Thriving Kids Victoria & NDIS Changes

KCT Parent & Family Handout | Updated 28 August 2026

IMPORTANT: This is a fast-moving reform. Since the July update, new Commonwealth NDIS legislation has passed. Some implementation details for Thriving Kids Victoria - including local referral pathways, exact service intensity and provider arrangements - are still being developed.

What is Thriving Kids?

Thriving Kids is a new system of supports outside the NDIS for children aged 8 and under (under 9) with developmental delay and/or autism and low-to-moderate support needs. A formal diagnosis is not intended to be the only gateway to support. Victoria will combine existing services with new supports, with help delivered as much as possible where children live, learn and play.

Key dates

- **From 1 Oct 2026:**
  - Stages of Thriving Kids rollout begins.
  - First Victorian supports start, with more services added over time.
- **1 Feb 2027:**
  - NDIS plan rollover changes begin.
  - At scheduled reassessment/renewal, a renewed plan is created; unspent funds do not automatically carry into the renewed plan.
- **1 Jan 2028:**
  - Thriving Kids fully operational nationally; new NDIS access rules commence.
  - New applicants aged 8 and under with developmental delay/autism and low-to-moderate needs are expected to use Thriving Kids rather than NDIS.
  - Existing participants are reassessed under transitional rules.
- **2028-2030:**
  - Existing NDIS participants progressively reassessed under new access arrangements.
  - Timing will vary.
  - Children already in NDIS before 1 Jan 2028 have specific transitional arrangements while aged 8 and under.

What might Thriving Kids include in Victoria?

- Developmental information, advice and earlier identification of developmental concerns.
- Two new developmental assessments for all children - one before kinder and one before school - alongside existing Maternal and Child Health checks.
- A mix of family/parent support, peer connection and allied health/support services, increasingly delivered in everyday settings such as early learning, kinder and school.
- The exact local pathways, eligibility processes, frequency of sessions and which providers will deliver services are still being finalised.

Will my child lose NDIS funding?

Right now: there is no immediate change to how people access the NDIS before 1 January 2028. Keep using your child's current plan in line with their goals, approved supports and NDIS guidelines.

Children aged 8 and under: children already in the NDIS before 1 January 2028 with developmental delay/autism and low-to-moderate support needs have transitional reassessment arrangements. Children with permanent and significant disability or high support needs can remain eligible for NDIS, subject to the usual requirements.

Children aged 9+ / other participants: the new functional-capacity-based NDIS access criteria commence from 1 January 2028, with existing participants progressively reassessed over about three years. This is broader than Thriving Kids, so families should not assume older children are permanently unaffected.

What should families do now? Use funding well + build functional evidence

The strongest evidence is not simply a diagnosis or a list of appointments. It shows functional impact: what your child cannot do independently, what support is required, how often and how intensively it is needed, what happens without it, and how needs affect everyday family life.

- Use current NDIS funding for reasonable and necessary supports that relate to your child's plan and goals. Do not spend simply to "use up" a budget. Think ahead to transitions (for example kinder-to-school or starting school) and discuss useful supports with your therapy team.
- Keep invoices, service agreements and relevant records. From 1 December 2026, NDIS claims generally need to be made within 90 days of service delivery; record-keeping requirements are also being strengthened.
- Ask therapists to document functional support needs while they have current knowledge of your child - not only test scores or diagnoses.

Create a "functional evidence" Folder:

NDIS documents
Notice of impairment/access documents; current and previous plans; review/reassessment correspondence.

Allied health
OT, speech pathology and other support letters; observation reports; NDIS review reports; formal assessments and Functional Capacity Assessments where clinically appropriate.

Safety + daily life
Documented safety concerns, supervision needs, incidents, sleep disruption, community access difficulties and support needed for personal care/daily living.

Medical
Paediatrician letters/reports and relevant GP/specialist information.

Education
Kinder/school reports, meeting notes, goals, funding paperwork, behaviour/support plans and incident reports.

Carer evidence
A Carer Impact Statement describing the frequency, intensity and cumulative care load across a whole day/week, and where informal care is reaching its limit.

Carer Impact Statement: show the lived reality

An FCA can be very detailed and still not capture the whole story. A Carer Impact Statement does not replace an FCA or therapist report - it adds the lived evidence of what support looks like across the whole day, every day.

Instead of only writing "requires supervision", explain what that means: Is it occasional checking, constant line-of-sight supervision, repeated prompting, night waking, bolting risk, help to regulate, medication management, cutting food, finding tolerable clothing, driving to appointments, or being unable to safely leave the child alone?

Include: what your child cannot do independently; the support you provide; frequency/duration; supervision level; what happens without support; effects on work, sleep, siblings and family life; cancelled formal supports you have to absorb; and where informal care has reached its limit.

Why detail matters: one task can look small on paper, but when it happens repeatedly across a day, week and year it demonstrates the actual level of assistance required. "I'm exhausted" is important - but explain why.

Current pathways & Kids Connect Therapy

- Until 1 January 2028, families with newly identified developmental delay should continue to use the current NDIS access pathway where appropriate. There are no changes to NDIS access before that date.
- There is no immediate change to Kids Connect Therapy supports. We will continue to update families as Thriving Kids Victoria referral and provider arrangements become clearer. We do not yet know whether Kids Connect Therapy will be able to deliver services within Thriving Kids.
- Medicare-rebated allied health may remain available where a child is eligible under an applicable Medicare pathway and referral. Speak with your GP/paediatrician and our admin team about current options.

Please bring any NDIS reassessment or review letter to your therapy team as soon as you receive it. We can help identify what existing clinical and functional evidence may be useful and what may need updating.

Please note:

This is an evolving framework and the information available right now may change as soon as tomorrow. If you would like further information or have questions about what this may mean for your family, please contact our KCT team.