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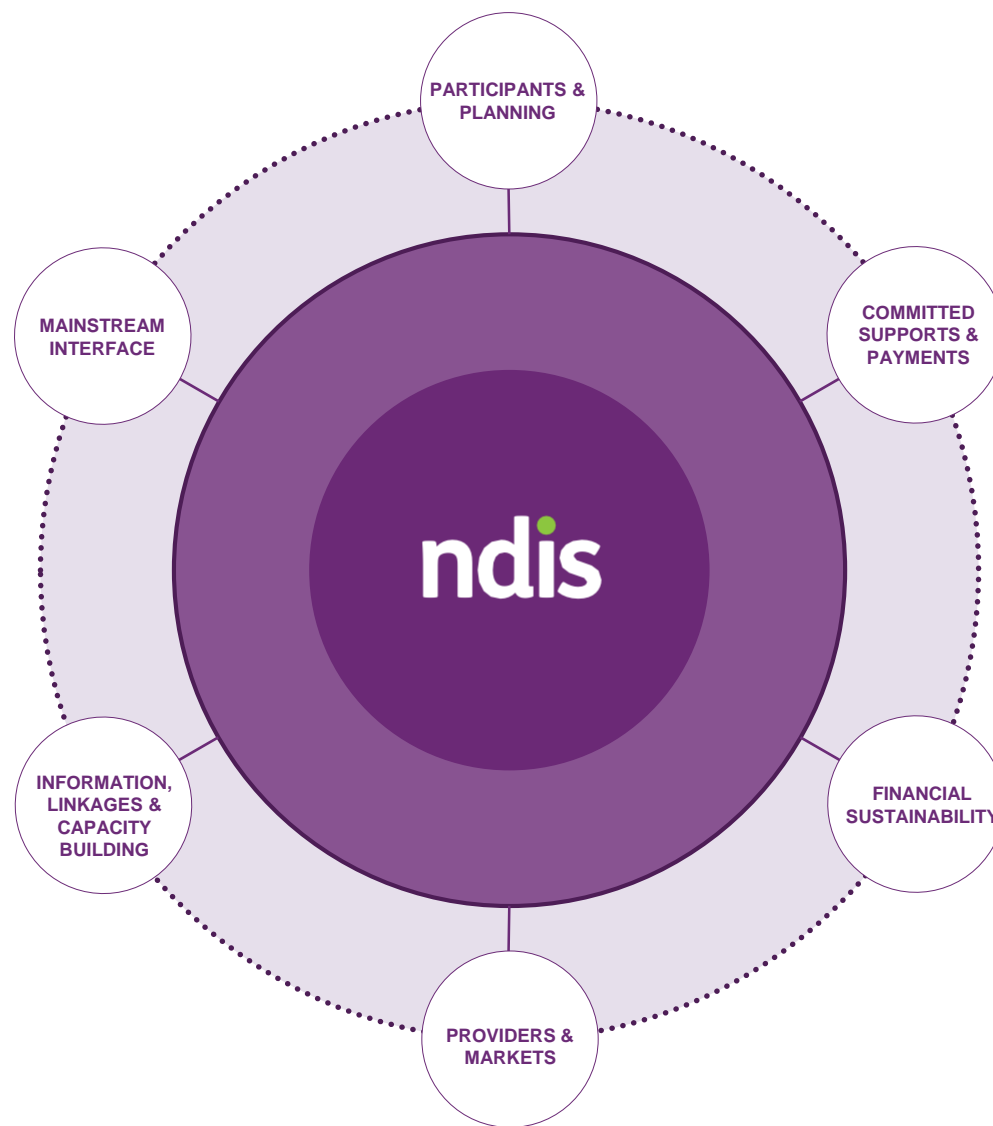
## Disability Reform Council Quarterly Performance Report

Northern Territory – 30 June 2017



# Overview

This report is the fourth quarterly report during the NDIS Transition period, which commenced on 1<sup>st</sup> July 2016.



# Summary

## Participants and planning

89 additional participants with plans this quarter.

71% of the 30 June 2017 cumulative bilateral estimate has been met.

## Committed supports and payments

\$69.1 million of supports has been committed to 388 participants. This includes \$6.9 million of support in respect of trial, \$19.7 million in respect of 2016-17 and \$42.5 million for later years.\*

\$10.8 million has been paid to providers and participants.

