

NDIS Supported Decision Making Policy

April 2023

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1. Acknowledgements

The National Disability Insurance Agency (NDIA or 'we') acknowledges the Traditional Owners and Custodians of Country throughout Australia and their continuing connection to land, sea and community. We pay our respects to their Elders, past, present and emerging.

We have worked with National Disability Insurance Scheme (NDIS) participants, families, carers and the disability sector to develop the Supported Decision Making Policy (Policy). We are grateful for the time and expertise they shared with us in the development of this Policy.

We acknowledge the work of the Supported Decision Making Steering Committee, the Independent Advisory Council and members of their Intellectual Disability Reference Group, Inclusion Australia, academics, and members of our Participant First Initiative for their help in developing the Policy.

We would like to recognise the individual participants, families and carers who have shared their stories in the national consultation and our workshops. Their feedback on the Policy has been invaluable, and their time and commitment is acknowledged.

2. Policy scope

This policy covers:

- participants from when they enter the Scheme to when they exit the Scheme
- people with disability who engage with early childhood partners or Local Area Coordination partners ('partners')
- all areas of the NDIS, including NDIA staff and partners
- decisions people make about the NDIS, like applying, their goals and how to use the supports in their plan.

This policy does not cover:

- expectations about all the times and places people with disability might make decisions. For example, helping people with Centrelink, banking and health decisions is out of scope
- individual advocacy, which is different from supported decision making
- detailed information about implementation activities
- the tools, resources or other supports people with disability might use to make decisions
- detail about the legal frameworks impacting children, young people and adults with disability and how they are supported to make decisions.

3. Introduction

People with disability have the right to make their own decisions. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) outlines the rights of people with disability to dignity, autonomy, decision making, and recognition of legal capacity.

As the Australian Law Reform Commission (ALRC) outlines¹, many people with disability do not have the opportunity to make decisions. This can be because:

- people communicate with their family or carer instead of them;
- people with disability are not encouraged to be involved;
- families and carers may make decisions on behalf of them, or
- they don't have the information to support decision making.

In developing this policy, we heard that people with disability want to be respected and in control of decision making. How people communicate with them when supporting decision making is part of this.

The [National Disability Insurance Scheme Act 2013](#) (or NDIS Act) recognises the need for people with disability to make decisions that affect them. As a starting point, the NDIS Act assumes that adult participants have the ability to make their own decisions about the NDIS.

We want to strengthen the NDIS based on advice from the Independent Advisory Council (Council), feedback from the disability community and what we have learned in co-design. We want to show leadership, stewardship and improve how the NDIS supports people with disability in their everyday lives. This means we want to improve how we support people with disability to make decisions. This policy explains our role and how we will make these improvements.

In this policy we talk about **supported decision making**. This is the process of providing support to people to make decisions to remain in control of their lives. This is every person's human right. It involves building the skills and knowledge of people, their families, carers, peers and professionals.

Making decisions impacts a person's life. These can range from small decisions like what to eat today to bigger decisions about where to live. Everyone uses supported decision making, as everyone seeks support with some decisions at some points in time. There are lots of decisions a person has to make. The Supported Decision Making Policy (Policy) is focused on the decisions people make about the NDIS, like applying, their goals and how to use the supports in their plan.

¹ ALRC 2014, Easy English: Equity, Capacity and Disability Report. https://www.alrc.gov.au/wp-content/uploads/2019/08/rep_easyenglish.pdf

When we support participants to make decisions we move away from substitute decision making. This is when someone decides for the participant. Substitute decision making takes choice and control away from participants.

People need different types of supports to make different decisions. The Policy covers how the NDIS can respond to the changes in support needed to make decisions over time. A person's age and life experience impacts the decisions they make. This includes how decision making affects children and families. We think about how the policy works with families, communities, and early childhood and education settings. This is where children and young people learn decision making skills.

This policy is informed by:

- The UNCRPD and Australia's Disability Strategy 2021-2031
- The values, goals and objectives of the NDIS, in line with the NDIS Participant Service Charter
- Council advice on supported decision making
- Research, consultation and co-design
- Other relevant NDIS policies and strategies.

4. Purpose

The purpose of this policy is to improve the way people with disability are supported to make decisions in the NDIS.

It will explain:

- the role of the NDIA and NDIS in supporting people with disability to make decisions;
- how the NDIA can help children, young people and adults with disability understand their rights to make decisions, and support them to make decisions;
- the role of nominees, guardians, family members and others in supporting people with disability to make decisions about the NDIS; and
- the interaction between appointed decision makers under the NDIS and State and Territory Guardianship provisions.

5. Policy statement

Everyone has the right to make decisions that affect their life and to have those decisions respected. People must be provided with the support necessary to make and communicate decisions that affect their lives.

Supporting people with disability to make decisions is a central part of the NDIS Act. The NDIA has an important role to recognise and adopt supported decision making principles and practices in all its interactions with participants.

The ALRC looked at ways to make laws about making decisions, voting and justice fairer for people with disability in 2014. We have adopted their advice about decision making principles and recognising the role of supporters and representatives.

We are committed to:

- improving how we serve NDIS participants in line with the **Participant Service Charter** and its five principles for our engagement with participants;
- communicating our decisions in a way that can be easily understood; and
- being clear about expectations that NDIA staff, partners and support providers use supported decision making when they interact with people with disability and participants in the Scheme.

To deliver the supported decision making policy we will:

- make supported decision making part of NDIS policies, systems and processes
- promote training and resources for participants and their families and carers
- provide opportunities for participants to make their own decisions
- help all NDIA and partner staff understand supported decision making and their role
- make sure all NDIA and partner staff have the training they need, to think about what support people with disability and their supporters might need to make decisions
- ensure NDIA and partner staff have conversations about making decisions focused on each person as an individual. Looking at their strengths, and how to build and maintain supports and networks that help them make decisions and lead the life they want
- work with government and stakeholders to build approaches together that support people with disability to make decisions.

6. Principles

The ALRC recommended four National Decision Making Principles². The Royal Commission into the Violence, Abuse, Neglect and Exploitation of People with Disability (the Royal Commission)³ supported these national principles in a report on proposals for reform⁴.

People involved in the co-design of this policy also supported these principles. We have used these principles for the Policy, they are:

² ALRC (2014) 'Equality, Capacity and Disability in Commonwealth Laws'. Available here: <https://www.alrc.gov.au/publication/equality-capacity-and-disability-in-commonwealth-laws-alrc-report-124/>

³ Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. Available here: <https://disability.royalcommission.gov.au/>

⁴Supported decision-making and guardianship – proposals for reform roundtable. Available here: <https://disability.royalcommission.gov.au/publications/supported-decision-making-and-guardianship-proposals-reform-roundtable>

- a) **Recognition of the equal right to make decisions.** All adults have an equal right to make decisions that affect their lives and to have those decisions respected.
- b) **Access to support necessary to communicate and participate in decisions.** Persons who require support in decision-making must be provided with access to the support necessary for them to make, communicate and participate in decisions that affect their lives.
- c) **Decisions directed by a person's own will, preferences and rights.** The will, preferences and rights of persons who may require decision-making support must direct decisions that affect their lives.
- d) **Inclusion of appropriate and effective safeguards against violence, abuse, neglect or exploitation.** Policy and practice frameworks need to reflect laws and legal frameworks which contain appropriate and effective safeguards for interventions for persons who may require decision-making support, including to prevent abuse and undue influence.

