



Group-Based Social and Community Participation





Guidance for pricing transition

October 2023

[ndis.gov.au](https://www.ndis.gov.au)

OFFICIAL

Contents

Group-Based Social and Community Participation	1
Overview	4
New group-based supports pricing	5
 Direct (Face-to-Face) Supports	6
How are staff costs covered if the pricing is per group and does not consider staff to participant ratios?	6
Do direct support costs need to be apportioned equally amongst the participants?	7
How is a participant charged when they need 1:1 self-care during their group-based support?	7
 Non-Face-to-Face Supports	8
How does Non-Face-to-Face claiming work for group-based supports?	8
How are Non-Face-to-Face supports documented?	9
What if a Non-Face-to-Face task is completed, then a participant cancels?	10
 Centre Capital Costs	10
What are centre capital costs?	10
Claiming when a group spends part of the time at the centre and part of the time out in the community?	10
Can centre capital costs be claimed for delivering a support at a community facility we have temporarily hired, such as a swimming pool?	11
 Programs of Support	12

What is a Program of Support?	12
Can 1:1 supports be included in a Program of Support?	13
If delivering supports under a Program of Support, is a new Service Agreement required every 6 months?	13
What are the cancellation rules for a Program of Support?	13
What is the notice period to exit a Program of Support?	14
What is a Program of Support unplanned exit?	14
If a participant exits a Program of Support, can a provider change the amount they charge the remaining participants?	14
General Questions	14
Will the transition period be extended again, and can we just keep using the transitional prices?	14
Is the NDIA adding more of an administrative focus to the Disability Support Worker role by introducing separate Non-Face-To-Face (NF2F) claiming?	15
Is the newer pricing approach designed to reduce revenue available for group-based supports?	15
Separating out NF2F costs is an administrative burden and may be challenging for participants to understand. Are there any real benefits to participants?	16
Will providers need to upgrade systems to transition to the new pricing approach?	17
Has an outcomes framework for group-based social and community participation supports been developed?	17
What role do providers have in ensuring participants have sufficient funding in their plans?	18
How do participant goals impact group-based social and community participation supports?	18
Will there be more support for transition?	19

The transition period to move to the new pricing arrangements for group-based supports ends 31 December 2023.

This guidance is designed solely for providers who deliver group-based social and community participation supports as core supports. Providers who deliver other types of group-based supports should not rely on this guidance.

The contents are not intended to replicate or replace the information contained in the NDIS Pricing Arrangements and Price Limits.

Overview

According to the NDIS Act (2013), key objectives of the NDIS are to “...support the independence and social and economic participation of people with disability, maximise a person’s inclusion in the community, and to facilitate greater community inclusion of people with disability.

The NDIA recently conducted research on social inclusion and community access, which can be found on the NDIS website: [Social inclusion and community access research | NDIS](#). As part of this research, participants told us that community participation gave them:

- A sense of belonging and connection
- Deeper relationships with friends and family
- Larger social networks and reduced isolation
- Increased confidence, self-efficacy, and safety
- Increased opportunities for further community participation, employment or study.

The NDIA recognises that providers delivering social and community participation supports play a significant role in enabling participants to share in these benefits.

New group-based supports pricing

Both the new pricing arrangement (introduced July 2020) and the transitional pricing arrangement are based on the Disability Support Worker (DSW) Cost Model. Figure 1 is a visual comparison of the two arrangements, showing the indicative cost elements for each approach.

The transitional pricing is a maximum rate, per hour, per participant. It includes a standard provision for Non-Face-to-Face (NF2F) support for ratios over 1:1, as well as Centre Capital Costs (if relevant).

The new pricing arrangement is a maximum rate, per hour, per group. Centre Capital Costs (if relevant) are claimed separately. NF2F costs are now negotiated to reflect the actual needs of participants and are also claimed separately.