86% of committed supports were utilised in 2014-15 and this has decreased to 80% in 2015-16. In 2016-17, utilisation of committed supports has decreased to 26%. As there is a lag between when support is provided and when it is paid, the 26% in 2016-17 will increase.

## Providers and market

383 approved providers.

65-100% of payments made by the NDIA are received by 25% of providers.

16% of services providers are individual/sole traders.

## Mainstream Interface

88% of active participants with a plan approved in 2016-17 Q4 access mainstream services.

The proportion of participants entering in the current quarter accessing mainstream services is lower compared to prior quarters.

\*Note: The \$42.5 million committed in future years is due to current plans in place that have an end date past 30 June 2017.

# Participants and Planning

As the transition phase to full scheme continues, the NDIS in Northern Territory continues to grow with 89 additional participants with approved plans this quarter.

# Participants and Planning

The NDIS is transitioning to full-scheme in line with phasing schedules bilaterally agreed by State/Territory and Commonwealth governments.



## Key Statistics

**121**

ACCESS DECISIONS IN 2016-17 Q4

**89**

INITIAL PLANS APPROVED IN 2016-17 Q4

**71%**

OF 30 JUNE 2017 BILATERAL ESTIMATE MET

**20%**

OF PARTICIPANTS WITH AN INITIAL PLAN APPROVED IN 2016-17 Q4 ARE CHILDREN AGED 7-14 YEARS

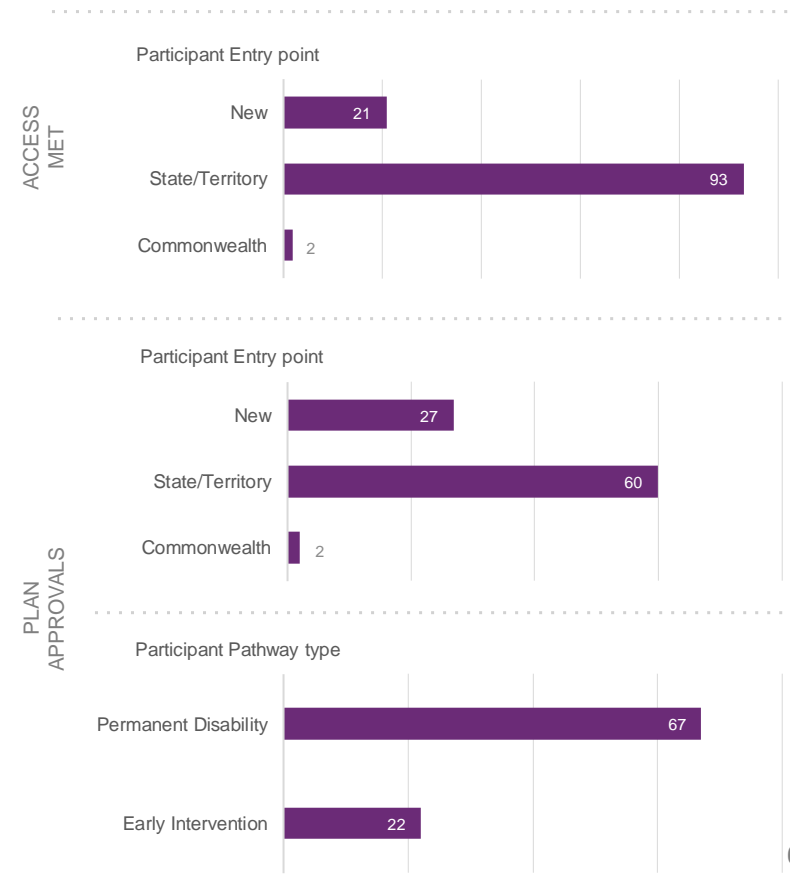
**33%**

OF PARTICIPANTS WITH AN INITIAL PLAN APPROVED IN 2016-17 Q4 HAVE A REPORTED PRIMARY DISABILITY OF INTELLECTUAL DISABILITY

# Quarterly Intake

2016-17 Q4

80% of participants determined 'eligible' in this quarter had transitioned from an existing State/Territory program. Overall, since 1 July 2013, there have been 523 people with access decisions, and 388 participants with an approved plan.