The Royal Commission's work is not finished. If recommendations are made about the national principles, or other relevant areas, we may update this Policy to align with this work.

On the 18 October 2022, the Minister for the NDIS announced a review of the National Disability Insurance Scheme. The NDIS Review will look at the design, operations and sustainability of the NDIS. This policy may be reviewed if any Review findings relate to Supported Decision making (including conflict of interest).

7. Roles and responsibilities

Adult participants and people with disability have the role of decision maker.

Supporting NDIS participants to make decisions is a shared responsibility between many people, organisations, and levels of government.

The relationship between people with disability and their families and carers is to be recognised and respected when implementing this Policy⁵.

External support is important for many people when making decisions. This includes having strong, trusting and collaborative relationships with a broad range of people in a support network to facilitate decision making.

The NDIA works alongside the NDIS Quality and Safeguards Commission, mainstream services, community organisations and participants with their family, friends, paid and unpaid carers and support providers.

The ALRC has identified two types of roles which help make decisions:

⁵ See section 4 (12A) of the NDIS Act

- **Representatives** assist a person who requires support to make decisions or, where necessary, makes decisions on their behalf. The decision made by the representative reflects the will and preferences of the person they are assisting. In the NDIS, representatives include child representatives and NDIS nominees. Under this policy, representatives acting in the NDIS will adopt the NDIS approach to supported decision making. Other representatives appointed outside the NDIS may include guardians under state or territory law. While child representatives, NDIS nominees and guardians may also provide decision support, they are referred to as representatives in this Policy as they have the authority to make decisions on behalf of the person they represent. See Section 12 – *Recognise, appoint and review representatives in the NDIS* and Section 13 – *Other representatives appointed outside the NDIS*.
- Supporters assist a person who requires support to make decisions. A supporter does not make the decision. We say ‘**decision supporters**’ in this policy⁶. People with disability can select people to be their decision supporters. Decision supporters can include family, friends, carers, peer networks, advocates, or support providers. Under this policy, decision supporters acting in the NDIS will adopt the NDIS approach to supported decision making. See Section 11 – *Recognise decision supporters in the NDIS*.

Our role in supported decision making

Our role is to develop and implement this supported decision making policy. This is an opportunity to lift everyone’s expectations about supported decision making.

Together with our partners we can help participants through the decision making process by providing information and communicating in their preferred way. We will need to improve our processes to do this well for everyone.

NDIA staff are not representatives for people with disability – they are not able to make day to day decisions on a participant’s behalf.

Under the NDIS Act some NDIA staff (access and planning delegates) have the responsibility to make key NDIS decisions about things including access to the NDIS, the appointment of NDIS nominees and the supports approved in a plan. We have to provide reasons for reviewable decisions⁷.

NDIS planners must prepare the statement of participant supports in a participants plan with the participant, and decide what supports are reasonable and necessary to approve in individual circumstances⁸. NDIS funding for supports such as network facilitation and Microboards⁹ may be available if it is reasonable and necessary.

⁶ Note - Our position is to seek consistency and use clear terms. This policy will align with the ALRC report and any Royal Commission recommendations on supported decision making framework and whole of government language, where supported by the Government.

⁷ Section 99 of the NDIS Act outlines all the decisions we make that are reviewable decisions.

⁸ Section 33(2), NDIS Act.

⁹ See: <https://cosam.org.au/national-resource-centre/microboards/> for an explanation.

There are people and organisations with certain roles and responsibilities to support people with disability and participants in the NDIS. Partners are community-based organisations funded by the NDIA to help deliver the NDIS in some parts of Australia. There are early childhood partners and local area coordination partners. Support coordinators help participants understand and use NDIS funded supports in their plan to pursue their goals. Plan managers support participants to manage the funding in their NDIS plan.

Partners, support coordinators and plan managers are not representatives; they cannot make decisions on behalf of a participant. Under this policy partners, support coordinators and plan managers will adopt the NDIS approach to supported decision making.

As part of their development, children and young people learn foundational decision-making skills from their families, communities and in early childhood and educational settings. The NDIA has a role in supporting young people with disability and encouraging opportunities and environments where this can happen.

The NDIS Quality and Safeguards Commission has oversight of the conduct of registered providers of support under the NDIS.

Attachment A explains the roles and responsibilities of the different groups of people involved in supported decision making. The principles of supported decision making outlined in this policy are relevant to everyone.

Capacity building for supported decision making

We recognise that the Commonwealth Government invests in capacity building for supported decision making. For example, there are:

- advocacy supports and services funded by the Department of Social Services (DSS);
- connections between people with disability and the communities they live in through the Information Linkages and Capacity Building program, funded by the DSS; and
- funding arrangements for primary and secondary students with disability consistent with the Schooling Resource Standard, funded through State, Territory and Commonwealth governments.

We will work collaboratively across Government, and with States and Territories to promote supported decision making.

The NDIS will not duplicate support made by Commonwealth, State or Territory bodies. It is not the role of the NDIS to fund advocacy supports and services.

8. Approach to Supported Decision Making

The approach to supported decision making in the NDIS:

1. is individual to each person;
2. recognises the role of relationships, kinship and trust;

3. looks at decision making as a process
4. takes a lifespan approach; and
5. recognises the importance of key transitions in a person's life.

1. Individual

People need different types, amount and frequency of support to make different decisions. Their need for decision making support may change over time.

People communicate their decisions and preferences in different ways, including through expression and how their expression is interpreted by people who know them well. A supported decision making approach needs to be appropriate for the person.

The NDIA recognises that all participants, including people with profound intellectual and multiple disability, have the right to support to make or direct decisions that impact their lives.

Supported decision making principles apply to everyone. This includes people with profound disability who rely on other people to determine their wishes and make decisions. These decisions should still be based on an understanding of their will and preferences.

Many factors contribute to determining the support a person needs to make decisions, including:

- the nature of a person's disability;
- if their disability is episodic and fluctuating;
- age;
- culture and background;
- identity;
- experience;
- a person's preferred communication style and support needs (for example, this includes Alternative and Augmentative Communication (AAC));
- the decision being made;
- the people someone has in their life; and
- the support they have available to them.