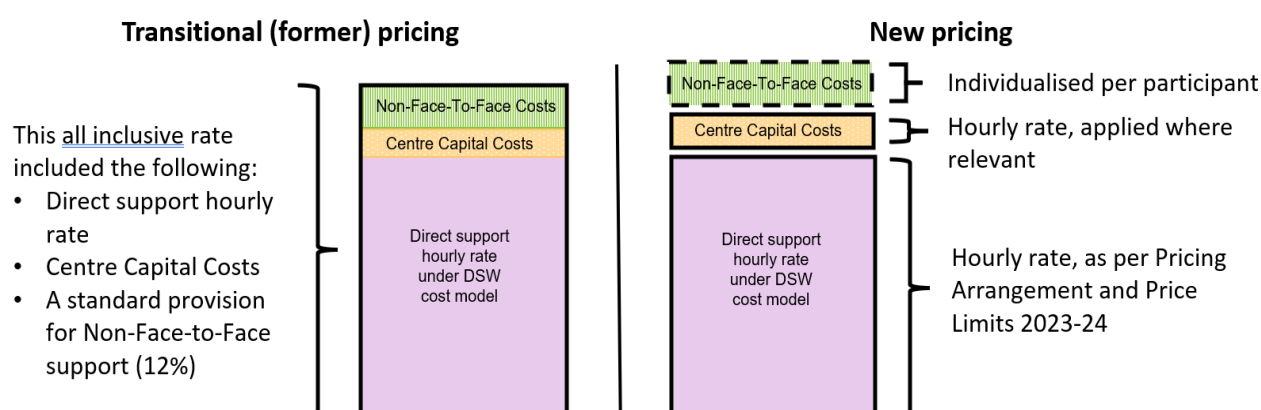


FIGURE 1 - COMPARISON OF PRICING ARRANGEMENTS

The new pricing arrangement also introduces Programs of Support (POS). The POS model allows providers and participants to agree on programs of activity up to 6 months. This gives some increased certainty around the supports and participants attending, which can mean more certainty around costs for both participants and providers. However, POS are not mandatory. They are simply an option that may suit providers and participants in some circumstances.

This guidance was developed to complement the Pricing Arrangements and Price Limits (PAPL) which can be found on the NDIS website. We have developed this guidance based on questions and scenarios received since the new pricing arrangement was introduced, to help providers understand how the new pricing arrangement could be operationalised in different settings and contexts.

We have referred to ‘participant’ throughout this document, but where relevant, mean that to include families, carers, responsible person or nominees as well.

If any inconsistencies with the PAPL are identified in this guidance, the PAPL is the higher order document and must be complied with.



Direct (Face-to-Face) Supports

How are staff costs covered, if the pricing is per group and does not consider staff to participant ratios?

A core element of the Scheme is choice and control. Group-based social and community participation supports, delivered in large groups, can sometimes make it difficult to accommodate the preferences and interests of all people in the group.

Some providers who have transitioned to the new pricing have told us that the shift to charging per group, provided an incentive for them to think more closely about how they structure the programs they offer. They have worked with participants and nominees to ensure they have a good understanding of everyone’s interests and goals. Viewing group supports through the lens of smaller groups, has allowed providers to really target the support they offer to meet the needs of these participants.

Example

A provider delivers group-based supports to 20 participants in their centre. These 20 participants are supported by 4 support workers, and participants are charged under the transitional pricing, at the 1:5 weekday, daytime standard rate.

If the provider continues to deliver support to these participants as one large group of 20 under the new pricing arrangement, they will experience a reduction in revenue that could threaten the financial viability of the future provision of the group support.

Instead, the provider changes their service offering and splits the group into 4 groups, each with 5 participants supported by 1 support worker. Under the new pricing arrangement, the hourly rate for group activities is divided by the number of participants in the group.

A provider may choose to offer different activities within each group that are more targeted to the individual needs of the participants.

Do direct support costs need to be apportioned equally amongst the participants?

Under the new pricing arrangement, the hourly rate for group activities is divided evenly by the number of participants in the group. There is no provision to apportion that rate differently amongst participants in the group.

How is a participant charged when they need 1:1 self-care during their group-based support?

Ultimately this is a commercial business decision for each provider.

Some things providers should consider in making a decision include:

- Whether the activity is resourced and available to the participant for the full group-based support, regardless of 1:1 self-care needs (i.e., if the self-care takes 20 minutes instead of 30, is the participant able to re-join the group for that extra 10 minutes);
- Considering the same scenario for the other participants, for example, if a participant who can attend to self-care tasks unassisted spent 15 minutes in the bathroom during a 4-hour activity, would it be a reasonable expectation to charge them 3 hours and 45 minutes of group time instead of 4 hours?

Whichever approach is taken, it is expected that this is communicated clearly with the participant, and that appropriate supporting documentation is retained as evidence of support delivery.



Non-Face-to-Face Supports

How does Non-Face-to-Face claiming work for group-based supports?

