

Improving Support Coordination for NDIS Participants

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Contents

Improving Support Coordination for NDIS Participants	1
Contents	2
Introduction	3
The role of a support coordinator	4
Role 1: Help participants connect to NDIS and other supports	4
Role 2: Build a participant’s capacity and capability to understand their plan, navigate the NDIS and make their own decisions	6
Role 3: Broker supports and services in line with a participant’s wishes and their plan budget	6
Role 4: Monitor plan budgets and support effectiveness	7
Promoting and protecting the safety of participants	8
What’s next?	9
Taking a market stewardship approach, partnering with the sector, to improve quality and outcomes of support coordination	9
Educating support coordinators on their roles	9
Lifting quality by encouraging better engagement with existing quality standards	9
Lifting quality through a range of initiatives led by the Australian government and broader sector	10
Supporting support coordinators who wish to develop expertise in specific areas	11
No change on arrangements for sharing plans	11
Working in partnership with the sector to address situations where real or perceived conflict of interest may be adversely affecting participant outcomes	12
Encouraging better engagement with existing conflict of interest requirements	12
Understanding and addressing specific situations to protect participants’ safety and wellbeing, in partnership with the sector	12
Reviewing pricing	13
Continuing to work with the sector to deliver consistency and equity in planning outcomes (including support coordination)	14
Appendix A – Consultation overview	16
Appendix B – Use of support coordination	22

Introduction

Support coordination plays an important role in helping National Disability Insurance Scheme (NDIS) participants to make the most of their NDIS plans and to pursue their goals. As at 30 September 2021, 208,634 (43%) active participants have support coordination funded in their approved plan. Total payments for support coordination were \$667 million for the year ending 30 September 2021.¹

The support coordination sector continues to mature under the changing NDIS landscape. The [Participant Service Improvement Plan](#) sets out what the National Disability Insurance Agency (NDIA) is going to do over the next two years to deliver a Scheme that meets participants' expectations. One of our commitments in the Participant Service Improvement Plan is 'we will be clearer about support coordination services, and what you should expect'.

Feedback to our 2020 Support Coordination Discussion Paper was received from:

- NDIS participants, their families and carers
- NDIS providers (including support coordinators)
- community organisations
- peak bodies
- government agencies.

Stakeholders agreed that the current support coordination service model needed to improve. There were various perspectives on which areas of support coordination services could improve, and how.

This paper outlines the high level outcomes from reviewing the current support coordination model in the context of both the consultation process, and broader strategic design of the Scheme.

While we have been considering the feedback, the NDIA has been investing in building the capability of support coordinators through initiatives such as thin market trials and the Exceptionally Complex Support Needs Program.

The NDIA has also observed a range of other initiatives to improve capability within the sector more broadly. This includes initiatives funded through the [Support for NDIS Providers grant program](#) administered by the NDIS Quality and Safeguards Commission (NDIS Commission) to support NDIS providers in meeting their quality and safeguarding responsibilities. Other initiatives include the development of support coordination practice standards led by peak organisations, and a range of courses and communities of practice available in the market.

The NDIA will continue to work closely with the sector on how support coordinators can drive better participant outcomes as the NDIS evolves.

¹ **Source:** Figure E.48 from the *NDIS Quarterly Report to Disability Ministers for Q1 2021-22*

The role of a support coordinator

Greater clarity on the role of support coordinators will help drive more consistent, quality outcomes from support coordination services. Consultation feedback (see [Appendix A](#)) indicated a broad agreement around the following roles of a support coordinator. A support coordinator should:

1. Help participants connect to NDIS and other supports
2. Build a participant's capacity and capability to understand their plan, navigate the NDIS and make their own decisions
3. Broker supports and services in line with a participant's wishes and their plan budget
4. Monitor plan budgets and support effectiveness.

Support coordinators will help participants with different things depending on what the individual participant's goals, needs and circumstances are. This should also consider what has been funded in the participant's plan.

As with all NDIS providers and workers, support coordinators must promote and protect the safety and wellbeing of participants. This should underpin everything that a support coordinator does.

Role 1: Help participants connect to NDIS and other supports

To clearly define the parameters of a support coordinator's role, the [NDIS website](#) sets out what activities support coordinators should and should not do when connecting participants to NDIS and other supports.

The NDIA expects support coordinators to understand service offerings available in a participant's local market, and actively help participants to find service providers who meet their needs. The NDIA has observed instances where support coordinators have used their local market knowledge to drive quality participant outcomes. For example, when a service provider decides to exit the NDIS or withdraw their services, quality support coordinators are able to quickly source and connect participants to alternative service providers. This has been integral for participants to maintain continuity of supports and services.

Support coordinators should also link participants to mainstream, community and informal supports where appropriate. The NDIA has seen quality outcomes when support coordinators have a sound knowledge of service offerings – including mainstream, community and informal supports – and have strong provider networks in the participant's local area.

In our [NDIS thin market trials](#), the NDIA has worked with local community stakeholders to improve support coordinator understanding of the range of community, mainstream and informal supports available locally. We have also worked closely to strengthen support coordinator relationships with local providers to maintain up-to-date knowledge of provider capacity and capability. In these areas, we saw an increased confidence of support coordinators to be more proactive in helping participants to access and connect with a wide range of NDIS and other disability supports. Support coordinators should continue to take initiative in forming communities of practice, learning from one another and leveraging off their networks to attract services for the benefit of all participants in the area.

