# External Research Request Form for Aggregated Data

## Purpose of this form

This form is for individuals and organisations requesting access to tailored releases of aggregated (summary level) NDIS data.

## Instructions for applications

### ****Government Departments/authorities****

| Are you from a Commonwealth, State or Territory Government Department/Authority requesting NDIS data? | Yes.  Please don’t complete this form, please contact [DATASHARING@ndis.gov.au](mailto:DATASHARING@ndis.gov.au) to discuss your request for NDIS data.  No  complete the Checklist below |
| --- | --- |

### Checklist

| Does the request involve access to aggregated (summary level) NDIS tailored data | Yes  please complete **all sections of this form**  No |
| --- | --- |
| Does the request involve access to unit record (individual level) data? | Yes  please complete [*External Research Request Form*](https://www.ndis.gov.au/about-us/research-and-evaluation/research-partnerships#engaging-with-the-ndis)for identifiable or re-identifiable data and other requests and other requests  No |
| Does the research involve access to NDIA personnel? | Yes  please complete [*External Research Request Form*](https://www.ndis.gov.au/about-us/research-and-evaluation/research-partnerships#engaging-with-the-ndis)for identifiable or re-identifiable data and other requests and other requests  No |
| Does the research involve a request for a collaboration or partnership with the NDIA? | Yes  please complete [*External Research Request Form*](https://www.ndis.gov.au/about-us/research-and-evaluation/research-partnerships#engaging-with-the-ndis)for identifiable or re-identifiable data and other requests and other requests  No |
| Does the research involve a request for both aggregated (summary level data) and Access to NDIA Personnel and/or collaboration or partnership? | Yes  please complete [*External Research Request Form*](https://www.ndis.gov.au/about-us/research-and-evaluation/research-partnerships#engaging-with-the-ndis)for identifiable or re-identifiable data and other requests and other requests  No |

If you have answered ‘No’ to all of the above questions, applicants should review the [External Research Request Interim Policy](https://www.ndis.gov.au/about-us/research-and-evaluation/research-partnerships) for more information on access requests.

### ****Ethics approval****

If required for your project, approval from a National Health and Medical Research Council (NHMRC) registered Human Research Ethics Committee (HREC) should be obtained prior to lodging this application, where possible.

**A copy of the HREC approval or submission letter, research protocol and all relevant documents** (including participant information sheets if appropriate) **MUST be included with your application**.

### NDIA Corporate Plan Aspirations

The Research and Evaluation Branch will provide a single point of contact to facilitate requests and will consider research requests that align to the delivery of the aspirations, goals and related outcomes as stated in the [NDIS Corporate Plan](https://www.ndis.gov.au/about-us/publications/corporate-plan).

Note, the NDIA does not have capacity to support initiatives that do not align with the NDIA’s aspirations. Please only proceed to complete this form if your request aligns to one of the above NDIA’s aspirations.

### Submission process

Please email a copy of your completed signed application form and any necessary accompanying documents to the NDIA Research and Evaluation Office at [research@ndis.gov.au](mailto:research@ndis.gov.au).

### About assessment

All applications (**except** for tailored data requests) are assessed based on the following criteria:

* alignment to one or more of the [NDIS Corporate Plan](https://www.ndis.gov.au/about-us/publications/corporate-plan) aspirations, goals and related outcomes
* benefits gained from the research activity to NDIS participants, communities, providers, service systems or wider public
* risks associated with supporting the activity
* dissemination strategy to provide evidence publications, reports and tools to NDIA personnel and stakeholders

### Further information

Any questions are to be sent to [research@ndis.gov.au](mailto:research@ndis.gov.au).

### Collection of personal information

By completing this request form, you agree to the NDIA using your personal information for the purpose of managing your request for access to tailored releases of aggregated (summary level) NDIS data. We would be unable to process your request without this information.

Information about the collection, use, disclosure, and storage of personal information by the NDIA is available in our [Privacy Policy](https://www.ndis.gov.au/about-us/policies/privacy).

