

4. NDIA Partners in the Community (PITC) Program

4.1 What is the Partners in the Community (PITC) Program?

Key elements of the Agency's purpose and responsibilities are delivered through the PITC Program, which includes Local Area Coordination (LAC) Services and Early Childhood (EC) Services.

The PITC Program supports the implementation of the NDIS at a local community level. The purpose of the PITC Program is to enable the NDIA to partner with suitably experienced and qualified organisations (Partners), with strong local knowledge and understanding of the needs of people with disability and children with developmental delay (including developmental concerns), to deliver LAC and EC Services. Our Partners are often the primary touchpoint for Participants and their families or carers, making them the face of the Scheme in many communities.

Partners are responsive to the needs of their community and develop tailored outreach strategies to support specific cohorts including culturally and linguistically diverse (CALD), Aboriginal and Torres Strait Islanders, and LGBTIQ+.

The Agency currently delivers the NDIS with the support of 25 Partners across Australia, as part of the PITC Program. Partners support more than 70 per cent of all NDIS Participants with a core focus of connecting Participants and non-Participants with NDIS supports, local community and mainstream supports, and building individual and community capacity. Partners are responsible for delivery of LAC or EC services across designated geographical locations, or service areas. There are currently 72 service areas nationally.

For more detail on current Partner service areas refer to the following website link:

[Understanding the NDIS in each state](#)

4.2 Relationship between the NDIS and Partners

The NDIA and Partners work collaboratively to maximise the benefits of the PITC Program. Partners play a significant role in supporting and promoting the Scheme and the Agency in the community. Accordingly, Partners are required to ensure that their organisational structure, governance and policies, and the conduct of Partner personnel, are consistent with the NDIA and wider [APS culture and values](#).

Participant Service Charter

The [Participant Service Charter](#) sets out how the NDIA and our Partners will work with and support Participants, and explains what Participants, their families and carers can expect when they deal with us.

The Participant Service Charter is based on five engagement principles:

- transparent;
- responsive;
- respectful;
- empowering; and
- connected.

The Charter also includes timeframes, called the Participant Service Guarantee.

The Agency and Partners will work together to ensure Partner services are delivered in a manner consistent with the Participant Service Charter, and to support the achievement of timeframes under the Participant Service Guarantee.

You can find further information about our commitment to Participants at this website link:

[Commitment to Participants](#)

Partners support the NDIA by remaining flexible in their approach and adapting to the changing requirements of the NDIS. Partners are required to balance work effort as necessary when delivering services for the NDIA to achieve the Scheme objectives.

As the Scheme continues to mature and evolve, the NDIA will work collaboratively with its Partners to respond to lessons learned and improve services to meet Participant and non-Participant needs and support the long-term sustainability of the NDIS.

The following sections provide a more detailed explanation of important elements of the PITC Program and key services the NDIA would seek Partners to deliver in the future PITC program. Existing Partners will recognise many aspects of the services described below, however, it is anticipated that there will be some amendments to the PITC program moving forward.

4.3 PITC Program – Early Childhood Approach

Early Childhood (EC) Approach

Evidence-based research reveals that timely access to best-practice early childhood intervention can improve the functional capacity and well-being of a child with a developmental delay (including developmental concerns) or disability, and their family. The EC approach is designed to deliver better long-term outcomes for children and their families or carers and to contribute to greater NDIS sustainability, reduce lifetime costs and build the capacity of the mainstream system. Early intervention can also benefit the wider society in a variety of ways, including reduced incidents of exclusion from school, longer term increased levels of employment and significantly reduced impacts of social isolation.

In line with evidence-based best practice, the EC Approach currently provides a range of flexible and responsive supports for children under seven years of age. It focuses on their individual needs and is delivered using family-centred practices in a child's natural setting, such as in the family context, preschools and playgroups. This approach supports greater inclusion for children with developmental delay (including developmental concerns) by

building on family strengths and growing the capacity and awareness of mainstream and community services to support children with developmental delay (including developmental concerns) or disability.

As an outcome of a recent review of the EC Approach (EC Reset), the NDIA is looking to shift the EC age group to support children under nine years¹ of age going forward. More information on the EC Reset Project can be found at the below website link:

[How we're improving the way we support young children and their families](#)

The EC Approach is designed to deliver better long-term outcomes for children and their families or carers and to contribute to greater NDIS sustainability, reduce lifetime costs and build the capacity of the mainstream system. It emphasises the importance of accurate and timely information from a wide range of sources to enable families or carers to make appropriate decisions about their child and to gain more control over their lives.

Critical Functions of the EC Program

The NDIA is seeking to engage with Early Childhood Partners who can deliver the program in a manner that provides children and families or carers with timely, comprehensive and well-integrated early intervention supports that build towards better longer-term outcomes for children by fostering inclusion and participation in their environment. It is envisaged that the following services will be provided by Early Childhood Partners.

EC in the Community

Function 1: Community Capacity Building

- Early Childhood Partners work at the local community level to strengthen and enable the broader community to welcome and include children with developmental delay (including developmental concerns) and disability and their families or carers.
- Early Childhood Partners raise awareness in the community about developmental delay (including developmental concerns) and disability. They also build the skills and capacity of mainstream and community services, such as early education and care services, to support the inclusion of all children, remove barriers and create opportunities for meaningful participation.
- Early Childhood Partners work with children and their families or carers to identify gaps and barriers to participation in their community. They work together to prioritise action areas for inclusion and co-design solutions for their community.
- Early Childhood Partners encourage innovative solutions and work to support education and care services, family support services, sporting, and recreation and community services to adopt more inclusive policies and practices that support the engagement of children with developmental delay (including developmental concerns) and disability and their families or carers.

¹ Under the current PITC Program, Early Childhood Partners support children under 7 years. In line with EC Reset recommendations, it is proposed that as part of the future PITC Program, Early Childhood Partners will support children under 9 years.

- Early Childhood Partners seek feedback on inclusion initiatives and work with community stakeholders to build sustainable community solutions.
- Early Childhood Partners work to amplify the voices and leadership of families or carers of children with developmental delay (including developmental concerns) and disability, to influence change.
- Early Childhood Partners tailor their approach to their communities and individualise how they might connect with children and families or carers.

Function 2: Community Engagement

- Early Childhood Partners promote community awareness of the early childhood approach and best practice principles to early childhood intervention.
- Early Childhood Partners identify key community stakeholders. They proactively engage with community leaders, groups, organisations, local government, mainstream services, and businesses to build relationships of trust.
- Early Childhood Partners share information with stakeholders to raise awareness and provide education about developmental delay (including developmental concerns) and disability, accessibility, inclusion and other issues that matter the most to children and their families or carers.
- Early Childhood Partners leverage community resources and draw together individuals and organisations who can contribute to change and act to create more inclusive and welcoming communities.
- Early Childhood Partners support the development of collaborative working relationships with and between families and carers of children with developmental delay (including developmental concerns) and disability, peer networks, community groups and mainstream services. Early Childhood Partners encourage and strategically assist families or carers of children with developmental delay (including developmental concerns) or disability to assume leadership roles in their community.

