



TRANSCRIPT Podcast Recording

Scheme Dreams: 'What is the NDIS?'

Podcast link: <https://soundcloud.com/vmiac/scheme-dreams-episode-1-what-is-the-ndis>

Hello everyone and welcome to Scheme Dreams! The show where we talk about your worries and aspirations for the National Disability Insurance Scheme. I'm your host, Jess. And I'm an NDIS Educator at VMIAC. That acronym stands for the Victorian Mental Illness Awareness Council. As you can from our name our organisation really cares about mental illness. So the focus for the podcast will be exploring how someone with a mental illness goes about accessing the NDIS.

Now, I have a confession to make! I'm new in my role as NDIS Educator – bit of a newbie. And *laughs* I'll be honest, trying to learn about the NDIS is confusing. And it can be really frustrating. So much of the information out there is dry and difficult to understand. And there's a lot of conflicting information out there too. So once you think you know something then you find out that it's wrong. It's awful. So it's my hope that through Scheme Dreams and VMIAC's other social media that we can learn together. Speaking of which, you've got to keep up to date with our social media. So keep checking our blogs, YouTube videos and pods all about the NDIS that will be on our website.

To help us with our journey in the NDIS I've invited someone very cool to me. Because this is Scheme Dreams first pod, we decided to keep it within the VMIAC family. So I'd like to introduce you to my manager, my fearless leader, o captain, my captain, It's Neil Turton-Lane. Welcome Neil.

Hi Jess, and hello listeners out there.

laughs thank you so much for joining us. Could you tell us a little bit about yourself. How long have you been working in the area of the NDIS and mental health.

I've been working in mental health for over 20 years. And

Wow

And in the area of the NDIS for about four years now. And in my current role as NDIS manager for a year.

Excellent. Jeeze, I bet you've seen some pretty fascinating things. But before we get into that, could you please start by telling us 'what is the NDIS?'

Well, the NDIS a very significant major social reform that's taken place in Australia.

Yepp.

That whose aim is to support people with a disability to live a much better quality of life. To be able to do the things that in life their disability might stop them from doing and provide them with the supports to do that.

That sounds really cool actually. *laughs*

It is.

It's such a succinct way of describing it. But just tell me a little bit, what is the goal of the NDIS?

The goal is really to support people to achieve things that they identify as significant in life. Their own goals. The goals that people identify with as being important to them.

Yepp, so what might one of those goals be, for example?

Well, for everyone it will be different.

Yepp.

But for some that might be getting out more, it might be starting work or a vocation, and things that in the past have been very difficult and challenging for them to be able to do.

And just to clarify, how does the NDIS differ from the disability support pension?

Well, the disability support pension is around your income support around your disability. Whilst the NDIS is around providing the supports for you that allow you to achieve things in life.

Right, so they're really not related at all, I guess.

Well, they are both are related in the fact that you need a disability to qualify for both. But they have very different criteria around access to either of them.

Because I know a lot of people get confused because they think that because they're on the NDIS they'll definitely get the pension. Or that because they don't get the pension they won't get the NDIS.

No, no, there's no – they're not related in that way. They're both different. There's different assessment processes for both. And for people with a mental health condition it can be a bit of a hurdle to go through that assessment process. But they're quite different. They are not related. Just because you've got the DSP doesn't necessarily mean you'll automatically get the NDIS or qualify for an NDIS plan. Or vice versa.

Right. That makes sense. A phrase I've often heard that might help us tease it apart is that the NDIS is a way of supporting people with disability to live ordinary lives. Could you speak on that?

It's funny that the 'ordinary'. When I say – when they say 'ordinary' they mean the lives that most people take for granted. That for me, that sits better with me. Most people who have a – who are happy with their life, take for granted that part of their life, whether it's living in a home where they feel safe, kind of being able to look after themselves, feeling connected to other people, or have things to do in their life and so forth.

Great. So can you tell us a little bit about how the NDIS defines disability?

The NDIS has a fairly narrow view of disability. Because in Australia there would be well into the millions of people who qualify for that under that notion of disability. But the disability that they will fund is probably a small fraction of that. And so to meet that criteria you probably need to have a disability that is considered permanent. Likely to be lifelong.

Yepp.

And has a significant impact on stopping you do things in life that most people, as I said, would take for granted.

Yepp. So how does psychosocial disability fit into that?