At the same time, support coordinators should set clear expectations about their scope of service and be clear about the limits of their role. Support coordinators walk alongside a participant to engage with providers, NDIA, and other community, mainstream and government services. Support coordinators need to be aware when their involvement moves beyond supported engagement into the role of a formal advocate. While there is no hard and fast line between supported engagement and formal advocacy, this is an important consideration for support coordinators in determining the scope of their service.

To consider whether their role as a support coordinator has moved into the role of a formal advocate, some questions which a support coordinator might ask include:

- Have I done all I can to help the participant make their needs clear to the provider, worker or government system through the established processes?
- Is the participant entering into a dispute, especially where there is legal involvement or escalation to administrative appeals?
- Have I fallen into dispute in a way that undermines my role and effectiveness as a support coordinator?
- Does my involvement in an NDIS review process create a conflict of interest, especially if I am requesting more support coordination funding at the participant's plan review?
- Is the level of complexity or time required to adequately represent the person beyond the level of support allocated to support coordination?
- Is the level of representation required beyond my skills and capacity, and the participant would benefit from an experienced advocate?
- Is there an appropriate formal advocacy service to refer the participant to?

If the answer to some of these questions is 'yes', then a support coordinator should consider whether their participant might benefit from formal advocacy and assist them to find a suitable advocacy service. In line with the *National Disability Insurance Scheme Act 2013* (Cth)², an independent advocate cannot be:

- a staff member of the NDIA
- a staff member of the NDIS Commission
- a registered or unregistered NDIS provider (including support coordinators) providing supports to the participant.

² Section 9 of the *National Disability Insurance Scheme Act 2013* (Cth)

Role 2: Build a participant's capacity and capability to understand their plan, navigate the NDIS and make their own decisions

Support coordinators should build a participant's capacity for independence. We recognise there can be some barriers and challenges in capacity building, depending on individual participant circumstances.

The NDIA is currently working on resources to empower participants to become more astute consumers in the NDIS market. These resources are designed to help participants to understand their plan and navigate the NDIS. A participant's support network, including their support coordinator, will also be able to access these resources to help build the participant's capability to do this themselves.

To build a participant's capacity for decision making, a support coordinator needs to develop trust with the participant. This could entail a variety of approaches that will largely depend on a participant's individual circumstances.

There is often a broad range of supports – including informal and formal supports – available to a participant to help them make informed decisions. Support for participants to make informed decisions can often be provided by many people in a participant's life. This may include their family and friends, nominees and guardians, community supports and support workers.

To strengthen these supports and increase opportunities for decision making, the NDIA is working on a Support for Decision Making policy framework which aims to:

- Increase opportunities for participants and future participants to be actively involved in making decisions about their life, and exercise real choice and control
- Support the development of the individual's capability in making decisions (and helping to explore and make those decisions)
- Build the capacity of decision supporters, NDIA staff and partners to recognise and enable the will and preference of participants
- Strengthen a support for decision making approach in the appointment of nominees.

Role 3: Broker supports and services in line with a participant's wishes and their plan budget

In addition to helping participants connect with NDIS and other supports, support coordinators should also help participants to explore the right mix of supports. Stakeholders generally agreed that this should involve helping the participants to trial options, design a suitable support approach and negotiate service agreements in line with the participant's preferences and plan.

The NDIA has been testing ways to promote more efficient organisation and more timely delivery of supports and services in rural and remote areas. We have worked closely with support coordinators to implement group purchasing models. Under these models, support coordinators have worked collaboratively with each other and their participants to bundle and pool plan funds to attract new providers and drive better participant outcomes.

We continue to encourage support coordinators to be innovative and to take initiative when helping participants to broker supports and services in line with their support preferences and plan budgets. To do this, the NDIA will share tools with support coordinators and promote their use more widely. We will also continue to improve the market data available to enable support coordinators to better influence local markets.

Role 4: Monitor plan budgets and support effectiveness

We agree with stakeholder feedback that support coordinators should regularly monitor a participant's plan implementation to ensure participants are connected to providers and to evaluate the effectiveness of those supports in helping participants to pursue their goals.

As part of the website guidance on support coordination, the NDIA outlines what we would generally expect support coordinators to discuss with the participant to effectively monitor plan implementation progress. This includes what information is needed to help the participant and their support coordinator to prepare for plan reviews. We will also work on improving the process to make it easier for support coordinators to report back to the NDIA.

Support coordinators should regularly engage with participants to understand their individual circumstances, disability-related support needs and goals, including any potential changes. In doing so, support coordinators should work with the participant to prepare for unexpected events or interruptions in supports. Preparing participants for unexpected events includes establishing supports to prevent crisis situations from arising, and ensuring a plan is in place should a crisis occur. When a crisis situation arises, support coordinators should help the participant to put the plan into action and to access the appropriate supports, including crisis or emergency services, where needed.

