



CLIENT DETAILS

Date			
First name			
Last name			
Client D.O.B.			
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Non-binary <input type="checkbox"/> Other:	Pronouns	<input type="checkbox"/> She/Her <input type="checkbox"/> He/Him <input type="checkbox"/> They/Them <input type="checkbox"/> Other:
Contact person		Phone number	
Email address			
Home address			

REFERRER

Name			
Relationship to client	<input type="checkbox"/> Support Coordinator <input type="checkbox"/> Healthcare Provider <input type="checkbox"/> Family <input type="checkbox"/> Other, please detail:		
Organisation		Phone Number	
Email Address			

INITIAL CONSENT

SinaOT may need to contact the person listed above to better understand the client’s circumstances and to ensure that the client is connected to the supports that best meets their needs. Does the client approve this?

Yes No

FUNDING

National Disability Insurance Scheme (NDIS)			
NDIS number		Contact person	
Plan start date		Plan finish date	
Plan types supported	<input type="checkbox"/> Self managed <input type="checkbox"/> Plan managed	Accounts email	

If you feel comfortable, **please attach the NDIS plan or extract that includes client goals.** This is a quick way to get the Occupational Therapist up to speed on your situation, goals and ensure you have the correct funding to commence services. However, this is completely optional and you can choose to convey the relevant information in any format you prefer.

0467 712 199
sina@sinaot.com.au
PO Box 511,
Brighton SA 5048



REFERRAL FORM

Other Funding Sources	Details
My Aged Care	
Private	
Other	

DISABILITY/IMPAIRMENT TYPES

Type	Details
Physical (e.g. muscular dystrophy)	
Neurological (e.g. brain injury, seizures)	
Psychosocial (e.g. Schizophrenia, PTSD)	
Other (e.g. deaf, Intellectual disability)	

SAFETY

Are there any safety concerns with the Occupational Therapist attending the client's home for assessment?
(e.g. contagious/infectious disease, challenging behaviours, safety concerns, illicit substances, self-harm tendencies, pets etc)

No Yes – please detail:

SERVICE REQUIRED

Please select all that apply

<input type="checkbox"/> Functional Capacity Assessment/FCA	<input type="checkbox"/> Assistive Technology/AT
<input type="checkbox"/> Home and Living Assessment	<input type="checkbox"/> SDA/SIL Assessment
<input type="checkbox"/> Home Modification	<input type="checkbox"/> Other – please detail:
<input type="checkbox"/> Telehealth	

We prefer to conduct face-to-face assessments whenever possible. However, when a face-to-face visit is not feasible, we offer telehealth consultations. The choice between in-person and telehealth services depends on the specific case and its complexity.

FEE SCHEDULES

National Disability Insurance Scheme (NDIS)					
Item number	Item name & notes	Unit	Metro/regional (MM1-MM5)	Remote (MM6)	Very remote (MM7)
15_617_0128_1_3	Capacity Building - Improved Daily Living	Hour	\$193.99	\$271.59	\$290.99
01_741_0128_1_3	Core Support - Assistance with daily life	Hour	\$193.99	\$271.59	\$290.99

National Disability Insurance Scheme (NDIS)					
Item number	Item name & notes	Unit	Metro/regional (MM1-MM5)	Remote (MM6)	Very remote (MM7)
	<i>Note: client required to have NDIS approval to use this</i>				
<p>Therapy travel time will be charged at the NDIS rate of \$193.99 per hour to 30 minutes in MM1-3 each way in the metropolitan area, and for up to 60 minutes each way in MM4-5 regional areas if it is the last appointment or the only appointment.</p> <p>To check your Modified Monash (MM) zoning, please see the Australian Government locator resource: https://www.health.gov.au/resources/apps-and-tools/health-workforce-locator/app</p> <p>Providers may request a reasonable contribution from participants for non-labour travel costs incurred during Face-to-Face supports. This can include:</p> <ul style="list-style-type: none"> • Up to \$0.99 per kilometre for the use of a provider's or worker's vehicle. • The full amount for other travel-related expenses such as road tolls, parking, or public transport fares. <p>For more information, refer to: https://www.ndis.gov.au/providers/pricing-arrangements#ndis-pricing-arrangements-and-price-limits</p>					