Under the new pricing arrangement, providers and participants have more flexibility to agree on Non-Face-to-Face (NF2F) fees that reflect the cost of meeting the individual participant's needs for a group-based support. They are claimed with the same line item as the relevant direct support; however, the "Non-Face-to-Face" claim type is selected, differentiating it from the claim for the direct support. For more information on claiming, please see the "Using the myplace provider portal step by step guide" on the [NDIS website](#).

NF2F supports are different from the types of tasks that are covered by the administrative and corporate overheads included in the Disability Support Worker Cost Model. These overheads account for a range of tasks like rostering staff, general planning for activities or programs, invoicing and claiming, as well as standard record keeping and routine communication.

Claimable NF2F costs are the indirect supports specifically required to deliver group-based supports to a participant. There are two main types of NF2F supports that are relevant. These are:

- **Disability specific individual supports**, for example adapting an activity so that a participant can safely and effectively participate. These costs would be charged only to the relevant participant.
- **General tasks** that are required to facilitate a group support, and are necessary across the entire group, for example setting up activity specific equipment. These costs would be shared evenly across all participants in a group.

It's important to note that any NF2F supports and their cost must be agreed with the Participant in advance, and must be in line with the requirements of the *Pricing Arrangements and Price Limits*.

The NDIA has not published an exhaustive list of NF2F supports, as we recognise that what is a reasonable NF2F support for one participant and activity may not be for another. Consider the following example:

Scenario

A provider runs a cooking class as a group-based support activity. Could the time shopping for ingredients be claimable as a NF2F support?

Example 1:

The participants goals are to increase their independent living skills so that they can move out of home in the next couple of years.

The provider estimates it will take 30 minutes to shop for ingredients. Even though this may limit the ability of the participants to cook some kinds of recipes, shopping for groceries as part of meal preparation is an independent living skill.

The provider and participant agree that participants will help shop for groceries as part of their face-to-face activity, as it will better help them achieve their goals.

In this instance they are **not** likely to be appropriate NF2F costs.

Example 2:

The participants goals are to socialise with their friends, some attend the same centre for group activities for 2 hours each week.

The provider estimates it will take 30 minutes to shop for ingredients. If they do this as a Face-to-Face support, it may limit the ability of the participants to cook some kinds of recipes during their session and having the DSW shop for ingredients prior to the session is preferable.

In this instance, If the provider and participant agree, it **may** be appropriate to claim the cost for the shopping as a NF2F support, split between the participants who attend the group.

How are NF2F supports documented?

Different types of NF2F costs may have different documentation requirements depending on what the NF2F cost is covering. For example, a cost shared across a group of participants could be documented with an addition to a group-roster, however a one off individual NF2F cost may need case notes or similar evidence to be retained.

Please visit the NDIS website at [Getting paid | NDIS](#) for more information about how to appropriately document NF2F supports for a particular support.

What if a NF2F task is completed, then a participant cancels?

If a NF2F task is completed in preparation for a session, and the participant later cancels the session associated with that task, then the provider could choose to claim for the NF2F activity. However, if the task has not yet been completed, it should not be charged by the provider.

Providers should ensure that their service agreements clearly explain the NF2F costs when the associated direct support is cancelled, so that participants are aware of all costs they may be liable for upon cancellations.



Centre Capital Costs

What are Centre Capital Costs?

Some social and community participation supports are delivered in centres. These centres are different to typical community settings and are designed as accessible spaces for those with higher support needs.

The Centre Capital Cost line item is an additional amount contributing to the costs of running and maintaining a centre. Where relevant, they can be claimed per hour per participant.

This line item cannot be claimed when using the transitional pricing as the centre capital cost is already included in those prices. Details related to claiming Centre Capital Costs are contained within the PAPL and providers are reminded they are required to acknowledge compliance with the *NDIS Pricing Arrangements and Price Limits* and its associated documents when submitting a payment request through the myplace Provider Portal.

Claiming when a group spends part of the time at the centre and part of the time out in the community?

Providers can claim Centre Capital Costs when the support is partially delivered in a centre, if the centre is available for use for the duration of the group-based support activity.

Example:

A group of participants attend a support each Friday that brings them together over a shared love of music. They meet in a centre, which is designed to support participants with high support needs.

The local council is putting on a month-long series of free lunchtime concerts in the botanic gardens on Fridays.

The participants and provider decide that this a great opportunity to explore music in the community and arrange to attend the concerts, which are a short walk away from the centre. This means they will be out of the centre for about 2 hours, each Friday for that month. They are charged the Centre Capital Costs for the full 6 hours because the centre is available for them to use, if needed.

