

NATIONAL DISABILITY INSURANCE AGENCY

Quarterly Report to COAG Disability Reform Council

30 September 2014

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Key definitions:

Access request status	A formal request by an individual for a determination of eligibility to access the scheme. This includes all requests and is not unique to single participants.
Active participant	Active participants are those who are currently eligible, are not deceased and have a client status of "Active".
Annualised Package Cost	Approved Package Cost, prorated over a 12 month period to allow like-for-like comparisons. This value does not represent the expected true cost of a package.
Approved Cost	Calculated package cost, derived from all approved plan items. Costs are for duration of approved plan. Approved package cost = unit cost x quantity x number of frequency periods (eg number of weeks covered in the plan)
CALD	Country of birth is not Australia, UK, USA, Canada or South Africa, or primary language spoken at home is not English
Claimed support	Payments made to providers, participants or their nominees for supports received as part of the participant's plan
Committed support	The cost of products that are contained within a participant's plan, approved to be provided to support a participant's needs.
EI	Early Interventions
In-kind	"In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.
Indigenous (ATSI)	Response of: <ul style="list-style-type: none"> - Aboriginal but not Torres Strait Islander; or - Australian Aboriginal; or - Torres Strait Islander
LAC	Local Area Coordinators conduct community capacity and awareness building activities, and assist, if necessary, in the coordination and sourcing of participant supports
Participant	An individual whose access request has been determined 'eligible'
State/Territory	Based on the jurisdiction administering the participant

Introduction

This report to the COAG Disability Reform Council contains three sections:

Part 1: A summary of progress against the Statement of Strategic Guidance

Part 2: A summary report on the management of scheme cost drivers

Part 3: A report under the Integrated NDIS Performance Reporting Framework

PART 1

Progress against Statement of Strategic Guidance

Background

On 28 June 2013 the former Commonwealth Minister for Disability Reform issued the Statement of Strategic Guidance to the National Disability Agency (NDIA) Board (available online at [The NDIS Website](#)). The statement was issued with the agreement of state and territory governments in accordance with section 125 of the *National Disability Insurance Scheme Act 2013* (NDIS Act).

The statement outlines government expectations of the Board and the NDIA for the duration of the trial phase of the NDIS and transition to full scheme.

The statement also requests that the Board report against a set of time-specific key deliverables in each quarterly report. The table below provides an update against each of these key deliverables for the first quarter of 2014-15.

September 2014 deliverables – Update on progress	
Deliverable:	Status:
1. By September 2014, ensure that the NDIA is transitioning participants into the NDIS in the Northern Territory, Western Australia and the Australian Capital Territory in accordance with the client phasing schedule agreed with the Northern Territory, Western Australia and the Australian Capital Territory.	<ul style="list-style-type: none">• Participants are tracking roughly in line with expectations in the bilateral agreements in the ACT and WA, but there are much fewer eligible participants in the NT than expected.• 60%-65% of participants expected in the bilateral agreements in the ACT and WA have an approved plan, but this is around 20% in the NT.
2. By September 2014, ensure that any initial implementation risks have been identified to governments.	<ul style="list-style-type: none">• On 17 August 2014, the Board provided advice to the CDRC on the Board's proposed model for transitioning to full Scheme. Included with the Board's advice was a report prepared by KPMG on the key risks to implementing a full NDIS.• Governments have also been advised on the key factors affecting scheme sustainability in the Scheme Actuary's 'Summary of Annual Financial Sustainability Report', which is contained in the 2013-14 NDIA annual report.

Ongoing deliverables for period of trial – Update on progress

Deliverable:	Status:
<p>1. Provide regular information to governments, including through the quarterly report to the Ministerial Council (as set out in section 174 of the NDIS Act and the Integrated NDIS Performance Reporting Framework in the IGA), to give all jurisdictions visibility of the Agency’s service delivery and fiscal outcomes and whether the Agency is meeting agreed performance targets, and keep governments informed of implementation issues as they emerge</p>	<ul style="list-style-type: none"> • This is the Board’s fifth Quarterly Report to COAG Disability Reform Council (NDIS Act, s 174). • The Board also prepared an additional ‘Report on the Sustainability of the NDIS’ for the fifth quarter as part of the Agency’s function to report on the sustainability of the scheme. • The Board’s inaugural annual report (covering 2013-14) was tabled in Parliament and delivered to the CDRC. • The Chair of the Board and the CEO appear before CDRC meetings when required. • The Agency appears before the Joint Standing Committee when required. • The Chairman of the Board and the CEO continue to meet regularly with shareholder governments to discuss the ongoing roll out of the NDIS.
<p>2. Maintain best practice standards of governance appropriate to the Agency, having regard to ANAO’s Public Sector Governance Better Practice Guides and ensuring Board members undertake their duties impartially with a high degree of diligence, care and skill and at all times act in a manner that promotes the highest level of corporate governance in Board operations</p>	<ul style="list-style-type: none"> • All Board meetings are run in accordance with the PGPA Act and the ANAO Public Sector Governance Better Practice Guides. • The Board has established a Sustainability Committee, Audit and Risk Committee, and an ICT Committee. • The Board engaged an independent expert to conduct a review of the Board for 2013-14. • The Board held a strategic planning day on 27 October 2014, and will hold regular strategic planning days in 2015, to ensure the Board continues to undertake its governance duties at the highest level. • The Board has considered the lessons learned from performance audits undertaken by the ANAO.
<p>3. Operate in accordance with all relevant legislation including the NDIS Act, the CAC Act and IGA and comply with all responsibilities under these Acts, including those relating to the annual reports, significant events, financial accountability, conduct of directors and officers, director’s duty to disclose, compliance with General Policy Orders and Audit Committee</p>	<ul style="list-style-type: none"> • Board members have published their register of interests on the NDIS website. • The Agency continues to brief the Board and the Audit and Risk Committee on requirements of the PGPA Act and PGPA Rules. • The Board has approved the Agency’s Risk Management Strategy. Risk management, including the active use of mitigation strategies, is a key priority for the Board. • The Board approved the 2013-14 annual accounts, 2013-14 annual report, and 2013-14 Risk Management Declaration. • The Board provided its declaration under the CAC Act to the responsible Minister on 15 October.

Ongoing deliverables for period of trial – Update on progress

Deliverable:	Status:
<p>4. Demonstrate evidence for how the Board has embedded a culture of decision making informed by actuarial advice throughout the Agency</p>	<ul style="list-style-type: none"> • The Scheme Actuary attends all Board meetings. • The Chair of the Sustainability Committee meets regularly with the Scheme Actuary and Chief Executive, and supports close contact between the Scheme Actuary and the Board. • The Sustainability Committee meets once per quarter. • The Scheme Actuary provides monthly reports to the Board. • The Scheme Actuary also provides training to agency staff at both the National Office and trial sites. • The Scheme Actuary sits on the Audit and Risk Committee, ICT Committee and Sustainability Committee and provides actuarial advice to both committees. • The Chief Finance Officer and Scheme Actuary collaborate to produce budget reports and financial statements.
<p>5. Carefully monitor the use of discretionary powers set out in the legislation and the Rules, to ensure that these powers are subject to effective controls and operate consistently to support scheme sustainability and transparency in access to supports</p>	<ul style="list-style-type: none"> • Quality assurance activities have continued and are driven by the National Quality and Innovation Team (NQIT), which was established in May 2014 and is responsible for implementation of the Agency’s National Internal Quality Management Framework through the National Quality Action Plan. • The Agency is collecting and analysing data on discretionary decisions especially in relation to access and the approval of reasonable and necessary supports in participant plans. • The Agency continues to monitor closely the use of delegations, ensuring they are used appropriately and consistently across trial sites, having regard to local needs. • The Agency monitors and reviews the outcome of internal and AAT review of decisions and updates its processes and procedures in the light of this experience. • The Agency has developed a comprehensive set of operational guidelines to assist with consistency in decision making across the trial sites. These are reviewed and updated regularly, having regard to Agency experience including the outcome of internal and AAT review of decisions.

PART 2

Summary Report on Management of Scheme Cost Drivers

1. Overview of cost drivers

The below analysis addresses a recommendation from the Council of Australian Government's (COAG) May 2014 meeting - the NDIA Board is to outline in all Quarterly Reports the impact of past and future actions intended to manage cost drivers and ensure the financial sustainability of the scheme.

As outlined in the NDIA Strategic Plan 2013-16, one of the goals of the NDIA is to ensure that the NDIS is financially sustainable and governed using insurance principles. Management of cost drivers is a key component of the insurance approach. The insurance approach enforces strong monitoring of scheme experience, including actuarial analysis which compares actual experience with expected experience. This detailed comparison allows cost pressures to be identified and addressed in a timely manner. Significant training is being rolled out across the Agency to instil insurance principles within the Agency.

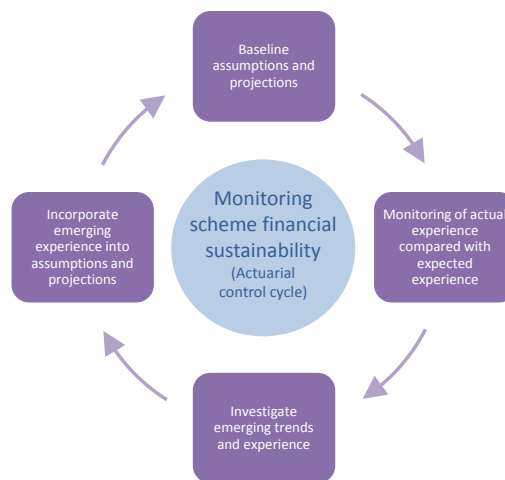
The Sustainability Committee is also developing an *Insurance Principles and Financial Sustainability Manual* to more formally articulate the concepts of insurance principles and financial sustainability within the NDIS, and how these link to the NDIA Strategic Plan 2013-16. This document consolidates the process of Prudential Governance of the cost drivers set out below, and the levers open to the Board to monitor and manage financial sustainability. It should be noted that the financial sustainability of the scheme is determined by the interrelationship of all cost drivers; it is inappropriate to consider the performance of any one cost driver in isolation.

At a high level, there are five categories of costs drivers which affect the financial sustainability of the National Disability Insurance Scheme (NDIS). These are:

- **Access:** how many people meet the access criteria to be participants in the scheme, and who is entitled to a plan with supports funded or provided by the scheme.
- **Scope:** the scope of NDIS-funded supports that are available to be purchased by participants of the scheme, as opposed to supports that are not within the scope of the scheme, for example, because they are more appropriately funded or provided through other systems of service delivery like the health system.
- **Volume:** for individual participants, the resources available to purchase supports within the scope of the scheme.
- **Delivery:** the manner in which supports are funded or provided, and in particular how effectively, efficiently and economically this is done.
- **Price:** the price that it costs participants or the NDIA to purchase the supports that are funded or provided by the scheme.

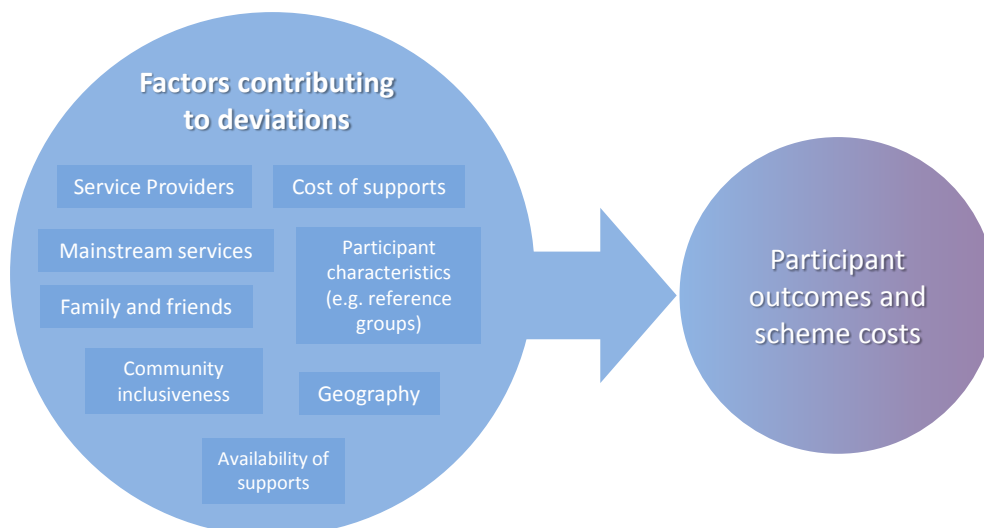
2. Monitoring framework against cost drivers

The National Disability Insurance Agency has developed a framework for monitoring cost drivers and financial sustainability. This framework is summarised in the diagram below:



Specifically, the framework involves collecting data on the number of participants, the characteristics of these participants (to allow analysis of reference groups), the outcomes for these participants, and the cost of supports provided to participants. This allows a detailed understanding of deviations between actual and expected experience and hence identification of cost drivers. This information can then be used by the NDIS Board and NDIA management to implement any changes required to continue to ensure the NDIS remains financially sustainable.

Monitoring and investigation of actual experience compared with expected experience are continuous activities within the Agency. The Scheme Actuary prepares an annual report on the scheme's financial sustainability. The Summary Financial Sustainability Report will be available with the release of the NDIA Annual Report.



This Quarterly Report to COAG Council on Disability Reform contains

- A summary of performance against cost drivers (reported in Part 3), and
- A summary of key initiatives against cost drivers.

3. Summary of key initiatives against cost drivers

Cost Driver	Key Initiatives Implemented by Agency
Streamlining access	<ul style="list-style-type: none"> • Implementation of risk-based segmentation to streamline access and planning for participants in Western Australia, Northern Territory and Australian Capital Territory. • The Agency has matured its use of data from existing State/Territory and Commonwealth programs to proactively approach potential participants. This has resulted in a more efficient and reliable phasing process, and where appropriate, pre-determined eligibility for some applicants. • Trial sites undertake regular reviews of decisions to check for local consistency. The establishment of a National Quality and Innovation Team to audit decisions will ensure national consistency. • Detailed analysis of participants who have been found ineligible is underway – this provides some indications of where possible cost pressures may arise. • Weekly operational dashboards have been put in place, which allow timely monitoring of scheme performance.
Scope of supports funded under the scheme	<ul style="list-style-type: none"> • A comparative review of supports funded under the NDIS versus those proposed by the Productivity Commission indicated that the scope of supports is in line. • Establishment of expert groups in autism and sensory disability to establish the evidence base for funding appropriate early intervention options for children. • Focusing the planning conversation on the availability of community and mainstream support to meet the needs of participants before consideration of funded supports. This also encourages innovative ways for individuals to achieve desired outcomes.
Volume of supports funded	<ul style="list-style-type: none"> • Substantial research has been undertaken to refine reference packages – reference packages provide a benchmark amount for participants with similar characteristics (such as age and disability). This allows detailed monitoring of the amount of supports provided to certain groups of participants, and identification of any cost pressures in a timely manner. It is important to note that the reference packages are not used to determine the amount provided to individual participants but allow for detailed monitoring. • The World Health Organisation Disability Assessment Schedule 2.0 (WHODAS 2.0) was trialled and will supplement the reference packages. • These two projects will also allow streamlining of the planning process by collecting much information in advance of these discussions. • Operational guidelines providing information on reasonable and necessary supports have assisted the planning process and have contributed to the reduction in package sizes.
Delivery of supports funded	<ul style="list-style-type: none"> • Work is continuing to develop and implement an outcomes framework for individuals. This will encourage the delivery of supports to strive towards achieving positive outcomes for participants, their families and carers. This will also provide the NDIA Board with a dynamic feedback loop to evaluate the outcomes of particular groupings of scheme participants, and the extent to which the NDIA is meeting its strategic objectives.