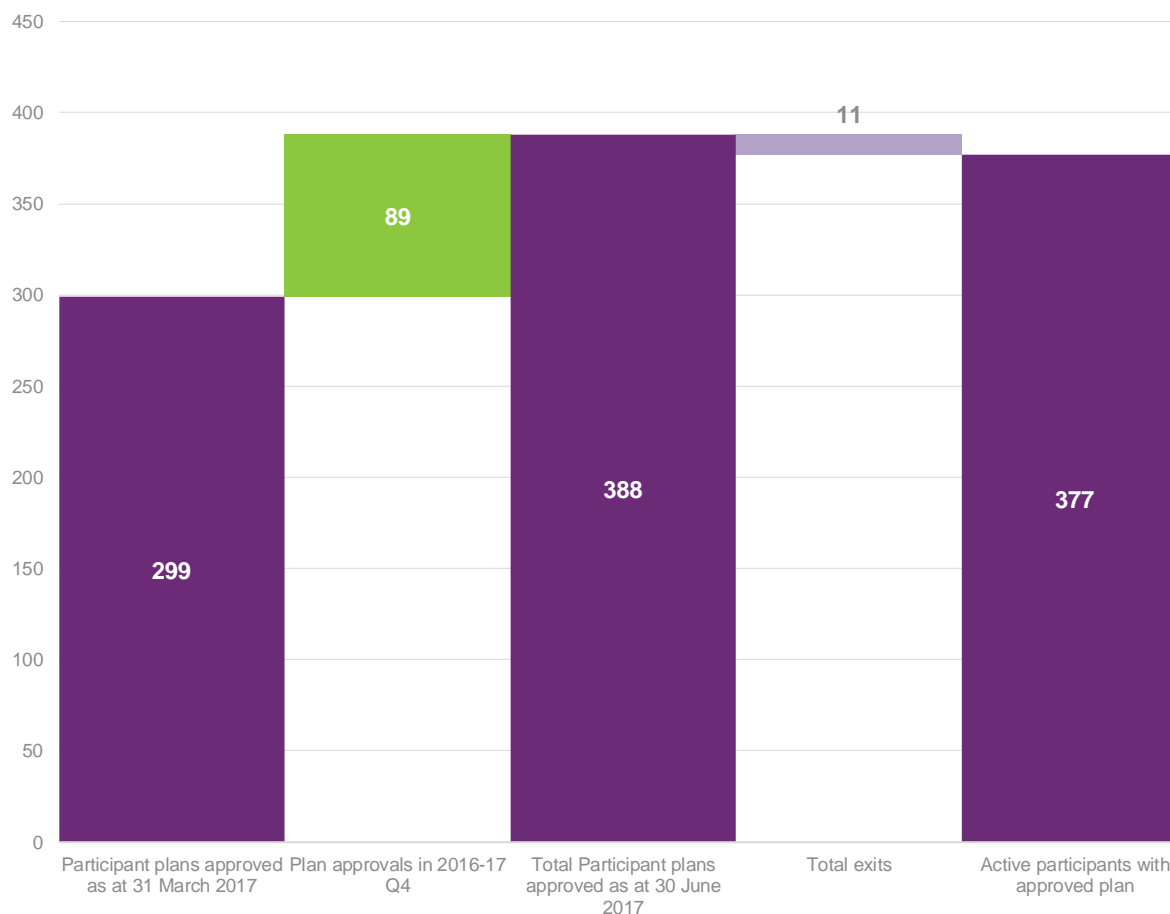
# Quarterly Intake Detail

## Plan approvals as at 30 June 2017

Plan approval numbers have increased from 299 at the end of 2016-17 Q3 to 388 by the end of 2016-17 Q4. This is an increase of 89 approvals. Additionally there were 11 exits bringing the overall numbers to 377.

In the quarter of 2016-17 Q4 there were 143 plan reviews. This figure relates to all participants who have entered the scheme (including transition).