Some people will always need support to make decisions. This could be for many reasons, including their communication style, a preference for decisions to be made as a family group or using communal decision making processes, or support is required for the person to make informed decisions.

Time is also a key factor in decision making. It can take time to read and understand information, to think about options, get input and support and then express and review decisions. Different timeframes are needed for different people.

NDIS participants:

- need the time that is right for them to make decisions
- need support to understand the NDIS and to get independent information, in an accessible format, about how the NDIS works
- should be able to ask for and get help when they need it
- have the right to delay or defer decisions
- have the right to refuse or decline support
- have the right to delegate decision-making to others, formally or informally
- have the right to try things out, change their mind and consider other options even after decisions have been made; and
- need for support can be affected by factors including:
 - the type, complexity and significance of the decision to be made,
 - current circumstances including emotional state, mental and physical health, time of day, and environment.

2. Relationships, kinship and trust

Relationships and kinship are the connections people have with others in their lives who support them to make decisions. We respect that relationships and cultural context are an important part of supported decision making.

We understand that decisions are made in the context of a person's identity and relationships with others. The relationship of trust between people and their decision supporter is important.

The NDIA recognises relationships and kinship can be central to decision making, have safeguarding benefits, and support self-determination of people with disability.

3. Decision making is a process

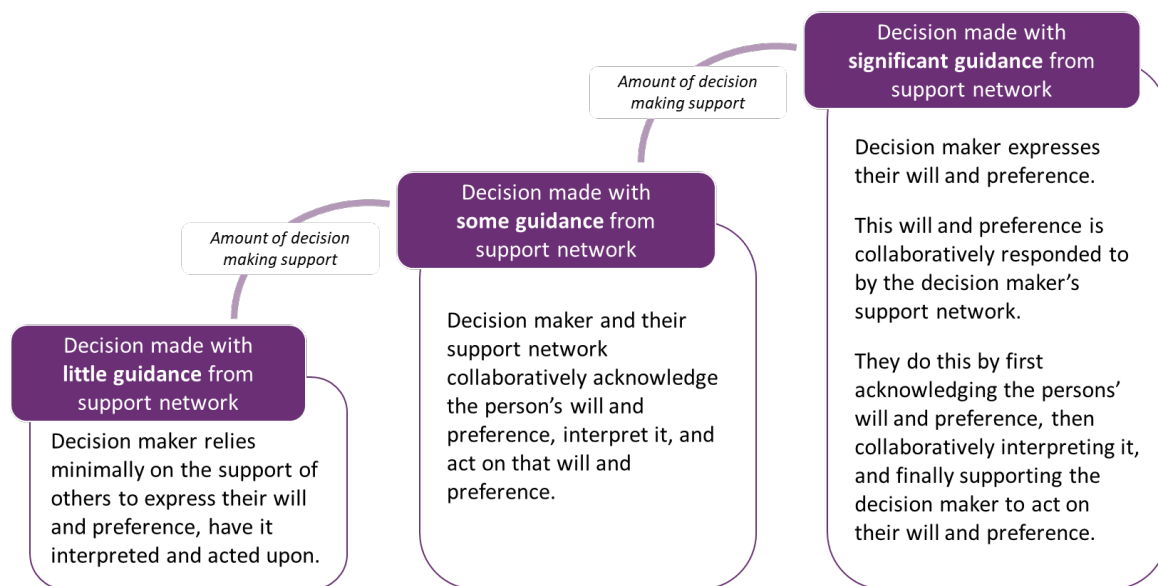
Making decisions is a process influenced by different circumstances in our lives. These can be personal to us and who we are, environmental (where the decision is being made) and contextual (other factors that might influence the decision, such as time of day or deadlines).

Each decision represents an opportunity for a person to learn or strengthen their decision making skills and knowledge, and to communicate their choices.

This picture explains how supported decision making can involve different amounts of decision making support. A person may make decisions with little guidance, some guidance, or

significant guidance from decision supporters in their support network. In each example a person is supported to act on their will and preference.

Picture 1: Supporting a person with disability to make decisions¹⁰



4. A lifespan approach

Our age and life experience influence the types of decisions we make, and when and how we are supported to make decisions.

Decisions can get harder and more complicated as people grow older and move from childhood to adulthood. This means decision making is a skill that is learnt throughout life, which grows over time and needs to be practiced from early childhood¹¹. We call this a lifespan approach to supported decision making.

Evidence shows that children gain confidence when adults provide guidance and encourage them to take responsibility for themselves¹². Children express preferences from birth, and with support from family and others, make decisions appropriate for their age.

In the context of the NDIS, support to make decisions for children comes through families or others who have parental responsibility (see section see section 12 – *recognise, appoint and review representatives in the NDIS*).

The lifespan approach encourages children and young people to be involved in their NDIS decision making processes. This includes age-appropriate involvement in discussions led by

¹⁰ Picture reproduced with permission from Watson, J. (2021). *NDIS Support for Decision Making Consultation: Submission from Deakin University*. Retrieved from <https://www.ndis.gov.au/community/we-listened/consultation-submissions>. The concepts described in the picture are based on research reported in Watson, Wilson & Hagiliassis (2017) Supporting end of life decision making: Case studies of relational closeness in supported decision making for people with severe or profound intellectual disability. *Journal of applied research in intellectual disabilities : JARID*,30(6), 1022–1034. <https://doi.org/10.1111/jar.12393>

¹¹ [Decision-making schools - Be You](#)

¹² [Decision-making early childhood - Be You](#)

partners, and the weight of a child's views should reflect the developing capacities of each child. The transition towards a young person building experience and taking on more decision making may require more support.

Decision making continues throughout a person's life. In some circumstances there will be a need for participants to re-learn decision making skills and confidence. People with disability who are aging also have the right to have their decisions respected and acted upon.

5. Transitions and supported decision making

In the NDIS context, transitions can influence who has the legal authority to make decisions, for example, transitioning from a child representative arrangement. These changes may occur based on age (for example, when turning 18) or individual circumstances. In this situation, NDIA staff and partners will work with the person with disability to understand the decision supports they need for their will and preference to be heard and acted upon.

The NDIA will work with the person with disability to understand the decision supports they need at key transition stages in life. Transition stages are things like the end of school or other big events like changes in support networks or a person's support needs. Transition periods might impact the need for decision support.

9. Supported Decision Making and the NDIS

The NDIA will start from the position that all people need varying levels of support for decision making. In supporting people with disability to make decisions, the NDIA will seek to understand a person's decision support needs and who is supporting that person, rather than assess a person's capacity to make decisions.

Some NDIA staff and partners directly support people to make decisions. This may include by providing connections and referrals to supports, and information needed to make a decision.

To build skills and carry out a person's decisions, support may also come from:

- Plan Managers;
- Support Coordinators;
- advocates (for example, funded by National Disability Advocacy Program);
- other decision supporters – this might be other people in the person's life who help make decisions, including family, partners, friends, peers; and
- support providers, and many others.