Cost Driver	Key Initiatives Implemented by Agency
	<ul style="list-style-type: none"> • Participant flexibility in the choice and consumption of allocated funding has been delivered through the “bundling” of similar supports. Providing increased flexibility has also reduced the need to choose a wider range of fixed supports in participant plans. • Work is underway to develop strategies and models of support for Indigenous communities, rural and remote communities, culturally and linguistically diverse (CALD) communities, and for mental health. • In order to better understand links with other service systems and the use of mainstream supports, the NDIA is also applying to be an accredited Data Integration Authority. • It is critical that the NDIA has developed a fit for purpose ICT System for full scheme roll out. A Board Committee has been formed to provide enhanced governance of this crucial component of managing cost drivers. • System improvements implemented to improve monitoring and reconciliation of supports delivered under Commonwealth, State and Territory “in-kind”¹ funding arrangements.
Prices	<ul style="list-style-type: none"> • The development of the National Aids and Equipment Strategy is continuing. • Work is underway to establish an appropriate sector data collection to monitor the price and cost of supports delivered. • An efficient price has been developed for personal care and community participation. This price has been set higher in the short term to support the sector to transition to the NDIS. • Work is underway to establish an efficient pricing model for supports specific to addressing the needs of participants living with a psycho-social disability.

¹ “In-kind” supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

PART 3

Report under the Integrated NDIS Performance Reporting Framework

Index of Tables

1. Participant Outcomes

Table 1.1.1. Information about participants with approved plans	26
Table 1.1.2. Support needs for participants with approved plans by life domain	28
Table 1.2.1. Number of participant plans with each funded support category	30
Table 1.2.2. Delivery of agreed supports as planned	31
Table 1.2.3. Proportion of participants with a claimed support	33
Table 1.2.4. Average days from access request to plan approval	34
Table 1.2.5. Service provider characteristics and market profile	35
Table 1.3.1. Trends in proportion of participants using each, or a combination, of plan management options	36
Table 1.3.2. Access requests made	37
Table 1.3.3. Reviews of decisions	38
Table 1.3.4. Total appeals by outcome	38
Table 1.3.5. Appeals by Category	39
Table 1.3.6. Complaints by outcome and average resolution time	40
Table 1.3.7. Complaint type	40
Table 1.3.8 Satisfaction with the Agency	41

2. Financial Sustainability

Table 2.1.1. Total amount of committed supports	42
Table 2.1.2. Total payments (\$, in-kind)	42
Table 2.1.3. Operating Expenses Ratio (%) total costs	43
Table 2.1.4. Annualised support package distributions	43
Table 2.1.5. Average length of time from application to commencement of services	44
Table 2.1.6. Payments to providers and participants split by support cluster	45
Table 2.1.7. Average and median costs of individual support packages	46
Table 2.1.8. Value of and number of active approved packages by participant group	46
Table 2.1.9. Number of participants receiving supports paid for with cash and/or in-kind supports by state/territory	47
Table 2.1.10. Ratio of cash to in-kind services by participant group	47
Table 2.1.11. Participant numbers	48
Table 2.1.12. Total number of plans developed	49
Table 2.1.13. Number of plans with single supports	49
Table 2.2.1. Participants with early intervention supports	50
Table 2.2.2. Total cost of investment in research and innovation (including the sector development fund)	52

3. Community Inclusion

Table 3.1.1. Proportion of participants accessing mainstream services	53
Table 3.1.2. Support categories with mainstream services	53
Table 3.2.1. Community awareness activities undertaken within the period by LACs	55
Table 3.3.1. Community capacity building activities undertaken by LACs within the period	57
Table 3.3.2. Community capacity building activities undertaken by funded organisations within the period	58

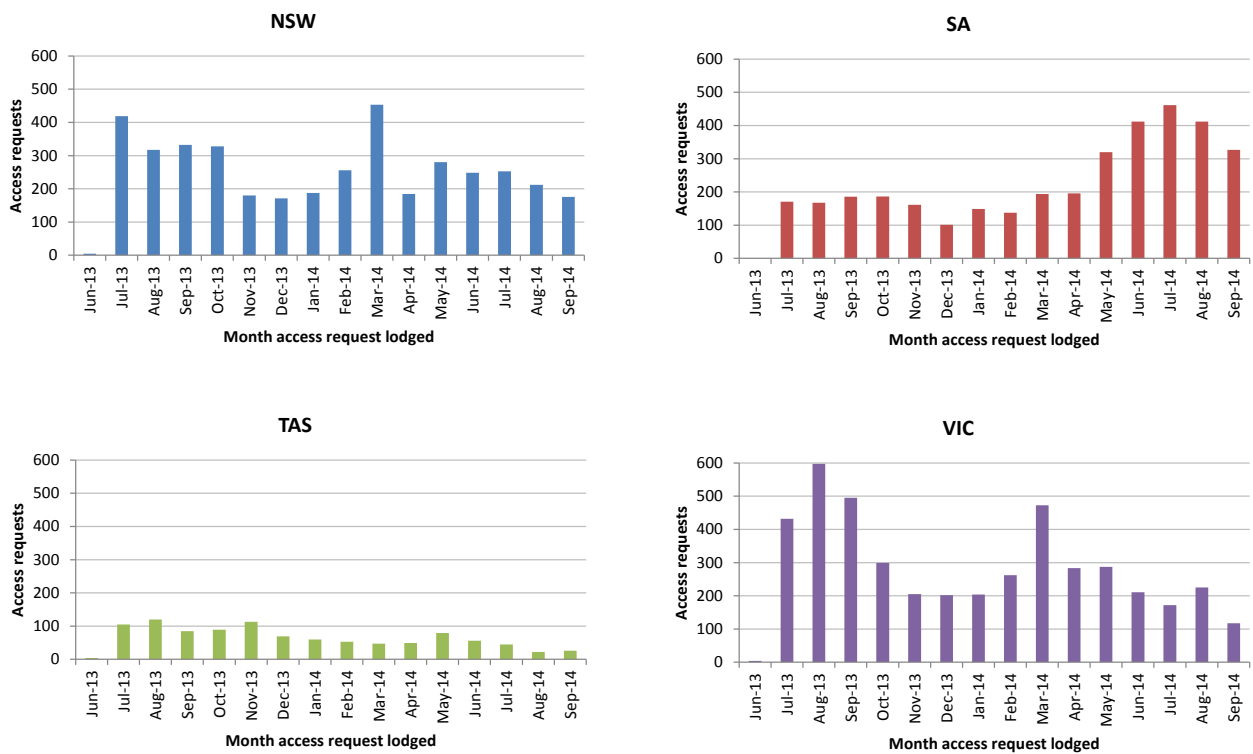
APPENDIX 1: Measures documented in Level 2 Performance Reporting Framework not included in this report	59
APPENDIX 2: Accessible tables for Agency performance overview graphs	61
APPENDIX 3: Definition of measures reported in Quarterly Report to Standing Council	65

Agency Performance

Access requests

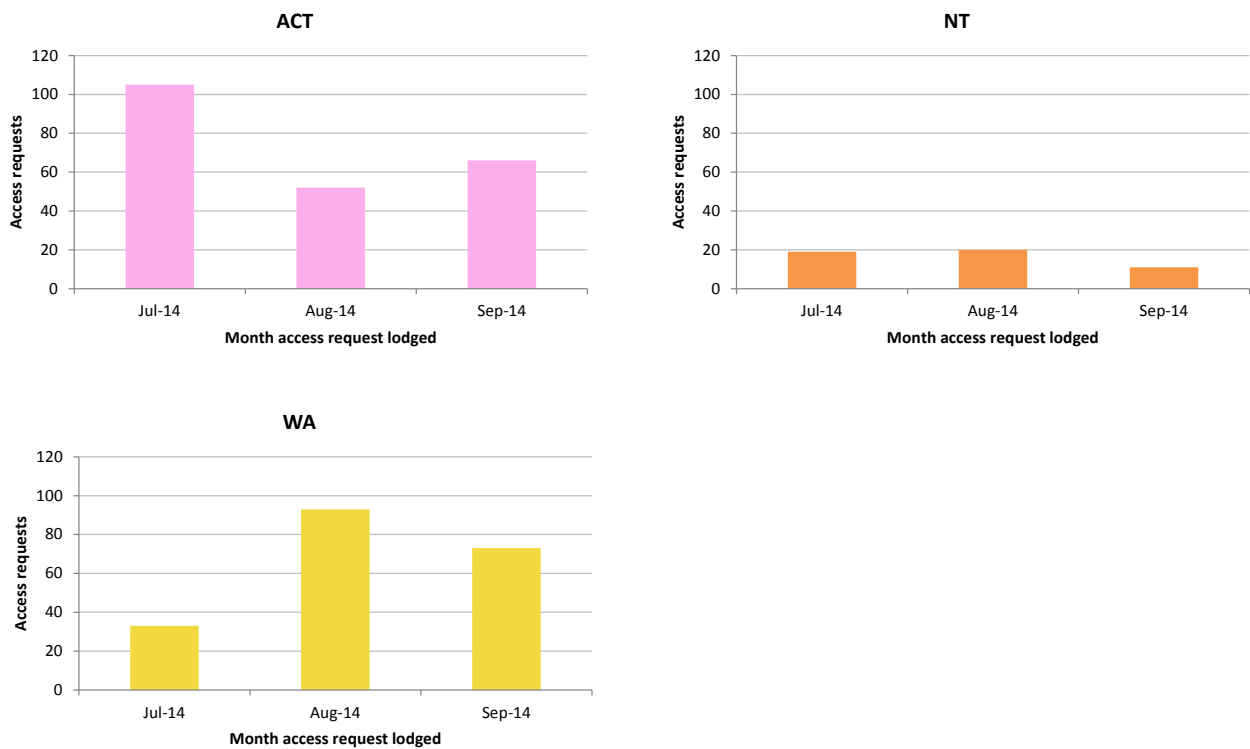
13,220 access requests have been made, with 10,795 people currently eligible² for the scheme (82% of access requests), and 1,136 people (9%) found ineligible. 148 of these access request decisions have been requested to be reviewed.

Figure 1.(a). People lodging an access request by month- NSW, SA, TAS and VIC trial sites



² Note: 10,939 participants have ever been found eligible for the scheme. However, participants are now inactive.

Figure 1.(b). People lodging an access request by month- ACT, NT and WA trial sites



Participants

Of the 10,939 active and inactive participants³, there are 8,880 with an approved plan. A low proportion of these participants are either Indigenous (3%) or CALD (3%) – however, these variables are not well completed. Detailed exception reporting is underway to ensure these data are collected. Intellectual disability is the most common primary disability across all trial sites (30% of participants nationally). In Tasmania 42% of participants have intellectual disability listed as their primary disability due to the young age cohort (15-26 years). In South Australia, Autism and Related Disorders is the most prevalent primary disability (40%) due to the younger cohort of participants (0-6 year olds).

A number of participants who are eligible for the NDIS are currently receiving funded supports from existing commonwealth and state/territory disability programs – “existing” participants. Other participants entering the NDIS have not received any disability services before, either due to unmet need or new incidence – “new” participants. There are currently 6,198 (70%) active participants with approved plans who have received funded supports from existing programs, and 2,613 new participants⁴.

Of the 8,826 active participants with approved plans, 5,780 were found eligible for the scheme because they meet the disability requirements (section 24 of the NDIS Act), and 3,032 participants met the early

³ Active participants are those who are currently eligible, are not deceased and have a client status of "Active". Inactive participants are all other participants, including participants who are now deceased or have chosen to exit the scheme, as well as participants who have had their eligibility revoked.

⁴ 15 active participants with approved plans do not have information on whether they were previously accessing existing disability programs.

intervention requirements (section 25 of the NDIS Act)⁵. Younger participants are more likely to meet the early intervention requirements which aim to improve, stabilise or lessen the impact of the person's impairment on their functional capacity.

8,735 active participants have funded supports in their approved plans, and 6,679 (76%) of these participants receive at least one early intervention support. Participants aged 0-4 years, and participants with Cerebral Palsy, Deafness/Hearing Loss or Global Developmental Delay are more likely to receive early intervention supports – around 90% of participants in each of these groups (95% of those aged 0-4 years).

The first 15 months of scheme experience indicate that:

- There are likely to be fewer participants than expected in the New South Wales and Victorian trial sites, specifically fewer lower cost participants.
- The number of participants in the South Australian and Tasmanian sites is likely to be in line with expected.
- A number of people in current disability programs have declined to phase into the scheme or have withdrawn indicating they may not need NDIS support at the present time, but may require some support in the future (or episodically). These people are likely to be low cost, and work is underway to understand the reasons for declining to phase into the scheme or withdrawal in order to get a better picture of future likely participant numbers.

Plans

10,226 plans have been approved to date, including 1,314 second plans and 32 third plans. These plans are likely to include a focus on supporting participants with their goals across independence, social participation and/or health & wellbeing. They are also likely to contain multiple funded supports (81% of plans). The most common funded supports in dollar terms are community participation, daily tasks in shared living arrangements, and assistance with personal activities. The most commonly funded support in South Australia and the Northern Territory, however, is early childhood support.

These plans are mostly solely agency managed (71%), and 28% use a combination of agency management and self-management.

⁵ 14 active participants with approved plans do not have information on how they entered the scheme.

Figure 2.(a). Approved plans by month that the plan was first approved – NSW, SA, TAS and VIC trial sites

