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| **Easy Read – Planning with you** | |
| Cough with solid fill | **Your voice is the essential** |
| Boardroom with solid fill | **Please tell us about your needs and requirements.** |
| User network with solid fill | **Your Support Plan is designed with you at the centre of all actions.** |
| List with solid fill | **Our staff will look at your current NDIS Plan funding to ensure that we have the services you need.** |
| Two Men with solid fill | **To create your plan, we may need to talk to your family, health providers and others (with your permission)** |
| Connections with solid fill | **We will consult with you about many supports such as:**   * **Living skill development** * **Your interests, leisure and community group involvement** * **Travelling and transport needs** |
| Noodles with solid fill  Chat with solid fill | **We will consult about:**   * **Family relationships** * **Cultural requirements, e.g. food,** * **Spiritual Identity – religious needs** * **Communication methods** |
| Architecture with solid fill | **Your safety is checked:**   * **Physical environment** * **Personal emergency plan** |
| Eye dropper with solid fillFirst aid kit with solid fill  Heart with pulse with solid fillToothbrush with solid fill | **Your health needs are assessed:**   * **Medical needs** * **General health requirements** * **High-intensity requirements** * **Allied health services** * **Comprehensive health** * **Vaccination support** * **Oral health** |
| Health And Safety with solid fill | **We look for risks so we can get rid of or reduce them** |
| Classroom with solid fill | **We will create risk strategies and train our staff in these** |
| Document with solid fill | **Your Support Plan is reviewed every year** |
| Boardroom with solid fill | **If your needs change, then we will review your plan earlier** |
| Signature with solid fill | **You will need to sign your Support Plan** |
| Clipboard with solid fill | **We will provide you with a copy of the Support Plan** |