Support coordinators should also regularly track how the participant's plan is being used and ensure the participant will be adequately supported throughout the duration of their plan. As part of this, support coordinators should evaluate how effectively their supports are meeting the participant's needs. Support coordinators should regularly review whether the current support mix meets a participant's needs or whether alternate options may be more suitable. Part of this should consider emerging, innovative support options or service delivery models (e.g. telehealth) in helping participants pursue their goals.

Promoting and protecting the safety of participants

All NDIS providers and workers have an obligation to promote the safety of participants under the [NDIS Code of Conduct](#). In particular, the NDIS Code of Conduct requires all NDIS providers and workers (including support coordinators) to promptly:

- take steps to raise and act on concerns about matters that may impact the quality and safety of supports and services provided to people with disability
- take all reasonable steps to prevent and respond to all forms of violence against, and exploitation, neglect and abuse of, people with disability
- act with respect for individual rights to freedom of expression, self-determination, and decision-making in accordance with relevant laws and conventions
- provide supports and services in a safe and competent manner with care and skill
- act with integrity, honesty, and transparency.

Support coordinators play an important part in safeguarding a participant's wellbeing due to their unique perspective. Support coordinators will often be the first to become aware of any concerns about the quality and safety of a participant's supports and services because support coordinators:

- have oversight, or a 'helicopter view', over the other supports and services received by the participant
- monitor the participants' plan budgets, effectiveness of their supports and their changing needs
- have a trusted relationship with participants.

For these reasons, support coordinators can provide an early warning where a participant's safety or wellbeing is at risk. Support coordinators should proactively support the participant to raise any concerns or issues around the participant's safety or the quality of their supports and services. Support coordinators can also raise their concerns or make a complaint themselves.

All registered NDIS providers (including support coordinators) should understand and comply with their obligations to raise concerns, including through formal mechanisms. If there is an immediate risk or threat to the participant, support coordinators should immediately contact emergency 'triple zero' services.

What's next?

Taking a market stewardship approach, partnering with the sector, to improve quality and outcomes of support coordination

Educating support coordinators on their roles

The NDIA has released guidance that builds on the above description of support coordinators' four roles on the [NDIS website](#). In particular, we have better defined what functions are in and out of scope for a support coordinator in the context of the broader NDIS service system. We will also run information sessions with a focus on educating participants and providers on the role of support coordinators. We will work with stakeholders to develop best practice examples to complement this material.

As the Scheme continues to evolve, we will continue to review the most appropriate roles of support coordinators in the context of what is offered by other intermediaries such as Local Area Coordinators, plan managers and psychosocial recovery coaches. The aim is to ensure participants receive the most appropriate supports for them, from the most appropriately skilled and qualified intermediary.

Lifting quality by encouraging better engagement with existing quality standards

All NDIS providers, whether they are registered or not, and NDIS workers have current obligations to comply with the [NDIS Code of Conduct](#). The NDIS Code of Conduct requires, among other things, that all NDIS providers and workers (including support coordinators) provide supports and services in a safe and competent manner, with care and skill.

Where required to be registered, NDIS providers must also comply with [conditions of registration](#), including the NDIS Practice Standards. The [NDIS Practice Standards](#) specify the quality standards to be met by registered NDIS providers to provide supports and services to NDIS participants. Together with the NDIS Code of Conduct, the NDIS Practice Standards create an important benchmark for all providers (including support coordinators) to assess their performance, and to demonstrate how they provide high quality and safe supports and services to NDIS participants.

Providers registered to deliver registration group 106 'Assistance in coordinating or managing life stages, transitions or supports' must comply with the Core module of the NDIS Practice Standards³. The Core module includes standards for the rights of participants and responsibilities of providers, provider governance and management and the way that support is provided.

³ Schedule 1 of the *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018* (Cth)

Providers registered to deliver registration group 132 ‘Specialised support coordination’, must comply with the Core module and Module 4 of the NDIS Practice Standards⁴. Module 4 includes additional standards for the provision of support and management of conflict of interest.

Each standard is supported by a set of quality indicators⁵ which are used by providers to demonstrate evidence of compliance. While these specify the quality standards which need to be met by registered NDIS providers, all NDIS providers – including non-registered support coordinators – can use these to build understanding of what quality service provision should entail. The [NDIS Practice Standards and Quality Indicators](#) provides more detail.

The guidance on the role of a support coordinator builds on the existing requirements of support coordinators to deliver quality and safe supports and services under the NDIS Code of Conduct and NDIS Practice Standards. As part of their role in sector leadership, we will ask peak organisations to share this guidance with the sector and drive a common understanding of best practice support coordination.

Lifting quality through a range of initiatives led by the Australian government and broader sector

The [NDIS National Workforce Plan 2021-2025](#) outlines the Australian Government’s commitment to work with NDIS participants, industry and other stakeholders to grow a responsive and capable care and support workforce, and to strengthen the sector to meet the needs and aspirations of Australians with disability, now and in the years ahead. It builds on existing efforts to deliver significant improvements to the NDIS. The [Growing the NDIS Market and Workforce Strategy 2019](#) set out the long-term vision for a capable and responsive NDIS workforce. Developed as part of this strategy, the [NDIS Workforce Capability Framework](#) supports consistency in practice and delivery of quality disability services across Australia by translating the NDIS Principles, Code of Conduct and Practice Standards into a set of observable skills and behaviours for workers in the sector.