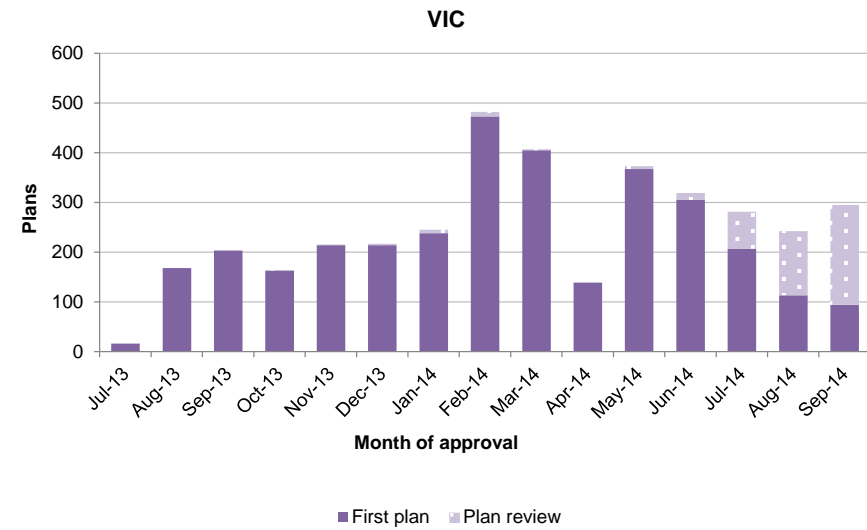
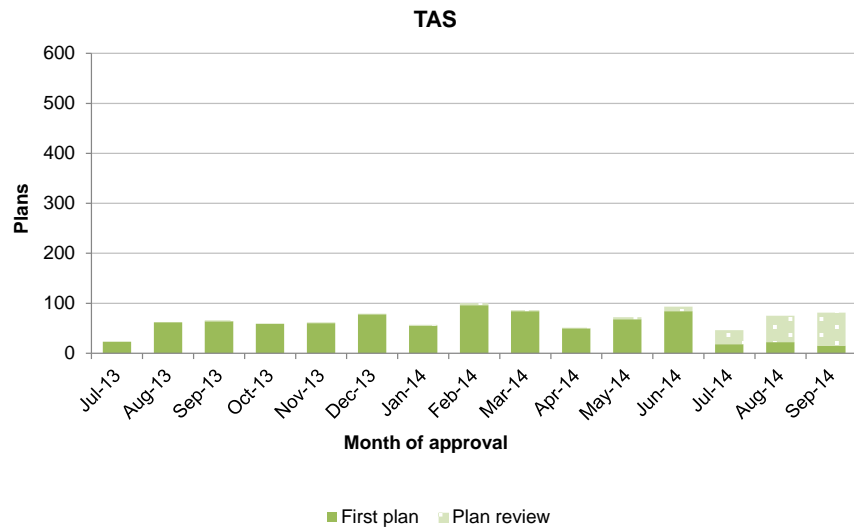
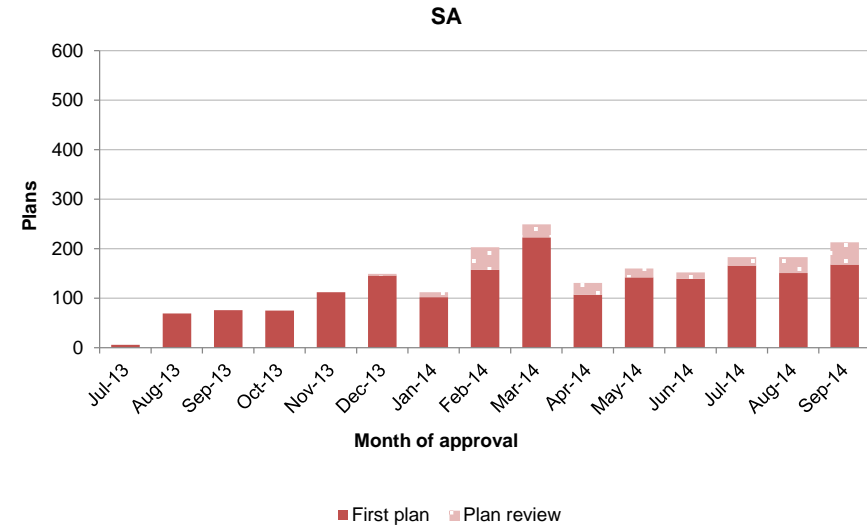
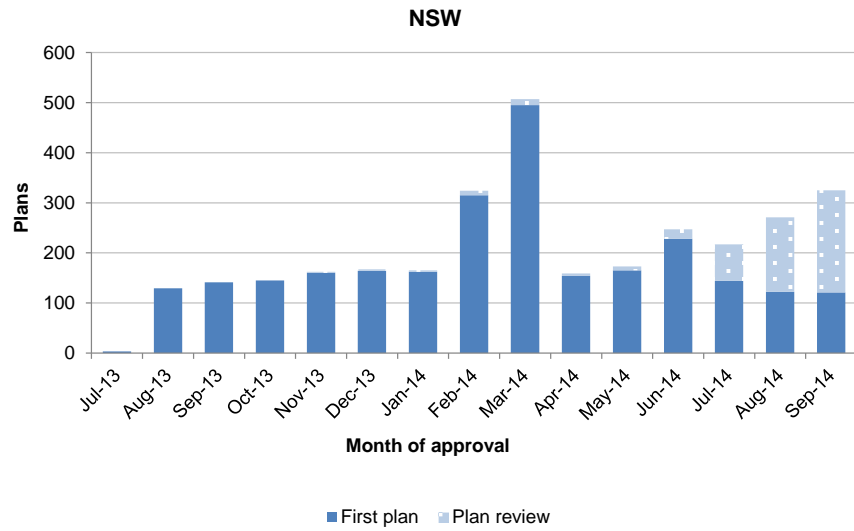
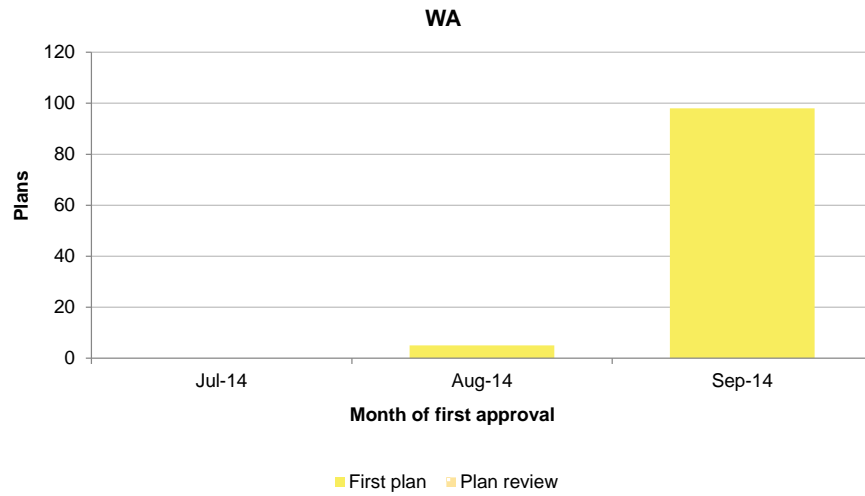
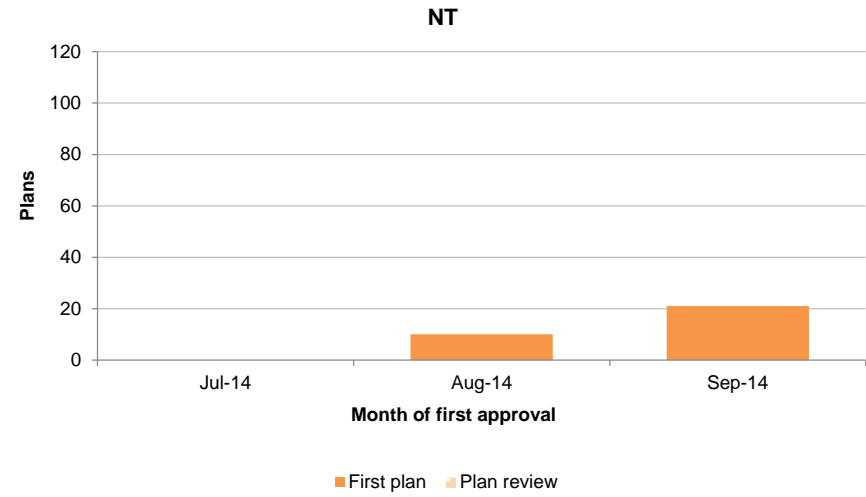
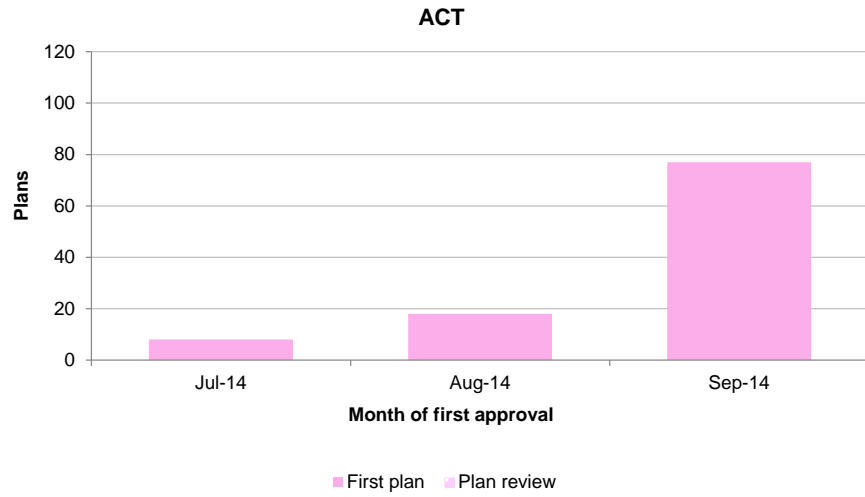
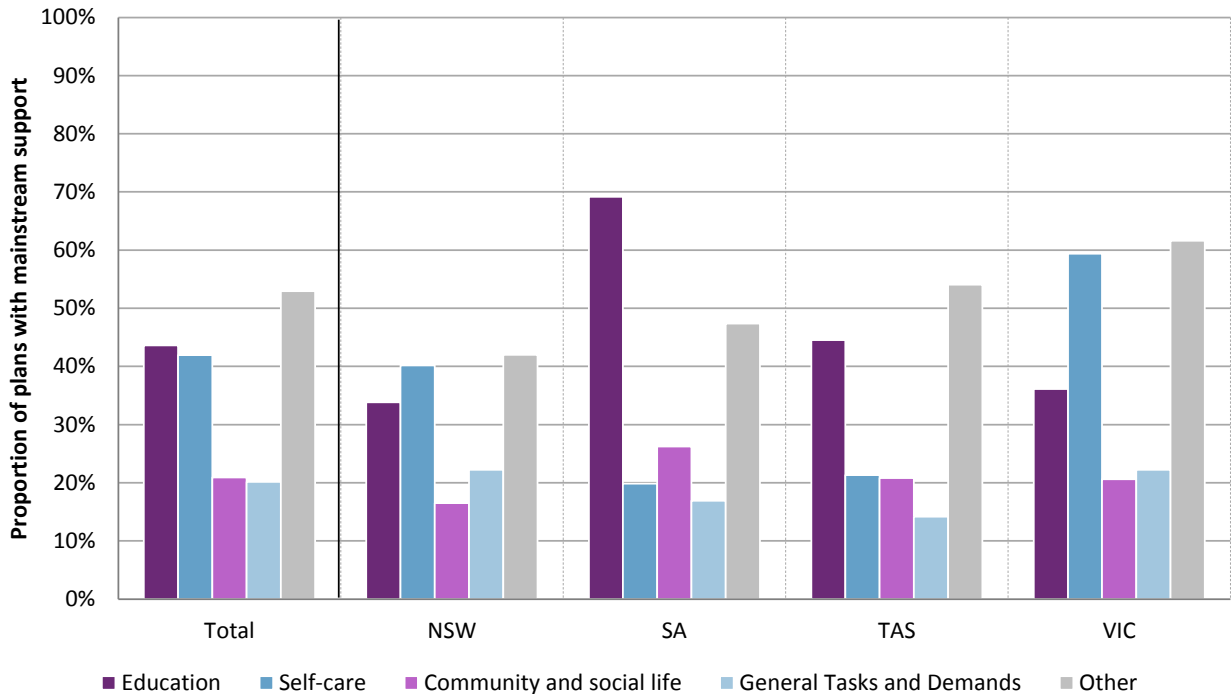


Figure 2.(b). Approved plans by month that the plan was first approved – ACT, NT and WA trial sites



In addition to supports provided through plans, 79% of participants are also accessing mainstream services (87% in Victoria and 90% in the Northern Territory). A large number of these mainstream services relate to education (44%) or self-care (42%).

Figure 3. Types of mainstream supports accessed in participants plans



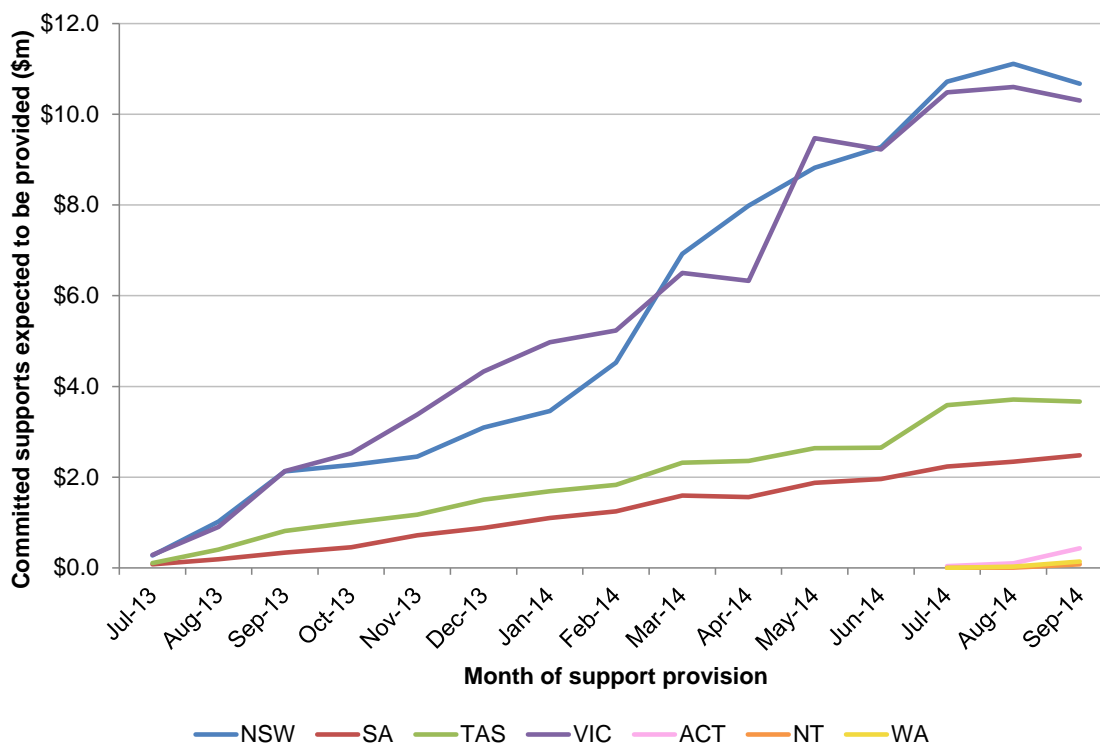
Committed funds

Overall, \$395.3 million has been committed for participant support costs to date, with \$151.2 million and \$146.4 million committed in New South Wales and Victorian trial sites respectively (noting \$41.2 million has been committed to participants in the Stockton large residence in the New South Wales trial site). Figure 4 shows the committed support expected to be provided each month by state.

These support costs are mostly allocated to a very small proportion of high-cost participants – only 10% of participants have an annualised package cost over \$100,000, but these participants account for 49% of total committed supports⁶. On the other hand, 70% have an annualised package cost below \$30,000, and account for only 24% of annualised committed funding.

⁶ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

Figure 4. Committed supports expected to be provided by month of support provision



Overall, the average annualised package cost across all trial sites is \$39,087 including the Stockton large residence, and \$35,207 excluding Stockton large residence⁷. This is higher in the Tasmanian trial site at \$49,731, and is lowest in South Australia at \$17,498. These differences are driven by the age specifications in the Tasmanian and South Australian trial sites. However, it is important to note, that average annualised package cost is not an appropriate measure of scheme performance when considered in isolation, and should be considered in combination with the number of scheme participants, the distribution of packages committed to these participants, and actual payments for supports provided.

The distribution of the cost of support packages differs from expected across all trial sites. In particular, a higher proportion of low cost participants were expected compared with actual experience, and there are a higher proportion of participants receiving mid-range packages than expected.

The first 15 months of scheme experience indicate that overall costs of the scheme are in line with expectations. The average package costs, however, are higher than expectations because of the lower than expected number of participants with low cost packages.

In addition to package costs, \$45.5 million has been committed to research and innovation projects, and there is another \$48.5 million worth of projects under development.

⁷ Note: the bilateral agreements for the 2014/15 year indicate that the average participant cost is \$36,750.

