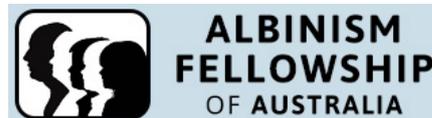


## Examples of prior successful NDIS funding



Please note that these are merely examples of prior successful funding by AFA members and are in no way meant to suggest that future applications will also be successful. Please consult the NDIS site.

Any funding must be related to a personal goal for the child, with consideration of their specific eye condition and stage of development. It does not help to compare any funding received for one child with another, as albinism alone does not qualify the child for funding.

### \* **Sunglasses/sunscreen/spf clothing**

An example from a successful application for a child with no melanin and photophobia:

- **Goal:** *I would like "Will" to be able to safely and comfortably participate in outdoor activities and events.*
- **How to meet the goal:** *Through the use of funding to purchase UV skin and eye protection to eliminate the discomfort caused by the sun. This protection will allow "Will" to enjoy the outdoors for longer periods of time thus improving his social and community participation.*
- **Category of Consumable Daily adaptive equipment (AT Level 1 & 2) as per Practice Guide Assistive Technology:** *For provision to assist with the cost of eye and skin protection, such as specialised sunglasses with transition lenses modified to fit a baby, UV protective clothing, including hats and specialised UV rated sunscreen.*

### \* **Prescription Glasses**

All optical examinations are covered by Medicare, but the prescribed glasses, lenses or other appliances are not. It is important to distinguish between how children without a recognised disability are funded for glasses versus those with a disability! Frames and lenses for children without a disability are expected to be covered from private health insurance for things like long/short sightedness or to improve general clarity (generally common conditions, including in those with albinism). For those on low incomes, there are state based schemes for free or subsidised glasses for eligible children.

[https://www1.health.gov.au/internet/main/publishing.nsf/Content/optometry\\_eye\\_health](https://www1.health.gov.au/internet/main/publishing.nsf/Content/optometry_eye_health)

In order for glasses to be funded by the NDIS, the eye condition must be related specifically to the recognised disability. If especially thick lenses are needed for loss of acuity due to albinism (which don't fit normal frames) or if the child has significant photophobia and requires tinted prescription lenses, they may be covered as this goes beyond common childhood eye conditions. A statement to this fact from the optometrist or ophthalmologist will help support the application.

### \* **Using Service Providers**

The NDIS will generally provide funding for your child to work with the following health or technology specialists in order to improve their skills or for assessments for equipment to meet personal goals. It is about learning lifelong skills and capacity building, so that they will be independent of supports in the future. You may find you only need a few of these – everyone is different!

- **Early childhood specialist teacher** – for those under 7, to guide and inform you and the child.

T: 1300 22 16 19 [albinismaustralia.org](http://albinismaustralia.org)  **Albinism Fellowship of Australia**

- **Orthoptist** – functional vision assessment and recommendations for making the most of vision. <https://www.visionaustralia.org/services/children/functional-assessments>
- **Orientation and mobility specialist (O&M)** – learning to move around safely, including cane use.
- **Occupational therapist** – accomplish everyday activities safely and efficiently eg. to bike ride.
- **Assistive technology (AT) specialist** – recommend the age appropriate AT for your child eg cane, monocular or magnifiers.
- **Speech pathologist** – some children may need support as they don't see the mechanics of speech.
- **Physiotherapist** – to ensure your child is moving correctly and meeting physical milestones
- **Psychologist** – older children may benefit from advice and training on how to self-advocate effectively (you may have to pay for initial visits through medicare).

## \*Technology

Basic domes and non-electronic magnifiers can be recommended by early intervention specialists in order for your child to read large print in children's books, but once the child requires more sophisticated equipment in order to read smaller print, they will need to undergo an assistive technology (AT) assessment. This can be done by an AT specialist, orthoptist or an occupational therapist, who you should be able to source through one of the major low vision providers. They will recommend which technology is required for your child in order to meet their specific goals.