Function 3: Information Provision

Early Childhood Partners deliver the following supports to families or carers of children with developmental delay (including developmental concerns) or disability:

- Early Childhood Partners deliver information sessions and parent workshops about the Early Childhood Approach, childhood development and supports and strategies that could be included in a child and family or carer's everyday routines. They also provide information about programs and services offered by mainstream and community supports that are available to families or carers.
- Early Childhood Partners provide families or carers with individualised, practical information that's relevant to their child's individual support needs. This may include practical advice on child development and helpful strategies that could be included in a child and family or carer's everyday routines.

- Early Childhood Partners play an important role in supporting families or carers to have access to accurate, timely and accessible information to make decisions and choices about their child's life.
- Early Childhood Partners use their local knowledge to offer personalised information to families or carers about the supports and opportunities available to support their family and child's needs in the wider community.

Function 4: Assessment and Information Gathering

- Early Childhood Partners are early childhood professionals who use observations of child development, assessment and screening tools, observations from professionals, and most importantly information from families or carers about their child to determine the right type of support for a child and family.
- Early Childhood Partners help children and families or carers connect to and find the right supports. This can include connection to mainstream and community services, provision of short-term early intervention if a child has developmental concerns, or support to assist families or carers to apply to the NDIS on the child's behalf.

Function 5: Developing Goals and Aspirations

- Early Childhood Partners develop trusting relationships with children and their families or carers. They recognise families or carers as the experts on their child's needs and take time to listen to their stories and develop a shared understanding of what life looks like for their child and family.
- Early Childhood Partners collaborate with families or carers to consider their goals and aspirations for their child and family using a strengths based approach. They ask future-focused questions about what a good life would mean for their child and family and what it would take for them to get there.
- Early Childhood Partners support families or carers to identify and prioritise steps to work towards goals for their child. These steps are then broken down in to practical actions which early childhood partners can assist to implement.
- Early Childhood Partners support children and families or carers to take steps towards achieving their goals using natural networks of support, community and mainstream connections, and if applicable, early childhood intervention or NDIS funded supports.

Function 6: Connecting to Supports

- Early Childhood Partners make sure families or carers get the right supports and services to help with their child's individual needs. Initial supports are available when families or carers have concerns about their child's development, or if a child has a disability.
- Early Childhood Partners make recommendations about what initial supports are best for a child and family's individual needs. They also provide quick access to supports that meet children's individual needs.

- Early Childhood Partners build on family or carers' strengths and capacity to support them in helping their child to develop the skills needed to be included in everyday activities.
- Early Childhood Partners work to understand the current support networks and mainstream and community connections in the lives of children and families. Early Childhood Partners understand that although families or carers may have information about existing supports in their community, they may need assistance to understand information, broaden their connections, access services and navigate service systems to support their child's participation and inclusion.
- Early Childhood Partners have strong community connections. They help children and their families or carers to connect and participate in mainstream or community services, including early childhood educational services, schools, health services, community health services and family support services.
- Early Childhood Partners will receive referrals from health, education and mainstream services who have identified children with developmental delay (including developmental concerns) or disability. Early Childhood Partners will be a source of general information for families or carers about supports available in their local community.
- Early Childhood Partners connect children and families or carers to local support networks and services in order to meet other families with similar experiences or situations.
- Early Childhood Partners provide assistance to NDIS Participants to find and connect with service providers. They offer support to access and use the MyPlace portal, make service agreements, create service bookings, review plan utilisation and assist the Participant to resolve service and payment issues.
- Early Childhood Partners follow up supports to ensure that ongoing connections are suitable and beneficial.

Function 7: Individual Capacity Building

- Early Childhood Partners encourage families or carers to reflect on their capacity and their child's capacity, environment, connections and use of service systems.
- Early Childhood Partners follow the principles of best practice in early childhood intervention to develop the skills and capacity of mainstream services and if applicable, implement early childhood intervention strategies.
- Early Childhood Partners deliver early childhood intervention strategies by employing suitably qualified allied health professionals or educators to help children and family or carers build their skills and participate in everyday activities and routines.
- Early Childhood Partners support children and families or carers to prepare for significant transitions, such as starting school or preschool.
- Early Childhood Partners provide connection to programs and services offered by mainstream and community services about childhood development and early childhood intervention programs.

- Early Childhood Partners increase the opportunity for families or carers to access relevant information and build their knowledge to make independent and informed decisions. They also play a role in assisting families or carers to build their independence in communicating their child's needs and preferences to others.
- Early Childhood Partners support children and families or carers to embed themselves in their local community and take on a more active role in leading, shaping and influencing their community.
- Early Childhood Partners increase the opportunity for families or carers to exercise choice and control in their child's support needs and how they want to live their lives as a family.
- Early Childhood Partners support families or carers to understand the Early Childhood Approach and if required, strengthen their capacity for self-management of NDIS funds and connection to best practice early childhood providers of supports.

Function 8: Monitoring and Check-ins

- Early Childhood Partners follow up supports and check in to review and monitor progress towards a child's goals. They ensure that the community, mainstream and NDIS funded services are working towards outcomes and meeting the needs of children and their families or carers.

Function 9: Scheme Access Support

- Early Childhood Partners identify where a child with developmental delay or disability could meet the requirements for becoming a Participant of the Scheme. They provide individualised support to families or carers to understand and navigate the NDIS access process.
- If a child transitions from initial supports to become an NDIS Participant, Early Childhood Partners use information gathered about goals, assessments, and connections with community and mainstream supports to help families or carers create an NDIS plan for their child.
- If a child is eligible for the NDIS, Early Childhood Partners provide assistance to families and carers to access and use the MyPlace portal, make service agreements, create service bookings, review plan utilisation and resolve service and payment issues.

Function 10: Building plans for NDIS Participants

- Early Childhood Partners assist NDIS Participants by developing a plan budget that includes reasonable and necessary funded supports, based on the individual goals and aspirations of the family, child and carer.
- Early Childhood Partners assist NDIS Participants by developing a plan budget, based on the individual goals and aspirations of the Participant.
- This includes completing the Participant's statement of supports using the typical support package with reference to the *National Disability Insurance Scheme Act 2013 (Cth)*

(**NDIS Act**) and NDIA Operational Guidelines relating to preparing a statement of supports that are reasonable and necessary.

- Early Childhood Partners will also provide a recommendation on how funds in the plan are to be managed, and review and submit the plan, including the reasonable and necessary declaration, for approval by an NDIA delegate.

For all functions, it is anticipated that Early Childhood Partners will:

- Adopt a capacity building approach as a fundamental tenet of the early childhood approach to guide children and families or carers through their interactions with the NDIS and to build their confidence for increased independence, choice and control;
- Deliver support that is aligned with the current evidence base that underpins the Early Childhood Approach;
- Adopt a flexible approach to the delivery of the Early Childhood Approach to support the individual needs of children and families or carers using evidence-based, best practice approaches.