Figure 5.(a). Distribution of package costs by trial site – NSW, SA, TAS and VIC trial sites

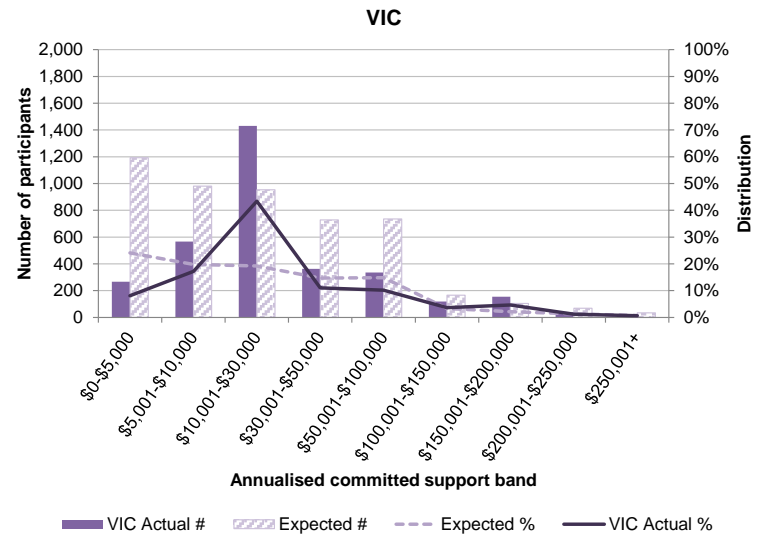
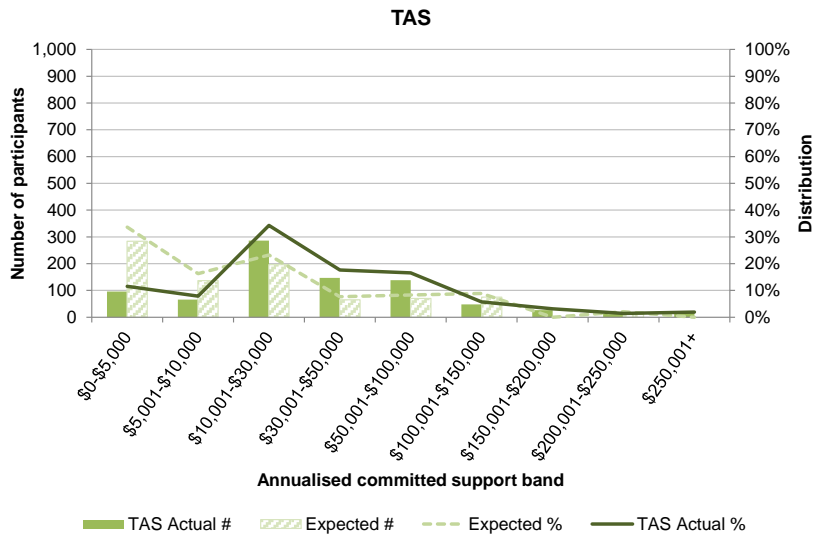
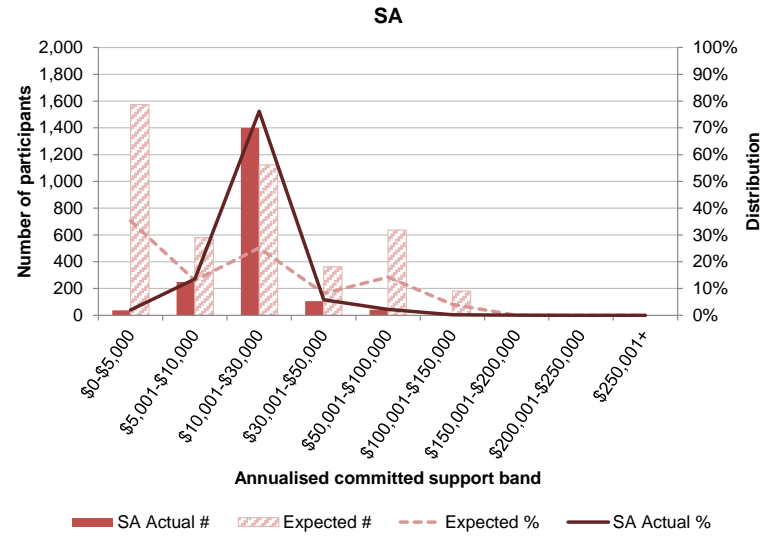
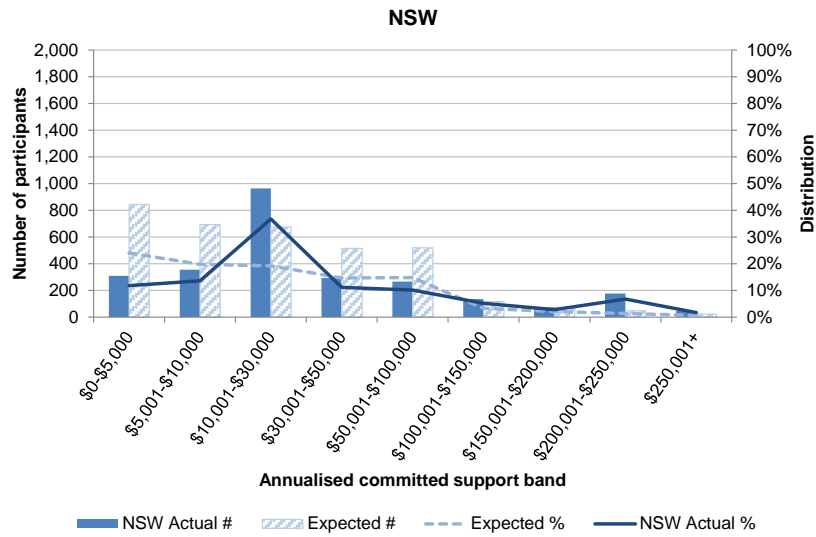
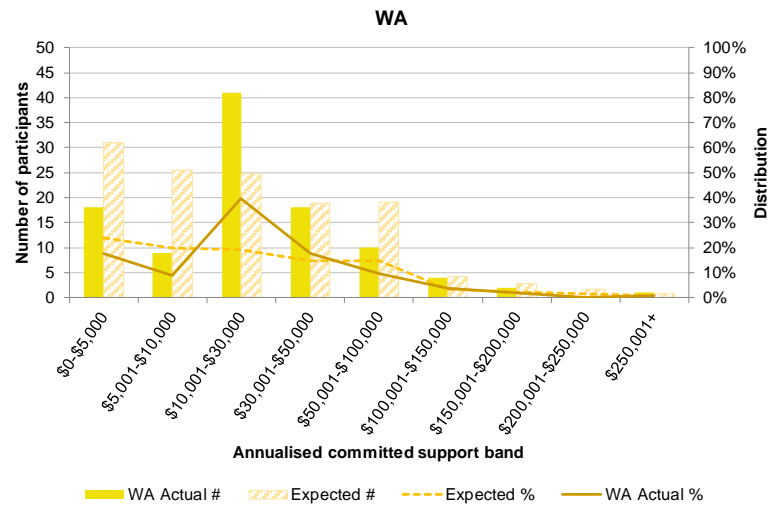
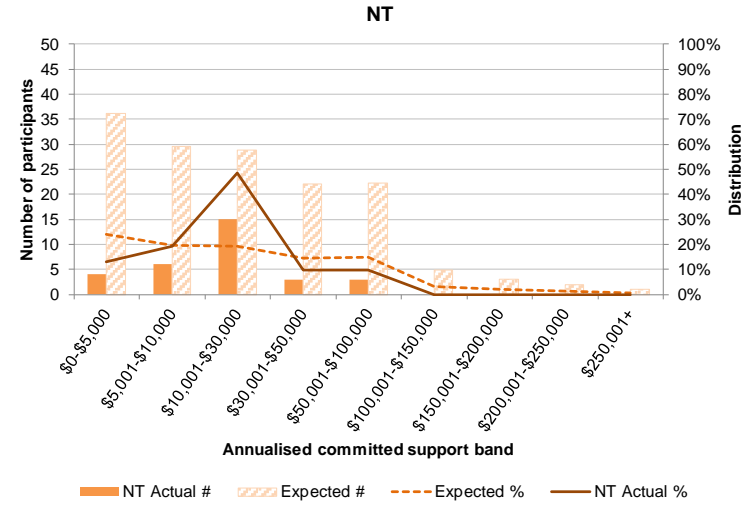
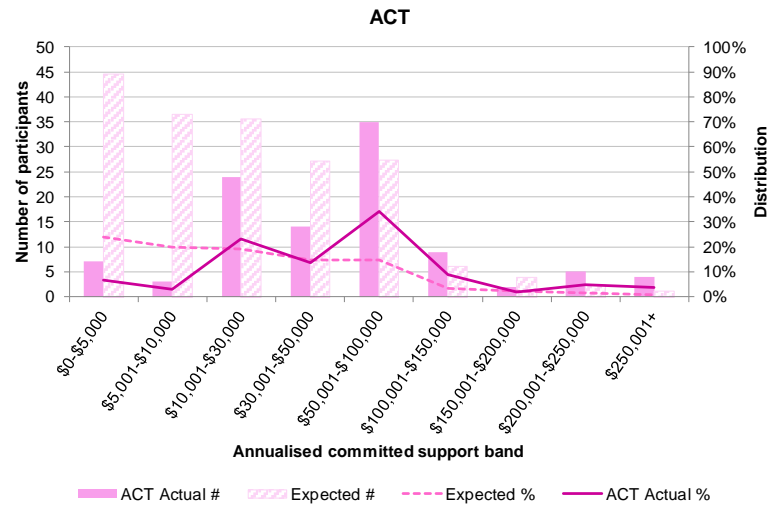


Figure 5.(b). Distribution of package costs by trial site – ACT, NT and WA trial sites



Payments made

78% of participants with funded supports have had at least one claim for payment against their plan (87% of those with plans over 3 months in length). Most of the payments are made in cash (66% of participant plans or 94% of all services received) or with a combination of cash and in-kind⁸ (32% of participant plans but only 1% of all services received).

Payments made for participant supports total \$65.5 million for supports provided in 2013/14 (47% of total committed supports⁹ in this year) and \$27.3 million for supports provided in the first quarter of 2014/15 (33%). The draft off system reconciliation process undertaken to date to determine the amount of in-kind provided in 2013/14 indicates that a further \$12.1 million supports were provided in-kind in 2013/14 – hence 58% of committed support has been claimed for 2013/14.

The largest amounts overall have been paid for daily tasks/shared living (\$26.4 million) and community participation (\$24.5 million). \$84.3 million has been paid in cash, and \$8.6 million has been paid in-kind (or \$20.7 million if the off system payments are included).

Note: there will be a lag between supports being provided and subsequently claimed by service providers.

Service Providers

There are 1,494 registered service providers, of whom:

- 1,418 (95%) operate in one state/territory only,
- 1,052 (70%) are small/medium enterprises, and
- 1,233 (83%) are new to the NDIS and have not been previously registered with the Department of Social Services.

These service providers have received a total of \$86.9 million for participant supports, which is over 90% of the total payments made to date. The remaining \$6.0 million has been paid to participants who are self-managing.

Participant satisfaction

Of the 1,052 participants surveyed for their satisfaction, the majority are highly satisfied with the Agency, with an overall rating of 1.67 on a scale of -2 (very poor) to +2 (very good), with slightly lower levels of satisfaction in South Australia. The overall satisfaction rating is calculated as a weighted average of the satisfaction ratings of each participant surveyed. Participants are provided a paper survey after their plan is agreed with their planner; not all participants choose to complete and submit their survey. The participant is given the choice of submitting the survey anonymously. Paper surveys are handed to participants by

⁸ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

⁹ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

their planner to complete, and once completed are returned to the business support officer. Hence, the planner does not see the paper surveys.

To date there have been 24 appeals, 12 due to access issues (0.1% of all access requests), and 12 due to plan issues (0.1% of all active and inactive¹⁰ participants with an approved plan). 20 of these appeals have reached a resolution - nine have been varied (participant won the appeal) and the other 11 have been dismissed, withdrawn or affirmed (the original decision confirmed).

There have been 370 complaints (3% of access requests or 4% of participants), 66% being due to agency related issues, and 16% due to the amount of reasonable and necessary supports in participant plans.

Participant outcomes

Work is currently underway to develop an outcomes framework for measuring participant and family outcomes. The development of this outcomes framework considers how outcomes can be measured at the scheme level as well as the individual level. This project considered a number of domestic and international frameworks and consulted with a range of experts and stakeholders. This framework includes eight participant domains – choice and control, daily activities, relationships, home, health and wellbeing, lifelong learning, work, and social, community & civic participation – as well as outcomes related specifically to families.

¹⁰ Active participants are those who are currently eligible, are not deceased and have a client status of "Active". Inactive participants are all other participants, including participants who are now deceased or have chosen to exit the scheme, as well as participants who have had their eligibility revoked.

1. Participant Outcomes

1.1. People with disability achieve their goals for independence, social and economic participation

The scheme has only been in operation for 15 months, and hence reporting on goal achievement is premature. The Agency is developing an outcomes framework to systematically measure outcomes across participants and families.

This section provides some descriptive information on participants in the scheme, including their support needs. The measures specified in the COAG Integrated Performance Framework are reported, where possible.

Table 1.1.1. Information about participants with approved plans

Table 1.1.1.(a) Information about participants with approved plans, split by gender and age

State/Territory	Total	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	2,648	3%	2%	59%	41%	0%	7%	24%	12%	22%	34%	2%
SA	1,839	3%	6%	70%	30%	0%	56%	44%	0%	0%	0%	0%
TAS	838	5%	2%	64%	36%	0%	0%	0%	94%	6%	0%	0%
VIC	3,318	1%	2%	59%	41%	0%	9%	27%	14%	23%	26%	1%
ACT	103	3%	4%	62%	38%	0%	20%	1%	55%	6%	15%	3%
NT	31	90%	74%	55%	45%	0%	13%	35%	13%	19%	19%	0%
WA	103	6%	7%	66%	33%	1%	12%	32%	30%	9%	17%	0%
Total	8,880	3%	3%	62%	38%	0%	18%	27%	19%	16%	20%	1%

Table 1.1.1.(b) Information about participants with approved plans, split by primary disability

Primary Disability	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Total	2,648	1,839	838	3,318	103	31	103	8,880
Autism and Related Disorders	22%	40%	30%	24%	19%	3%	28%	27%
Cerebral Palsy	5%	6%	7%	4%	10%	16%	8%	5%
Deafness/Hearing Loss	3%	4%	0%	1%	3%	0%	1%	2%
Developmental Delay	3%	14%	2%	6%	6%	6%	0%	7%
Down Syndrome	5%	4%	7%	5%	12%	6%	6%	5%
Global Developmental Delay	2%	12%	2%	3%	1%	6%	7%	5%
Intellectual Disability	21%	0%	34%	22%	23%	6%	26%	19%
Multiple Sclerosis	2%	0%	0%	3%	3%	3%	1%	2%
Schizophrenia	6%	0%	1%	5%	1%	0%	0%	4%
Other Intellectual/learning	5%	6%	6%	3%	5%	6%	9%	5%
Other Neurological	13%	2%	6%	10%	8%	23%	9%	9%
Other Physical	5%	3%	2%	3%	6%	16%	4%	4%
Other Psychiatric	3%	0%	2%	6%	0%	0%	0%	3%
Other Sensory/Speech	4%	8%	1%	3%	4%	6%	2%	4%

Table 1.1.1 shows the demographic information of participants with an approved plan. Overall, 3% of participants with approved plans to date are Indigenous and 3% are classified as Culturally and Linguistically Diverse (CALD). Note that Indigenous status is not well completed in the system, with 50% of records not stated. Detailed exception reporting is underway, however, to make sure these data are collected in the future.

Participants with intellectual disability (including Down syndrome and other intellectual/learning disability) represent the highest proportion of approved plans overall, at 28%. Participants with Autism and related disorders represent the second highest proportion of approved plans, at 27%. This is higher in South Australia and Tasmania as these trial sites are age-specific. In South Australia, there is a high proportion of participants with developmental and global developmental delay (26% combined) reflecting the younger age group of the cohort (0-6 year olds).