Psychosocial disability is a disability caused by your mental health condition. So if there are things that your mental health condition stop you from doing. Like caring for – and they may be things like for example, caring for yourself, connecting with other people, going out. For example, someone with an anxiety condition or with schizophrenia might be quite scared about going outside.

Absolutely.

Or connecting with other people. So it's the impact of that condition and those symptoms on a person's life. What level, you know, with a psychosocial disability if there are things that stops you from doing. To that effect you're disabled until you have the supports in place that enable you to do those things.

And it's kinda counterintuitive because you might think 'I've got X mental illness, that's my disability'. But not everyone with a mental illness has a psychosocial disability. Is that right?

Abso – That's probably correct. Probably to the degree that the NDIS wants to see.

Yeah. Absolutely, yeah.

There are people who are living with a mental illness who through, you know, luck, and through hard work but often just through meeting the right people and having the right opportunities have been able to kind of like rebuild their lives and do more and more. And kind of reclaim their life to a fairly full extent. And then there are people who are still waiting to do that and hopefully the NDIS can help assist them...

Help them do that.

For many people their mental health condition will be life long. And for some people it's a very sort of substantial illness that impacts greatly on their life. And for people like that it's only reasonable to expect that they also be viewed as a disabled person and that they can get the supports they need, whether it's around maintaining a home, their finances, supports around shopping or going out or connecting into the community. Maybe volunteering? Or eventually finding a job. But they are disabled as any disabled person out there with a physical disability. But often it's invisible.

Yeah.

It's harder to talk about. And to show.

It's really interesting you should say that about that claiming that disability identity. Because I think for a lot of people with mental health issues, whether it's the stigma or the fact that it's just not a word we would use, don't often identify with the word 'disability'. We might feel impaired by our mental illness but it's not usually a word we would use. How do you think that might influence someone's decision to apply for the NDIS?

***sighs* Well, as they say 'when in Rome'.**

laughs

'Do as the Romans do'. And it's the Scheme.

Yepp.

It's the process you have to go through.

That's good advice.

It doesn't necessarily define who you are in any shape or form. As your diagnosis doesn't define who you are. You are a unique human being. So everyone's different. So it's really around kind of looking at it, reframing the whole issue around disability and saying 'Well, actually there are things that I can't do in life...

And I deserve support.

And I have a right. I have a right like any disabled person, now that we have the NDIS, to get support to do that.

Yeah. And I guess – I've spoken to a few people before about how the NDIS really, you can view it from a human rights framework, described in that way.

The NDIS was very much informed from a human rights framework. The United Nations Convention on the Rights of People with a Disability. When the Scheme was first conceived it came from a very lofty human rights perspective. Unfortunately, over time, in order to bring it into reality, because it is a hugely ambitious Scheme.

laughs Absolutely, yeah.

And it's something that hasn't been attempted anywhere in the world. To bring it into reality and to enable it to be something that is sustainable there's been a lot of kind of conditions placed on access to the Scheme. And so really it's around the case of the real challenge for many people with psychosocial disability, the first challenge is getting onto the Scheme. But once you're in the Scheme, you're in it for life. So that's a good – that's really good.

Yepp.

You only have to prove your eligibility once. But...

So you mentioned some of those conditions for access, what are the eligibility criteria for the NDIS?

There's some around, you know, similar to the DSP where you have to be an Australian, you know, around your residency. You have to be an Australian citizen. You have to be under the age of 65.

Yepp.

And you need to have a disability that's considered permanent, likely to be lifelong in nature and impacts on your life...

Significantly.

Yes, thank you.

laughs That's alright. So I guess if we were to look at me as a case study. I'm someone who has several mental illnesses – I'm very delightful. *laughs* But my primary disability, in the language of the NDIS would be Bipolar. And I guess it's quite difficult to think whether I would fit that criteria: of permanent and significant. Because permanent – there's no established cure for Bipolar it's probably with me for life. But in terms of significance....I would regard myself as having significant challenges. But I guess in the eyes of the NDIS, or the NDIA, I go to work, I have a social life, I can do a lot of things. And I guess that's a bit confronting for some people to think 'Oh, I won't qualify. I'm not disabled enough', you know what I mean?

I do. I do know what you mean. And I think it's challenging for anyone when they think about applying. I would encourage people to learn about the process. There are supports there in the community both with the Local Area Coordinators...

Yepp.

Attached to the NDIA. And also there are kind of community supports. Our organization is there to help people as well: the Victorian Mental Illness Awareness Council.

