

# A Coordinator's Companion to SDA Applications

*Practical guidance for building the SDA case in a participant's NDIS plan.*

**Audience:** Support Coordinators

**Read with:** *Kinkera Comprehensive SDA Guide (master) – particularly sections 4 (eligibility) and 14 (eligibility to approval)*



Securing SDA funding in an NDIS plan is one of the highest-stakes pieces of work a Support Coordinator does. The Comprehensive SDA Guide explains what SDA is and who it is for. This companion goes one level deeper – what the NDIA needs to see, and how to build a case that holds up.

*Participants have choice and control in selecting their SDA provider and living arrangements.*

## THE FOUR PILLARS OF AN SDA CASE

**1 Eligibility**  
– the participant meets the Section 14 needs requirement of the NDIS Act.

**2 Evidence**  
– independent assessments from suitably qualified clinicians.

**3 Goals**  
– explicit, plan-aligned housing goals in the participant’s own words.

**4 Value for money**  
– SDA is reasonable and necessary against alternative housing options.

## GOAL LANGUAGE MATTERS

Help the participant articulate a goal that is specific, disability-related and tied to a real-life outcome. Vague goals are the most common reason for a thin SDA case.

## GOAL LANGUAGE EXAMPLES

“I want to move into my own home where I can manage my mobility and personal care safely, without relying on my parents to be my full-time carers.”

“I want to live with my partner in a home that is accessible, calm and predictable enough for me to manage my sensory and behavioural needs without escalation.”

“I want to transition from hospital to a home that’s robust enough to keep me and the people supporting me safe, so my behaviour support plan can be implemented day to day.”



## EVIDENCE THE NDIA NEEDS

### Functional Capacity Assessment (FCA)

a current FCA from an Occupational Therapist with SDA experience, showing how the disability affects daily life and why current housing is not working.

### Housing Needs Assessment (HNA)

a separate, SDA-specific report from an OT confirming the design category, build type and key design features.

### Allied health support letters

psychology, speech, GP and psychiatrist evidence as relevant.

### Behaviour Support Plan

required where behaviours of concern are a driver of the SDA request.

## WHAT TO AVOID



Treating SDA as a request for housing rather than for disability-related capital



Vague goals such as “I want to live in nicer housing”



Submitting an FCA more than twelve months old



Confusing SDA (the building) with SIL (the supports) in the funding ask



Skipping the value-for-money argument

## VALUE FOR MONEY

Compare the SDA-funded option with current accommodation costs and risks, the alternative supports otherwise needed (higher SIL hours, hospital stays, family carer burnout), and long-term sustainability. SDA is most clearly reasonable and necessary when it reduces other costs or risks over time.



## NEXT STEPS

- 1 Start the conversation with the participant's Occupational Therapist early.
- 2 Connect with KinKera to identify a target design category and likely property type.
- 3 Build the evidence pack before the plan reassessment, not after.

## WATCH THE MASTERCLASS

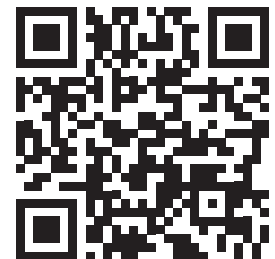
**SDA Eligibility Masterclass** –Greg Barry of SDA Services walks through SDA terminology, the Section 14 needs requirement and the strategy behind a successful application. One hour.



Scan to watch

## IMPORTANT TO KNOW

For the full picture, download the KinKera Comprehensive SDA Guide from [www.kinkera.com.au/kinacademy](http://www.kinkera.com.au/kinacademy) or scan the QR code to share the link.



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