4.4 PITC Program – LAC Services

In accordance with the key pillars of the Scheme, the NDIA recognises that it must strengthen voluntary links between the community and people with disability to stimulate social capital, with the goal of increasing existing formal and informal support networks and access to community and mainstream services.

The principles underpinning the LAC approach emphasise concepts of the natural authority of people with disabilities and their families and carers, and the importance of accurate, timely and independent information from a wide range of sources to enable people to make appropriate decisions and to gain more control over their lives.

Critical Functions of the LAC Program

The NDIA is seeking to engage with LAC Partners who can deliver the program in a manner that is aligned to the foundational practices of the Local Area Coordination Model. That is:

- place-based;
- relationship-based;
- person and community centred;
- outcomes focussed; and
- strengths-based.

LAC is an innovative approach to better include people with disability in society and support them to have valued and quality lives. The approach has a strong focus on increasing choice and control for people through a person and family centred approach. LAC assists people to draw support from their communities by working to increase both the capacity of individuals and families and the capacity of communities and other government services.

Developing a vision for a 'good life' is a personal and individual matter but it usually includes:

- opportunities for valued relationships;
- contribution to home, family and community life;

- choice and control;
- security and a positive vision for the future;
- challenge and opportunities for learning and sharing gifts or skills; and
- developing and increasing self-sufficiency/independence.

LAC connects fundamental beliefs about how people with disability and/or their families should be able to live in society with practical ways for achieving their vision for a good life.

It is envisaged that LAC Partners will deliver supports across the following Functions.

LACs in the Community

Function 1: Community Capacity Building

- LACs work at the local community level, to strengthen and enable the broader community to welcome and include people with disability as full citizens.
- LACs work with people with disability and their families to identify gaps and barriers to participation in the community. They work together to prioritise action areas for inclusion and co-design solutions for their community.
- LACs work to amplify the voices and leadership of people with disability in influencing change.
- LACs identify community assets and work with people with disability to strengthen and leverage these resources, in order to remove barriers and create opportunities for meaningful participation.
- LACs encourage innovative solutions and work to support places of employment, education, sport and recreation and community services to adopt more inclusive policies and practices that support the engagement of people with disability.
- LACs seek feedback on inclusion initiatives and work with community stakeholders to build sustainable community solutions.

Function 2: Community Engagement

- LACs identify key community stakeholders. They proactively engage with community leaders, groups, organisations, local government, mainstream government services, and businesses to build relationships of trust.
- LACs share information with stakeholders to raise their awareness of disability, accessibility, inclusion and other issues that matter the most to people with disability.
- LACs encourage and strategically assist people with disability and their families to assume leadership roles in their community.
- LACs leverage community resources and draw together individuals and organisations who can contribute to change and act to create more inclusive and welcoming communities.
- LACs support the development of collaborative working relationships with and between people with disability, peer networks, community groups and mainstream services.

- LACs promote community awareness and understanding of the NDIS.

LAC supporting people with disability, their families and carers

Function 3: Information Provision

- LACs play an important role in supporting people with disability and their families to have access to accurate, timely and accessible information to make decisions and choices about their lives.
- LACs use their local knowledge to offer personalised information to people with disability about the supports and opportunities available to them in the wider community.
- LACs also communicate information about programs and services offered by mainstream supports that are available to people with disability, such as education, health, housing and transport services.

Function 4: Information Gathering

- LACs support people with disability to gather the information they need to navigate the NDIS, including any relevant assessments, information 'About me', understanding existing circles of support, and any support required to complete any questionnaires provided by the NDIA.
- LACs support NDIS Participants to navigate and prepare for their First Plan or Plan Review meetings, including completing the relevant fields in the NDIS Business System.

Function 5: Developing Goals and Aspirations

- LACs supporting people with disability to consider what a good life means to them, develop a vision for their future and work towards their goals.
- LACs develop trusting relationships with people with disability. They recognise people with disability as the experts in their own life and take time to listen to their stories and develop a shared understanding of what life looks like for them and how they feel about it.
- LACs collaborate with people with disability to consider their goals and aspirations using a strengths-based approach. They ask future-focused questions about what a good life would mean for people with disability and what it would take for them to get there.
- LACs support people with disability to identify and prioritise steps to work towards their goals. These steps are then broken down in to practical actions which LACs can assist to implement.
- LACs support people with disability to take steps towards achieving their goals using natural networks of support, alongside local community connections, mainstream services and, if applicable, funded supports.

Function 6: Connecting to Supports

- LACs offer assistance to link people with disability and their families to relevant community, mainstream and funded supports. LACs offer individualised support that is centred on the needs of the person with disability. They understand that although people with disability may have information about existing supports, they may need assistance to understand information, make connections, access these services and navigate service systems.
- LACs recognise the importance of natural networks and existing relationships for people with disability. They work to strengthen connections between people with disability and their family, friends, neighbours, work colleagues, social and study interests as well sporting and recreational pursuits.
- LACs support people with disability and their families to connect to programs and opportunities offered in their local community such as those offered in neighbourhood houses, local council, libraries, recreational centres, sporting and social clubs and philanthropic organisations. They also support people with disability to connect to wider mainstream services such as those available through the education, health and housing sectors.
- LACs offer follow up support to ensure that ongoing connections are successful.
- LACs provide assistance to NDIS Participants to find and connect with service providers. They offer support to access and use the MyPlace portal, make service agreements, create service bookings, review plan utilisation and assist the Participant to resolve service and payment issues.

Function 7: Individual Capacity Building

- LACs protect the rights of people with disability. They support people with disability to feel safe, confident about their future and living full lives of belonging and citizenship by working with people and their families to assess risks, vulnerabilities and challenges to their safety and wellbeing.
- LACs encourage people with disability and their families to reflect on their capacity, environment, connections and use of service systems.
- LACs increase the opportunity for people with disability to exercise choice and control in how they want to live their lives and support people to consider opportunities for self-direction and self-management.
- LACs support people with disability to develop their capacity to access relevant information and build their knowledge to make independent and informed decisions. They also play a role in assisting people with disability to build their confidence in communicating their preferences to others.
- LACs support people with disability to embed themselves in their local community and take on a more active role in leading, shaping and influencing their community.

- LACs support NDIS Participants to build their understanding of how NDIS funding can be managed and strengthen their capacity for self-management of NDIS funds and supports.

Function 8: Monitoring and Check-ins

- LACs offer follow up support and check-ins to review and monitor progress towards goals. They ensure that the community, mainstream and funded services are working towards outcomes and meeting the needs of the person with disability and their family.

Function 9: Scheme Access Support

- LACs assist people with disability who may be eligible for the NDIS to understand the eligibility criteria and access process.
- LACs provide individualised support to people with disability, their families and carers to navigate the NDIS access process.