The NDIA has been investing in building the capability of support coordinators through initiatives such as the Exceptionally Complex Support Needs Program (ECSNP). The ECSNP is a two year national program which started in late 2019. The ECSNP will soon conclude, having delivered over 590 sector development sessions, over 970 secondary consults and 70 communities of practice that have enhanced the capability of support coordinators working with participants with complex support needs. Consultation feedback also highlighted a range of training programs, communities of practice and other initiatives are being led and delivered by the sector.

⁴ Schedules 1 and 6 of the *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018* (Cth)

⁵ *National Disability Insurance Scheme (Quality Indicators) Guidelines 2018* (Cth)

We are aware of work by peak organisations to help support coordinators deliver quality service and build capability within the NDIS. We also recognise and encourage the high-quality training already in the sector. This training should continue to be led and delivered by the sector. To meet participants' expectations of a quality support coordination service, we encourage the sector to continue working with participants in developing any training or industry standards that may complement providers' regulated obligations.

Supporting support coordinators who wish to develop expertise in specific areas

There is potential value of more targeted support coordination to participants with specific goals. Support coordination providers who see value in developing and promoting targeted expertise, or niche services, to meet specific participant needs are encouraged to do so. Participants can choose to engage these services within the existing support coordination funding arrangements in their NDIS plan.

To assist participants in pursuing their home and living goals, the NDIA will continue to release practical guidance on the available housing supports through '[Our Guidelines](#)' on the NDIS website. This guidance may also assist support coordinators in helping participants with goals related to housing.

The NDIA is also currently developing a new approach to Home and Living. We have released a consultation paper and survey, supported by targeted engagement sessions. Responses to the paper, survey and consultation sessions will help develop a Home and Living Policy. The introduction of further information and resources may also be available following the release of a Home and Living Policy.

As participants become more empowered consumers, participants will consider how their support coordination needs complement their other support needs. All support coordinators are encouraged to promote their service offerings to participants. This may include promoting their expertise in specific areas. Participants can choose how to best use their existing support coordination funding in their NDIS plan. They can also choose whether they wish to engage more than one person.

No change on arrangements for sharing plans

A participant chooses who they wish to share their plan with, including their support coordinator. To respect and protect the participant's privacy, we are otherwise unable to share a copy of a participant's plan without consent.

Both the participant and their support coordinator should discuss and agree on the information needed to ensure quality service outcomes. Support coordinators are encouraged to discuss the benefits of the participant sharing their plan and how this may help the delivery of support coordination services.

In deciding whether to deliver services to a participant, a support coordinator must consider whether they have the information, capability and capacity required to meet the participant's support coordination service needs.

Working in partnership with the sector to address situations where real or perceived conflict of interest may be adversely affecting participant outcomes

Encouraging better engagement with existing conflict of interest requirements

All NDIS providers, whether they are registered or not, and NDIS workers have current obligations to comply with the [NDIS Code of Conduct](#). Among other things, the NDIS Code of Conduct requires NDIS providers and workers, including support coordinators, to act with integrity, honesty and transparency. This includes guidance for:

- recommending and providing supports and services appropriate to the needs of the participant
- maintaining integrity by declaring and avoiding any real or perceived conflicts of interest
- avoiding engaging in, participating in or promoting sharp practices.

The [NDIS Code of Conduct: Guidance for NDIS Providers](#)⁶ and [NDIS Code of Conduct: Guidance for NDIS workers](#)⁷ provides more information and includes scenarios to illustrate this guidance. The [NDIS Practice Standards](#) also set out what registered NDIS providers are required to do to avoid real or perceived conflicts of interest in the delivery of supports and services.

The NDIS Commission can take regulatory action where it identifies a provider or worker is in breach of their obligations under the NDIS Code of Conduct or the NDIS Practice Standards. Participants, providers and other stakeholders should raise any concerns – including where there are potential real or perceived conflicts of interest – with the [NDIS Commission](#) for further investigation. The NDIA will similarly raise any concerns with the NDIS Commission should we become aware of situations where a support coordinator's real or perceived conflicts of interest may be adversely affecting participant outcomes.

Understanding and addressing specific situations to protect participants' safety and wellbeing, in partnership with the sector

The NDIA is committed to preventing situations where a participant's safety and wellbeing is put at risk because the same provider delivers both their support coordination and other funded supports.

The [Independent Advisory Council \(IAC\)](#) has encouraged the NDIA to enforce independence between intermediary and other funded supports at the participant level. Independence at the participant level would not prevent providers from operating both as a support coordinator and provider of other disability supports. However, to protect participants from sharp practices, a single provider would be prevented from providing support coordination and other supports to an individual participant.

⁶ NDIS Code of Conduct: Guidance for NDIS Providers p.19-21

⁷ NDIS Code of Conduct: Guidance for NDIS Workers p.18-19

The [Tune Review 2019](#) recommended that the NDIS Rules be amended to outline circumstances in which it is not appropriate for the providers of support coordination to be the provider of any other funded supports in a participant's plan (Recommendation 16b).