## Project overview

### ****Project title****

| Click or tap here to enter text. |
| --- |

### Project detail

What is the background and rationale of the project?

| Click or tap here to enter text. |
| --- |

What are the project’s aims and objectives?

| Click or tap here to enter text. |
| --- |

Please attach project protocol to your application which provides details of the study design, methods and planned outputs.

### Human Research Ethics

Have you sought (or are you seeking) Human Research Ethics Committee (HREC) approval?

Yes. Please provide a copy of HREC approval (or status of application if approval is pending) and all relevant documents.

No.

### ****Funding arrangements****

Please outline the cost and funding arrangements for the project.

Is this project funded by another organisation?

No.

Yes.

Please provide details

| Click or tap here to enter text. |
| --- |

### Requestor details

Please provide details of the chief investigator/project lead and any others who will have access to the requested data, information, or NDIA personnel. Add boxes if needed.

#### Chief investigator/Project lead

| First name | Click or tap here to enter text. |
| --- | --- |
| Last name | Click or tap here to enter text. |
| Position | Click or tap here to enter text. |
| Department | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Mobile phone | Click or tap here to enter text. |
| Email | Click or tap here to enter text. |
| Role in the project | Click or tap here to enter text. |

#### Associate investigator 1/Project team member 1

| Title | Details |
| --- | --- |
| First name | Click or tap here to enter text. |
| Last name | Click or tap here to enter text. |
| Position | Click or tap here to enter text. |
| Department | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Mobile phone | Click or tap here to enter text. |
| Email | Click or tap here to enter text. |
| Role in the research project | Click or tap here to enter text. |

### Additional organisations involved in the research/project, if applicable

| Organisation | Click or tap here to enter text. |
| --- | --- |
| Role in the research | Click or tap here to enter text. |

### ****Project**** duration

What is the estimated timeline for the project?

| Click or tap here to enter text. |
| --- |

## Data required

### Details of data required

Please describe the data being requested by selecting from the options below. Please refer to Appendix A in the [NDIS Public Data Sharing Policy](https://data.ndis.gov.au/public-data-sharing) and the metadata (data rules) at [NDIS Data and Insights – Data Downloads](https://data.ndis.gov.au/data-and-insights/data/data-downloads) for further details on data available. The data rules documents are available for participant, active providers, budget and market data downloads. Additionally, refer to the [Quarterly Reports](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ndis.gov.au%2Fabout-us%2Fpublications%2Fquarterly-reports&data=04%7C01%7CResearch%40ndisgovau.mail.onmicrosoft.com%7C34d855f18dfd40d11bb508da21c81775%7Ccd778b65752d454a87cfb9990fe58993%7C0%7C0%7C637859440547871438%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=T%2BqCCuRN8x%2BDtpnhb2L7mWVAheP36AADOvQlRYe0oFQ%3D&reserved=0) for examples of data sets held by the Agency.

| Click or tap here to enter text. |
| --- |

**Please provide a template for the table structure you are expecting to receive.**

Are you requesting data about specific participant subgroups or cohorts (e.g., specific age groups, gender, disability type, location)?

No

Yes. Please provide details of inclusion and exclusion criteria and why this data is necessary.

| Click or tap here to enter text. |
| --- |

NDIA reserves the right to determine that the request for “data about specific participant subgroups or cohorts” may provide the opportunity for the re-identification of data. If that is the case your request will need to be revised or completion of the detailed [*External Research Request Form for identifiable or re-identifiable and other requests*](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ndis.gov.au%2Fcommunity%2Fresearch-and-evaluation%2Fhow-we-engage-researchers-and-disability-sector%23engaging-with-the-ndis&data=05%7C01%7CSimone.Eckardt%40ndis.gov.au%7C3d7f59d1659543602d4b08da57e86219%7Ccd778b65752d454a87cfb9990fe58993%7C0%7C0%7C637918953171273206%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=S4QV3rXPabUC17JhuNPoWop1RoH%2BDq%2Bg9msAzyOYuPk%3D&reserved=0)will be requested.