Function 10: Building plans for NDIS Participants

- LACs assist NDIS Participants by developing a plan budget, based on the individual goals and aspirations of the Participant.
- This includes completing the Participant's statement of supports using the typical support package with reference to the NDIS Act and NDIA Operational Guidelines relating to preparing a statement of supports that are reasonable and necessary.
- LACs will also provide a recommendation on how funds in the plan are to be managed, and review and submit the plan, including the reasonable and necessary declaration, for approval by an NDIA delegate.

For all functions, it is anticipated that the LAC Partner will:

- Adopt a capability building approach as a fundamental tenet to guide individuals and families or carers through their interactions with the NDIS and to build their confidence for increased independence, choice and control;
- Operate and deliver support that is aligned with the current evidence base that underpins the LAC model;
- Build on existing capabilities and resources to build individual, family or carer capacity to engage with social and economic activities and thereby reduce NDIS supports over the long term; and
- Ensure that the NDIS is delivered in a way that achieves and improves outcomes for people with disability.

4.5 Partner Personnel Requirements

Ideally, the NDIA is seeking to engage Partners:

- Have appropriately skilled and experienced staff:

- at a ratio of staff to active Participants that enables an individualised, flexible and efficient response;
 - who can provide all required supervision, coordination, analysis, administration and senior engagement with NDIA staff and external stakeholders;
 - with lived experience of disability and/or relevant qualifications and/or demonstrated work experience in the human services sector e.g. disability, child services, allied health, social work, community development, educators;
 - that are based in, and or the local community;
 - from a diverse range of backgrounds at a ratio representative of the community in which they work.
- Under the Early Childhood Approach, Partners are required to employ appropriately qualified allied health professionals and educators for the delivery of early intervention strategies to children under the age of six;
 - Are able to deliver services in accordance with the NDIS Act, NDIS Rules, and NDIA policies, guidance, and systems.

4.6 Partner Tools and Resources

It is proposed that the following tools and resources will be provided to Partners to support the provision of services:

- The NDIA will provide training packages and support to the Partner, including training:
 - that incorporates content provided which must be used by Partners;
 - for managing administrative processes associated with the supply of Services under the agreement (including the use of NDIA IT Systems); and
 - for providing Services to different cultural groups, including Aboriginal and Torres Strait Islander people.

4.7 Other Requirements

Transition to a better NDIS

To improve the NDIS, the NDIA is introducing a series of improvements. These improvements are informed by consultation with the disability sector and key stakeholder groups. The NDIA anticipates making a number of improvements in relation to the PITC program. These are discussed in more detail in the following pages.

For Partners, planned improvements enable a gradual move away from work effort currently associated with Function 10 described above, to providing support through information and connection to community and mainstream supports, delivery of short-term early intervention for children with developmental concerns, investing in individual and community capacity building and having the time and skills to develop relationships to support delivery of a quality service. The planned changes will allow more time to assist participants to use their plans and progress towards their goals and achieve outcomes.

The NDIA has recently undertaken a review of the Early Childhood Approach. This review is referred to as the 'EC Reset' and builds on the existing national approach, to ensure the provision of a world leading model that delivers evidence based, high quality and timely supports to young children and families. Partners are expected to continue developing their practice in accordance with the EC Reset Recommendations. More information on the EC Reset Project can be found at the below website link:

[EC Reset Project Update](#)

Contract Duration

The NDIA is currently giving consideration to extending the term of Partner contracts under the future PITC program to a term of five years (plus one two-year extension option) to facilitate the effective implementation of Scheme improvements, provide security for Partners to build short to medium term operational delivery strategies and encourage workforce stability.

Conflict of Interest Policy for NDIS Registered Providers

Disability supports and services funded through the NDIS are largely delivered by Registered NDIS Providers and are subject to regulation by the NDIS Quality and Safeguards Commission.

Under the PITC Program, Partner organisations are not able to provide LAC and/or EC Services in a service area/s if the organisation, its subcontractors, or any related companies are also a Registered NDIS Provider in the same service area/s.

The NDIA's position on the eligibility of Registered NDIS Providers to apply to deliver PITC services is grounded in the person-centric approach of the NDIS, and the rights of the person to exercise choice and control.

Partners work closely with Participants, their families and carers which places them in a position of influence which may, or may be seen to, impinge on a Participant's choice and control.

To minimise this influence, the NDIA's position is that there should be a clear separation between a PITC Partner and a Registered NDIS Provider.

In the current delivery of the PITC Program, organisations must either:

- cease to deliver Registered NDIS Provider services in the service area/s where they provide LAC and/or EC Services; or
- submit an application to the NDIA to continue the delivery of Registered NDIS Provider services in a service area/s due to exceptional circumstances.

There is no simple definition of what amounts to 'exceptional circumstances'. The NDIA will assess any claims that exceptional circumstances exist as part of the future PITC Program on a case by case basis.

This position may be subject to review prior to any future approach to market.

5. Feedback - Have your say

The NDIA is particularly interested in feedback from interested organisations, and the broader sector, on the following:

- extension of PITC Partner support into some remote communities;
- ways to improve the delivery of services for specialist cohorts;
- proposed funding model to support flexible response to participant needs; and
- other general feedback relating to this information paper.

The information contained in the sections below, provides more detailed insight into these topics. An online feedback form is available [at this link](#) and a template is included at **Appendix A** for your reference. Organisations are asked to submit their responses via the online feedback form only.

Please note your responses may be used to inform the future development of the PITC program.

This information paper is not an approach to market (ATM) for the purpose of the Commonwealth Procurement Rules.

The NDIA intends to publish a summary of market feedback in December 2021. Any feedback received will be de-identified before inclusion in this summary.

5.1 Expanding PITC Program to some Remote Communities

The NDIA is committed to ensuring all Australians have the opportunity to access the NDIS, regardless of where they live. Acknowledging there are a range of challenges that come with providing services to some of the country's most geographically isolated areas, the NDIA is interested in understanding a range of options that could be used to help expand its service delivery into these remote communities.

We would like to hear from organisations about their interest and capacity to deliver PITC services in remote areas. It is important to note that no decision has been made about the NDIA's future approach for delivery of the PITC Program into remote communities. Feedback received may be used in conjunction with wider consultation activities that will inform a potential refresh to the NDIA's delivery and operations in remote communities.

For the purpose of this paper, remote and very remote communities are classified as MMM6 and MMM7 ([Modified Monash Model](#) - Modified Monash Model | Australian Government Department of Health).

Statement on the Rural and Remote Strategy 2016-2019

The 2016–2019 NDIA Rural and Remote Strategy (Strategy) was developed to guide the roll out of the NDIS in rural and remote Australia during transition. The Strategy recognised that people with disability in rural and remote Australia, including Aboriginal and Torres Strait Islander people, might require additional support to access the NDIS, receive an NDIS plan and use their supports. As at 31 March 2021, 6,664 people with disability living in remote and very remote locations were receiving NDIS support, an increase of 342 per cent over the past three years.