The Department of Social Services (DSS) has released proposed changes to the NDIS Act and NDIS Rules. Tune Review 16b is in the process of being implemented through the proposed amendments to the *NDIS (Plan Management) Rules 2013*. Public consultation on the draft legislation was undertaken from 9 September 2021 to 7 October 2021.

We strongly support the IAC and Tune Review recommendations, and will work to ensure the commitments made in the [Australian Government's response](#) to the Tune Review 2019 are delivered. In doing so, the NDIA will partner with key stakeholders to agree on a path to implement these recommendations. The aim is to ensure participants have access to a diverse range of service providers of their choice, while also ensuring service delivery arrangements protect participants from conflicts of interest.

We recognise the breadth of roles involved to implement change in this important policy area, and the need to work collaboratively with all stakeholders to identify, address and prevent situations where a provider should not deliver both support coordination and other funded supports in a participant's plan. Together, we will consider:

- how to prevent these situations from occurring, and actions to respond to existing situations
- what is the appropriate pace and sequencing of the rollout, taking into account the areas of most urgent need and managing any associated disruption
- how to ensure participant choice and control is at the centre of decision-making.

Reviewing pricing

Support coordination will be considered in the Annual Pricing Review (the Review). The roles of a support coordinator and other elements set out in the paper will inform the Review. The Review will consider:

- how the current tiers of support coordination pricing arrangements are being used and if they are effective
- whether the price limits for support coordination are reasonable, especially when compared to the price limits for other services
- the experience and skills required to deliver quality support coordination services by tier
- how pricing can best encourage innovation, improve quality of service, and ensure value for money for participants.

We will avoid introducing further complexity. Given the identified challenges (see [Appendix A](#)), the NDIA is not currently considering outcomes-based pricing for support coordination services.

We are particularly focused on how we can ensure higher quality outcomes for participants with the most complex needs. Effective support coordination is a critical enabler of good outcomes for all participants, including those with complex support needs. We are considering how the NDIA could more directly engage in the support coordination market to ensure participants with complex support needs can access a skilled, quality support coordinator who meets their needs and who may take on some additional responsibilities, for example around safeguarding. More actions are likely to arise for this participant cohort as we consider the options available to engage more actively with this market.

Continuing to work with the sector to deliver consistency and equity in planning outcomes (including support coordination)

Consistent reasonable and necessary funding decisions across all supports remains a key priority for participants and the Agency. We will continue to work with the sector through a process of continuous improvement. Insights from the support coordination consultation will be used to inform this process.

As at 30 September 2021, 208,634 (43%) active participants have support coordination funded in their approved plan. In line with stakeholder feedback (see [Appendix A](#)), factors in deciding support coordination funding in plans consider a participant's disability, their capacity to make decisions, their existing formal and informal support network, and their individual needs and circumstances.

Table 1 shows that participants in younger age groups, especially those under 18 years old, tend to have a proportionally lower need for assistance from a support coordinator. The existing formal and informal support network of participants in younger age groups are likely considered when funding support coordination in plans.

The need for support coordination in the younger age groups may also be linked to the nature of their disability. Table 2 indicates that participants with developmental delay (9%) and global developmental delay (13%) are less likely to have support coordination funding in plans. These participants may receive most of the support they need from their Early Childhood partner or Local Area Coordinator.

In comparison, participants with a psychosocial disability (90%), an acquired brain injury (81%) or stroke (69%) have a proportionally greater incidence of support coordination funding in plans. The participant's capacity to make decisions and the availability or capability of their support network would be factors in funding support coordination. Participants with a psychosocial disability may receive funding in their Support Coordination budget to access assistance from a support coordinator or psychosocial recovery coach, depending on their individual needs and circumstances.

Table 1: Support coordination funding in plans by age group, as at 30 September 2021

Age Band	Participants with support coordination as a proportion of all participants
0 to 6	9%
7 to 14	20%
15 to 18	38%
19 to 24	49%
25 to 34	60%
35 to 44	70%
45 to 54	73%
55 to 64	71%
65+	67%
Total	43%

Table 2: Support coordination funding in plans by disability type, as at 30 September 2021

Disability type	Participants with support coordination as a proportion of all participants
Acquired Brain Injury	81%
Autism	26%
Cerebral Palsy	49%
Developmental Delay	9%
Down Syndrome	46%
Global Developmental Delay	13%
Hearing Impairment	14%
Intellectual disability	58%
Multiple Sclerosis	65%
Other	53%
Other Neurological	67%
Other Physical	41%
Other Sensory/Speech	15%
Psychosocial Disability	90%
Spinal Cord Injury	56%
Stroke	69%
Visual Impairment	34%
Total	43%

We recognise the importance of support coordination in helping participants build skills to understand and implement their NDIS plan, and to overcome any potential barriers or challenges in doing so. We will continue to ensure that the support coordination service model effectively and efficiently delivers the best possible outcomes for all participants.

The NDIA welcomes any feedback on the directions in this report. Feedback can be emailed to supportcoordination@ndis.gov.au.

Appendix A – Consultation overview

On 12 August 2020 we released a Support Coordination Discussion Paper. We wanted to better understand how the support coordination service model works in practice and how it can be improved to better support participant outcomes. The consultation sought feedback on five key areas:

- inclusion of support coordination
- understanding the role of a support coordinator
- quality of service and value for money
- capacity building for decision making
- conflict of interest.