Change in plan approvals between 31 March 2017 and 30 June 2017



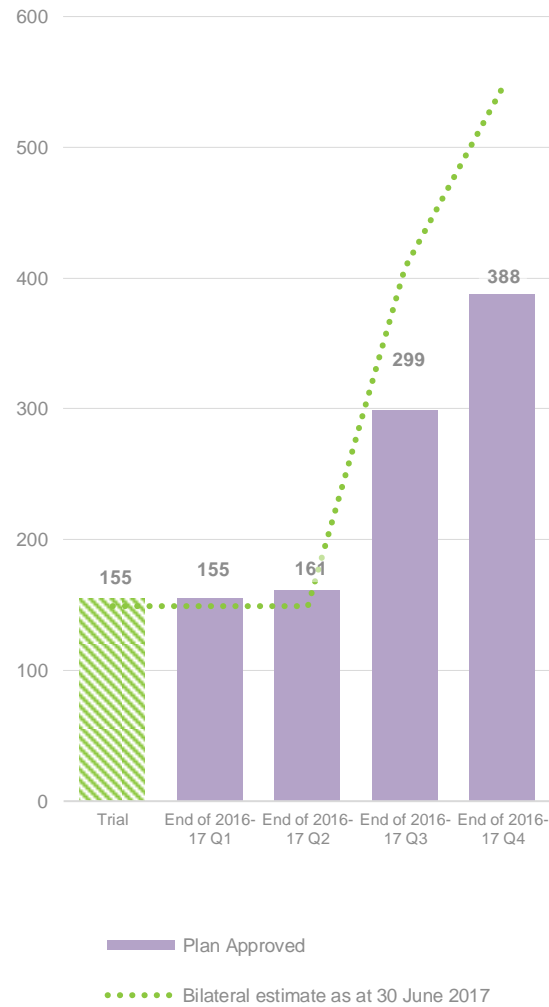
# Cumulative Position

Plan approvals as at 30 June 2017

As at the end of 2016-17 Q4, the cumulative total number of participants receiving support was 388. In addition, 94 participants were awaiting a plan as at 30 June 2017.

Cumulative position reporting is inclusive of trial participants for the reported period and represents participants who have or have had an approved plan.