The NDIA has announced that we are [reviewing the Strategy](#) and will develop a position statement on remote service delivery in 2021-22 to further enhance the NDIS experience and outcomes for people with disability and children with developmental delay (including developmental concerns) living in remote Australia.

Further, the NDIA has released a [progress update](#) on the Aboriginal and Torres Strait Islander Engagement Strategy detailing the Agency's key activities over the past four years against the 10 priority areas identified in the Strategy. The update also articulates additional actions to drive the Aboriginal and Torres Strait Islander Engagement Strategy over the next 18 months.

Current PITC Program coverage and opportunity for expansion

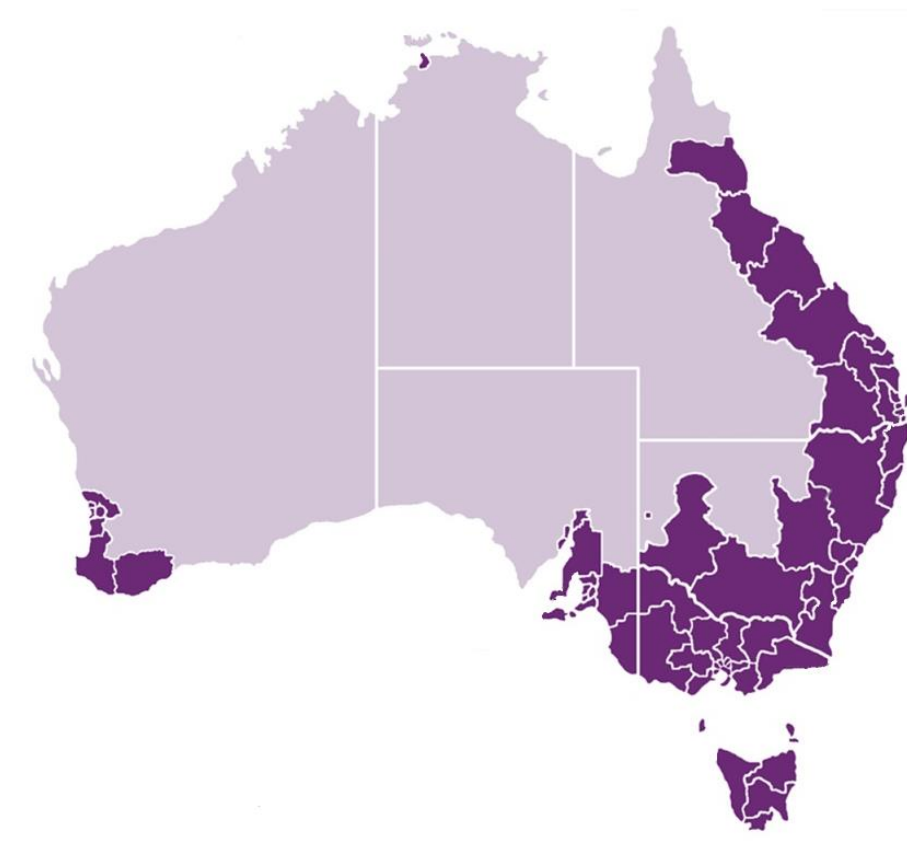
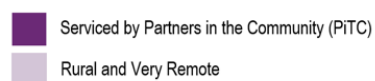
The PITC Program is currently offered in 72 service areas across Australia, excluding those areas classified as greater than 50 per cent remote or very remote (MM6 and MM7 classification). The NDIA is reviewing this 50 per cent threshold with the view that coverage could be expanded to communities beyond these areas **[See Figure 1]**. Further information about current Program coverage is also available on the [NDIS Website](#).

The NDIA is considering a number of factors to determine suitability for the expansion of the PITC Program to remote areas, including:

- General population and population density;
- Number of Persons with a disability ([ABS Data by Region](#));
- Number of active Participants ([NDIS Interactive Data Tool](#));
- Thin market considerations including number of NDIS Registered Providers of Supports ([NDIS Interactive Data Tool](#));
- Existing community infrastructure (NGOs and other government programs).

The NDIA acknowledges that local context and situations vary between different remote communities and is therefore seeking feedback from the market as to the suitability of the PITC Program in specific locations.

Figure 1 – indicates the service areas where the PITC program is currently delivered.



Points for consideration regarding Partner Coverage

Some of the points we are asking organisations to consider when providing feedback via the online feedback form found [at this link](#), include:

1. What is your organisation's interest in delivering the PITC Program in remote communities/your remote community?
2. Which of the PITC Program functions (described under sections 4.3 and 4.4 above) does your organisation have the capability and capacity to deliver in remote communities?
3. What current experience and capability does your organisation have in remote delivery?
4. Does your organisation have existing networks in remote communities/your remote community that could be leveraged in delivering PITC services?
5. Which service delivery models would/does your organisation use/consider to deliver services to remote communities/your remote community?

6. Are there gaps and challenges your organisation experiences/anticipates in remote delivery that would require a level of further support from the NDIA?
7. Would the introduction of Remote/Very Remote Coverage impact your cost model and to what aspects of your service model (e.g. travel time and travel costs, penalty rates, loading etc.)?
8. How could your organisation facilitate earlier access to services for those who would benefit most from early childhood intervention in remote areas (children with developmental delay (including developmental concerns) or disability)?
9. How could your organisation meet the diverse needs of people living in remote areas, including but not limited to cultural and linguistic diversity (with a strong emphasis on multiple Australian Indigenous languages) and cultural sensitivity/community connection for First Nations people?
10. In addition to the factors discussed in Section 5.1 above, are there other factors that the NDIA should be considering to determine opportunity for the expansion of the PITC Program?
11. Please indicate the remote and very remote (MMM 6&7) localities that you currently have a presence in, are interested in expanding to, or have existing networks in (select current/interest/network for each).

5.2 Specialisation

Our Partners are often the primary touchpoint for Participants, making them the face of the Scheme in many communities. A key design feature of the PITC Program is the emphasis on building trusting relationships and getting to know people with disabilities and children with developmental delay (including developmental concerns) in the context of their family, friends, culture and community, and being based in and connected to the local community.

Through recent consultation and feedback, Scheme Participants have told us that understanding of their disability is an important part of building a trusted relationship. In response to this feedback, the NDIA is seeking to further diversify the Partner workforce skillset and increase alignment to specific customer cohorts.

While it is recognised that the current PITC Program in general offers value-add services for a large proportion of customer cohorts, examples of opportunities for further specialisation include the following cohorts:

- Culturally and linguistically diverse communities (CALD);
- People identifying as LGBTIQ+;
- Specific disability groups;
- Aboriginal and Torres Strait Islander communities; and
- Rural and remote communities.

Under the future PITC program, it is anticipated that Partners will consider options and innovations to maximise the availability of staff with disability or cohort specific knowledge that can be aligned to meeting the needs of a broad range of customers.

