



High Physical Support Needs: What to Expect from Your Care Team

A Guide for Participants and Families

Prepared by Your Story Community Supports

When someone has high physical support needs, the care team around them becomes essential to daily life. This guide explains what that team looks like, what they do, and what you should expect from them.

What Are High Physical Support Needs?

High physical support needs means a person requires significant physical assistance throughout the day — and sometimes overnight — to manage daily tasks that most people do independently.

This might include:

- Assistance with transfers (moving from bed to wheelchair, wheelchair to shower)
- Help with all personal care (showering, dressing, toileting, grooming)
- Assistance with eating and drinking
- Medication administration
- Wound care or other clinical tasks
- Use of assistive equipment (hoists, wheelchairs, walking frames, pelican belts)
- Continence management
- Positioning and pressure care

Who Is on the Care Team?

A person with high physical support needs typically has a team of people working together:

Support Workers

Your day-to-day team. They help with personal care, meals, household tasks, and community access. At Your Story, support workers complete 40 onboarding modules before working with participants, covering:

- Manual handling and safe transfers
- Infection control
- Medication management
- Positive behaviour support



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- First aid and CPR
 - Trauma-informed care

Registered Nurses

For participants with complex health needs, registered nurses provide:

- Health assessments and monitoring
- Medication management and administration
- Wound care and clinical procedures
- Coordination with GPs and specialists
- Health management plan development
- Training and supervision of support workers for clinical tasks

At Your Story, our nurses hold current AHPRA registration and have experience in disability, aged care, and community nursing.

Allied Health Professionals

Accessed through our partnership with Allied Alliance:

- **Physiotherapists** — mobility, strength, pain management, equipment prescription
- **Occupational therapists** — daily living aids, home modifications, functional assessments
- **Speech pathologists** — communication support, swallowing assessments
- **Psychologists** — emotional wellbeing, behaviour support

House Leader / Team Leader

Each Your Story home has a designated house leader who:

- Oversees the support team
- Ensures consistency in care delivery
- Acts as the main point of contact for families
- Coordinates with allied health and nursing staff

What Should You Expect from Your Care Team?

Dignity and Respect — Always

Personal care is intimate. Your care team should:

- Explain what they're doing before they do it
- Ask for your consent
- Respect your privacy (close doors, use towels)



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- Follow your preferences (water temperature, clothing choices, routine order)
 - Never rush you

Consistency

- You should see familiar faces — not a revolving door of strangers
- Staff should know your routines, preferences, and health needs
- Handover between shifts should be thorough so nothing is missed

Communication

- Staff should talk *to* you, not *about* you
- Families should receive regular updates
- Any changes in health or behaviour should be reported promptly
- You should always know who to contact with questions or concerns

Safety

- Proper manual handling techniques (no shortcuts)
- Equipment checked and maintained regularly
- Infection control practices followed
- Incident reporting for any accidents, near-misses, or concerns

Goal-Focused Support

Even with high physical support needs, your goals matter. Your team should:

- Help you work toward whatever independence is possible for you
- Support community participation and social connection
- Encourage choice and control in your daily life
- Review goals regularly and celebrate progress

Assistive Equipment You Might Use

Equipment	Purpose
Ceiling or mobile hoist	Safe transfers between bed, chair, and bathroom
Wheelchair (manual or powered)	Mobility and independence
Walking frame or walking stick	Supported mobility
Pelican belt	Safe assisted walking



Equipment	Purpose
Pressure care mattress	Preventing pressure injuries
Shower chair or commode	Safe bathing and toileting
Communication device	Expressing needs and preferences
Continence aids	Dignity and comfort
Orthopedic supports	Joint and posture management

Your NDIS plan can fund assistive technology under Capital Supports. Your OT can assess what you need and help with the application.

What If Something Goes Wrong?

If you're not happy with the care being provided:

- **Speak to your house leader** — they can address issues directly with the team
- **Contact the office** — if you'd prefer to go higher
- **Make a formal complaint** — every concern is taken seriously and documented
- **Contact the NDIS Quality and Safeguards Commission** — if you believe your rights are being violated (1800 035 544)

You will never be disadvantaged for speaking up. Your safety and dignity are non-negotiable.

For Families

It can be hard to hand over the care of someone you love. Here's what might help:

- **Visit regularly** — you're always welcome
- **Build a relationship with the house leader** — they're your main contact
- **Ask questions** — no question is too small
- **Trust the process** — it takes time for everyone to settle into a new routine
- **Stay involved in planning** — your input matters, especially during goal reviews



Helpful Contacts

Who	Contact
Your Story Community Supports	www.yourstorycommunitysupports.com
NDIS	1800 800 110
NDIS Quality and Safeguards Commission	1800 035 544

Your story. Your way.