Table 1.1.2. Support needs for participants with approved plans by life domain

Table 1.1.2.(a) Support needs for participants with approved plans by life domain, split by state/territory

State/Territory	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Approved Plans
NSW	569	635	1,568	1,760	797	1,840	19	2,648
SA	15	786	1,043	1,631	54	1,529	4	1,839
TAS	328	254	290	506	251	536	18	838
VIC	807	787	1,945	2,365	1,144	2,558	12	3,318
ACT	48	44	64	88	58	81	0	103
NT	5	9	13	29	6	17	0	31
WA	36	18	51	66	11	70	0	103
Total	1,808	2,533	4,974	6,445	2,321	6,631	53	8,880

Table 1.1.2.(b) Support needs for participants with approved plans by life domain, split by primary disability

Primary Disability	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Approved Plans
Total	1,808	2,533	4,974	6,445	2,321	6,631	53	8,880
Autism and Related Disorders	278	984	1,330	1,858	329	1,976	14	2,396
Cerebral Palsy	77	115	301	364	148	335	4	481
Deafness/Hearing Loss	43	76	88	144	25	139	0	209
Developmental Delay	29	212	301	468	42	469	5	580
Down Syndrome	103	106	230	318	125	350	4	441
Global Developmental Delay	11	152	230	356	33	322	2	426
Intellectual Disability	639	330	821	1,046	693	1,192	15	1,644
Multiple Sclerosis	40	23	110	124	81	101	0	175
Schizophrenia	117	55	229	178	165	227	0	327
Other Intellectual/learning	91	108	261	327	104	314	3	436
Other Neurological	164	119	477	587	322	545	2	808
Other Physical	57	65	215	237	92	201	2	324
Other Psychiatric	105	68	211	167	113	214	1	288
Other Sensory/Speech	54	120	170	271	49	246	1	345

Table 1.1.2 shows the distribution of funded support by aggregated life domain. Life domains are areas of focus for participants' goals, objectives and strategies. Committed funding may address more than one life domain. Across each of the trial sites, the most commonly funded life domains are Independence, Social participation and Health & Wellbeing.

1.2. Increased mix of support options and innovative approaches to provision of support in response to assessed need

The NDIS provides a range of supports aimed at increasing participant independence, inclusion, and social and economic participation. These supports are designed to be more flexible than the previous system, and allow innovation. Importantly, the supports are specific to an individual, and not provided through block grants to service providers. No specific data on services received under the previous disability system is collected and comparison is difficult due to block grants. It is envisioned that the range of supports funded by the scheme will expand over time. Work is being considered to compare supports received under the previous system, with support provided in the NDIS.

This section provides descriptive information on funded support categories, payments and registered service providers.

Table 1.2.1. Number of participant plans with each funded support category

Table 1.2.1.(a) Number of participant plans with each funded support category, split by state/territory

State	Communication	Community - Social and Civic	Domestic Life	Education	Employment	General Tasks and Demands	Interpersonal Relationships	Learning and Knowledge	Mobility	Self-care	Total Plans
NSW	2,043	1,316	665	43	348	1,291	294	86	794	1,698	2,648
SA	1,733	434	151	14	0	247	54	293	506	745	1,839
TAS	508	512	209	43	177	508	57	57	210	493	838
VIC	2,492	2,071	974	135	392	1,827	627	301	1,209	2,359	3,318
ACT	95	79	54	3	25	60	17	31	35	77	103
NT	27	25	6	1	1	9	0	0	13	25	31
WA	79	45	18	2	17	24	11	3	31	65	103
Total	6,977	4,482	2,077	241	960	3,966	1,060	771	2,798	5,462	8,880

Table 1.2.1.(b) Number of participant plans with each funded support category, split by primary disability

Primary Disability	Communication	Community - Social and Civic	Domestic Life	Education	Employment	General Tasks and Demands	Interpersonal Relationships	Learning and Knowledge	Mobility	Self- care	Total Plans
Total	6,977	4,482	2,077	241	960	3,966	1,060	771	2,798	5,462	8,880
Autism and Related Disorders	2,074	1,027	320	87	138	867	499	209	350	1,255	2,396
Cerebral Palsy	392	315	174	17	38	248	36	16	375	397	481
Deafness/Hearing Loss	201	37	10	4	17	32	9	2	30	49	209
Developmental Delay	531	152	45	12	13	110	76	58	111	201	580
Down Syndrome	378	294	103	17	85	250	52	79	170	329	441
Global Developmental Delay	384	112	39	10	5	93	37	103	90	191	426
Intellectual Disability	1,101	1,095	480	59	437	1,022	187	165	466	1,107	1,644
Multiple Sclerosis	119	99	116	1	9	93	8	3	140	153	175
Schizophrenia	174	211	68	3	52	209	17	12	39	262	327
Other Intellectual/learning	342	215	112	13	39	182	39	47	204	294	436
Other Neurological	575	482	366	5	71	449	46	28	497	669	808
Other Physical	226	149	128	2	14	139	9	11	201	225	324
Other Psychiatric	173	181	67	7	25	169	26	20	30	196	288
Other Sensory/Speech	307	113	49	4	17	103	19	18	95	134	345

Table 1.2.1 shows the distribution of funded support by category. Categories are aligned to the World Health Organisation’s International Classification of Function (WHO-ICF). Committed funding may address more than one support category. Across each of the trial sites, the most commonly funded support categories are Communication, Self-care and Community Participation.

Table 1.2.2. Delivery of agreed supports¹¹ as planned

Table 1.2.2.(a) Delivery of agreed supports as planned, split by state/territory

State	Claimed (Supports provided in 2013/14)	Committed Supports expected to be provided (2013/14)	Proportion claimed (2013/14)	Claimed (Supports provided in Sep 2014 quarter)	Committed Supports expected to be provided (Sep 2014 quarter)	Proportion claimed (Sep 2014 quarter)
NSW	\$25,033,153	\$52,234,765	48%	\$10,097,611	\$32,501,221	31%
SA	\$4,825,731	\$11,989,386	40%	\$2,370,280	\$7,058,869	34%
TAS	\$9,549,026	\$18,485,697	52%	\$3,107,856	\$10,960,339	28%
VIC	\$26,133,866	\$55,279,116	47%	\$11,703,422	\$31,386,305	37%
ACT	\$0	\$0	n/a	\$27,899	\$575,614	5%
NT	\$0	\$0	n/a	\$1,350	\$83,951	2%
WA	\$0	\$0	n/a	\$0	\$165,952	0%
Total	\$65,541,777	\$137,988,964	47%	\$27,308,418	\$82,732,251	33%
Total (incl. in-kind off system reconciliation for 2013/14)	\$77,593,154	\$137,988,964	56%	\$27,308,418	\$82,732,251	33%

¹¹ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

Table 1.2.2.(b) Delivery of agreed supports as planned, split by primary disability

Primary Disability	Claimed (Supports provided in 2013/14)	Committed Supports expected to be provided (2013/14)	Proportion claimed (2013/14)	Claimed (Supports provided in Sep 2014 quarter)	Committed Supports expected to be provided (Sep 2014 quarter)	Proportion claimed (Sep 2014 quarter)
Total	\$65,541,777	\$137,988,964	47%	\$27,308,418	\$82,732,251	33%
Total (incl. in-kind off system reconciliation for 2013/14)	\$77,593,154	\$137,988,964	56%	\$27,308,418	\$82,732,251	33%
Autism And Related Disorders	\$12,163,372	\$25,295,665	48%	\$5,430,252	\$15,402,032	35%
Cerebral Palsy	\$7,241,756	\$16,125,584	45%	\$2,596,382	\$7,784,564	33%
Deafness/Hearing Loss	\$672,070	\$1,501,589	45%	\$221,723	\$759,592	29%
Developmental Delay	\$2,421,025	\$4,690,048	52%	\$1,026,795	\$2,491,466	41%
Down Syndrome	\$4,506,241	\$10,195,852	44%	\$1,854,653	\$5,631,669	33%
Global Developmental Delay	\$996,769	\$2,506,306	40%	\$492,777	\$1,713,969	29%
Intellectual Disability	\$18,306,301	\$34,355,305	53%	\$7,861,571	\$25,521,858	31%
Multiple Sclerosis	\$1,605,849	\$3,745,863	43%	\$535,764	\$1,319,989	41%
Schizophrenia	\$2,182,815	\$3,557,063	61%	\$766,943	\$2,551,738	30%
Other Intellectual/learning	\$3,327,748	\$7,375,085	45%	\$1,312,880	\$4,356,223	30%
Other Neurological	\$8,409,594	\$19,644,781	43%	\$3,380,966	\$9,770,199	35%
Other Physical	\$1,946,125	\$4,953,876	39%	\$764,016	\$2,345,909	33%
Other Psychiatric	\$977,857	\$1,903,999	51%	\$637,219	\$1,890,361	34%
Other Sensory/Speech	\$784,255	\$2,137,947	37%	\$426,478	\$1,192,684	36%

Table 1.2.2 shows the total dollar amount claimed to date compared with the estimated funds committed for supports delivered to date. The proportion of supports delivered for 2013/14 has increased from 38% to 56% since the previous quarter, when the in-kind off system payments are included. An additional 33% of supports committed for the first quarter of 2014/15 have been delivered. This measure remains too immature to interpret meaningfully due to the complexity of participants and providers transitioning to the scheme from existing funding arrangements. There is also a lag between when a support is provided and when claims are made.

Table 1.2.3. Proportion of participants with a claimed support

Table 1.2.3.(a) Proportion of participants with a claimed support, by support category and state/territory¹²

State	Communication	Community - Social and Civic	Domestic Life	Education	Employment	General Tasks and Demands	Interpersonal Relationships	Learning and Knowledge	Mobility	Self-care	Total Plans
NSW	64%	58%	49%	49%	21%	61%	54%	51%	51%	60%	82%
SA	75%	44%	17%			56%	63%	15%	49%	56%	80%
TAS	54%	62%	38%	51%	30%	65%	39%	53%	43%	60%	78%
VIC	61%	54%	57%	40%	20%	54%	55%	57%	59%	60%	80%
ACT	2%	6%	2%		0%	37%		0%	20%	5%	34%
NT	4%	0%								0%	3%
WA	0%	0%				0%			0%	0%	0%
Total	63%	54%	47%	43%	21%	57%	53%	38%	52%	58%	78%

Table 1.2.3.(b) Proportion of participants with a claimed support, by plan length and state/territory

State	All Plans	Plans 3mth+	Plans <3mth
NSW	82%	88%	46%
SA	80%	90%	50%
TAS	78%	81%	26%
VIC	80%	87%	26%
ACT	34%	0%	34%
NT	3%	0%	3%
WA	0%	0%	0%
Total	78%	87%	37%

Table 1.2.3 shows the proportion of participants with funded supports that have had at least one claim for payment, by support category. This proportion increases from 78% to 87% when plans less than three months are excluded (allowing for service provision and provider claiming lags). Participants are

¹² There are a small number of participants receiving supports in some support category and state/territory combinations. Where there are fewer than 20 participants in a particular group, the proportion is not included in this table, as the results could be misleading.

likely to have more than one support, so the overall proportion of participants with at least one claimed support under any of the support categories is higher at 78%.

Note: it is known that some supports have not been claimed which is distorting these results.

Table 1.2.4. Average days from access request to plan approval

State	Average Days
NSW	51
SA	66
TAS	44
VIC	67
ACT	48
NT	32
WA	30
Total	59

Table 1.2.4 shows the average number of days between when an access request is made and support is approved. Overall, the average is 59 days, which has remained stable since last quarter. Note: only approved plans are considered in this analysis.

Table 1.2.5. Service provider characteristics and market profile

Footprint	Allied Health	Disability Support	Disability Equipment	Plan Management	Total
National	61	58	58	27	76
State	986	969	989	187	1,418
Provider Type					
Non-Government Organisation	326	341	188	142	374
Small/Medium Enterprise	674	638	802	60	1,052
Other Private	12	10	24	0	27
Public	35	38	33	12	41
Total	1,047	1,027	1,047	214	1,494

Type	Providers Registered
New NDIS	1,233
Previously DSS	261

Table 1.2.5 shows the market profile and characteristics of registered service providers. 95% of registered providers operate in one state/territory only. The majority of registered providers are small/medium enterprises (70%), and have not been previously registered with the Department of Social Services (DSS) (83%).

1.3. People with disability are able and supported to exercise choice

As mentioned previously, work is underway on an outcomes framework which measures choice and control. Further, participants receive individual plans and flexibility in spending the money in their plan. This section presents data on participants' self-management and satisfaction, and information on appeals and complaints.

Table 1.3.1. Trends in proportion of participants using each, or a combination, of plan management options¹³

State	Agency Managed	Combination	Self-Managed
NSW	63%	36%	1%
SA	78%	15%	7%
TAS	60%	37%	3%
VIC	74%	26%	0%
ACT	35%	51%	14%
NT	90%	10%	0%
WA	65%	19%	16%
Total	70%	28%	3%

Table 1.3.1 shows the distribution of plan management options being used by active¹⁴ participants. 4% of plans are solely self-managed, and 28% of plans use a combination of agency management and self-management. Two of the new trial sites have a much higher proportion of plans that are self-managed - in the ACT this is 14% and an additional 51% using a combination, and in WA this is 16% and an additional 19% using a combination. Given the low numbers of participants to date in these trial sites, this finding should be treated with caution.

Note: Whilst a participant is receiving in-kind¹⁵ support, they cannot solely manage their plan.

¹³ These numbers are rounded to the nearest whole percentage, and the rounded numbers may not add to 100% across plan management options.

¹⁴ Active participants are those who are currently eligible, are not deceased and have a client status of "Active". Inactive participants are all other participants, including participants who are now deceased or have chosen to exit the scheme, as well as participants who have had their eligibility revoked.

¹⁵ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 1.3.2. Access requests made

Table 1.3.2.(a) Access requests made

State	Closed	Eligible	In progress	Ineligible	Revoked	Withdrawn	Total
NSW	48	3,013	144	543	37	126	3,911
SA	6	2,826	421	195	1	37	3,486
TAS	10	910	19	26	7	41	1,013
VIC	27	3,660	146	336	7	163	4,339
ACT	0	171	36	15	0	1	223
NT	0	36	3	9	0	1	49
WA	0	179	8	12	0	0	199
Total	91	10,795	777	1,136	52	369	13,220

Table 1.3.2.(b) Proportions of access requests made

State	Closed	Eligible	In progress	Ineligible	Revoked	Withdrawn	Total
NSW	1%	77%	4%	14%	1%	3%	3,911
SA	0%	81%	12%	6%	0%	1%	3,486
TAS	1%	90%	2%	3%	1%	4%	1,013
VIC	1%	84%	3%	8%	0%	4%	4,339
ACT	0%	77%	16%	7%	0%	0%	223
NT	0%	73%	6%	18%	0%	2%	49
WA	0%	90%	4%	6%	0%	0%	199
Total	1%	82%	6%	9%	0%	3%	13,220

Table 1.3.2 shows the number and distribution of access requests made by the current status of the request. To date, approximately 82% of access requests have been found to be eligible, and a further 6% are in progress. Around 9% of access requests have been deemed ineligible, down from 10% at 30 June 2014.

Table 1.3.3. Reviews of decisions

State	Affirmed	Set aside	Pending	Outcome not recorded	Total
NSW	5	7	8	15	35
SA	0	12	12	4	28
TAS	1	1	0	1	3
VIC	7	29	14	32	82
ACT	0	0	0	0	0
NT	0	0	0	0	0
WA	0	0	0	0	0
Total	13	49	34	52	148

Table 1.3.3 shows the number of decisions that participants, providers, or their agents, have formally requested to be reviewed. Reviews can be requested for decisions on access requests (13,220) or plan decisions (10,226). Given the total number of decisions, there have been very few requests for review (148), with the majority from Victoria (82), which is currently the largest trial site.