Points for Consideration regarding Specialisation

Some of the points we are asking organisations to consider when providing feedback via the online feedback form found [at this link](#), include:

1. Which PITC Program functions would your organisation be interested in applying an increased focus on specialisation?
2. Which cohorts would your organisation be interested in applying/providing an increased focus on specialisation?
3. Please indicate which mechanisms your organisation is likely to consider in meeting customer preferences regarding specialisation of services.
4. If your organisation is entirely specialised (e.g. disability type, Aboriginal and Torres Strait Islander, CALD), what are your preferences for supporting specialisation in the PITC program?
5. Are there other ideas that the NDIA should be considering to enhance the specialisation of PITC services?

5.3 Funding Model

Background

Historically, the NDIA has funded the Program through a grant-based model. This approach relied on Agency forecasts to predict volumes and work effort, with payments made to Partners in advance on a fixed, monthly basis, with periodic acquittals.

During NDIS transition, Partners were required to deliver services during periods of fluctuation in workflow. This included being responsive to transition arrangements for state and Commonwealth programs, responding to individual Participant needs and to higher than expected volumes of new Participants entering the Scheme.

Increased stability in requirements and workflow as the Scheme moves beyond transition now provides an opportunity for the NDIA to align contractual and funding mechanisms to meet Program outcomes.

Current Challenges

There are known issues with the current funding model. These include:

- Partners have reported challenges in managing the delivery of the full scope of services, given additional volumes and work requirements;
- the current model does not incentivise innovation or efficiency;
- there is a lack of flexibility to respond to unexpected variations in workflow and volumes;

- there is a lack of transparency for specific work types, and reduced ability for the Agency to report on return on investment from the Program; and
- the grant-based model requires completion of acquittals, which creates additional administration for Partners.

Proposed PITC Program Funding Model

This information is designed to give organisations an opportunity to provide feedback to the Agency on the proposed funding model.

To support development of a revised funding model, the NDIA has conducted a review of other similar programs.

Improvements to the funding model are proposed to:

- increase innovation that leads to improved Participant outcomes;
- improve flexibility of service delivery;
- reduce administrative burden for Partners;
- improve operational efficiencies, facilitating program and market sustainability;
- increase transparency of performance; and
- increase the ability of the NDIA to measure improved outcomes for Participants from the Program.

Key features of the proposed funding model under consideration for the future PITC Program include:

- Funding service provision using a part-fixed, part-variable model. **Tables 1 - 6** below provide an overview of the proposed fixed and variable components, and associated LAC and EC Functions;
- Payment terms under a revised funding model may include a shift to payment in arrears;
- Variable funded items may be paid at either of two points:
 - upon initiation of service; or
 - upon completion.
- Work items will be costed based on a fee schedule;
- Invoices will include work effort to deliver fixed and variable services, as per verifiable data extracted from the relevant NDIA Business System (which is accessible by both the NDIA and the Partner);
- Funding items noted as fixed are entirely fixed with no variable component;
- The NDIA recognises the importance of balancing the perceived risk to Partners, while maintaining adequate incentives for innovation and efficient service delivery. It

is intended that the fixed payment component would provide funding certainty to Partners throughout the course of the contract.

Proposed LAC Fee Schedule

Table 1 - Services for Scheme Customers² 9 years and over

ID	Work item	LAC Functions	Modality
1.1	Community Capacity Building and Engagement	Function 1: Community Capacity Building Function 2: Community Engagement	Fixed
1.2	General Information Provision and Front of House Services	Function 3: Information Provision	Fixed
1.3	Substantive / Ongoing Services for Customers	Function 4: Information Gathering Function 5: Developing Goals and Aspirations Function 6: Connecting to Supports Function 7: Individual Capacity Building Function 8: Monitoring and Check-ins	Variable
1.4	Access requests	Function 9: Scheme Access Requests	Fixed

Table 2 - Services for Scheme Participants aged 9 years and over

ID	Work item	LAC Functions	Modality
2.1	First Plan	Function 4: Information Gathering Function 5: Developing Goals and Aspirations Function 10: Building plans for NDIS Participants	Variable
2.2	Plan Implementation	Function 6: Connecting to Supports	Variable
2.3	Monitoring and Check Ins	Function 8: Monitoring and Check-ins Function 4: Information Gathering Function 5: Developing Goals and Aspirations	Variable
2.4	Plan Variation (Plan Review)	Function 4: Information Gathering Function 5: Developing Goals and Aspirations Function 10: Building plans for NDIS Participants	Variable

Table 3 - Establishment Costs

ID	Work item	Modality
5.1	Establishment Costs	Fixed

² *Scheme Customers refers to individuals with a disability who are not yet, or who are not eligible to become NDIS Participants.

Proposed EC Fee Schedule

Table 4 - Services for Scheme Customers under 9 years

ID	Work item	EC Functions	Modality
3.1	Community Capacity Building and Engagement	Function 1: Community Capacity Building Function 2: Community Engagement	Fixed
3.2	Initial Supports and Initial Assessment	Function 3: Information Provision Function 4: Assessment and Information Gathering	Fixed
3.3	Short-Term Early Intervention (under 7 years)	Function 5: Developing Goals and Aspirations Function 6: Connecting to Supports Function 7: Individual Capacity Building Function 8: Monitoring and Check-ins	Variable
3.4	Access Requests	Function 9: Scheme Access Support	Fixed

Table 5 - Services for Scheme Participants under 9 years

ID	Work item	EC Functions	Modality
4.1	First Plan	Function 4: Assessment and Information Gathering Function 5: Developing Goals and Aspirations Function 10: Building plans for NDIS Participants	Variable
4.2	Plan Implementation	Function 6: Connecting to Supports	Variable
4.3	Monitoring and Check Ins	Function 8: Monitoring and Check-ins	Variable
4.4	Plan Variation (Plan Review)	Function 4: Assessment and Information Gathering Function 5: Developing Goals and Aspirations Function 10: Building plans for NDIS Participants	Variable

Table 6 - Establishment Costs

ID	Work item	Modality
5.1	Establishment Costs	Fixed

The PITC Program will be delivered within a defined program budget over the course of the contract term. The NDIA and Partners will work together to ensure provision of services is appropriate to the volumes and demand. If demand is significantly less than estimated over a defined period of time, the Partner will work with the NDIA to implement strategies to reinvest in enhancements within the Program.

The NDIA may consider some variations to the funding model for NDIS services delivered in remote areas.

There are some features of the current funding model that will be retained:

- Establishment costs – the NDIA will reasonably fund the capital costs to scale businesses to deliver Early Childhood and/or Local Area Coordination services; and
- Delivery of community capacity building will continue to be paid as a fixed fee monthly payment.

Based on the outcomes of market feedback, the proposed funding model is subject to change.