On the day of the second concert, a thunderstorm is forecast, and the concert is cancelled, so the group spend the full day in the centre and participate in other activities instead.

It is important to note that the centre needs to be **genuinely** available to participants who are charged the Centre Capital Costs while not at the centre. Consider a scenario where a provider runs a centre that can safely accommodate 30 participants. If they support 50 participants and rotate groups in and out of the centre to meet capacity constraints, then the centre is not genuinely available for up to 20 of the 50 participants at any one time.

Can Centre Capital Costs be claimed for delivering a support at a community facility we have temporarily hired, such as a swimming pool?

No, Centre Capital Costs cannot be claimed for temporary hire of facilities. Hiring a pool or other community facility isn't incurring running and maintenance costs, so isn't intended to be covered by this line item.



Programs of Support

What is a Program of Support?

Programs of Support can relate to any group-based support:

- in the Assistance with Social, Economic and Community Participation Support Category, including group-based supports and Supports in Employment;
- in the Assistance in Shared Living Arrangements - Supported Independent Living section of the Assistance with Daily Life Support Category; and
- in any Capacity Building Support Category.

If providers and participants agree on a Program of Support, the provider can claim a regular weekly amount for delivering the agreed supports for the duration of the Program of Support (up to 6 months). This reduces the need for providers to recalculate minor changes every session.

Programs of Support should be individualised for each participant, even where different participants are accessing the same activities. When developing a Program of Support, it should be based on what is usual for that particular participant, which is referred to as a typical pattern of support. The typical pattern of support can be based on a weekly or other agreed period and can include, where relevant, days of attendance, hours, individual, group, Non-Face-to-Face supports, transport, and Centre Capital Costs.

Planned absences do not form part of a Program of Support, but providers can claim for unscheduled absences, as long as they had the capacity to deliver the support. Managing cancellation risk in this way give more certainty for providers offering group-based supports and helps secure the viability of group supports.

The NDIA recognises that Programs of Support might not be suitable for all providers, activities, or participants. They are not mandatory, and offering Programs of Support is a commercial business decision for each provider to make, considering the needs of their business and the participants they support.

When documenting a Program of Support, providers should ensure that they have clearly outlined the length of the program, exit rules and intended outcomes.

Note

Programs of Support previously had a maximum length of 12 weeks. This has increased to 6 months in response to stakeholder feedback. While some participants and providers will welcome the option to move to longer Programs of Support, the NDIA reiterates that this is a maximum length and shorter Programs of Support can still be agreed if desired.

Can 1:1 supports be included in a Program of Support?

The Group Activities line items on pages 60 and 61 of the PAPL (standard and high intensity) can be delivered to individuals or groups of participants. These line items can also be delivered as part of a Program of Support.

Note:

This advice in this answer applies only to the group activities line items on pages 60 and 61 of the PAPL and should not be applied to other support types and line items as they may have different requirements.

If delivering supports under a Program of Support, is a new Service Agreement required every 6 months?

A Service Agreement is different from a Program of Support. A Service Agreement may refer to multiple Programs of Support, so a new Service Agreement is not necessarily needed every 6 months. However, Programs of Support must not automatically roll over and must be individually agreed upon.

Where a Service Agreement refers to multiple Programs of Support, before agreeing on each individual Program of Support under that Service Agreement, the provider and participant would discuss progress towards goals and what program opportunities they are interested in pursuing.

What are the cancellation rules for a Program of Support?

The short notice cancellation rules do not apply for Programs of Support. Under the PAPL, providers may claim for supports that a participant has agreed to attend, whether or not they actually do attend, unless a participant has given notice to exit the program.

It is important for providers to clearly communicate this to participants, including any expectations around payment during planned absences. If a participant notifies the

provider before a planned absence, the provider may need to adjust their service delivery.

Providers are responsible for being upfront with terms of support. Similarly participants are also responsible for providing notice when exiting a Program of Support.

What is the notice period to exit a Program of Support?

The notice period for a program of support is 2 weeks.

What is a Program of Support unplanned exit?

If a participant stops attending an agreed Program of Support and does not give notice, a provider can only claim for four consecutive weeks. After this time, it is considered an unplanned exit.

If a participant exits a Program of Support, can a provider change the amount they charge the remaining participants?

The PAPL allows for providers and participants to agree on a new Program of Support at any time.