### Level of data aggregation

What level of aggregated data are you requesting?

Aggregated (summary) data only with small cells masked.

Aggregated (summary) data only without small cells masked.

The data cubes available on [NDIS Data and Insights](https://data.ndis.gov.au/) are a useful resource for determining whether the cohort of interest is likely to result in small cells.

### Purpose of your data request

How will the information or data you are requesting assist your project in meeting its aims and objectives?

| Click or tap here to enter text. |
| --- |

### Reporting period

| Date range (e.g., 01/01/2015 – 31/12/2017) |  |
| --- | --- |
| Time series (e.g., yearly, quarterly, monthly) |  |

### Matters relevant to the NDIS

Do any of the following apply to the NDIS data you are requesting?

(Please select more than one if applicable)

It is reasonably necessary for research into matters relevant to the NDIS.

It is reasonably necessary for actuarial analysis of matters relevant to the NDIS.

It is reasonably necessary for policy development relating to health and disability.

If yes, please provide further information below providing a detailed justification for each category.

| Click or tap here to enter text. |
| --- |

### Preferred format

Please indicate what format you prefer to receive the data. We will attempt to meet your request, although it may not be possible in all cases.

Comma Separated Value (.csv)  Microsoft Word Document (.doc)

Excel spreadsheet (.xlsx)  Printable document format (.pdf)

## Data collection, use and storage

### Data storage

How will the data provided as part of this project be stored?

| Click or tap here to enter text. |
| --- |

### Data analysis

What is your data analysis plan?

| Click or tap here to enter text. |
| --- |

### Data disposal

What is your plan for the safe and secure disposal of any data released?

| Click or tap here to enter text. |
| --- |

## Dissemination plan

How will the outputs of this project be shared, published or released? Please include details on:

* Publication type (e.g., conference, journal articles, technical reports, educational resource, etc.)
* Intended target audience
* Any sharing of raw or transformed data with other researchers or disclosure to a third party or the public

| Click or tap here to enter text. |
| --- |

## Conflicts of interest and risks

### Conflicts of interest

Please provide details of any actual, potential or perceived conflicts of interest relevant to the research (e.g., financial interests, preferential relationships, sponsorship, endorsements)

| Click or tap here to enter text. |
| --- |

### Risks

Please provide details of any potential risks for the NDIA, NDIS participants or other groups or entities, including any political or commercial risks

| Click or tap here to enter text. |
| --- |

## Endorsement of External Research Request

| **Certification by Chief Investigator/ Project lead** |
| --- |
| Tick the boxes to indicate that you have read and understood each clause.  I, the Chief investigator/Project lead certify that:  All information in this application is truthful and as complete as possible.  I am aware of and understand the relevant legislation and regulations and will ensure that the project will be conducted in accordance with these.  The information provided for this project by the NDIA will be used only as outlined in this application.  Permission is granted for summary details of the project to be made publically available on a NDIS Public Register for reporting purposes. |

| Name of Chief investigator/project lead | Click or tap here to enter text. |
| --- | --- |
| Signature | Click or tap here to enter text. |
| Date | Click or tap here to enter text. |

### 8.1 Endorsement by Head of Department (HoD)/Head of Research (HoR)

**If the HoD/HoR is named as an investigator on this project, then independent sign-off must be provided.**

I have read the application and confirm that this project: has been developed and will be conducted in accordance with relevant [*Insert name of institution e.g., University of New South Wales*] standards, policies and codes of practice; has research merit; has adequate resources and appropriate leadership/supervision.

| Name | Click or tap here to enter text. |
| --- | --- |
| Position | Click or tap here to enter text. |
| Signature | Click or tap here to enter text. |
| Date | Click or tap here to enter text. |