Points for consideration regarding the proposed funding model

Some of the points we are asking organisations to consider when providing feedback via the online feedback form found [at this link](#), include:

1. After reading this information on the key features of the proposed PITC funding model, how has your level of interest in delivering Early Childhood and/or Local Area Coordination services changed?
2. Please indicate which feature(s) of the proposed funding model may be a barrier to your organisation delivering Early Childhood and/or Local Area Coordination Services (select multiple).
3. Do you perceive a risk to your organisation due to the part-fixed/ part-variable model, which would deter you from considering future involvement in the PITC program?
4. Please indicate what changes your organisation believes may improve the proposed PITC program funding model.

6. Next Steps

The NDIA invites all interested organisations to review the information contained in this paper and provide written feedback via the [online feedback form](#).

You may also register your interest to attend one of our online engagement sessions. Online sessions will be held with interested organisations to gather feedback on the proposed funding model, extending Partner coverage to some remote areas, and ways for improving specialisation of services for the PITC program.

Feedback from the survey and engagement sessions may be considered in the development of the future PITC Program, prior to a future sourcing activity in early 2022.

Following completion of market engagement activities, a summary of feedback will be shared with the market in December 2021.

7. Glossary

Term	Definition
Access	Term used when eligibility for the NDIS is confirmed as a result of meeting the Access criteria set out in the Act and Rules.
Culturally and Linguistically Diverse (CALD)	People from other cultures outside Australia, or people who speak a language other than English.
Delegate	An NDIA staff member who can exercise or perform legislative powers and functions, such as making Access decisions or Plan approvals, according to the particular level of delegation they hold.
Developmental Delay (DD)	<p>A specific description under the NDIS Act (s.9) for a delay in the development of a child under 6 years of age that:</p> <ul style="list-style-type: none"> a) is attributable to a mental or physical impairment or a combination of mental and physical impairments; and b) results in substantial reduction in functional capacity in one or more of the following areas of major life activity: <ul style="list-style-type: none"> (i) self-care; (ii) receptive and expressive language; (iii) cognitive development; (iv) motor development; and c) results in the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually planned and coordinated.
Early Childhood Early Intervention (ECEI) Approach	This is the current approach delivered by the NDIS to support children aged under seven years with developmental delay or disability and their families/carers to achieve better long-term outcomes through support services in their local community, regardless of diagnosis. The ECEI Approach is based on the principles of best practice in ECI and allows for access to timely, targeted and individualised early childhood intervention supports for children.
Early Childhood Intervention (ECI)	The services and supports that children with developmental delay or disability and their families receive during the early years, when the child is developing most rapidly. ECI is delivered for children and families by qualified early childhood intervention teams of allied health professionals and early childhood educators. These teams will usually include allied health professionals such as speech pathologists and occupational therapists but don't usually name the therapy type as child development needs have to be supported holistically.

Term	Definition
Early Childhood Partners (EC Partners)	Early Childhood Partners (or EC Partners) deliver services and supports on behalf of the NDIA as Partners in the Community (PiTC) to participants and non-participants under 7 years old and their families/carers. EC Partners have teams of allied health professionals and early childhood educators who are contracted to deliver the ECEI Approach for children and families in the community. The term EC Partner may refer to either the Partner organisation or the staff working within that organisation.
Goals	Statements to describe the objectives and aspirations of the participant and/or their parent /carer.
Independent Advisory Council (Council)	A Council that advises the Board of the National Disability Insurance Agency (NDIA) on the most important issues affecting participants, carers and families. The NDIA Board must consider all advice provided by Council when performing its duties as a governing body of the NDIS.
Initial Supports	Initial Supports are provided by Early Childhood Partners at the first point of contact with families/carers of children under 7 years of age. The intention of Initial Supports is to assist children with delayed development or disability and their family/carers to access support to learn and develop to their full potential, including to connect with mainstream and community services or to request access to the NDIS if required.
Local Area Coordinator (LAC)	Local Area Coordinators (or LACs) deliver services and supports on behalf of the NDIA as Partners in the Community (PiTC) to Participants and non-participants aged 7 years old and above. LACs support people with a disability, both participants and non-participants to engage in their community by linking to mainstream and funded supports. An LAC assists people with a disability to actively connect and participant as a valued member of their community. The term LAC may refer to either the Partner organisation or the staff working within that organisation.
Mainstream Services	Goods, services, supports and assistance available to the Australian population, for example, health, mental health, early childhood development, school education, justice, housing, child protection and family support and employment services. Mainstream services are the first option for service provision for all NDIS participants. For children mainstream services include child health services, playgroup, childcare, early childhood education centres (pre-school, kindergarten).

Term	Definition
Natural Settings	Places where children learn and develop everyday abilities and skills, including the home, community, and early childhood education settings.
National Disability Insurance Agency (NDIA or the Agency)	An independent Commonwealth entity that is responsible for implementing and managing the NDIS.
National Disability Insurance Scheme (NDIS or the Scheme)	An insurance support scheme of the Australian Government that funds costs associated with disability.
Scheme Customers	Scheme Customers refers to individuals with a disability who are not yet, or who are not eligible to become NDIS Participants.

Appendix A: Feedback Form Template

This template is provided to allow organisations to gather their responses prior to submission via the online feedback form [at this link](#).

Please note the online feedback form and other market engagement activities have been developed solely for the purpose of seeking feedback from the market. It does not constitute an offer from the NDIA to participate in the PITC Program in the future.

Collection Statement

While this survey does not require you to give your personal information, should you choose to do so, the NDIA will only use this information for the intended purpose of informing the future development of the PITC Program and associated sourcing activity.

The NDIS Privacy Policy (external) contains information about how we handle personal information and how you may access, update and correct any personal information we hold about you.

Demographic Questions

Organisation Name

[Free text]

Organisation name

[Multiple choice, select one]

- Community services
- Disability services
- Early childhood
- Aged care
- Employment services
- Childcare
- Healthcare
- Job services
- Other (please specify)

Organisation size

[Multiple choice, select one]

- Non-employing
- Less than 20 employees
- 20 - 199 employees
- 200+ employees

Do any of the following apply to your organisation?

[Multiple choice, select multiple]

- Registered not-for-profit organisation
- A business that primarily exists to provide the services of persons with a disability (such as an Australian Disability Enterprise)
- Indigenous supplier via Supply Nation
- National Disability Representative Organisation (or other peak body)
- NDIS Registered Provider of Supports (RPoS)
- None
- Other (please specify)

Which States/Territories do you currently operate in?

[Multiple choice, select multiple]

- New South Wales
- Queensland
- South Australia
- Tasmania
- Victoria
- Western Australia
- Australian Capital Territory
- Northern Territory

Which Modified Monash Model (MMM) classifications do you currently operate in?

[Multiple choice, select multiple]

- Metropolitan areas
- Regional centres
- Large rural towns
- Medium rural towns
- Small rural town
- Remote communities
- Very remote communities

Are you a current PITC Program Partner?

[Multiple choice, select one]

- Yes – LAC Partner
- Yes – Early Childhood Partner

- Yes – both LAC and Early Childhood
- No

Which age groups does your organisation have an interest or capability in working with?

