health professionals. You do not need a GP referral for NDIS services. A guardian or nominee can sign consent forms and the service agreement for a person who cannot sign independently. Where the person can take part in decisions about where and how they live, they should be part of the referral, not only its subject.

What you get in writing

The agreed report covers:

your living preferences and goals

your functional abilities and how they vary across settings

the assistance and supervision you need with daily tasks, and when

your current paid and informal supports and their sustainability

clinically relevant environment and access needs

recommendations linked to the home and living question, with limitations stated

Bloom's home and living assessment includes liaison with stakeholders and report writing with additional home and living components, and may include interpretation of psychometric screening results. If a decision or reassessment date is coming, put it in the referral so report time can be planned.

Where Bloom delivers home and living assessments

Observation in your current living environment may be useful. The clinician confirms whether in-person, online or blended delivery suits your situation, and the estimate reflects that. See telehealth .

Bloom works across New South Wales, Queensland, South Australia, Tasmania, Victoria, Western Australia and the Australian Capital Territory. Specialist home and living enquiries need a clinician-scope check, so ask about your area when you enquire. See all locations .

Common questions about NDIS home and living assessments

How is this different from a Functional Capacity Assessment?

A functional capacity assessment usually gives a broader picture of everyday function. A home and living assessment targets living arrangements and the assistance or environmental needs connected with them. Bloom can help clarify which scope fits your question.

Can the assessment support a SIL enquiry?

It may provide relevant evidence about assistance and supervision with daily tasks. The exact report purpose and the clinician expertise needed must be agreed before booking. A report does not guarantee SIL funding.

What is the difference between SIL and SDA?

SIL relates to assistance or supervision with daily activities. SDA relates to specialist housing for eligible participants with particular needs. Funding for one does not automatically mean funding for the other.

What is ILO?

ILO concerns an individualised support arrangement. It is not interchangeable with SIL or SDA, and the evidence it needs depends on the arrangement being explored.

Can you help with an ILO assessment enquiry?

Contact Bloom with the specific evidence request and living goal. We confirm whether the required clinical scope can be met and what other planning or exploration work may be needed.

Does Bloom find accommodation or provide daily support workers?

No. Bloom provides clinical assessment and reporting. It does not offer housing placement or an ongoing daily support-worker service; those arrangements are separate from the assessment.

Who makes the funding decision?

The NDIA decides whether proposed home and living supports meet the applicable criteria. The clinician provides evidence and recommendations, not an approval decision.

Which part of my plan pays for the assessment?

Usually Capacity Building – Improved Daily Living, the category that funds occupational therapy assessment and reporting. Fees are agreed in a service agreement before the service starts and are charged within the NDIS Pricing Arrangements and Price Limits.

Does the assessment have to happen at home?

Not always, but observation in your current living environment may be useful. The clinician confirms whether in-person, online or blended delivery is suitable and agrees the estimate with you before starting.

Can a home and living assessment be done for someone leaving custody?

Yes. Bloom delivers home and living assessments for NDIS participants in forensic settings, to help determine appropriate and sustainable housing pathways on discharge. Contact the team to confirm scope and availability.

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

Functional capacity assessments

Home modification assessments

Assistive technology assessments

Information for support coordinators and referrers

Making a referral

What is an NDIS home and living assessment?

It is a targeted occupational therapy assessment of daily function, assistance needs, living preferences and environment that provides evidence for NDIS home and living planning, including SIL, SDA and ILO enquiries, as offered by Bloom Healthcare.

How is a home and living assessment different from a Functional Capacity Assessment?

A functional capacity assessment usually gives a broader picture of everyday function, while a home and living assessment targets living arrangements and the assistance or environmental needs connected with them. Bloom Healthcare can help clarify which scope fits a participant's question.

What is the difference between SIL and SDA?

SIL (Supported Independent Living) relates to assistance or supervision with daily activities, while SDA (Specialist Disability Accommodation) relates to specialist housing for eligible participants with particular needs. Funding for one does not automatically mean funding for the other.

What is ILO in the context of NDIS home and living supports?

ILO stands for Individualised Living Options, an NDIS home and living support built around how and where the person wants to live. It is not interchangeable with SIL or SDA, and the evidence it needs depends on the specific arrangement being explored.

Can a home and living assessment support a SIL funding enquiry?

It may provide relevant evidence about assistance and supervision with daily tasks, but the exact report purpose and required clinician expertise must be agreed before booking. A report does not guarantee SIL funding.

Does Bloom Healthcare find accommodation or provide daily support workers?

No. Bloom Healthcare provides clinical assessment and reporting only. It does not offer housing placement or an ongoing daily support-worker service; those arrangements are separate from the assessment.

Who decides whether home and living supports are funded?

The NDIA (National Disability Insurance Agency) decides whether proposed home and living supports meet the applicable criteria. The clinician provides evidence and recommendations, not an approval decision.

Which part of an NDIS plan typically pays for a home and living assessment?

Usually Capacity Building – Improved Daily Living, the category that funds occupational therapy assessment and reporting. Fees are agreed in a service agreement before the service starts and are charged within the NDIS Pricing Arrangements and Price Limits.

Does the home and living assessment have to take place in the person's home?

Not always, but observation in the participant's current living environment may be useful. The clinician confirms whether in-person, online or blended delivery is suitable and agrees the estimate with the participant before starting.

Can Bloom Healthcare conduct a home and living assessment for someone leaving custody?

Yes. Bloom Healthcare delivers home and living assessments for NDIS participants in forensic settings, to help determine appropriate and sustainable housing pathways on discharge. Contacting the team confirms scope and availability.

How quickly will someone from Bloom Healthcare respond after a referral?

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