Table 1.3.4. Total appeals by outcome

State	Affirmed	Set aside	Pending	Varied	Dismissed	Withdrawn	Total
NSW	1	0	0	1	2	0	4
SA	1	0	1	0	1	0	3
TAS	0	0	1	0	0	0	1
VIC	1	0	2	8	2	2	15
ACT	0	0	0	0	0	0	0
NT	0	0	0	0	0	0	0
WA	0	0	0	0	0	0	0
National Office	0	0	0	0	0	1	1
Total	3	0	4	9	5	3	24

Table 1.3.4 shows that there have been 24 appeals to date of which four are pending (20 lodged with the Administrative Appeals Tribunal, two with the Australian Human Rights Commission and two with the Commonwealth Ombudsmen). Of the 20 appeals to have reached a resolution, nine have been varied (participant won the appeal), the other 11 have been dismissed, withdrawn or affirmed (the original decision confirmed).

Table 1.3.5. Appeals by Category

State	Access Issues	Plan Issues	Total
NSW	3	1	4
SA	1	2	3
TAS	1	0	1
VIC	6	9	15
ACT	0	0	0
NT	0	0	0
WA	0	0	0
National Office	1	0	1
Total	12	12	24

Table 1.3.5 shows that of the appeals lodged to date, half were related to access issues and the other half related to plan issues.

Table 1.3.6. Complaints by outcome and average resolution time

State	Closed - referred to another agency	Closed - resolved	Closed - unresolved	Open	Total
NSW	1	87	9	10	107
SA	1	45	3	3	52
TAS	0	16	1	2	19
VIC	1	97	18	20	136
ACT	0	8	1	2	11
NT	0	0	0	0	0
WA	0	2	0	0	2
National Office	3	31	4	5	43
Total	6	286	36	42	370

Table 1.3.6 shows the number of complaints submitted. In total, there have been 370 complaints, of which 136 are from Victoria (37%) and 107 are from NSW (29%). Complaints can be lodged by participants, providers, organisations and members of the general community.

Table 1.3.7. Complaint type

State	Provider	Agency	Reasonable and Necessary Supports	Harm, Abuse, Neglect	Other	Total
NSW	1	67	29	3	7	107
SA	0	40	8	0	4	52
TAS	0	13	1	0	5	19
VIC	3	94	21	0	18	136
ACT	0	7	1	0	3	11
NT	0	0	0	0	0	0
WA	0	2	0	0	0	2
National Office	2	20	1	1	19	43
Total	6	243	61	4	56	370

Table 1.3.7 shows the distribution of the total complaints to date by complaint type. The majority (66%) of complaints are agency related, with a further 16% relate to the amount of reasonable and necessary supports in participant plans.

Table 1.3.8 Satisfaction with the Agency

Table 1.3.8.(a) Participant/Carer satisfaction with the Agency and life experience

(Note: Satisfaction is reported on a scale of -2 *very poor* to +2 *very good*, with 0 = *neutral*)

State	Participant satisfaction	Experience satisfaction
NSW	1.81	1.07
SA	1.45	1.17
TAS	1.85	1.36
VIC	1.76	1.15
ACT	1.73	0.91
NT	-	0.74
WA	1.50	1.04
Total	1.67	1.14

Table 1.3.8.(b) Participant satisfaction with the Agency

State	Very good	Good	Neutral	Poor	Very Poor	Total
NSW	83%	16%	2%	0%	0%	100%
SA	60%	29%	7%	4%	0%	100%
TAS	86%	12%	2%	0%	0%	100%
VIC	79%	18%	3%	0%	0%	100%
ACT	82%	9%	9%	0%	0%	100%
NT	-	-	-	-	-	-
WA	50%	50%	0%	0%	0%	100%
Total	74%	21%	4%	1%	0%	100%

Table 1.3.8 shows participant satisfaction with the Agency, and in particular, the planning process. Experience satisfaction measures a participant's overall satisfaction with their current life experience and outcomes. Of the 1,052 participants who have been surveyed 95% have responded that their planning process was either good, or very good, maintaining the high level of satisfaction with the Agency at 1.67.

Note: Carer satisfaction with the planning process will be captured and reported on in the next quarter.

2. Financial Sustainability

Note: A number of measures relating to financial sustainability are addressed in the Summary Annual Financial Sustainability Report.

Further, only one quarter's worth of information is available from ACT, NT and WA. The phasing schedules significantly impact the information presented for these sites.

There are five categories of cost drivers which affect the financial sustainability of the scheme – access to the scheme, and the scope, volume, delivery, and price of NDIS-funded supports. Managing cost drivers is a key component of the insurance approach, and enables identification and handling of any cost pressures that arise.

2.1. Effective estimation and management of short-term and long term costs

Table 2.1.1. Total amount of committed supports¹⁶

State	Committed costs
NSW	\$151,206,613
SA	\$34,968,476
TAS	\$52,004,397
VIC	\$146,363,930
ACT	\$6,986,328
NT	\$604,923
WA	\$3,159,402
Total	\$395,294,069

Table 2.1.1 shows the total cost of committed supports for participants.

Table 2.1.2. Total payments (\$, in-kind¹⁷)

State	Cash	In-Kind	Total
NSW	\$34,906,832	\$223,933	\$35,130,765
SA	\$6,731,772	\$464,239	\$7,196,011
TAS	\$10,970,282	\$1,686,600	\$12,656,882
VIC	\$31,651,538	\$6,185,751	\$37,837,289
ACT	\$27,899	\$0	\$27,899
NT	\$1,350	\$0	\$1,350
WA	\$0	\$0	\$0
Total payments	\$84,289,672	\$8,560,522	\$92,850,195
Total (incl. in-kind off system reconciliation for 2013/14)	\$84,289,672	\$20,611,900	\$104,901,572

¹⁶ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

¹⁷ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 2.1.2 shows total payments to date by trial site. The majority of payments are from the New South Wales and Victorian trial sites (76% of payments, combined). This is expected as these are the largest trial sites. The new trial sites have made very few payments. This is expected as the scheme has just commenced.

Table 2.1.3. Operating Expenses Ratio (%) total costs

	%
Operating expenses ratio	31.3%

Table 2.1.3 shows the operating expenses ratio. This figure is down from 49.2% reported in the previous quarter.

Table 2.1.4. Annualised support package distributions¹⁸

Annualised committed support band	Active plans	%
\$0-\$5,000	738	8%
\$5,001-\$10,000	1,256	14%
\$10,001-\$30,000	4,161	47%
\$30,001-\$50,000	944	11%
\$50,001-\$100,000	828	9%
\$100,001-\$150,000	319	4%
\$150,001-\$200,000	258	3%
\$200,001-\$250,000	234	3%
\$250,001+	88	1%
Total	8,826	100%

Table 2.1.4 shows the majority of participants have annualised package costs of between \$10,001 and \$30,000 and few participants have high cost plans of over \$100,000. Of the 8,826 active¹⁹ participants with approved plans, 70% have an annualised package cost of less than \$30,000; this group accounts for only 24% of annualised committed funding. Conversely, 10% of participants have an annualised package cost over \$100,000 and these participants account for 49% of total committed supports²⁰. As expected, the bulk of committed funding is being allocated to a very small proportion of high-needs participants.

¹⁸ This table includes participants with active plans only. The total of 8,826 is slightly lower than the 8,880 active and inactive participants with an approved plan reported elsewhere in this report.

¹⁹ Active participants are those who are currently eligible, are not deceased and have a client status of "Active". Inactive participants are all other participants, including participants who are now deceased or have chosen to exit the scheme, as well as participants who have had their eligibility revoked.

²⁰ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

Table 2.1.5. Average length of time from application to commencement of services

State	Days
NSW	82
SA	94
TAS	91
VIC	106
Total	95

Table 2.1.5 shows the average length of time from when an access request is submitted before an invoice for support is received. Only participant plans that have had at least one claim are included in this measure. Many plans are yet to have their first claim, and as such, this measure is underdeveloped. At this stage, the average number of days ranges from 82 to 106 across the trial sites.

Note: there has been insufficient development time to report on claims in the new trial sites.

Table 2.1.6. Payments to providers and participants split by support cluster

Support Category	Participant	Service Provider	Total
Accommodation/Tenancy	\$4,759	\$81,675	\$86,434
Assess-Skill, Ability, Needs	\$26,572	\$841,973	\$868,545
Assist Access/Maintain Employ	\$1,992	\$647,793	\$649,785
Assist Prod-Pers Care/Safety	\$272,932	\$958,219	\$1,231,151
Assist-Integrate School/Ed	\$78,115	\$298,980	\$377,095
Assist-Life Stage, Transition	\$31,632	\$2,039,161	\$2,070,792
Assist-Personal Activities	\$1,149,471	\$14,773,410	\$15,922,882
Assist-Travel/Transport	\$1,355,165	\$1,595,835	\$2,950,999
Assistive Equip-Recreation	\$66,071	\$86,739	\$152,810
Assistive Prod-Household Task	\$15,896	\$5,707	\$21,603
Behaviour Support	\$19,030	\$363,433	\$382,463
Comms & Info Equipment	\$182,307	\$68,604	\$250,911
Community Nursing Care	\$29,832	\$110,350	\$140,182
Daily Tasks/Shared Living	\$231,024	\$26,106,364	\$26,337,388
Development-Life Skills	\$133,885	\$1,221,171	\$1,355,056
Early Childhood Supports	\$589,880	\$5,664,464	\$6,254,344
Equipment Special Assess Setup	\$8,452	\$116,440	\$124,892
Hearing Equipment	\$33,346	\$21,394	\$54,740
Home Modification	\$85,928	\$682,863	\$768,790
Household Tasks	\$112,456	\$519,133	\$631,589
Interpret/Translate	\$3,021	\$76,873	\$79,895
Other Innovative Supports	\$57,966	\$195,413	\$253,379
Participate Community	\$841,650	\$23,613,168	\$24,454,818
Personal Mobility Equipment	\$131,206	\$1,145,288	\$1,276,495
Physical Wellbeing	\$133,113	\$86,222	\$219,334
Plan Management	\$1,449	\$81,669	\$83,117
Therapeutic Supports	\$315,679	\$4,960,048	\$5,275,727
Training-Travel Independence	\$7,653	\$107,787	\$115,440
Vehicle modifications	\$54,326	\$331,643	\$385,969
Vision Equipment	\$19,463	\$54,108	\$73,571
Total	\$5,994,270	\$86,855,925	\$92,850,195
Total (incl. in-kind off system reconciliation for 2013/14)			\$104,901,572

Table 2.1.6 shows total payments (cash & in-kind²¹) expenditure split by support cluster, excluding the off system reconciliation. Support clusters are groupings of similar supports. A single plan may have funding over many support clusters. Payees can include participants who are self-managing or providers claiming directly. The majority of payments are made to providers (over 90%). The total payments made have increased from nearly \$50 million in the previous quarter to over \$90 million excluding the in-kind off system reconciliation, and nearly \$105 million when this reconciliation is included.

²¹ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 2.1.7. Average and median costs of individual support packages

State	Average annualised committed	Median annualised committed
NSW	\$38,107	\$19,768
SA	\$17,498	\$14,613
TAS	\$49,731	\$27,162
VIC	\$38,293	\$17,023
ACT	\$70,273	\$52,190
NT	\$20,665	\$16,466
WA	\$35,236	\$21,747
Total	\$35,207	\$17,088

Table 2.1.7 shows the actual expenditure, the average annualised plan amount and the median annualised plan amount, by trial site.

Table 2.1.8. Value of and number of active approved packages by participant group²²

Primary Disability	Number	Committed costs*	Average annualised cost
Total	8,826	\$395,294,069	\$35,207
Autism and Related Disorders	2,392	\$74,157,663	\$26,773
Cerebral Palsy	479	\$38,497,187	\$61,624
Deafness/Hearing Loss	209	\$3,461,824	\$14,932
Developmental Delay	579	\$12,127,086	\$18,390
Down Syndrome	438	\$27,137,760	\$45,842
Global Developmental Delay	426	\$8,092,395	\$17,399
Intellectual Disability	1,636	\$116,822,927	\$55,161
Multiple Sclerosis	174	\$7,780,259	\$32,438
Schizophrenia	323	\$11,232,849	\$31,623
Other Intellectual/learning	433	\$21,426,670	\$35,630
Other Neurological	794	\$48,044,453	\$44,083
Other Physical	314	\$12,222,661	\$28,605
Other Psychiatric	287	\$8,340,569	\$26,620
Other Sensory/Speech	342	\$5,949,766	\$15,213

* Committed costs are not annualised.

Table 2.1.8 shows the number of participants who have approved plans, the total cost committed in these plans and the average annualised cost of the plans, split by primary condition group. The average annualised costs by primary disability group will be affected by the underlying age distributions of each group. The overall average annualised plan amount to date is \$35,207²³ excluding the Stockton large residence, or \$39,087 when the Stockton large residence is included.

Note: annualising plan values adds uncertainty to estimates. It is not an appropriate measure of scheme performance when considered in isolation from other metrics. It is important to consider the number of scheme participants, the distribution of packages committed to these participants, and actual payments for supports provided. All of these factors contribute to the overall cost. The

²² Note: Average annualised cost excludes participants from the Stockton large residential centre in NSW.

²³ Note: the bilateral agreements for the 2014/15 year indicate that the average participant cost is \$36,750.

phasing of participants also influences plan costs by trial site. For example, New South Wales is phasing by provider and Barwon is phasing by program. As a result, plan costs to date are not comparable across trial sites.

Table 2.1.9. Number of participants receiving supports paid for with cash and/or in-kind²⁴ supports by state/territory

State	Cash	In-kind	Cash & In-kind	Total
NSW	1,717	4	413	2,134
SA	1,146	17	298	1,461
TAS	295	11	317	623
VIC	1,290	93	1,190	2,573
ACT	34	0	0	34
NT	1	0	0	1
WA	0	0	0	0
Total	4,483	125	2,218	6,826

Table 2.1.9 shows that almost all participant plans that have had at least one claim are receiving cash payments (66%) or a combination of cash payments and in-kind supports (32%) against their claims.

Note:

Not all participants at this stage have received a claim.

A number of in-kind supports have been claimed off the system, and a reconciliation process has been undertaken. These results have not yet been allocated to participants and aren't included in the above table - hence the above results are distorted.

Table 2.1.10. Ratio of cash to in-kind services by participant group

State	Cash Services	In-kind Services	Cash & In-kind
NSW	98%	0%	1%
SA	95%	4%	1%
TAS	88%	11%	1%
VIC	92%	7%	0%
ACT	100%	0%	0%
NT	100%	0%	0%
WA	-	-	-
Total	94%	5%	1%

Table 2.1.10 shows the distribution of services funded through cash and in-kind arrangements by trial site. Overall 94% of all services are funded through cash (reducing to 80% when the in-kind off system payments are included), and 1% from a combination of cash and in-kind services. Tasmania has the highest percentage of in-kind supports at 11%. Note: A number of in-kind supports have been claimed off the system, and a reconciliation process has been undertaken. These results have not yet been allocated to participants and aren't included in the above table - hence the above results are distorted.

²⁴ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 2.1.11. Participant numbers

Table 2.1.11.(a) Participant numbers, split by gender, age and primary disability

State	Total	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	2,648	89	59	1,574	1,074	0	193	644	305	571	893	42
SA	1,839	62	103	1,280	559	0	1,024	815	0	0	0	0
TAS	838	41	16	534	304	0	0	0	790	48	0	0
VIC	3,318	40	72	1,943	1,375	0	309	905	467	757	849	31
ACT	103	3	4	64	39	0	21	1	57	6	15	3
NT	31	28	23	17	14	0	4	11	4	6	6	0
WA	103	6	7	68	34	1	12	33	31	9	18	0
Total	8,880	269	284	5,480	3,399	1	1,563	2,409	1,654	1,397	1,781	76

Table 2.1.11.(b) Participant numbers, split by primary disability

	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Total	2,619	1,838	835	3,297	103	31	103	8,826
Autism and Related Disorders	568	737	254	783	20	1	29	2,392
Cerebral Palsy	140	112	59	145	10	5	8	479
Deafness/Hearing Loss	91	78	4	32	3	0	1	209
Developmental Delay	88	262	15	206	6	2	0	579
Down Syndrome	134	72	60	152	12	2	6	438
Global Developmental Delay	62	224	16	114	1	2	7	426
Intellectual Disability	557	6	284	736	24	2	27	1,636
Multiple Sclerosis	53	0	1	115	3	1	1	174
Schizophrenia	143	0	6	173	1	0	0	323
Other Intellectual/learning	140	117	48	112	5	2	9	433
Other Neurological	347	42	48	333	8	7	9	794
Other Physical	125	48	16	110	6	5	4	314
Other Psychiatric	78	2	15	192	0	0	0	287
Other Sensory/Speech	93	138	9	94	4	2	2	342
Other Not recorded	0	0	0	0	0	0	0	0

Table 2.1.11 shows the number of participants accessing supports.