[Multiple choice, select one]

- Under 9 years
- 9 years and older
- All ages

The following sections seek your feedback on three specific topics, as discussed in the Market Engagement paper:

- Coverage of the PITC Program
- Specialisation
- Proposed Funding Model

The outcomes of market engagement may be used to inform the NDIA's future sourcing activity for the PITC program.

Partner Coverage Feedback questions

What is your organisation's level of interest in delivering the PITC Program in remote communities/your remote community?

[1-5 scale]

- 1- Low
- 2- Moderately Low
- 3- Medium
- 4- Moderately High
- 5- High

Which of the following PITC Program functions does your organisation currently have the capability and capacity to deliver in remote communities?

[Multiple choice, select multiple]

- Community capacity building
- Community Engagement
- Assessment and Information Gathering
- Short Term Early Intervention delivered by an Early Childhood Professional (including allied health)
- Developing Goals and Aspirations
- Connecting to supports

- Individual capacity building
- Monitoring and Check ins
- Scheme access support
- Develop Plan Budget for NDIS Participants

What current experience and capability does your organisation have in remote delivery?

[Multiple choice, select one]

- Currently providing services in remote communities
- Metro and Rural experience with high degree of cultural safety/competence
- Metro and Rural experience with some degree of cultural safety/competence
- Limited experience in remote delivery.

Does your organisation have existing community networks in remote communities/your remote community that could be leveraged in delivering PITC services?

[Multiple choice, select one]

- Well established networks
- Some networks and connections
- No/Limited existing networks

Which models would/does your organisation use/consider to deliver services in remote communities/your remote community?

[Multiple choice, select multiple]

- Direct delivery (e.g. similar to the current PITC model)
- Sub-contracting arrangements
- Auspicing
- Partnership arrangements
- Referral pathways
- Telehealth
- Other (free text)

Are there gaps and challenges your organisation experiences/anticipates in remote delivery that would require a level of further support from the NDIA?

[Word limit 500 words]

Would the introduction of Remote/Very Remote Coverage impact the cost of your organisation's service delivery model and if so, what aspects of your model would be impacted (e.g. travel time and travel costs, penalty rates, loading etc.)?

[Word limit 500 words]

How could your organisation facilitate earlier access to services for those who would benefit most from Early Intervention in remote areas (children with development concerns or disability)?

[Word limit 500 words]

How would/does your organisation meet the diverse needs of people living in remote areas, including but not limited to cultural and linguistic diversity (with a strong emphasis on multiple Australian Indigenous languages) and cultural sensitivity/community connection for First Nations people?

[Word limit 500 words]

The NDIA is considering a number of factors to determine potential suitability for the expansion of the PITC Program to remote areas, including:

- General population and population density
- Number of Persons with a disability (ABS Data by Region)
- Number of active participants (NDIS Interactive Data Tool)
- Thin market considerations including number of NDIS Registered Providers of Supports (NDIS Interactive Data Tool)
- Existing community infrastructure (NGOs and other government programs).
- Proximity to regional and population centres

In addition to the factors listed above, are there other factors that the NDIA should be considering to determine opportunity for the expansion of the PITC Program?

[Word limit 500 words]

Please indicate the remote and very remote (MMM 6&7) localities that you currently have a presence in, are interested in expanding to, or have existing networks in (select current/interest/network for each).

[List with drop down categorisation, multiple selection]

- Port Lincoln, SA
- Alice Springs, NT
- Mount Isa, QLD
- Geraldton, WA
- Kalgoorlie, WA
- Broome, WA
- Karratha, WA
- Other (please indicate)

- Current
- Interest

- Networks

General Feedback

Does your organisation have any additional feedback you would like to provide, to assist the NDIA in considering the potential role of the Partners in Community, in some remote areas?

[Word limit 500 words]

Specialisation Feedback questions

For which PITC Program functions would your organisation be interested in applying an increased focus on specialisation?

[Multiple choice, select multiple]

- Community capacity building
- Community Engagement
- Assessment and Information Gathering
- Short Term Early Intervention delivered by an Early Childhood Professional (including allied health)
- Developing Goals and Aspirations
- Connecting to supports
- Individual capacity building
- Monitoring and Check ins
- Scheme access support
- Develop Plan Budget for NDIS Participants

For which cohorts would your organisation be interested in applying/providing an increased focus on specialisation?

[Multiple choice, select multiple]

- Culturally and linguistically diverse communities (CALD)
- People identifying as LGBTIQ+
- Specific disability groups
- Aboriginal and Torres Strait Islander communities
- Rural and remote communities
- Other (please specify).

Please indicate which mechanisms your organisation is likely to consider in meeting customer preferences regarding specialisation of services:

[Order options from most likely to utilise, to least likely]

- Direct employment of staff with cohort specific knowledge and experience
- Subcontracting arrangements
- Auspicing
- Partnership arrangements
- Referral pathways
- Use of consultancy to build organisational capability
- Training to build staff capability.

If your organisation is entirely specialised (e.g. disability type, Aboriginal and Torres Strait Islander, CALD), what are your preferences for supporting specialisation in the PITC program?

[Order options from most preferred, to least]

- Partnership arrangements with a PITC Partner(s)
- Subcontracting arrangements to a PITC Partner(s)
- Auspicing arrangements to a PITC Partner(s)
- Establishing referral pathways with a PITC Partner(s)
- Providing support to build organisational capability for a PITC Partner(s)
- Providing training to build staff capability of a PITC Partner(s).

Are there other ideas that the NDIA should be considering to enhance the specialisation of PITC services?

[Word limit 500 words]

General Specialisation Feedback

Does your organisation have any additional feedback you would like to provide in relation to the specialisation of PITC services?

[Word limit 500 words]

Funding Model Feedback Questions

After reading the information on the key features of the proposed PITC funding model, how has your level of interest in delivering Early Childhood and/or Local Area Coordination services changed?

[Select One]

- A – More interested due to the proposed PITC program funding model
- B – Interest remained the same
- C – Less interested due to the proposed PITC program funding model

If you answered C) above, please indicate which feature(s) of the proposed funding model may be a barrier to your organisation delivering Early Childhood and/or Local Area Coordination Services:

[select multiple]

A – Selection of fixed components is too large/many

B – Selection of fixed components is too small/few

C - Payment frequency

D – Payment in arrears

E - Establishment costs

F - Complexity of proposed model

G - Other (free text)

Do you perceive a risk to your organisation due to the part-fixed/ part-variable model, which would deter you from considering future involvement in the PITC program?

Yes / No

Please indicate what changes your organisation believes may improve the proposed PITC program funding model:

[Word limit 500 words]

General Funding Model Feedback

Does your organisation have any additional feedback you would like to provide on the proposed funding models?

[Word limit 500 words]

General Feedback on the PITC Program

Does your organisation have any other feedback in relation to potential improvements to the PITC program, outside of the three topics discussed above?

[Word limit 500 words]