Stakeholders who participated in the consultation process included:

- NDIS participants, their families and carers
- NDIS providers (including support coordinators)
- community organisations
- peak bodies
- government agencies.

Thank you to everyone who attended an online forum or made written submissions. The NDIA acknowledges the significant time and effort of stakeholders to provide feedback. We also thank everyone for allowing us the time to consider and analyse the feedback.

During the consultation we spoke with various stakeholders about their support coordination experience. Through more than 40 online discussion forums, we received quality feedback from approximately:

- **80** participants and nominees
- **375** NDIS providers
- **55** representatives from industry peak bodies.

Stakeholders were also invited to provide a written submission. In total, the NDIA received **421** submissions from:

- **35** participants nominees, families and carers
- **290** NDIS providers, including support coordinators
- **44** industry peak bodies
- **37** community organisations
- **15** government agencies.

Summary of feedback themes

Greater clarity is required around the role of a support coordinator

Feedback highlighted inconsistent participant and provider understanding about the role of a support coordinator. Generally, there is a lack of clarity in the sector about the key functions and responsibilities of a support coordinator. Further guidance is needed to improve this understanding.

Most stakeholders agreed that a support coordinator should:

- help participants connect to NDIS and other supports
- build a participant's capacity and capability to understand their plan, navigate the NDIS and make decisions
- broker supports and services in line with participant wishes and their plan budget
- monitor plan budgets and support effectiveness.

Support coordinators sometimes feel the need to “fill gaps” when they perceive a participant needs an advocate

Most stakeholders agreed that it is not a support coordinator's role to advocate on behalf of a participant. Most were aware that advocacy services are provided by organisations funded through the [National Disability Advocacy Program](#).

Despite this, in some circumstances some support coordination providers stated that they felt compelled to act outside the scope of their role and undertake advocacy functions. Some submissions revealed confusion about where a support coordinator's role ends and an advocate's role begins.

Support coordinators can experience challenges when supporting participants to make informed decisions

Stakeholders generally agreed that a support coordinator should help a participant to make informed decisions about their supports. To do this, support coordinators should:

- understand the participant and build their trust
- ensure information is communicated in a way the participant understands
- provide multiple options or choices
- discuss consequences
- allow time to consider options
- allow time to trial options
- follow up or check in regularly.

Many support coordination providers find it challenging to support participants to make informed decisions. Support coordinators gave a variety of reasons, including:

- insufficient hours funded to enable a support coordinator to build trust and understand a participant's needs and goals
- some participants may not wish to engage in decision-making.

Some participants said their support coordinator lacks the necessary skills or knowledge needed to help them to make informed decisions. Sometimes support coordinators lacked knowledge and understanding of their specific disability and the suitable service offerings available. This impacts the quality of service that a participant receives.

Responses recognised that a support coordinator needs to develop trust with a participant to build their capacity for decision making. This could entail a variety of approaches that will largely depend on a participant's individual circumstances. Supporting participants to make informed decisions can often be performed by many people in a participant's life. This may include their family and friends, nominees, community supports and support worker.

The quality of support coordination services is highly variable

Many participants said their support coordinator is not supporting them sufficiently to pursue their goals. A general lack of accountability of support coordinators was also identified.

Some participants reported their support coordinator:

- made no or very little contact with them
- lacked knowledge about their disability type
- lacked knowledge about the services available.

Support coordination providers said their services would improve if they had more information about a participant and their plan. Many support coordinators argued for the NDIA to provide them with a copy of the participant's plan or to provide more information in the support coordination request for service. They argued this information would enable them to better understand a participant's individual circumstances and plan goals, thereby allowing them to work more efficiently.

A range of participants provided examples of effective support coordination practices. Participants appreciate when their support coordinator helps them to navigate the NDIS to pursue their goals, by:

- taking the time to understand their situation
- engaging with them on a regular basis
- sourcing evidence to support their plan reviews.

Common suggestions on ways to measure the effectiveness of support coordination included:

- participant plan implementation and utilisation
- participant progress towards goals
- participant satisfaction
- satisfaction from other stakeholders (including a participant's support network).

Feedback highlighted greater awareness and engagement with existing quality standards is needed. Stakeholders recognised having quality indicators can improve service standards and participant outcomes.

Support coordinators should be upskilled

Most stakeholders said support coordinators should be upskilled to better support participants. Feedback was mixed as to what this should entail. A mix of qualifications, lived experience of disability and industry work experience were suggested. Many sought more guidance on recommended skills and experience for support coordinators.

There was support for industry accreditation standards. Many support coordinators also highlighted the value of peer groups and communities of practice in assisting them to build knowledge and expertise.

Stronger measures should be introduced to promote independence

Stakeholders generally agreed that there need to be measures in place to manage conflict of interest in support coordination.

The need for stronger measures to be introduced has been previously raised in the [2019 Review of the National Disability Insurance Scheme Act 2013 Report](#) (Tune Review 2019) and by the [Independent Advisory Council \(IAC\)](#). Some participants, providers and peak bodies raised similar concerns in the consultation process. They argued for stronger measures to be introduced to manage a support coordinator's real or perceived conflict of interest. Troubling examples, where providers delivered both support coordination and accommodation supports to the same participant, highlighted potential sharp practices.