The corresponding distribution of participants is shown in Table 1.1.1.

Table 2.1.12. Total number of plans developed

State	Total plans developed
NSW	3,135
SA	2,073
TAS	1,013
VIC	3,768
ACT	103
NT	31
WA	103
Total	10,226

Table 2.1.12 shows the total number of plans developed. This includes 1,314 second plans and 32 third plans. 54 participants with approved plans have since left the scheme via participant-initiated request, death or Agency-initiated eligibility revocation.

Table 2.1.13. Number of plans with single supports

State	Single items	Ratio
NSW	458	17%
SA	728	40%
TAS	88	11%
VIC	332	10%
ACT	12	12%
NT	1	3%
WA	15	15%
Total	1634	19%

Table 2.1.13 shows the number of approved plans that only contain a single type of support. Overall, 19% of approved plans only contain a single type of support, and this is consistent with the previous quarter. South Australia has 728 of these plans, which make up 40% of all approved plans in South Australia.

2.2. Benefits are realised from targeted investment strategies in enhanced disability support

Of the 8,826 active participants with approved plans, 5,780 were found eligible for the scheme because they meet the disability requirements (section 24 of the NDIS Act), and 3,032 participants met the early intervention requirements (section 25 of the NDIS Act). Younger participants are more likely to meet the early intervention requirements which aim to improve, stabilise or lessen the impact of the person's impairment on their functional capacity. 8,735 active participants have funded supports in their approved plans, and 6,679 of these contain at least one funded support for early intervention.

Table 2.2.1. Participants with early intervention supports

2.2.1(a). Participants with early intervention supports, by state/territory

State	Number	Proportion	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	1,895	73%	59	17	1,107	788	0	174	441	204	407	641	28
SA	1,766	96%	55	23	1,228	538	0	982	784	0	0	0	0
TAS	468	59%	17	10	298	170	0	0	0	435	33	0	0
VIC	2,373	72%	27	30	1,389	984	0	282	581	328	557	605	20
ACT	88	87%	3	0	54	34	0	20	0	45	6	14	3
NT	25	81%	22	0	16	9	0	4	9	2	4	6	0
WA	64	66%	5	3	44	20	0	11	21	16	3	13	0
Total	6,679	76%	188	83	4,136	2,543	0	1,473	1,836	1,030	1,010	1,279	51

2.2.1(b). Proportion of participants with early intervention supports, by primary disability

Primary Disability	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Total	1,895	1,766	468	2,373	88	25	64	6,679
Autism and Related Disorders	70%	96%	55%	66%	75%	100%	75%	75%
Cerebral Palsy	92%	100%	88%	92%	100%	60%	75%	93%
Deafness/Hearing Loss	86%	100%	25%	81%	100%	0%	0%	89%
Developmental Delay	83%	94%	50%	77%	83%	100%	0%	85%
Down Syndrome	75%	100%	72%	81%	83%	100%	83%	81%
Global Developmental Delay	79%	99%	67%	82%	100%	100%	71%	90%
Intellectual Disability	68%	100%	51%	74%	88%	100%	50%	68%
Multiple Sclerosis	81%	0%	0%	88%	100%	100%	100%	86%
Schizophrenia	39%	0%	20%	46%	100%	0%	0%	43%
Other Intellectual/learning	82%	97%	67%	83%	50%	0%	33%	83%
Other Neurological	80%	100%	70%	82%	100%	86%	78%	82%
Other Physical	87%	94%	67%	89%	100%	100%	100%	88%
Other Psychiatric	53%	100%	40%	39%	0%	0%	0%	43%
Other Sensory/Speech	75%	90%	67%	80%	100%	50%	100%	83%

Table 2.2.1 shows the proportion of participants receiving early intervention supports by trial site. South Australia has the highest proportion at 96%, reflecting the lower age of participants in this trial site. 80-90% of participants living with cerebral palsy, deafness or a developmental delay are accessing early intervention supports.

Table 2.2.2. Total cost of investment in research and innovation (including the sector development fund)

	Committed	Under development	Total
Research / Innovation	\$45,486,415	\$48,476,213	\$93,962,628

Table 2.2.2 shows the total funding committed and the value of projects under development by the Agency on research and market innovation (from 2012/13 to 2016/17).

Note:

Committed represents funds committed to projects with formal contracts or Memorandums of Understanding.

Under development represents funds for projects supported by the Board that have not yet been committed.

3. Community Inclusion

3.1. People with disability are able to access support from mainstream services

As mentioned previously, the Agency is developing an outcomes framework to systematically measure outcomes across participants and families. This section presents data on participants' use of mainstream services. Mainstream services are those supports best provided by other public systems including health, education, housing and justice. Further work is required to link NDIS participant data to administrative data from mainstream services to understand both the baseline and changes over time.

Table 3.1.1. Proportion of participants accessing mainstream services

State	Participants accessing mainstream services	Proportion accessing mainstream services
NSW	1,735	66%
SA	1,554	85%
TAS	620	74%
VIC	2,867	87%
ACT	81	79%
NT	28	90%
WA	60	58%
Total	6,945	79%

Table 3.1.1 shows that the majority of participants with approved plans are also accessing mainstream supports (79%).

Table 3.1.2. Support categories with mainstream services

Support categories	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Total	1,735	1,554	620	2,867	81	28	60	6,945
Self-care	697	308	132	1,703	33	16	25	2,914
Education	587	1,075	276	1,035	11	16	30	3,030
General Tasks and Demands	386	263	88	637	14	3	10	1,401
Community and social life	286	408	129	591	27	1	10	1,452
Community - Social and Civic	214	224	103	601	21	1	8	1,172
Mobility	174	195	50	578	10	5	4	1,016
Carer/Family Support	108	162	40	273	9	5	5	602
Employment	103	0	106	303	9	2	8	531
Domestic Life	93	9	50	329	19	8	2	510
Communication	85	219	12	134	5	0	5	460
Interpersonal Relationships	91	79	25	158	3	0	1	357
Learning and Knowledge	48	130	24	111	9	0	3	325

Table 3.1.2 shows that 3,030 mainstream education supports are utilised by participants with approved plans. There are 2,867 participants with approved plans in the Victorian trial site who are utilising at least one mainstream service²⁵.

²⁵ Participants may be accessing more than one mainstream service, and hence the overall total is not the sum of the services across the support categories.

3.2. Effectiveness of LAC community capacity building activities

Table 3.2.1. Community awareness activities undertaken within the period by LACs

State/Territory	
NSW	<ul style="list-style-type: none"> • Attended Expos, forums and organisations within the trial site to provide appropriate information and support for community to access the scheme and to develop symbiotic networks to assist participant outcomes and opportunities for inclusion <ul style="list-style-type: none"> ○ School leavers expo ○ Hunter Homeless Connect Day (HHC) expo ○ Siblings & Young Carers Network ○ Engagement forums ○ Disability Network Hunter. ○ Aboriginal Interagency ○ Community Disability Alliance Hunter (CDAH) planning café ○ Awabakal Newcastle Aboriginal Co-operative • LAC staff met with the leaders of Men’s shed; provided appropriate agency information, refined referral process. Made connection with Ability Links and shared information and reviewed opportunity for further development in regard to inclusion opportunities with the Men’s shed.
SA	<ul style="list-style-type: none"> • LACS worked with mainstream organisations to increase their understanding of the NDIS processes and the journey for participants. Over the reporting period there has been a focus on providing information sessions and workshops at schools and pre-schools due to the age of the participants phasing-in. • LACs have presented information sessions to community organisations such as Centacare, Anglicare and Relationships Australia SA to develop awareness of the support needs of the families/parents of participants. • LACs attend regular forums within Local Government Areas • LACs have met with community health providers and Early Childhood Intervention Coordinators to develop support networks and referral pathways for families.
TAS	<p>Regular community awareness activities have been undertaken by the engagement team, planning teams and the LACs (outsourced in Tasmania). The focus has been:</p> <ul style="list-style-type: none"> • Integrated Planning Model for students in years 11 and 12 – engagement with schools, learning support officers, principals, and State government. • Focus on raising awareness with 29 Local Councils in Tasmania. • Held discussions with sporting clubs throughout Tasmania to raise awareness of the need for mainstream clubs to consider inclusiveness. • LINC – State library services – discussions around how to increase involvement of NDIS participants in mainstream literacy and numeracy programs.

State/Territory	
VIC	<ul style="list-style-type: none"> • Contributed to organisation and coordination of the largest disability conference in Geelong • Established and regularly attended peer based support groups to support participants buy supports in their plan • Worked with mental health providers to facilitate potential participant's access to the scheme • Worked with potential participants across each of the phasing programs to explain the scheme, access requirements and supports available • Worked with ADE providers to facilitate potential participant's access to the scheme • Facilitated information sessions at schools and vocational training groups around scheme opportunities for enhanced employment and educational support for students with disability • Regular attendance at the Barwon Disability Advocacy Network • Regular presentations to and development of strategic design considerations with providers • Regular liaison with Aboriginal and Torres Strait Islander and CALD agencies / leaders to increase understanding of the scheme • Development of working relations with key disability support networks.
ACT	<ul style="list-style-type: none"> • Plan Support Coordinators are assisting with the pre-planning workshops and are working with various community groups to connect with participants and potential participants to assist in completing Access Request Forms and raise awareness of the NDIS. • Plan Support Coordinators are visiting Pre Schools to discuss the NDIS and how people can access the scheme.
NT	<ul style="list-style-type: none"> • All communities in the Barkly region have now been visited at least twice and collaborative relationships developed with key roles, and particularly Government Engagement Coordinators and Indigenous Engagement Officers employed by the Department of Prime Minister and Cabinet. • Extensive networking has occurred in communities, Tennant Creek and Elliot about NDIS generally and specific participants. • Meetings have been held with Northern Territory Government and key agencies in Darwin to develop working arrangements based for the trial. • Engagement activities have been occurring on a regular basis. These include market development, workforce development, participant meetings, remote community engagement, regular meetings with Northern Territory Government site implementation group and Barkly Coordination meetings. • Agency staff attended the National Disability Services (NDS) - <i>NDIS Essential Briefing</i> in Darwin.
WA	<ul style="list-style-type: none"> • Presentations provided to the three Local Government Authority Councils within the Trial Site to provide information about the scheme and the important role of local government in fostering community inclusion. • Quarterly information sundowners held for the Perth Hills Advisory Network – a multi-stakeholder group of over 80 people who use their own networks to disseminate information about the trial site and gather feedback. • Information shared about the scheme, Trial Site and the planning process through attending employment and NAIDOC expos, the Eastern Region Area Health Services and other cross-agency local groups. • Ongoing information sessions and workshops provided to families and potential participants to provide information about the scheme and to commence discussions about the planning process. • Information and discussion forums run to familiarise providers with the scheme, registration, participant planning and community engagement approaches.

3.3. Effectiveness of LAC community capacity building activities

Table 3.3.1. Community capacity building activities undertaken by LACs within the period

State/Territory	
NSW	<ul style="list-style-type: none"> • Met with low cost or non- for -profit organisations to improve access by participants and/or to improve capacity to be inclusive <ul style="list-style-type: none"> ○ Justin Ryder, local NGO, who provides an inclusive fitness program for people with significant disability and their family/ carers presented his program and received some information regarding community connection to assist in being more inclusive. ○ Justine Potter –octopod, presented on how octopod functions and the opportunity of support for participants wanting to access the arts programs in the Hunter. Access for participants refined and simplified to assist in ease of engagement. ○ LAC staff working with local culinary supplier (essential ingredient) to consider offering an inclusive program that will address basic cookery and food budget skills • LAC staff met with mainstream services to share and improve resources <ul style="list-style-type: none"> ○ Awabakal Newcastle Aboriginal Co-operative staff attended the NDIA office to meet with the pre-planning group. Pre-planning was introduced and offered as a resource tool to assist Awabakal clients who would be phasing into the scheme. ○ LAC staff met with DHS Indigenous service officer that have offered to support LAC’s to connect people with cultural connections. The LAC in turn will help Indigenous service officers with the access requirements for NDIA. ○ The strong relationships developed with Ability Links in each Local Government Area with in the trial site have assisted with effective referrals for non-eligible participants, resource sharing and greater participant family support by early linkers.
SA	<ul style="list-style-type: none"> • LACs have supported families to connect with a range of mainstream and community services; this allows providers to build capacity in response to individual needs • LACs continue to work with mainstream supports such as childcare, playgroups, to develop capacity for inclusion • Volunteers in the Creche at Hackham West Community Centre are participating in training to develop skills in providing care for children with disabilities. The centre received CICD funding for this project.
TAS	<ul style="list-style-type: none"> • Working with a few Local Councils to develop their activities (inclusiveness) or strategic plans for people with disabilities in their communities. • Huon Disability Network – assisted in establishing their website to link people with disabilities and providers in Huon Valley. • Establishing a LAN gaming opportunity through the linking of local council, provider and participants in community centre.
VIC	<ul style="list-style-type: none"> • Designed and implemented pre planning workshops to increase participant readiness for planning conversations • Designed and implemented plan implementation workshops to guide participant approach to implementation • Workshops on approach to self-management • Workshops to increase understanding of needs from plan management providers • Work with mental health carer network to better understand the scheme
ACT	<ul style="list-style-type: none"> • Plan Support Coordinators have commenced some community capacity building in developing and implementing participant plans. • Plan Support Coordinators have delivered and information session to the Australian Federal Police, to provide information on having conversations with people with Intellectual Disability. • Plan Support Coordinators meet weekly with a different community agency’s (such as the Public Advocate, Alzheimer’s Australia, Human Rights Commission etc.) to share information and discuss matters of common interest.

State/Territory	
NT	<ul style="list-style-type: none"> • Still establishing relationships with key providers to ensure geographical and service types needed, and working with NDS to support provider readiness activities. • Relationships with providers are moving to plan implementation discussions. • Additional engagement resources are being deployed support the following activities in October: <ul style="list-style-type: none"> ○ A briefing to the Aboriginal Interpreter Service ○ A provider workshop that will involve linkages across South Australia, Barkly and services located in Darwin and Alice Springs. ○ A communications workshop to refine the key communication messages for the region. • Proposed development of an Arts based engagement activities to build trust and awareness across communities in the region.
WA	<ul style="list-style-type: none"> • Ongoing meetings arranged with: <ul style="list-style-type: none"> ○ Community Development staff in the City of Swan to explore ways to develop strategies to foster community awareness, community capacity building and inclusion. ○ A voluntary community group in the Shire of Mundaring who are developing an inclusive community garden. ○ Department of Sport and Recreation in relation to working with community inclusion officers to increase inclusion within local sports associations. • Participation on a Rotary-led planning committee for a local inclusive community festival being held in March 2015. Committee involvement will, in turn, promote leadership opportunities for people with disability to participate on the committee and have opportunities to provide feedback as the festival is developed. • Participation in workshops hosted by peer-led organisation, Valued Lives, to encourage family and participants preparation prior to participant planning meetings.