People with disability and their families or carers who are first interacting with the NDIS will likely engage with a partner organisation. Partners work with people with disability and families or carers to look at where and how someone's support needs could be met. The partner can:

- consider a person's decision support needs, (if any);
- support linkages and referral to community and mainstream services; and

- assist with applying to access the NDIS.

If people with disability and participants have no one to support their decision making and are in need of support, we will consider a number of actions based upon the person's individual need, including:

- make referrals to community, mainstream and independent advocacy organisations
- assist them to apply for the NDIS; and
- provide reasonable and necessary supports.

Funding of decision supports for NDIS participants

The NDIS Act outlines how the NDIS must work. There are two parts in the Act which are important for supported decision making:

- a participant's statement of participant supports must be prepared with the participant and approved by the NDIA¹³. This is in section 33 of the NDIS Act; and
- the NDIA must give reasons for all reviewable decisions (including the decision to approve the statement of participant supports in a plan) to each person directly affected by the decision¹⁴. This is in section 100 of the NDIS Act.

Decision making support needs will be considered as part of planning and participants can request a change to their plan at any time. Support may be provided as general support or reasonable and necessary capacity building support depending on the person's circumstances. We will fund decision making supports where the support is a reasonable and necessary support. [Our guideline](#) on reasonable and necessary supports explains what we can fund under the NDIS. Reasonable and necessary supports funded in a participant's plan must meet the criteria in section 34(1) of the NDIS Act and Part 5 of the NDIS (Supports for Participants) Rules¹⁵. The NDIA will consider the participant's:

- a) individual needs and circumstances;
- b) support needed to make decisions; and
- c) existing supports and support network.

There are a range of tools and supports that can assist people to make decisions. This may be to build decision support skills, setup or build support networks. These are summarised in Attachment B.

10. Recognise decision supporters in the NDIS

¹³ Section 33(2), NDIS Act

¹⁴ Section 100(1), NDIS Act

¹⁵ See section 34(1), NDIS Act; Part 5, NDIS (Supports for Participants) Rules

The NDIA will support participants to be at the centre of their decisions as the decision maker.

Decision supporters

In the NDIS, the term ‘**decision supporter**’ means anyone chosen by the participant or person with disability to support them to make a decision. They can ask any person they would like to be their decision supporter, and may select more than one.

Decision supporters must not make the decision on behalf of the person with disability.

This is different from a ‘representative’ as discussed in section 12 – *Recognise, appoint and review representatives in the NDIS*.

We acknowledge and respect the role of decision supporters in enabling people with disability to make decisions. Decision supporters can promote independence, social and economic participation, and choice and control in the planning and delivery of supports.

The NDIA will recognise the role of the decision supporter and their relationship to the person, how they support the person, and in what capacity. The NDIA or partner will record who the participant has selected to be a decision supporter for NDIS decisions, and identify the particular consents given to this decision supporter. For example, the decision supporter for decisions about everyday goals may be different from the decision supporter for decisions about relationships or where to live. The role of decision supporter will be clearly recorded as distinct from a NDIS nominee role.

The principles of informed consent will guide the recording of decision supporters. Informed consent is where a person, sometimes with the help of their decision supporters, understands the risks, benefits and alternatives of their decision to give consent. See section 13 – *Dignity of risk, consent, influence and safeguards*.

The NDIA will promote supported decision making by sharing information and connecting decision supporters to training. Education, awareness and training options based on good practice and the experiences of people with disability will build decision supporters’ knowledge and skills about supported decision making.

11. Recognise, appoint and review representatives in the NDIS

Representatives, supported decision making and the NDIS law

There are two types of representatives under the NDIS Act: child representatives and nominees. Child representatives make decisions about the NDIS on behalf of participants under the age of 18 (children)¹⁶. Nominees make decisions about the NDIS on behalf of participants over the age of 18 (adults).

The NDIS Rules, which are made under the NDIS Act, set out the operation of the NDIS. These include the [NDIS \(Nominees\) Rules](#) and the [NDIS \(Children\) Rules](#).

¹⁶ Section 9, NDIS Act

As a starting point, the NDIS Act assumes that adult participants have the ability to make their own decisions about the NDIS. We will only appoint a representative to make decisions on an adult participant's behalf if the participant can't be assisted to make the decision, or they do not want to make the decision, for themselves.

There are two types of nominees:

1. Plan nominee: make decisions about a participant's plan and/or the management of the participant's plan funding.¹⁷ We can limit the types of decisions a plan nominee can make. For example, we can decide that a plan nominee is only able to make decisions about the management of a participant's plan funding.¹⁸
2. Correspondence nominee: cannot make decisions about a participant's plan or the management of the participant's plan funding.¹⁹ Correspondence nominees do other things on behalf of participants. For example, they can request information from us, or received letters from us, on a participant's behalf.²⁰

Our policy position on child representatives and nominees is that:

- supported decision making must be encouraged;
- representatives (child representatives and NDIS nominees) will not be appointed as an alternative to providing appropriate support;
- we will only appoint plan nominees on our own initiative if a participant cannot be supported to make their own decisions about the NDIS.²¹
- the will, preferences and rights of all participants will direct decisions that affect their lives.

In addition to the ALRC and Royal Commission principles, there are whole-of-government and legal frameworks to supporting children and young people which the NDIA must work within. These approaches generally adopt a '*best interest approach*' to supported decision-making and are protection-focused. Some of these are:

- a) Safe & Supported: The National Framework for Protecting Australia's Children 2021-2031; and
- b) Australia's Youth Policy Framework (2021).

The NDIS Act sets out principles child representatives are to follow when acting on behalf of a child participant. One of those principles is that the best interests of the child are paramount and there is a need to:

¹⁷ Section 78(1), NDIS Act.

¹⁸ Section 78(1), NDIS Act.

¹⁹ Section 79(1), NDIS Act

²⁰ Rule 3.9, *NDIS (Nominee) Rules 2013*.

²¹ see rules 3.1, 3.3 and 3.14(b)(i)-(ii) and 3.15, *NDIS (Nominee) Rules 2013*

- protect the child from harm;
- promote the child's development; and
- support positive relationships between the child and their parents, family members and other significant people in their life²².

We want to see supported decision making used by child representatives and NDIS nominees so that, where possible, the will and preferences of participants direct decisions that affect their lives.

For adult participants (over 18 years of age), there may be times when a person wants someone else to make decisions on their behalf and in very limited circumstances a person may be unable to make decisions about the NDIS themselves even with support (See Section 14 – *Dignity of risk, influence and safeguards*).

A participant may have representatives appointed outside of the NDIS, such as a Centrelink nominee, a power of attorney, guardian, or through an advanced health directive. These roles are discussed in section 13 '*Other representatives appointed outside the NDIS*'.