### Things to consider when asking for technology to meet goals:

- The NDIS will not provide funds to meet any school based goals, including doing homework.
- The NDIS will generally not provide technology that is normally used by children with full vision, that parents normally pay for (eg tablets and smart phones).
- What technology is required in order for your child to have access to print or other media, or for distance vision in order to meet their goals. (eg to read efficiently for pleasure or to be able to see the craft or art they are working on).
- Are different items required for different purposes or locations or can one device service several needs?

### Examples of matching technology to goals:

- Goal: to enable my child to read for pleasure or research an interest at home. Technology: various electronic or non-electronic magnifiers to suit the age of child and home situation (desk magnifier for reading books or newspapers, portable magnifier for reading things like labels or instructions away from the desk, computer or tablet with accessibility enabled software ).
- Goal: To enable my child to write for pleasure or to communicate with family and friends (as they cannot see their own handwriting). Technology: desk magnifier for handwriting or computer/lap top/tablet with large, high contrast keyboard for typing and accessible software for enlargement, and if appropriate text to speech or audio to text for when the eyes are fatigued.
- Goal: To enable my child to undertake fine craft or artwork. Technology: desk magnifier that will allow room for hands to operate underneath the camera.
- Goal: to enable my child to read for pleasure when outside the home (at a library, home of family or friends, or in a car or other transport – just as sighted children would). Technology: portable magnifier to read printed text or a tablet to read loaded or online text using the accessibility for larger text (novel or newsitems).
- Goal: to enable my child to read sheet music in a confined space in a band or orchestra. Technology: a tablet to either enlarge music or load onto the device.
- Goal: to enable my child to enjoy novels or other written material in audio form when his/her eyes are fatigued. Technology: a device that will access audible material (eg. novels or newsitems).

- Goal: to enable my child to be able to independently read menus or public transport timetables and routes when out on their own or with friends. Technology: This may simply be a monocular, or it could be a tablet that is capable of being used as a magnifier or taking a photo which can then be blown up to view.
- Goal: to allow my child to navigate in unfamiliar areas, follow a route, identify exactly where they are on a street or work out public transport for that time or place using an audible source in bright sunlight. Technology: Smart phone or tablet with apps to audibly describe a route, identify where they are or what building they are in front of, which bus is approaching, or when the next one is due. (note that this may only be accepted for a child diagnosed with significant photophobia or significant vision loss).

Note that the technology provided will depend upon the actual functional vision loss – those with better vision (closer to 6/18) will neither require or be approved for the same equipment as those with severe vision loss (6/60+) or severe photophobia. Therefore not all the above will be applicable to everyone.

An iPhone or iPad are generally not funded – unless you can demonstrate that it is the only efficient way to provide the accessibility, or that it will take the place of multiple other devices (thus decreasing the expense overall – “value for money”).

### **\*Other technology or home adaptations that may be funded by NDIS.**

If you bring a child with severe vision impairment into an existing home or rental, you may wish to request the following adaptations in order to meet goals (they must be linked to goals). Please check the listed item numbers on the NDIS site to ensure these are still available!

- Environmental home assessment (with recommendations) by an O&M or OT specialist to identify safety hazards or identify areas requiring alterations in order to allow safe movement, protect eyes, allow better vision or prevent eye pain.
- Tinting of car windows (darkest allowed for rear passenger area) in order to protect the eyes and prevent severe eye pain.
- Tinting of windows in the home or provision of blinds to reduce glare.
- Alteration to lighting to reduce glare in the home and provide adequate targeted light.
- Provision of a shade sail to protect skin during outdoor play.
- Alteration to existing stairs or surfaces that are unsafe for children with low vision.

### **Support workers to accompany your child**

If your child’s goal to improve fitness or increase independent community participation is through attending gymnastics or martial arts, they may qualify for a support worker to attend to assist them to move safely among the equipment and other gymnasts, or to help them understand instructions that they may not be able to see. If they wish to take up distance running/cross country running, they may cover the cost of a guide to lead them around the course. They will not fund something like swimming lessons (all parents pay this), but may subsidise for 1:1 beginner lessons if your child cannot see an instructor in a group lesson (especially if they also suffer with pool glare).

### **NDIS Resource (as at June 2020):**

**AT and consumables code guide-** scroll down page to find link:

<https://www.ndis.gov.au/providers/housing-and-living-supports-and-services/providing-assistive-technology>