Table 3.3.2. Community capacity building activities undertaken by funded organisations within the period

	Commitments made between 1 May 2014 - 30 September 2014	Total Commitment since 1 July 2013
Community Capacity Building	\$93,124.10	\$194,039.10

APPENDIX 1

Measures documented in Level 2 Performance Reporting Framework not included in this report

For reasons detailed in Appendix 2, not all measures documented in the Intergovernmental Agreement were able to be reported on for 2014/15 Q1. These are listed below:

1. People with disability lead lives of their choice

- Proportion of plans requiring early review (%)
- People with disability achieve their goals for independence, social and economic participation
- Proportion of participants achieving their life goals as specified in their plan
- Proportion of participants achieving their plan goals (total)
- Proportion of participants achieving their plan goals in one or more specific domains:
 - Economic
 - Social
 - Education
 - Health and well-being
 - Living arrangements
- Planning and goal setting completed on time (%)
- Trends in proportion of participants using different approaches to decision supports
- Carer satisfaction with agency

2. NDIS is a financially sustainable, insurance-based scheme

- Growth in future commitments
- Management of prudential risk
- Provision of supports
- Average cost of supports per assessor
- Current and future funding resources
- Current expenditure compared to projections
- Projected expenditure compared to projected revenue
- Long term cost trends (population, price and wage growth)
- Average client lifetime cost of support
- Number of Tier 2 supports with LAC funding and purpose of funding
- Average cost of internal reviews
- Average cost of appeals
- Proportion of participants with reduced needs after intervention supports

Note: A number of measures relating to financial sustainability will be addressed in the Summary Financial Sustainability Report.

APPENDIX 2

Accessible tables for Agency performance overview graphs

Table 1. People lodging an access request by month

State/Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14
National	1139	1202	1098	902	659	543	600	708	1166	712	967	927	1088	1036	796
NSW	423	317	332	328	180	171	187	256	453	184	281	248	253	212	176
SA	171	167	186	187	161	101	148	137	194	196	320	412	461	412	327
TAS	109	120	85	89	113	69	60	53	47	49	79	56	45	22	26
VIC	436	597	495	299	205	202	204	262	473	283	287	211	172	225	117
ACT													105	52	66
NT													19	20	11
WA													33	93	73

Table 2.(a) First approved plans by month that the plan was first approved

State/Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14
National	48	428	484	442	546	602	557	1,041	1,207	449	742	756	543	441	594
NSW	3	129	141	145	160	164	162	315	495	154	165	228	144	122	121
SA	6	69	76	75	112	146	102	157	223	107	142	139	166	151	168
TAS	23	62	64	59	60	78	55	96	84	50	68	84	18	22	15
VIC	16	168	203	163	214	214	238	473	405	138	367	305	207	113	94
ACT													8	18	77
NT													0	10	21
WA													0	5	98

Table 2.(b) Plan reviews by month that the plan was first approved

State/Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14
National	0	0	2	1	5	10	22	68	42	32	36	55	192	363	516
NSW	0	0	0	0	2	3	3	9	12	5	8	19	73	149	204
SA	0	0	0	0	0	3	10	46	26	24	18	13	17	32	45
TAS	0	0	2	0	2	1	2	4	2	1	4	9	28	53	66
VIC	0	0	0	1	1	3	7	9	2	2	6	14	74	129	201

Table 3. Types of mainstream supports accessed in participants plans

Support categories	Total	NSW	SA	TAS	VIC	ACT	NT	WA
Number of plans with mainstream supports	6945	1735	1554	620	2867	81	28	60
Education	44%	34%	69%	45%	36%	14%	57%	50%
Self-care	42%	40%	20%	21%	59%	41%	57%	42%
Community and social life	21%	16%	26%	21%	21%	33%	4%	17%
General Tasks and Demands	20%	22%	17%	14%	22%	17%	11%	17%
Other	53%	42%	47%	54%	62%	73%	64%	55%

Table 4. Committed supports expected to be provided by month of support provision (\$millions)

State/Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14
National	\$0.70	\$2.50	\$5.40	\$6.20	\$7.70	\$9.80	\$11.20	\$12.80	\$17.30	\$18.20	\$22.80	\$23.10	\$27.10	\$27.90	\$27.80
NSW	\$0.30	\$1.00	\$2.10	\$2.30	\$2.50	\$3.10	\$3.50	\$4.50	\$6.90	\$8.00	\$8.80	\$9.30	\$10.70	\$11.10	\$10.70
SA	\$0.10	\$0.20	\$0.30	\$0.50	\$0.70	\$0.90	\$1.10	\$1.20	\$1.60	\$1.60	\$1.90	\$2.00	\$2.20	\$2.30	\$2.50
TAS	\$0.10	\$0.40	\$0.80	\$1.00	\$1.20	\$1.50	\$1.70	\$1.80	\$2.30	\$2.40	\$2.60	\$2.70	\$3.60	\$3.70	\$3.70
VIC	\$0.30	\$0.90	\$2.10	\$2.50	\$3.40	\$4.30	\$5.00	\$5.20	\$6.50	\$6.30	\$9.50	\$9.20	\$10.50	\$10.60	\$10.30
ACT													\$0.00	\$0.10	\$0.40
NT													\$0.00	\$0.00	\$0.10
WA													\$0.00	\$0.00	\$0.10

Table 5. Distribution of package costs by trial site

	NSW	NSW	SA	SA	TAS	TAS	VIC	VIC	ACT	ACT	NT	NT	WA	WA
Annualised committed support band	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected
Total	2,619	3,508	1,838	4,456	835	830	3,297	4,960	103	185	31	150	103	129
\$0-\$5,000	309	844	37	1,573	96	279	267	1,194	7	45	4	36	18	31
\$5,001-\$10,000	356	693	249	581	66	135	567	981	3	37	6	30	9	26
\$10,001-\$30,000	964	674	1,400	1,123	286	193	1,431	953	24	36	15	29	41	25
\$30,001-\$50,000	293	515	106	362	147	64	363	728	14	27	3	22	18	19
\$50,001-\$100,000	266	520	41	637	138	69	335	735	35	27	3	22	10	19
\$100,001-\$150,000	135	117	4	180	48	74	119	165	9	6	0	5	4	4
\$150,001-\$200,000	73	74	1	0	26	0	154	104	2	4	0	3	2	3
\$200,001-\$250,000	177	48	0	0	12	17	40	67	5	3	0	2	0	2
\$250,001+	46	23	0	0	16	0	21	33	4	1	0	1	1	1

APPENDIX 3

Definition of measures reported in Quarterly Report to the COAG Disability Reform Council

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
1	Participant Outcomes		
1.1.1.	Information about participants (total active participants)	Summary of demographics for active participants, defined as people eligible for funding as per the Act, who have an approved plan for funding in place.	Yes
1.1.2.	Support needs for participants	For active participants, identifies the life domains which supports are being funded to address identified need. Note: Approved funding may address more than one life domain.	Yes
n/a	Proportion of participants achieving their life goals as specified in their plan	The outcome of a review of a participant's goals. Goals refer to the overarching, personal goals of participants.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Proportion of participants achieving their plan goals (total)	The outcome of a review of a participant's plan objectives (plan goals). Plan objectives refer to the identified aims within a plan, for which funding is allocated to support the achievement.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Proportion of participants achieving their plan goals in one or more specific domains	The outcome of review of a participant's plan objectives (plan goals), with identification of the aggregated life domain the objective was related to.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Planning and goal setting completed on time (%)	Reports the proportion of plan reviews that are completed on or before the previous plan's scheduled end date.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Plans requiring early review (%)	Reports the proportion of plans that were, or are due to be, reviewed less than 12 months after the plan commenced	No- an appropriate measure is required to be developed. There is also insufficient scheme development for this measure to be meaningful.

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Active Participants (Tier 2 and Tier 3)	On plan review, number of participants who change the way funding is utilised to support their needs.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Availability of provider services (%)	Proportion of identified support needs that have at least one registered provider servicing the residential area of the participant.	No. Data is not currently available for this measure.
1.2.1.	Funded support categories	Support categories (WHO-ICF domains) for which supports have been funded. Note: A single plan can contain funding in multiple support categories.	Yes
n/a	Proportion of participants with support packages within expected ranges (reference +/- x %)	Delegations are determined by the instrument of Delegation. This measure reports the delegation required to approve committed plans	No. Data is not currently available for this measure
1.2.2.	Delivery of agreed supports as planned	Proportion of funds committed for supports delivered to date that have been claimed.	Yes - insufficient time for meaningful development
1.2.3.	Proportion of participants with a claimed support	Proportion of participants with funded supports in support category that have had at least one claim for payment.	Yes
1.2.4.	Average days from access request to support approval	Days taken from when Access Request is received until initial funded plan is approved.	Yes
1.2.5.	Service provider characteristics and market profile	Market profile of registered providers	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Trends in proportion of participants using different approaches to decision supports	At plan review, proportion of participants who choose to change the way their plan is managed	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
1.3.1.	Trends in proportion of participants using each or a combination of plan management options	Split of plan management options being used by active participants.	Yes
1.3.2.	Access requests made	<p>Number of formal requests for access, with status of request.</p> <p>Statuses are defined as:</p> <p>Closed = Participant initiated exit from the scheme after being found eligible (e.g. deceased, chosen to exit after being found eligible, etc.)</p> <p>Eligible = Person is eligible to be a participant of the scheme.</p> <p>In Progress = Access Request has started, but no decision made yet.</p> <p>Ineligible = Person is not eligible to be a participant of the scheme (out of area, outside age bracket, does not meet disability requirements, etc.)</p> <p>Revoked = Person was previously found eligible, but Agency has revoked the eligibility.</p> <p>Withdrawn = Person withdrew their access request whilst it was in progress.</p>	Yes
n/a	Access requests accepted for funding	Number of eligible access requests that have established plans for funding.	No- Reported in 1.3.2

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
1.3.3.	Reviews of decisions	Number of decisions that have been formally requested to be reviewed. Outcome of reviews are classified as: Affirmed = original decision was maintained; Set Aside = original decision was overturned Pending = review is still underway	Yes
1.3.4.	Total appeals by outcome	Number of appeals submitted. Outcome of reviews are classified as: Affirmed = participant loses appeal; Set Aside = participant wins appeal Pending = appeal is still underway Varied = participant wins appeal Dismissed = appeal is dismissed Withdrawn = participant withdraws appeal	Yes
1.3.5.	Appeals by Category	Number of appeals submitted.	Yes
1.3.6.	Complaints by outcome and average resolution time	Number of complaints submitted by participants, providers, staff, and/or the general community.	Yes
1.3.7.	Complaint type	Number of complaints submitted by participants, providers, staff, and/or the general community.	Yes
1.3.8.	Participant/Carer satisfaction with the Agency and the experience	On a scale of -2 extremely dissatisfied to +2 extremely satisfied, with 0 = neutral, self-reported satisfaction of participants and their carers. "Participant Satisfaction" reports satisfaction of participants with the Agency, and in particular, the planning process. "Experience Satisfaction" reports the overall satisfaction of a participant with their current life experience and outcomes.	Partial - Data is not mature at this time to report Carer Satisfaction

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
2	Financial Sustainability		
n/a	Growth in future commitments	Reports growth in projected liabilities, as per actuarial modelling	No – This measure is currently addressed in the actuarial monitoring report
2.1.1.	Total committed supports	Reports annualised costs of supports committed to be funded for Tier 3 participants.	Partial - system for capturing Tier 2 activities was not implemented for 2013-14
2.1.2.	Total payments (\$, in kind)	Total claims against plans, split by cash and in-kind. Note: This does not represent total expenditure (reported in Measure 2.1.17)	Yes
2.1.3.	Operating Expenses Ratio (% total costs)	Operating Expenses as a proportion of total scheme costs	Yes
2.1.4.	Annualised support package distributions	Distributions of annualised funded support packages against expected.	Yes
2.1.5.	Average length of time from application to commencement of services	Average time from when access request is submitted, to first invoice for support is received by NDIA	Yes
n/a	Management of prudential risk	Reports liabilities and assets of the Agency	Work on an <i>Insurances Principles and Financial Sustainability Manual</i> is underway. This document sets out a prudential governance framework.
2.1.6.	Cash payments to providers and participants, split by support type	Cash payments against plans, split by support type and payee. This does not represent total expenditure (See measure 2.1.17)	Yes
2.1.7.	Real, average and median costs of individual support packages	Reports total expenditure, compared with average and median annualised committed funds	Yes
2.1.8.	Value of and number of approved packages by participant group	Number of plans with approved funding, the total costs committed in those plans, and the average annualised cost of the plans.	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
2.1.9.	Number of participants receiving supports paid for with cash and/or in-kind supports	Number of participants who have had claims against plans. This does not represent total expenditure	Yes
2.1.10.	Ratio of cash to in-kind services by participant group	Ratio supports claimed paid through cash or in-kind arrangements	Yes
n/a	Average cost of supports per assessor	Average value of funds committed in plans per planner	No - insufficient scheme experience for informed adjustment to actuarial model
2.1.11.	Tier 3 participant numbers, and people supported by Tier 2	Reports number of people accessing Tier 3 supports.	Partial - system for capturing Tier 2 activities was not implemented for 2013-14
2.1.12.	Total number of plans developed	Total number of plans that have been developed and approved. This measure includes plans that have now been superseded.	Yes
2.1.13.	Number of plans with single supports	Number of plans approved that only contain a single type of support	Yes
n/a	Current and future funding resources	Current annualised costs of approved plans, and the unannualised committed value of plans	Projections will be provided in the annual financial sustainability report.
n/a	Current expenditure compared to projections	Actual expenditure compared to actuarial projections	Projections will be provided in the annual financial sustainability report.
n/a	Projected expenditure compared to projected revenue	Comparison of projected expenditure to projected revenue	Projections will be provided in the annual financial sustainability report.
n/a	Long term cost trends (population, price and wage growth)	Monitors long term economic assumptions	Projections will be provided in the annual financial sustainability report.
n/a	Average client lifetime cost of support	Average actuarial estimate of individual participants' future cost liabilities.	No - insufficient scheme experience for informed adjustment to actuarial model
n/a	Number of Tier 2 supports with LAC funding and purpose of funding	Number of supports with Tier 2 funding. Note: This is not the same as number of participants - supports are not necessarily attached to individuals	No - system for capturing Tier 2 activities was not implemented for 2013-14

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Average cost of internal reviews	Average cost of administering internal reviews)	No - system is not in place for capturing internal review costs
n/a	Average cost of appeals	Average cost of administering appeals	No - system is not in place for capturing appeal costs for 2013-14
n/a	Proportion of participants with reduced needs after intervention supports	Reports growth in annual committed costs for participants who have had early intervention supports as part of the previous plans.	Analysis of participant's who have received second plans will be included in the financial sustainability report. Note: only a small number of participant's have received second plans. This analysis will become more meaningful as the scheme progresses.
2.2.1.	Proportion of participants with early intervention supports	Proportion of currently approved plans that have supports identified as early intervention supports - included to reduce long term need for lifetime supports	Yes
2.2.2.	Total and average cost of investment in research and innovation	Costs for investment into research and innovation	Yes
3	Community Inclusion		
3.1.1	Proportion of participants accessing mainstream services	Proportion of participants with approved funded supports who are also accessing mainstream supports	Yes
3.1.2	Successful referrals to mainstream services	Reports successful referral to mainstream supports by Local Area Coordinators	Yes
3.2.1	Community awareness activities undertaken within the period	Reports community awareness activities undertaken by LACs	Yes
3.3.1	Community capacity building activities undertaken by LACs within the period	Reports community capacity building activities undertaken by LACs	Yes
3.3.2	Community capacity building activities undertaken by funded NGOs within the period	Reports funding provided to Non-Government Organisations to undertake community capacity building activities.	Yes