Child representatives

Participants under 18 years of age have one or more child representatives who are responsible for making decisions about the NDIS on their behalf. A child's representatives(s) will usually be the person who has, or the persons who jointly have, parental responsibility for the child²³. If the child has a guardian, the guardian will usually have parental responsibility for the child²⁴. If the child does not have a guardian, any person who satisfies one of the parental conditions in section 75(1) of the NDIS Act has parental responsibility for the child for the purposes of the NDIS Act.

All people with parental responsibility in a child's life need to be identified, verified and recorded by the NDIA as child representatives. In exceptional cases, the NDIA may need to appoint a person who does not have parental responsibility for a child to be the child's representative under the NDIS Act.²⁵ For example, we may make this type of decision when there is a lot of uncertainty about who has parental responsibility for the child.²⁶

If we think a child is capable of making their own decisions, and that it is appropriate for them to do so, we can decide that the child does not need a child representative for NDIS purposes in the NDIS Act.²⁷ This means the child will make their own decisions about the NDIS. We call this 'self-representing'.

²² Section s5(f), NDIS Act

²³ Section 74(1)(b), NDIS Act

²⁴ Section 75(2), NDIS Act

²⁵ Section 74(1)(b), NDIS Act

²⁶ Rule 3.3 NDIS(Children) Rules

²⁷ Section s74(5), NDIS Act

There are things the CEO must do and think about before deciding that a child can make their own decisions about the NDIS and that it is appropriate for them to do so²⁸. For example, the CEO must consult with the child and their representative(s).

Under this policy:

- only a child representative can act on behalf of and receive information about a participant under the age of 18;
- the NDIS will support child representatives in assisting children to develop decision making skills;
- participants who are children may request to self-represent. The NDIA may consider it appropriate for the child to represent themselves and will support children and child representatives in exploring this option; and
- the NDIS will support child representatives to use a supported decision making approach. This involves connecting child representatives with supported decision making training and resources early, so they are prepared to assist child participants through the transition from 'childhood' to 'adulthood' (18 years of age).

NDIS nominees

In the NDIS, the word 'nominee' is used to talk about a representative that is appointed by the CEO under the NDIS Act to act on behalf of a participant who is 18 years or older. In this policy we say 'NDIS nominee'. Being a nominee is a voluntary role.

A participant may request a nominee or we may initiate an appointment.²⁹ There are different considerations in the NDIS Rules for when a participant requests a plan nominee³⁰, compared to if we appoint a plan nominee on our own initiative³¹. We must take into account the wishes of the participant before appointing a person as a plan nominee on our own initiative.

The appointment of a NDIS nominee must only be made after other decision support options have been tried, tested, considered or reasonably exhausted. When deciding whether to appoint a NDIS nominee, the planner will consult with the participant, their family and carers.

NDIS nominee appointments must have a review date, and the appointment must be regularly reviewed. A participant may have more than one person appointed to be their plan nominee, and a plan nominee appointment may be limited to only some matters.³²

The scope of a nominee's appointment is set out in a document called an 'instrument of appointment'. The nominee's obligations and duties are set out in the NDIS Act and Nominee Rules. Further information about nominees can be found on the NDIS website.

²⁸ See Rules 5.1, 5.2 and 5.3, *NDIS (Children) Rules*.

²⁹ Section 86(2) and 87(2), NDIS Act

³⁰ See Rules 3.12 and 3.13, *NDIS (Nominees) Rules*.

³¹ See Rule 3.14, *NDIS (Nominees) Rules*

³² Section 86(3) and 86(6), NDIS Act.

12. Other representatives appointed outside the NDIS

In some cases participants and people with disability who apply for the NDIS will have representatives appointed who can make decisions in other areas of their life, or such an appointment may be in progress.

We recognise court appointed decision makers made by state and territory bodies have the authority to make decisions in relation to a participant as set out in each particular order.

A court appointed decision maker however does not automatically become a nominee, as this is a separate and voluntary appointment under the NDIS Act 2013.

Other representatives may have duties that overlap with the duties of a NDIS nominee, or might be limited to different duties from that of a NDIS nominee. We need to be clear on who can make decisions in the NDIS and have this recorded and regularly reviewed.

We will record any request to appoint a representative, along with the particular duties requested for this representative. If the requested representative duties do overlap with those of a NDIS nominee, this request will need to go through the NDIS nominee appointment process before that person could make a decision on behalf of the participant in the NDIS. We will need to look at the supports provided to meet the person's decision making support needs.

Appointed decision makers

Formal arrangements may be made between the participant and another appointed person. This means the appointed person is able to make a decision on the participant's behalf (for example, a power of attorney, an advance health directive or appointment as an enduring guardian under state or territory law). In the context of the NDIS:

- a participant appointed decision maker can make some but not all NDIS decisions. They are not automatically a NDIS nominee;
- a participant appointed decision maker may go through the process to be appointed as a NDIS nominee if they choose;
- where a NDIS nominee has been appointed, they can only make decisions about the area they have been appointed to; and
- if there is a NDIS nominee and another appointed decision maker has overlapping duties, the NDIS nominee is the person with the authority for making NDIS decisions (for matters within the area they have been appointed to).

Tribunal or court appointed decision makers

We recognise court appointed decision makers made by state and territory bodies. Where there is interaction with state and territory appointed decision-makers, such as guardians and administrators, we will explain that:

- an existing state or territory appointed decision maker can make some but not all NDIS decisions and is not automatically a NDIS nominee;

- a decision maker, with the relevant authority, appointed under a state or territory law can interact with the NDIS on behalf of a prospective participant;
- state and territory appointed decision makers may go through the process to be appointed as a nominee if they choose;
- where a NDIS nominee has been appointed, they can only make decisions about the area they have been appointed to; and
- if there is a NDIS nominee and a tribunal or court appointed decision maker has overlapping duties, the NDIS nominee is the person with the authority for making NDIS decisions (for matters within the area they have been appointed to).

13. Dignity of risk, consent, influence and safeguards

Dignity of risk

People with disability have the right to make decisions that involve risk. Risk should be considered and discussed during the decision making process. Through supporting risk and encouraging people to make choices and take chances, people can learn and increase self-esteem, self-respect, empowerment and hope, leading them to live self-determined lives.

Sometimes a decision supporter won't agree with a decision a participant has made. For example, the decision might not match their own judgements and be different to the decision that the supporter would make. This doesn't mean that the participant can't make the decision. Where a participant has expressed their will and preference, and made an informed decision with support, anyone subsequently providing support and services should do so in a way that supports them to act on their decision. Taking risks is an essential part of growth. Dignity of risk means exploring new opportunities and extending a person's choice.