VMIAC shout out! *laughs*

VMIAC. So there are supports there. So I would encourage people not to be overwhelmed at the prospect. But to just start making steps.

Yeah.

You don't have to rush out and do it. That's the other thing.

Yepp. It might not be the right time.

Yeah, I think it's really important that people do it at the right time and they have the right supports in place. And have a bit of a plan about how they're gonna...

Manage self-care.

Manage self-care while they collect the evidence that they need. For some people the process will be very simple, relatively easy. And it's much easier if you've got a mental health service that supports you through that process. But not everyone's in that situation.

We've sort of talked about the funny language the NDIS uses. There's 'permanent' 'significant' 'substantial'. It can be really unfamiliar. And of the phrases that comes up on your application form, also known as the Access Request Form, is 'is there a remedy?' Can you kind of shed some light on what that statement

means?

Is there a remedy?

Is there a remedy!

Is there a remedy for life?

laughs

Well I suppose it's around that – your disability being considered permanent or likely to be lifelong. So the NDIS I suppose they've got a limited amount of funding so they want to make sure the funding goes to people who most fill the criteria of being very disabled. So one of the things they'd be looking at is about is 'is there a remedy to your condition?' which is very contentious in the mental health space.

Yeah it kind of conflicts.

When you've been give a diagnosis and...

And I guess a lot of people talk about that idea of recovery. And recovery means so many different things things for so many different people. And I guess thinking about in the language of 'is there a remedy?' for me, at least, it feels like it's in contradiction to that.

Absolutely. Well it can be that.

Yeah.

But I suppose a 'remedy' in that situation that they are referring to is 'have you explored all treatment options?'

Right.

That are going to help you to manage your mental health condition at a point where you are no longer stopped in doing things by your mental health condition. Your symptoms are kind of at a level where they're no longer stopping you stepping outside...

Yepp.

And in the area of mental health for some people that's the situation.

Absolutely.

But for others, many people, with a mental health condition they may have tried all sorts of therapies, been on all sorts of medications but they're still left with -

Debilitating symptoms.

Debilitating symptoms that are there. And they're living a life that's really quite hard and really...

And like you said, not being able to work towards their goals. And things like that.

Yeah. And I suppose that's the situation where the NDIS needs to come in and say 'well yes, this person has obviously explored all treatment options but still...

Still struggling.

Still struggling.

So it feels like sometimes the NDIS doesn't account for mental health or mental illness. Some of it's language that it uses. And some of the way that it's assessed. Do you still think it's worth considering applying if you have a mental illness?

I would definitely recommend people to apply.

Yepp.

But I would suggest people go into it with their eyes open. Which is hopefully something this podcast will assist people with.

Fingers crossed. *laughs*

But the more knowledge you have, you know.

Knowledge is power.

Yeah, knowledge is power. Absolutely.

And just to finish up, if you could one piece of advice to someone applying for the NDIS what would you say? Only one.

One piece of advice is to prepare.

Yepp. Prepare!

To prepare, to understand what the NDIS, what its attempting to do. To work out whether it's the

right scheme for you, if it's the right support for you. And if it's gonna be worthwhile you applying.

Terrific. Thanks so much for joining us Neil.

Thank you. And thank you Jess for launching this Podcast series it's an amazing idea.

Awh! I hope everyone compliments me that much. Thanks!

Music interlude plays

Our next guest is very special. One of our goals at Scheme Dreams is to not only speak to experts, but to also speak to people with lived experience. Because after all we are the experts on ourselves and our own experiences. so without further adieu I'd like to welcome Fiona who is a participant on the NDIS to Scheme Dreams.

Hi Jess. Thanks for having me.

No worries. It's so lovely to have you Fiona. Now could you please start by telling me a little about yourself and why you applied for the NDIS?

Well, there are probably lots of things I could tell you. But I'm feeling that maybe I should be talking about NDIS related things.

laughs Yes.

So I applied for the NDIS because I was already receiving some supports through the council. Some cleaning and shopping help.

Yepp.

And that's for a non mental health related disability, for a physical disability. And also I was receiving community mental health services through NEAMI and they actually started the process for me because community mental health in Victoria had arranged to invest that money into the NDIA. So they started the process actually.

That's great.

It was both really good to have their help. And a bit of a wrench. Because at the time I was fairly attached to that worker and you know, their timelines were just set that they needed to transition all of heir clients into applying (for the NDIS). They had some very good supports. Things like a template letter for the GP.

Oh great.

Which was functional sort of language that the NDIA...