However, this is a commercial business decision for the provider and something that should be discussed with participants both as part of the process to agree to a Program of Support, and in any instances where this situation eventuates.

General Questions

Will the transition period be extended again, and can we keep using the transitional prices?

The new pricing arrangement was introduced in July 2020, and the transition period ends on 31 December 2023. The Agency consulted with the sector on the new pricing and transition in 2022 and heard there were areas in the PAPL and provider guidance that could be refined. This additional 6-month period lets the NDIA implement those adjustments and ensures everyone can access support during the transition.

Providers who require time to transition to the new pricing arrangements may continue using the previous ratio-based support items (referred to as transitional arrangements) until 31 December 2023.

Once a provider has transitioned to the new pricing, they cannot revert to the transitional pricing. However, it may be easier for providers to gradually transition a group of participants.

All providers must fully transition by 31 December 2023, and no further extension will be granted beyond this date.

Is the NDIA adding more of an administrative focus to the Disability Support Worker role by introducing separate NF2F claiming?

Non-Face-to-Face work to support the face-to-face delivery of supports is common among many support types. For group-based social and community participation supports, the newer pricing approach means that providers can now reflect the actual Non-Face-to-Face effort expended for each group and/or participant.

Some providers who have transitioned to the new pricing approach have told us that the expectations for their Disability Support Workers have not changed with the transition. Those expectations are still clearly reflected in things like their position descriptions and staff rosters.

It has also provided organisations and staff an opportunity to reflect on the NF2F component of their work, identify opportunities to try new, more effective, or efficient ways of working, and work with participants to ensure the NF2F supports provided are meeting their needs.

Is the newer pricing approach designed to reduce revenue available for group-based supports?

The maximum hourly rates for group-based supports under the transitional pricing approach included a provision for NF2F support. The NDIA recognises that each participant and provider are different, and a standard one-size-fits-all approach for the provision of NF2F costs did not provide enough opportunity to truly reflect the real costs of meeting the needs of participants.

Charging NF2F fees in line with NF2F effort could mean that providers agree with individual participants to charge less, the same, or more. Separating the costs out is about giving providers flexibility in delivering and positioning themselves in the market, not reducing revenue.

Some providers who have transitioned to the newer pricing approach have told us that the transition provided an opportunity to dive deep into their financials and even tie this knowledge into their Enterprise Bargaining negotiations. Some also told us

that it provided an opportunity for change and to move away from tasks being undertaken simply because that is how they had always done them. Considering all the cost elements with a critical eye allowed them to refine their operations to better meet the needs of their participants, staff and business in general.

Separating out NF2F costs is an administrative burden and may be challenging for participants to understand. Are there any real benefits to participants?

While providers who have transitioned acknowledged it took effort to adapt to the new pricing approach, some providers told us that they have seen benefits. The range of benefits continues to grow the longer they have been operating under the new pricing approach.

Under the transitional pricing approach, providers told us it was not always viable to include some participants with more complex needs in some group supports or activities. Under the newer pricing approach, some providers, through negotiation with participants, have funded sufficient NF2F effort to adapt group-support offerings to accommodate a wider range of support needs, including more complex support needs. The ability to negotiate actual costs for individual needs can increase inclusion and ensure those with the highest support needs receive the support they require to participate in social and community activities.

We encourage you to consider the new pricing and how it might enable your business to better support participants.

Example:

Farhana attends a group program at a centre. She attends for 2 hours a week, with 2 other participants. They all have an interest in bikes and bike riding, and as a group, have been learning how to maintain bikes with their support worker, Sunny.

Farhana typically pays for the 2 hours of Face-to-Face support, 2 hours of Centre Capital Costs, and what works out to be 10 minutes' worth of agreed NF2F support.

Sunny notices a local bike riding club is having an open day. The group discuss the club and open day over a few sessions. As the open day approaches, Farhana decides she would like to attend but does not feel confident approaching the club independently.

The provider and Farhana agree for Sunny to spend up to an hour working with the club to plan for Farhana to attend the open day.

After 45 minutes of work outside of the group support session, Sunny and the club have identified a safe and meaningful way for Farhana to attend the open day. That week, in addition to her typical costs for the group-based support, Farhana pays an additional NF2F amount to cover the extra 45 minutes that Sunny worked with the bike club.

Farhana enjoys the open day and finds the club a friendly and supportive place to be. She is looking forward to attending more club events. The other participants are excited to hear about their experience and are even thinking about checking out the next open day themselves.

Will providers need to upgrade systems to transition to the new pricing approach?