In limited circumstances a participant's decisions (including those which may have been supported by a decision supporter – see section on *conflict of interest, undue influence and acquiescence* below) may put them at unreasonable risk and they may not be able to understand the risk and potential consequences of their decision(s), even with support. This may include serious, imminent risk of physical, financial or legal harm to themselves or others. In these situations, a participant's wellbeing (and the wellbeing of others) will be prioritised alongside their will and preference, and a substitute decision making arrangement (plan nominee) put in place for the limited time required.

An example may be where someone who requires episodic decision making support has expressed a will to have safe and stable accommodation, and then decides to leave this accommodation when experiencing a heightened state or fluctuation in their condition. In these situations, where a person's immediate preferences put them at risk and they may not be able to understand the risk, the representative making the decision should consider the participant's wellbeing and long-term will as expressed when they were feeling well, rather than their immediate preference.

In these circumstances we can appoint a plan nominee without a request from the participant.³³³⁴ In deciding whether to make the appointment, the CEO must have regard to the principle that a nominee should be appointed only when necessary, as a last resort, and subject to appropriate safeguards outlined in the Nominees Rule³⁵. All nominees have a duty to ascertain the wishes of the participant and to act in a manner that promotes the personal and social wellbeing of the participant.³⁶

Plan nominees appointed on the CEO's own initiative have additional duties. Importantly, they may only make a decision about the NDIS on the participant's behalf if they consider the participant is incapable of making the decision for himself/herself.

Consent

Participants have the right to share information, have people support them or have others do things on their behalf. The NDIS will approach seeking consent as an ongoing process rather than a one-off event. Informed consent means that people are adequately informed, understand, and agree to what they are consenting to.

Some people cannot, or will not, consent to supported decision making, but they still have the right to it. For example, a person may not identify with their disability and therefore not consent to needing support for their decision making; or they may have a fluctuating disability such as a psychosocial disability, requiring episodic decision making support when unwell, and may not consent to that level of support when they are feeling well.

We will accept consent given by participants with complex communication support needs through alternative means of communication.

Conflict of interest, undue influence, and acquiescence

Supporters and representatives who work with participants need to be aware of conflicts of interest (perceived or actual) and take steps to identify and manage such conflicts.³⁷ They also need to be careful not to unduly influence a participant's decisions.

A conflict of interest is when a decision supporter or representative puts what will benefit them (their own interests) ahead of the interests of the person they are supporting to make a decision. This means the person with the conflict could influence the person they are supporting to make a decision that is easier for, or benefits, them instead of the participant. Undue influence occurs when the person making the decision is pressured into making a decision that is not what they actually want.

Steps to identify and manage conflicts of interest include:

³³ Section 86(2), NDIS Act

³⁴ Section 87(2), NDIS Act

³⁵ Rule 3.14(b)(ii) NDIS Nominees Rules

³⁶ Section 80(1), NDIS Act

³⁷ Rule 5.12 for Nominees

- the person with the conflict explains any potential conflict of interests to everyone involved, including the decision maker and the NDIA or partner;³⁸ and
- the person with the conflict may find ways to reduce the conflict, for example involving other decision supporters to assist with understanding the will and preference of the participant or person with disability; or
- the conflicted person not being involved in the decision making process and finding an independent supporter or representative for those decisions where there is a conflict.

Families and carers are often the chosen supporter. It is important they are supported to identify and acknowledge their own possible conflicts of interests, and those that other parties may have in a participant's decision.

We will work in partnership with the disability sector to address situations where real or perceived conflict of interest or undue influences may be negatively affecting participant decision-making and outcomes.

Decision supporters and representatives who work with participants must also be aware of acquiescence. When people communicate 'yes' or accept and agree with things regardless of what has been asked, or without really wanting to, this is called acquiescence.

People may try to mask communication difficulties or use strategies to hide that they don't understand information, or they might have been put on the spot when they need time to think it through. Decision supporters and representatives need to watch out for signs that the person they are supporting is unwillingly communicating 'yes' or is communicating what they think they should - when this doesn't reflect their will and preference. They might need to go over the supported decision making process again, asking a different way or at another time, and expressing that it is ok to say no if this is not what they want.

Safeguards and supported decision making

The NDIA's approach to supporting participant safety is detailed in the NDIS Participant Safeguarding Policy. The NDIA is committed to supporting and working with all people with a disability who engage with the NDIS to take steps to protect their right to be safe. The NDIA will work proactively with people with disability to build a shared understanding of individual risks and develop preventative safeguards against harm. We commit to uphold our obligations to safety while respecting participants' right to dignity of risk.

We recognise that decision supporters, an independent advocate and strong support networks can provide safeguards. This can include managing conflict of interest and undue influence and providing space to take risks in decision making.

³⁸ Rule 5.12 for Nominees

We will take steps to address real or perceived conflicts of interest. There are circumstances where independent decision making support is important to mitigate undue influence and potential conflicts of interest.

We will work with the NDIS Quality and Safeguards Commission to:

- Identify conflicts of interest.
- Support participants to understand where conflicts of interest may arise and ensure they are aware of their options.

This Policy will work in partnership with work on improving support coordination for NDIS participants.

Being included and welcomed in community and work forms a safeguard. This creates opportunity to experience and practice decision-making, and develop friendships, support networks and other relationships that enhance economic and social health and wellbeing.

NDIS Code of Conduct

NDIS providers, whether they are registered or not, and NDIS workers have an obligation to comply with the [NDIS Code of Conduct: Guidance for NDIS Providers](#)³⁹. The NDIS Code of Conduct requires NDIS providers and workers to act with integrity, honesty and transparency.

In particular, the NDIS Code of Conduct requires all NDIS providers and workers to:

- 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.

The [NDIS Code of Conduct: Guidance for NDIS Providers](#)⁴⁰ and [NDIS Code of Conduct: Guidance for NDIS workers](#)⁴¹ provide more information and includes scenarios to illustrate this guidance. The [NDIS Practice Standards](#) has guidance for registered NDIS providers to avoid real or perceived conflicts of interest in the delivery of supports and services.

The NDIS Commission can take action if it identifies a provider or worker doesn't meet their obligations under the NDIS Code of Conduct or the NDIS Practice Standards. Participants,

³⁹ NDIS Code of Conduct: Guidance for NDIS Providers p.19-21

⁴⁰ NDIS Code of Conduct: Guidance for NDIS Providers p.19-21

⁴¹ NDIS Code of Conduct: Guidance for NDIS Workers p.18-19

providers and other stakeholders can raise concerns including potential real or perceived conflicts of interest with the [NDIS Commission](#) for further investigation. We will also raise any concerns with the NDIS Commission if we become aware of situations where a support provider has a real or perceived conflict of interest that may be negatively affecting participant outcomes.

14. Implementation plan

The Policy looks at how we support people with disability to make decisions. The Policy is the first step in addressing challenges faced by people with disabilities and their supporters to improve our approach to supported decision making.

We are committed to working together to implement the policy with the people it affects.