So all that self-management, self-care, that sort of language?

Yeah. Which I really think would of ben helpful because you know doctors, GPs don't have time to get trained up in what the NDIA responds well too. So that was a really good support. And they also helped me to I suppose create a bit of safety around the application process. It felt like high stakes for because council as moving out of, it was called HACC (Home And Community Care). Council as no longer going to be providing that to people with disability.

So it was now or never?

Exactly. If I didn't get a plan with the NDIA I was going to have no help. And I was already – my help provided by council was insufficient to get me through.

And was that challenging for you acknowledging that you needed that extra help?

Well I probably well and truly acknowledged it through some pretty impassioned conversations with people at the council all the way up to CEO level.

Wow.

But it really felt like I was hitting the wall there of bureaucracy. And because of my mental health diagnosis that was very hard for me to feel that they, I suppose, they didn't care.

So did it fee sort of invalidating? Like they didn't see you, in a way?

I felt as though they didn't care whether I lived or died, I suppose.

Wow.

And that's you know, not the most balanced response to have. But yeah, it goes back to the mental health condition that I live with which things like abandonment and neglect are felt very acutely. So it's been difficult to juggle. It's been difficult emotionally to juggle a severe physical disability without family supports and without at that time enough supports from government or whatever. That did exacerbate my mental health condition. Or maybe my mental health condition made me react -

In a certain way.

Yeah. It interrupted what I would ultimately more liked to be investing my time in. Time and energy.

And I feel like that's something the NDIA don't consider is that often people who are applying for the NDIS are already quite vulnerable, especially if you're talking about psychosocial disability. That they're at risk of exacerbating the condition kind of by going through the process of trying to get help.

Yeah, so I don't know. I would say compared to the battles I had with council and actually a couple of local councils previously, my experience with the NDIA was relatively good.

Oh really? Tell me more about that.

So I was saying earlier that the worker from the PHaMS program, they're basically a social worker. We created some safety basically around the application process by acknowledging that although I was having to talk about all of the things I couldn't do and you know, talk about what a worse day looked like, and also there was a lot of stress around getting all of the letters from doctors and different health professionals in time. And of course...

It's a short time period.

And was already not managing just in itself. That's why I need the...

laughs Yeah.

...Support.

Exactly. It's kind of a circular logic.

Yeah, so it's definitely a stressful period. But that worker: we acknowledged, we made an agreement that we would spend some time after the planning meeting, for example, doing some grounding work to just bring into consciousness the fact that I'm more than all of that crappy stuff that I had to talk about at one time to the NDIA for the application process. And I think I was – the other thing that made it - 'easy' is not the word but I'd say 'better' is the fact that they responded with a plan that does give me enough support. So I guess I did feel like I was finally seen after battling for years and years. for things like access to psychologists.

So that's some support that you're getting now: psychologists?

Yes. So in the past, you know, the better access scheme through Medicare only allows 10 sessions a year.

Don't get me started on that. *laughs*

Well, that's right! I think that's okay if you're perfectly well and you're going through a period of grief.

Grief or something. Exactly.

But to restore an embedded condition 10 sessions...And again in my case will only mean I get attached to a psychologist and then have to go through the grief of the end of – And I would respond to that situation by frantically trying to find resources to go on with therapeutic work which I really found that could help me. But I wasn't, ultimately I couldn't do that.

So you're seeing the Psychologist. What other supports are you getting at the moment?

It's- there's something that are called core supports. And I think another word for that would be 'personal support'?

It's the everyday.

The things that I don't have energy to do myself or capacity to do myself. So things like shopping. And preparing food. And helping me to clean up a bit. Yeah so they're great. I feel like I've got a more dignified sort of existence and so I don't end up with every item of clothing – I don't end up with nothing to wear anymore. So it's really like a safety net those core supports.

Helps keep you afloat.

Mmm. And in terms of mental health, not being able to get out it means I'm much less isolated. And I've been lucky to find some really great people as carers. So I think the idea that the NDIA have is that you'll be able to through the supports get out into the community.

Yepp.

So form connection that's with people that you don't have to pay for. Of course that's more sustainable. But with a physical condition that sort of causes almost constant exhaustion that's just not a - I still hope that I'll get there and there are lots of impacts from having enough support through the carers. Like I have a better diet now because I am able to have help preparing fresh meals. And I eat a lot more vegetables.

And that helps you feel better. And improves your mental health.