When arguing against mandating independence, providers often asserted they currently manage conflict of interest sufficiently through their internal processes. Providers and participants also highlighted that mandatory independence reduces participant choice and control, particularly in the short term. Some participants prefer the convenience of receiving support coordination and other supports from a single provider.

However, arguments for mandating independence commonly suggested that independence between services would increase participant choice and control while safeguarding participants from provider sharp practice. Over the long term, many reasoned that independence would drive better quality and greater diversity of services in the NDIS market.

Stakeholders outlined practical considerations for mandating independence between support coordination and other services. If introduced at the participant level, a transition period would be appropriate to minimise disruption to participants and providers. Exceptions to mandated independence were also proposed for consideration. Suggested exceptions included rural and remote areas or thin markets.

The three levels of support coordination should be simplified

Most stakeholders said Level 1 Support Connection is rarely used. Support coordination providers argued that it is not viable to deliver this level of support.

Many also said it is not always clear when a participant's plan should include Level 3 Specialist Support Coordination and who should deliver it. Many suggested that Level 3 Specialist Support Coordination funding is provided inconsistently. They found it was often unclear as to when a participant should be receiving Level 2 or Level 3 support.

Many respondents asked for the three level structure of support coordination to be simplified.

More targeted support coordination may be beneficial to meet specific goals

Support coordination providers generally agreed that more targeted expertise could benefit participants who want to pursue specific goals, such as moving out of home.

There were different delivery models suggested. Some suggested that a participant could have a 'general' support coordinator to assist them with their overall NDIS plan. A support coordinator with more targeted expertise could also be engaged to assist them with specific goals. However, many participants said that they would prefer to have a single point of contact. Many did not wish to engage more than one support coordinator to pursue their goals. It is ultimately up to the participant as to whether they wish to engage one or more support coordinators.

A variety of stakeholders also identified some gaps in the current market. In some circumstances, support coordinator knowledge and capability was insufficient to deliver more targeted support coordination. Stakeholders highlighted the need for increased market development, including training opportunities.

Outcomes-based pricing is probably not an appropriate lever to incentivise better performance, given current Scheme design

Some stakeholders supported outcomes-based pricing. They argued it would incentivise support coordinators to assist a participant in pursuing their goals. Outcomes-based pricing could also increase accountability for delivering participant outcomes.

However, potential challenges were also raised about shifting to an outcomes-based pricing model, such as:

- variability in goal setting – for example, whether goals are achievable in the short or long term
- risk of 'cherry picking' participants
- difficulty in measuring progress – for example, the episodic nature of some disabilities may mean progress will be hard to measure
- external factors affecting participant outcomes – for example, thin market supply and participant crises.

Funding for support coordination is inconsistent

Many stakeholders asked for more clarity and consistency on when and how support coordination goes into a participant's plan.

This feedback generally agreed with the 2017 Productivity Commission Report, which said participant need should determine funding for support coordination, rather than be limited by time.⁸

Stakeholders said support coordination funding decisions should consider a participant's:

- capacity to make decisions
- existing formal and informal support network
- individual needs and circumstances.

Stakeholders also said support coordination funding decisions can be inconsistent. Support coordination providers said that sometimes plans had insufficient support coordination funding to deliver holistic support and that they often only had enough time to find and connect participants to providers. Stakeholders commented that limited support coordination hours in plans prevented building a participant's capacity to become more independent.

⁸ Productivity Commission Study Report October 2017 NDIS Costs

Appendix B – Use of support coordination

Total support coordination payments

As the NDIS has grown and rolled out, the total spend on support coordination has increased. This is partly due to participants becoming more familiar with and more experienced in navigating the NDIS, which is driving an increase in average payments per participant, for those with support coordination funding in their plan budgets and plans more generally.

Table B.1: Total support coordination payments over time⁹

12 month period	Total support coordination payments (\$m)
Oct-17 to Sep-18	\$161 million
Oct-18 to Sep-19	\$272 million
Oct-19 to Sep-20	\$481 million
Oct-20 to Sep-21	\$667 million

For the year ending 30 September 2021, total payments for support coordination were \$667 million, with 63% of payments used to support participants with a psychosocial disability (\$166 million) an intellectual disability¹⁰ (\$154 million) or autism (\$102 million).

⁹ Total payments for support coordination is based on the total value of support coordination claims paid during each financial year.

¹⁰ Excludes Down Syndrome which is separately reported in this analysis.