See the *Supported Decision Making Implementation Plan* for an outline of key actions and future work needed to successfully implement the Policy.

Context for implementing this policy

This Policy is drafted in a way that seeks to improve supported decision making while acknowledging there is more to be done in this area to ensure all people with disability are supported to make decisions about their own lives.

Australia was one of the first countries to ratify the United Nations Convention on the Rights of People with Disabilities (UNCRPD), on 17 July 2008. A General Comment was made by the Committee on the Rights of Persons with Disabilities about equal recognition before the law. This is explained in a [plain English summary](#). It refers to Governments that have signed the convention changing laws that say other people can make decisions for people with disability.

We support the ALRC's recommendation for a nationally consistent supported decision-making framework.

15. Measuring the impact

A Monitoring and Evaluation Strategy will be developed to monitor the effectiveness of the Policy's implementation over the next 12 months. This evaluation will inform future revisions of the Policy and related documents.

16. Words we use

Table1 – Words we use

Words we use	What they mean
Acquiescence	When people communicate 'yes' or accept and agree with things regardless of what has been asked, or without really wanting to.

Words we use	What they mean
Conflict of interest	<p>When a person puts what will benefit them (their own interests) ahead of the interests of the person they are supporting.</p> <p>A Conflict of Interest may be:</p> <ul style="list-style-type: none"> • Actual – it happened. • Potential – it might happen. • Perceived – it seems like , has or might happen
Decision making support	<p>Means assisting, or supporting, a person to reflect their will and preference in making an informed decision. This could be by giving them the tools they need to make the decision. It does not mean making the decision for them.</p>
Decision supporters	<p>Decision supporters are anyone chosen by the participant or person with disability to support them to make a decision.</p> <p>They can ask any person they would like to be their decision supporter, and may select more than one. Decision supporters are people who have the participant’s consent to assist them with making decisions. This can include family, friends, carers, peer networks, advocates, or support providers. Decision supporters are different from a ‘representative’.</p>
Human rights	<p>Basic rights and freedoms that should happen for every person in the world.</p>
Representatives	<p>Representatives assist a person who requires support to make decisions or, where necessary, makes decisions on their behalf. The decision made by the representative should reflect the will and preferences of the person they are assisting. They may be chosen by the person who requires support or appointed by others. In the NDIS, representatives include child representatives, plan nominees and correspondence nominees.</p>
Safeguards	<p>Safeguards are actions designed to protect the rights of people to be safe from the risk of harm, abuse, neglect, or exploitation, while maximising the choice and control they have over their lives⁴².</p>
Substitute decision making	<p>This is when someone decides for the person who needs decision making support. It can take choice and control away from them. We encourage supported decision making to be used in the NDIS rather than substitute decision making.</p>

⁴² NDIS Quality and Safeguarding Framework, December 2016, pp 102.

Words we use	What they mean
Supported decision making	<p>The process of providing support to people to make decisions to remain in control of their lives. This is every person’s human right.</p> <p>Supported decision making is a rights based approach that assists a person who requires decision making support to make, and/or communicate, decisions about their own life.</p> <p>It does not mean making the decision for them.</p>
Undue influence	<p>Undue influence occurs when a person is pressured into making a particular decision by another person. This decision may not be what they person who needs decision support actually wants to do.</p> <p>This pressure can take the form of deception, harassment, threats, or isolation.</p> <p>People who need decision support must be able to exercise their own free will in the decision making process.</p>
Will	<p>Will means what some wants or wishes to do, it’s what a person is trying to achieve in their life. For example, a person’s will might be to be more independent (and their preference is to move out of the family home into a unit with friends). Understanding a person’s will helps to understand why they have particular preferences⁴³.</p>

17. Related documents

[Participant Safeguarding Policy](#)

[Self-Management Policy](#)

[Appointing a nominee Guidance](#)

[Reasonable and necessary Guidance](#)

[Child Representatives Guidance](#)

This Policy also relates to other Commonwealth documents and initiatives. For example, Australia’s Disability Strategy and upcoming work on a National Autism Strategy.

⁴³ [glossary-final.pdf \(supportfordecisionmakingresource.com.au\)](#)

Attachment A: Roles and responsibilities

Table 1 – Roles and responsibilities in supported decision making

Who	Role	Responsibilities
Child Representative	<ul style="list-style-type: none"> • Make decisions about the NDIS on behalf of a participant under the age of 18 (a child) • Compliance with NDIS Act 	<ul style="list-style-type: none"> • Uphold the participant's right to make decisions • Create opportunity for the participant to be part of making decisions about their life • Make decisions on behalf of the participant that are consistent with the will and preference of the participant where possible
Decision Supporter	<ul style="list-style-type: none"> • Provide independent decision support • Support the participant to make the decision • Build the participant's skills to make their own decisions • It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ make decisions on behalf of participants 	<ul style="list-style-type: none"> • Uphold a person's right to make their own decisions • Provide support to participants to make their own choices and decisions • Avoid exerting undue influence on a participant • Avoid or manage conflict of interest
Department of Social Services	<ul style="list-style-type: none"> • Fund information and referral services • Fund capacity building and decision making opportunities such as peer support • Fund independent advocacy 	<ul style="list-style-type: none"> • Work with NDIA to support ongoing supported decision making policy and national harmonisation • Infrastructure to support peer support network

Who	Role	Responsibilities
Independent advocacy	<ul style="list-style-type: none"> • Provide independent advocacy • Support the participant to make the decision • Build the participant's skills to make their own decisions • Based in independent advocacy organisations and Disability Representative Organisations (DROs) to reduce conflict of interest or undue influence • It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ make decisions on behalf of people with disability 	<ul style="list-style-type: none"> • Uphold a person's right to make their own decisions • Provide support to participants to make their own choices and decisions • Avoid exerting undue influence on a participant • Avoid or manage conflicts of interest • Provide supported decision making to participants who do not have informal supporters available • Risk enablement
NDIA (National Disability Insurance Agency)	<ul style="list-style-type: none"> • Policy development and implementation – opportunity to lift everyone's expectations about supported decision making • Develop guidance material • Improve NDIS processes (including consent for supported decision making, and to identify decision support needs) • Explain how the supported decision making policy interfaces with the state and territory guardianship systems 	<ul style="list-style-type: none"> • Use the term 'supported decision making' consistently in all documentation • Comply with the ALRC principles • Make reasonable and necessary decisions about supports in participant plans, including decision making supports • Work with DSS and other government departments to promote supported decision making and national harmonisation • Address barriers to supported decision making within the NDIS <p>Develop clearer information on how the NDIS interacts with guardianship.</p>