Yeah. So it really is a sort of virtuous cycle. And I think, I continue to hope I'm going to be able to become more independent in the community. But I'm thankful that I have enough support to - yeah, I'm much less isolated than I was. And I have some great conversations with my carers as well.

It sounds like one person who has been really important to you throughout this journey has been your support coordinator. Could you tell me a little bit about that relationship?

I've had four support coordinators.

Four?! *laughs*

I started with an agency community mental health space. And I ended up changing because I'm plan managed, I don't know, should I try and explain what plan managed is?

That would be great! In your own words.

Okay, well it came up in my planning meeting when I asked if I could keep the carer, not the carer, the cleaner who I was paying out of my DSP as the council had cut my home help down to fortnightly and that was just, it wasn't enough. So I found someone out of the paper to come in on the alternate week and she was good. And because I asked that question they said 'oh, you'd like to be plan managed'. Now I didn't know that there are different ways.

Yeah exactly. Most people don't.

Mmm. So I asked what that meant and basically what it means is that you can use your budget to employ, I suppose you could use, the services you use don't have to be NDIA registered.

Gives you I guess a lot more freedom and choice.

A lot more. It's very expensive for people. I think it's 15-20 thousand dollars to remain each year to be NDIA registered. And for some services...Yepp. So my cleaner isn't and it meant that I could - I mean, I don't know what it would have been like with the NDIA, if I was NDIA managed. But I get the idea that I would have had less freedom. So I've had a range of support coordinators. At the beginning, because I was on the first round of people onto the NDIS apart from the trial side. We were all trying to learn and figure out what was what.

Yeah.

And what was happening. So the support coordinators the person who allows you to access your budget.

Yepp.

Unless your self-managed. If you're self-managed I don't think you'd need...

Yepp.

But otherwise, I initially had to get a support coordinator.

That's frustrating.

Mmm. But that was again just part of the roll out. And council services continued in that time. So

yeah I've had a range of different people. I've got to say this one's really great. She's probably the best in some ways that I've had.

That's good.

But it's a different relationship than say a community mental health worker. Like their not support workers. They don't -

And that's an important distinction.

Yeah. They're really all about telling you what you can do with your plan and helping you to do that. They might help you know, if I said 'I don't have any cleaners but I need cleaning support.' She might have said 'Oh I know about, I can recommend these ones.'

Yepp. So you've been in the NDIS system for a couple of years now. So you -

Oh and I've sacked two!

You sacked two?

It wasn't really sacked it was more going toward what I thought was gonna be a better place. And that didn't turn out to be so great. So the second one I would probably describe as a bit more of a sacking probably.

What I've heard from a lot of people is that really the support coordinator can make a world of difference. If you get a good one, it can be fantastic. If you get a not so good one...

Yeah, yeah. But the last one I had and ended up being very unhelpful and really creating blockages rather than trying to open up things for me. But of course the good thing is that with the choice and control mantra you can sack them.

Exactly. You have the power! And something else you might have bene through with your years interacting with the NDIS is a plan review, could you tell us a bit about that?

Well a plan review is a lot like applying in the first place.

Yeah.

It's back to fear and trembling and not sleeping at night. And feeling like you're gonna lose everything again. The stakes feel really high. I've heard talk about them leaving plans for two years. It would be great if that happened because there was a big brush last time because we hoped to include a scooter or electric wheelchair prescription in the plan and unfortunately the occupational therapy company that we engaged didn't do it right. But yeah I don't know if they'll ever be a time

where you're not rushing to get your reports.

You're not nervous.

And you're not nervous.

Yepp.

Because it's, you know, as I say super happy with what I've received. And I feel as though my life is much better and I can go into more detail if you like. But I would say that, yeah, that's really - a plan review is a lot like applying. Luckily I had a conversation with the planner I got the impression that he could do the job very well.

Yepp. Felt confident.

Yes, so that made me, I was determined that they wouldn't send a different planner or something. Cause apparently that can make a big impact. It's hard that these things that are out of your control...

Yeah.

Like what planner is assigned to you can make a big difference. And it's probably good to mention that I had both of my review and my initial planning meeting in my home.

So felt a bit comfortable.

Yes, and like I said I'm not well enough to go out for these things. Probably, I have, apparently the research says that people have better outcomes if they have their planning meetings certainly in person than on the phone.

Yeah. Which seems quite intuitive but...

Yeah, yeah. So these are good things too I think at any point to really stand up for your rights about these things. And make sure you're going - I even, for my first planning meeting I put it off for a bit of time because I, both for health reasons and to have the reports and letters in for them that I needed.