Table B.2: Total support coordination payments by disability type for the year ending 30 September 2021

Disability type	Total support coordination payments for the year ending 30 September 2021
Acquired Brain Injury	\$50 million
Autism	\$102 million
Cerebral Palsy	\$29 million
Developmental Delay	\$5 million
Down Syndrome	\$15 million
Global Developmental Delay	\$2 million
Hearing Impairment	\$6 million
Intellectual disability	\$154 million
Multiple Sclerosis	\$18 million
Other	\$7 million
Other Neurological	\$49 million
Other Physical	\$25 million
Other Sensory/Speech	\$1 million
Psychosocial Disability	\$166 million
Spinal Cord Injury	\$11 million
Stroke	\$19 million
Visual Impairment	\$7 million
Total	\$667 million¹¹

Table B.3: Total support coordination payments by age group for the year ending 30 September 2021

Age Band	Total support coordination payments for the year ending 30 September 2021
0 to 6	\$13 million
7 to 14	\$56 million
15 to 18	\$43 million
19 to 24	\$62 million
25 to 34	\$88 million
35 to 44	\$98 million
45 to 54	\$128 million
55 to 64	\$144 million
65+	\$36 million
Total	\$667 million¹²

¹¹ Includes expenditure on participants with missing disability type.

¹² Includes expenditure on participants with missing age.

Average payments for non-SIL participants

Overall, the average payments for non-SIL participants with support coordination funding increased by 27% annually in the 3 years to 30 September 2021.

Across different age groups, the increase in average payments for non-SIL participants with support coordination funding was greatest for those aged 55+ as well as for those aged 0 to 14 years.

Table B.4 Average payments for non-SIL participants with support coordination funding, by age group

Age group	Oct-18 to Sep-19	Oct-19 to Sep-20	Oct-20 to Sep-21
0 to 6	\$20,446	\$29,075	\$32,339
7 to 14	\$30,648	\$40,511	\$45,021
15 to 18	\$44,439	\$57,701	\$65,474
19 to 24	\$55,255	\$64,215	\$74,223
25 to 34	\$57,949	\$66,397	\$74,113
35 to 44	\$49,014	\$59,941	\$69,238
45 to 54	\$47,318	\$61,465	\$71,341
55 to 64	\$49,540	\$66,775	\$79,266
65+	\$58,829	\$74,289	\$86,871
Total	\$46,808	\$59,374	\$68,410

Table B.5 Average annual increase in payments for non-SIL participants with support coordination funding, by age group

Age group	Oct-18 to Sep-19	Oct-19 to Sep-20	Oct-20 to Sep-21	Average annual increase
0 to 6	36%	42%	11%	29%
7 to 14	42%	32%	11%	28%
15 to 18	34%	30%	13%	25%
19 to 24	27%	16%	16%	19%
25 to 34	26%	15%	12%	17%
35 to 44	29%	22%	16%	22%
45 to 54	34%	30%	16%	26%
55 to 64	48%	35%	19%	33%
65+	43%	26%	17%	28%
Total	39%	27%	15%	27%

The average payments for non-SIL participants with a psychosocial disability, intellectual disability and autism, which account for 63% of total payments for support coordination, have increased by 36% (psychosocial disability), 25% (autism) and 22% (intellectual disability) annually in the 3 years to 30 September 2021.

Table B.6: Average payments for non-SIL participants with support coordination funding, by disability type

Disability type	Oct-18 to Sep-19	Oct-19 to Sep-20	Oct-20 to Sep-21
ABI	\$60,933	\$80,397	\$95,438
Autism	\$37,847	\$46,981	\$53,154
Cerebral Palsy	\$97,771	\$122,337	\$137,895
Developmental Delay	\$11,535	\$14,481	\$18,329
Down Syndrome	\$62,469	\$75,669	\$89,492
Global Developmental Delay	\$15,935	\$21,937	\$24,377
Hearing Impairment	\$13,433	\$17,612	\$21,197
Intellectual disability	\$47,289	\$57,533	\$67,112
Multiple Sclerosis	\$66,897	\$83,947	\$92,401
Other	\$61,378	\$59,494	\$79,564
Other Neurological	\$67,305	\$90,999	\$109,673
Other Physical	\$49,882	\$69,596	\$79,010
Other Sensory/Speech	\$9,625	\$13,862	\$17,120
Psychosocial Disability	\$25,451	\$36,604	\$46,846
Spinal Cord Injury	\$106,533	\$145,479	\$162,281
Stroke	\$63,483	\$86,811	\$104,825
Visual Impairment	\$28,853	\$37,913	\$45,850
Total	\$46,808	\$59,374	\$68,410

Table B.7: Average annual increase in payments for non-SIL participants with support coordination funding, by disability type

Disability type	Oct-18 to Sep-19	Oct-19 to Sep-20	Oct-20 to Sep-21	Average annual increase
ABI	39%	32%	19%	30%
Autism	40%	24%	13%	25%
Cerebral Palsy	38%	25%	13%	25%
Developmental Delay	28%	26%	27%	27%
Down Syndrome	63%	21%	18%	33%
Global Developmental Delay	18%	38%	11%	22%
Hearing Impairment	64%	31%	20%	37%
Intellectual disability	28%	22%	17%	22%
Multiple Sclerosis	35%	25%	10%	23%
Other	65%	-3%	34%	29%
Other Neurological	49%	35%	21%	34%
Other Physical	46%	40%	14%	32%
Other Sensory/Speech	16%	44%	24%	27%
Psychosocial Disability	35%	44%	28%	36%
Spinal Cord Injury	38%	37%	12%	28%
Stroke	67%	37%	21%	40%
Visual Impairment	49%	31%	21%	33%
Total	39%	27%	15%	27%