Who	Role	Responsibilities
NDIS Nominee	<ul style="list-style-type: none"> • Make decisions about the NDIS on behalf of a participant over the age of 18 (an adult) • Compliance with NDIS Act • Make decisions that are related to the NDIS, within the area they have been appointed to 	<ul style="list-style-type: none"> • Uphold a person’s right to make decisions • Create opportunity for participants to be part of making decisions about their life • Make decisions on behalf of participants that are consistent with the will and preference of the participant where possible
NDIS Planner	<ul style="list-style-type: none"> • Prepare plans with the participant, including communicate with the participant • Identify/recognise a person’s need for decision support: <ul style="list-style-type: none"> ○ understand who helps the person make decisions or whether these networks need to be built; ○ consider and try the range of decision making support that could be provided to the person; ○ identify risks and vulnerabilities which may mean there is a need for a representative; and ○ where all options have been explored, and there is no-one to provide decision support to the person, initiate the process to appoint a representative. • Approve plan and give reasons for the decision to approve the supports in the plan. • It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision. Unless that person is a child and the NDIS planner is acting under s74(5) of the Act – See Section 12 – <i>Recognise, appoint and review representatives in the NDIS</i>) or the planner is deciding whether to appoint a plan or correspondence nominee ○ act as an advocate for participants ○ make decisions on behalf of participants 	<ul style="list-style-type: none"> • Uphold a person’s right to make their own decisions • When someone is described as being unable to make decisions, to consider whether the participant has appropriate communication and supported decision making supports in place • Avoid exerting undue influence on a participant • Approve reasonable and necessary funding • Identify where connection to independent decision support is required • Enable / facilitate access to good decision-making supports

Who	Role	Responsibilities
NDIS Quality and Safeguards Commission	<ul style="list-style-type: none"> • Improve the quality and safety of NDIS services and supports, and strengthen the skills and knowledge of providers and participants. • Investigate and resolve complaints • Publish information for NDIS support providers on Effective Communication • Guidance and monitoring of supported decision making processes by service providers, especially home and living providers 	<ul style="list-style-type: none"> • Work with participants, providers and workers to resolve problems and improve the quality and safety of NDIS supports⁴⁴ • Register and regulate NDIS providers and oversee provider quality • Respond to concerns, complaints and reportable incidents • Advise providers on in-house complaints management and supporting participants to make a complaint • Work with people with disability, NDIS providers and workers to improve their skills and knowledge • Monitor the use of restrictive practices and educate providers and participants about behaviour support strategies
Participant	<ul style="list-style-type: none"> • Decision Maker 	<ul style="list-style-type: none"> • Self-advocacy • Communicate when need support with decision making • Communicate will and preferences • Engage in decision making processes
Partners, including early childhood partners and	<ul style="list-style-type: none"> • Identify/recognise a person's need for decision support: <ul style="list-style-type: none"> ○ understand who helps the person make decisions or whether these networks need to be built; 	<ul style="list-style-type: none"> • Uphold a person's right to make their own decisions and promote self-advocacy • When someone is described as being unable to make decisions, to consider whether the

⁴⁴ This section is taken from the [Fact Sheet: About the NDIS Quality and Safeguards Commission](#)

Who	Role	Responsibilities
local area coordination partners	<ul style="list-style-type: none"> ○ consider and try the range of decision-making support that could be provided to the person; ○ link the person to community-based opportunities to develop skills such as peer support; and ○ identify risks and vulnerabilities which may mean there is a need for a representative. <ul style="list-style-type: none"> ● It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ act as an advocate for participants and people with disability ○ make decisions on behalf of participants or people with disability 	<p>participant has appropriate communication and decision making supports in place</p> <ul style="list-style-type: none"> ● Avoid exerting undue influence on a participant ● Avoid conflicts of interest ● Engage independent decision support ● Have a strong role in the longer term creation of friendships and networks ● Provide support to access independent advocacy when required
Plan Manager	<ul style="list-style-type: none"> ● Manage funding for supports under the participant's plan⁴⁵. This can include building the participant's financial and plan management skills. ● It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ act as an advocate for participants and people with disability ○ make decisions on behalf of participants or people with disabilities 	<ul style="list-style-type: none"> ● Build a participant's capacity for decision making, provide decision making support when interacting with the participant ● Consider if the participant has appropriate communication and decision making supports in place ● Watch for undue influence and conflicts of interest occurring with the participant's support providers

⁴⁵ Section 42(1), NDIS Act

Who	Role	Responsibilities
State and Territory Guardians	<ul style="list-style-type: none"> • Compliance with Guardianship legislation in their State or Territory • Decision making authority in limited areas of a person’s life – as stated in the guardianship order 	<ul style="list-style-type: none"> • Refer to state and territory guardianship organisations
Support Coordinator	<ul style="list-style-type: none"> • Support NDIS participants make the most of their plans and to pursue their goals • 4 key roles of a support coordinator: <ul style="list-style-type: none"> ○ assist participants connect to NDIS and other supports ○ build a participant’s capacity and capability to understand their plan, navigate the NDIS and make their own decisions ○ broker supports and services in line with participant wishes and their plan budget ○ monitor plan budgets and support effectiveness • It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ act as an advocate for participants and people with disability ○ make decisions on behalf of participants or people with disabilities 	<ul style="list-style-type: none"> • Uphold a person’s right to make their own decisions • Build a participant’s capacity for decision making, provide decision making support where there is no other person providing this support for a participant • Consider if the participant has appropriate communication and decision making supports in place • Watch for undue influence and conflicts of interest occurring with the participant’s support providers • Assist a participant to make informed decisions about their supports. To do this, support coordinators should: <ul style="list-style-type: none"> ○ 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

Who	Role	Responsibilities
Support providers	<ul style="list-style-type: none"> • Deliver supports in accordance with the choices, preferences and decisions of the participant • It is not their role to: <ul style="list-style-type: none"> ○ assess whether a person has the capacity to make a decision ○ make decisions on behalf of people with disability 	<ul style="list-style-type: none"> • Support effective communication to uphold the rights of people with disabilities to have choice and control and make decisions about their own lives • Uphold and support the choices and decisions made by participant • Comply with the NDIS Code of Conduct • Support effective communication in accordance with the NDIS Practice Standards and NDIS Code of Conduct, including offering and supporting access to interpreting services to help participants use their supports

Attachment B: Types of decision support

There are a range of tools and supports that can assist people to make decisions.

Specific kinds of tools or supports include:

- Communication aides, tools and supports – to enable a person to communicate and express their will and preference from a young age.
- Decision aids and guides - focused on a specific support and designed to assist a person to make decisions.
- Groups or organisations that support people to understand their rights, build confidence in communication and expression (i.e., peer groups, citizen advocacy, other civic groups, yarning circles).

Alongside these kinds of tools, a person may also need other decision supports to communicate their will and preferences and make decisions.

Decision making support may come from a person, or several people, in formal or informal ways that include:

- Microboards
- Circles of support
- Network Facilitators
- Decision Coaches