To be prepared.

Yeah. And kind of encourage everyone to be assertive with that.

MM. And we've heard a lot of different things about the NDIS from you and from Neil sort of the strengths and weaknesses, if you had to decide the NDIS to a friend what would you say? What would you tell them?

For me, having an NDIS plan has been life changing. I mean, it hasn't fixed my disabilities but I would say certainly my mental health, what do we call it 'psychosocial disability'?

Yepp.

I'd say that that is more in control. And yeah, that's probably a mix of having a great psychologist and having more contact even though it's not informal social contact it's with carers. And just having a lot less level of frustration about...you know some of the things that matter to me are having a clean home and having a good diet. And those are things we aren't able to achieve without support.

Yeah and they seem like such small things until they are taken away from you.

Yeah, yeah. And I'd tried things like meals on wheels. But that wasn't, I gotta say, nutritionally, much chop.

laughs Yeah.

Um, unfortunately. What else would I say to a friend? I would say that although it's stressful - although applying is stressful and I think for me I had years of being knocked back or not having people see the need; my need. Not respond to it. So you can tend to think that they're, the planners, wont see because that's been my experience.

Yeah.

You know even my physical disability isn't visible.

Yepp.

So you can get a bit of imposter syndrome. But because. because of the supports my mental health is more stable. And I've been able to have a relationship which I don't know if it would have actually survived without the various supports I have in place.

Wow. Yeah.

So that's you know, big.

That's special. That's really big.

Yeah. And that was actually one of my goals when I first...

Oh really? Kicking goals! *laughs*

Mmm. And I've got to say I'm even less poor.

Yepp.

Because previously I was using....

DSP to pay for things.

Yeah, there's even, even if you see a Psychologist for ten sessions. The one I'm seeing now she had an out of Medicare charge, an out of pocket charge of \$50 each time. which is obviously a lot.

Yeah, exactly.

On a pension. And there was the cleaner who I was paying for who I totally needed. And there's even a transport allowance if you're unable to use public transport. And so that helps pay for taxis, which you know, I'm reliant go if I go out by myself. So I mean, it's good to be less poor!

laughs I mean yeah, it makes a huge difference.

Mmm.

You kind of touched on earlier the idea of being prepared and things like that. If you were to give one piece of advice to someone applying for the NDIS what would you say?

Yeah. I would say just know that it's really worth investing your time and effort in. And being as organized as you can about getting supplementary evidence. It seems as though, I didn't know this at the time of my first planning meeting, but now I see that occupational therapy and occupational therapists talk the language of the NDIA.

Yepp.

They really are able to report on functionality. Because the NDIA don't care how much you're suffering say, like I've seen on some of the forums I'm on on the internet, where people will talk about, you know, how terrible their life is.

But if it's not in their language it means nothing.

That's right.

Unfortunately.

That's not a quota to them. Or immeasurable. So their language is very much the language of

occupational therapy around functional impairment. And that's something that if probably I was applying fresh I might see about.

Brush up on the language.

Yeah. And I would even look at getting an occupational therapist to do a functional assessment. I'd bring that in. Because it's very confusing to try and separate health issues from disability issues. I mean we talk about mental health/mental illness.

Oohh, that's a big one for me. *laughs*

Mmm. Like it really scrambles brain and I don't think there is a clean line in the way their wanting it to be. That was another thing that made me nervous gong into the meeting, wondering, being concerned that I will describe things the right thing. But I practiced writing things. And I did write out my worst day. And I also wrote - another thing I'd recommend would be to think about your goals and write them down. Because I don't know. I have a feeling the NDIA respond well to seeing that you have a vision for your life.

Yepp.

And that they're funding you to go somewhere.

Absolutely. And so much is determined from your goals moving forward with the plan. And yeah, I would definitely agree with that. If you can get your head around that early it makes a difference.

Mmm. Yeah and also it gives you a kind of positive counterpoint to thinking about all the things you can't do.

Deficits.

Mmm. Ah yeah, it's always good to think about goals. Where you want to go.

Excellent, thanks Fiona.

Pleasure.

Well, thanks for joining us everyone for the very episode of SchemeDreams. I'd like to thank Neil and Fiona for joining us. Thaks for joining us and supporting the podcast. Join us next time when we will be talking about how to apply for the NDIS and what evidence you will need with your application. I've been your host Jess. Dream on, my friends.