The NDIA cannot advise on systems, as this is a commercial business decision for each provider. However, during our consultations, we have heard that some providers who have transitioned have done so with existing systems, and some have used this as an opportunity to roll out new systems.

What transition may mean for you will be impacted by how you apply the pricing approach and the systems you already have in place.

Has an outcomes framework for group-based social and community participation supports been developed?

A central pillar of the NDIS is choice and control for participants. The NDIA would like to see participants choosing their supports for social and community participation from a vibrant and diverse market.

Participants have shared with the NDIA that community participation gave them:

- a sense of belonging and connection
- a way to deepen relationships with friends and family
- larger social networks and reduced isolation
- greater confidence
- a way to increase opportunities for further community participation, employment or study.

The NDIA currently collects broad data on participant outcomes for the social and community participation domain through the Short Form Outcomes Framework and other measures, including social inclusion and community access research. The NDIA is currently working on several evaluation projects, and some of these might

help identify other indicators that could demonstrate outcomes for NDIS funded group-based social and community participation supports.

Findings from these evaluations, combined with extensive consultation across a range of stakeholder groups over 2023 and into 2024, will help the NDIA identify whether a formal, standalone outcomes framework for group-based social and community participation support is required.

On a more individual level, elements of the new pricing approach, such as Program of Supports and even the separate Non-Face-to-Face claiming, are expected to encourage goals and outcomes to feature more broadly in the conversations that providers, participants, and the NDIA have around group-based supports. Acknowledging and sharing outcomes as part of the general conversation allows participants to discover new interests and aspirations and spark innovative thinking for providers.

What role do providers have in ensuring participants have sufficient funding in their plans?

The NDIA makes planning decisions based on legislative requirements, including a participant's support needs and goals. Where support for social and community participation is reasonable and necessary, and a participant would like to be supported in a group setting, funding will be provided. Providers can then work with participants to agree on a Program of Support or explore what supports can be purchased within their budget.

Providers can provide participants with information about their supports, how this assists them to meet their goals, and any specific support needs, which a participant may take to their planning conversation.

Clear communication, consistent billing practices, and using Program of Support are the best ways providers can help ensure that participants have sufficient funding in their plans.

How do participant goals impact group-based social and community participation supports?

Social and recreational supports are key to the National Disability Insurance Scheme (NDIS) achieving its objective of supporting people with a disability to achieve independence, social and economic participation.

Participant goals are a key feature of the NDIS and are referenced throughout the NDIS Act (2013). Goals are important because they are developed by participants expressing their personal desires about what they want to do and achieve.

When we fund social and recreation supports, we need to know that these supports will help a participant to pursue the goals in their plan. What we consider when funding support is further explained here [Reasonable and necessary supports | NDIS](#) and [Social and recreation support | NDIS](#).

Participant budgets are allocated at a support category level and must be used to achieve the goals in the participant's plan. Support categories are aligned with the NDIS Outcomes Framework, which has been developed to measure goal attainment for individual participants and overall performance of the Scheme. There are eight outcome domains in the Framework, which help participants think about goals in different areas of their life and assist planners explore where supports in these areas already exist and where further supports are required.

NDIS providers should be aware that all supports and services for NDIS participants must contribute to the achievement of their individual goals as outlined in the participant's plan. It is important providers work closely with participant's and their families and carers to understand the participant's goals for social and community participation and deliver supports that will assist a participant to achieve their goals.

Every participant is different, but it is important that you find ways to understand the participant's goals, their interests, and how the support you offer can help them achieve their goals. Providers should remember that it is up to a participant whether or not they share a copy of their plan.

The changes to group-based pricing are intended to enable providers and participants to agree on the direct and Non-Face to Face supports provided and claim for these as they are provided based on the individual needs of each participant.

Investing in understanding participants and their goals will help you deliver individualised and outcomes-focused support. We encourage providers to identify opportunities for new and innovative ways to support participants to achieve their goals and outcomes, which is facilitated through the changes to the pricing arrangements which better reflect the individual costs for each participant.

Will there be more support for transition?

We held virtual information sessions for providers during August and September 2023. If you could not attend, keep an eye on the NDIS website, where a pre-recorded version will soon be available to watch at a time that suits you.

We will also be releasing participant-focused resources in the near future.

If you need more support, in the first instance, we encourage you to seek further information through your existing NDIA contact channels.

You can also email the transition team directly at
group.supports.transition@ndis.gov.au.