Cumulative plan approvals compared with bilateral estimate



**71%**

of 30 June 2017 bilateral estimate met

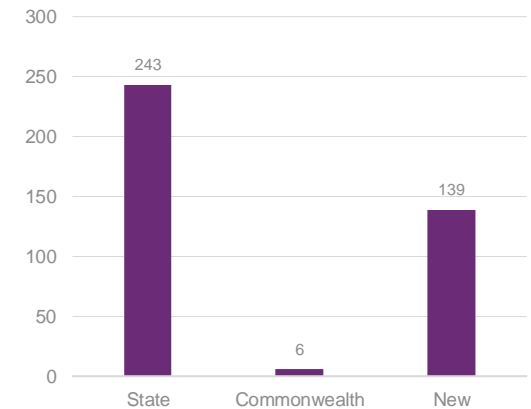
**89**

plan approvals in 2016-17 Q4

**388**

plan approvals to date

Plan approvals by participant referral pathway



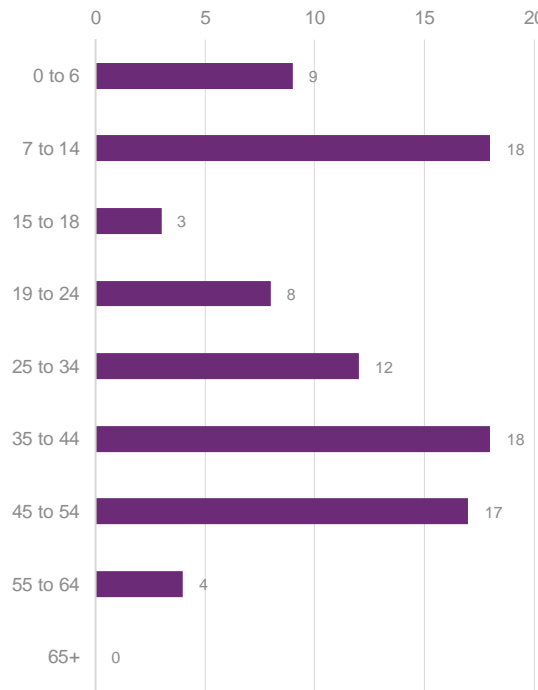


# Participant Profiles

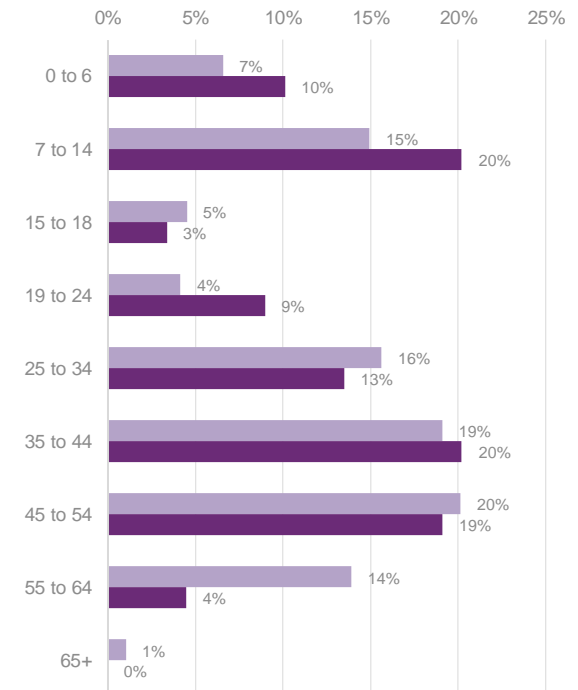
Demographic profile of active participants with a plan approved as at 31 March 2017, compared with plan approvals in the quarter of 2016-17 Q4.

Around 20% of participants entering in this quarter are children aged 7-14 years. This is an increase compared with prior quarters.

Active participants with a plan approved in the quarter of 2016-17 Q4 by age group



% of active participants with a plan approved by age group



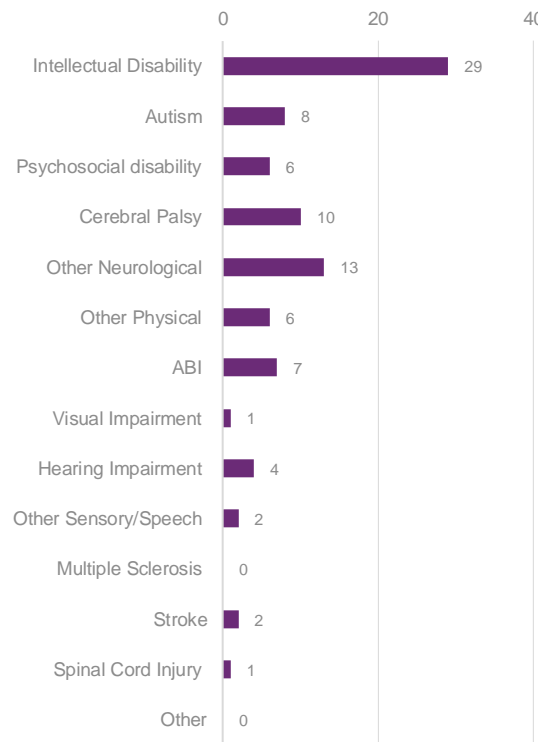
■ % of active participants with a plan approved in prior quarters  
 ■ % of active participants with a plan approved in 2016-17 Q4

# Participant Profiles

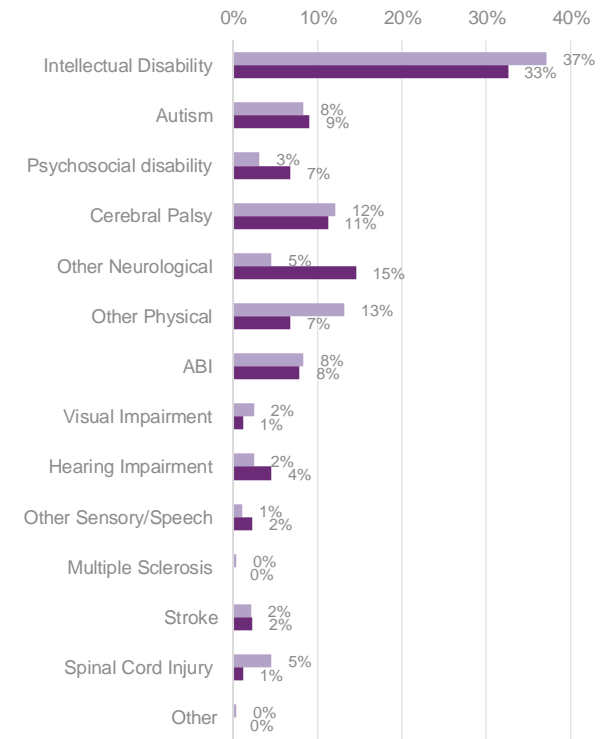
Demographic profile of active participants with a plan approved as at 31 March 2017, compared with plan approvals in the quarter of 2016-17 Q4.

33% of participants entering in the quarter of 2016-17 Q4 have a primary disability group of Intellectual Disability.

Active participants with a plan approved in the quarter of 2016-17 Q4 by disability group



% of active participants with a plan approved by disability group



■ % of active participants with a plan approved in prior quarters

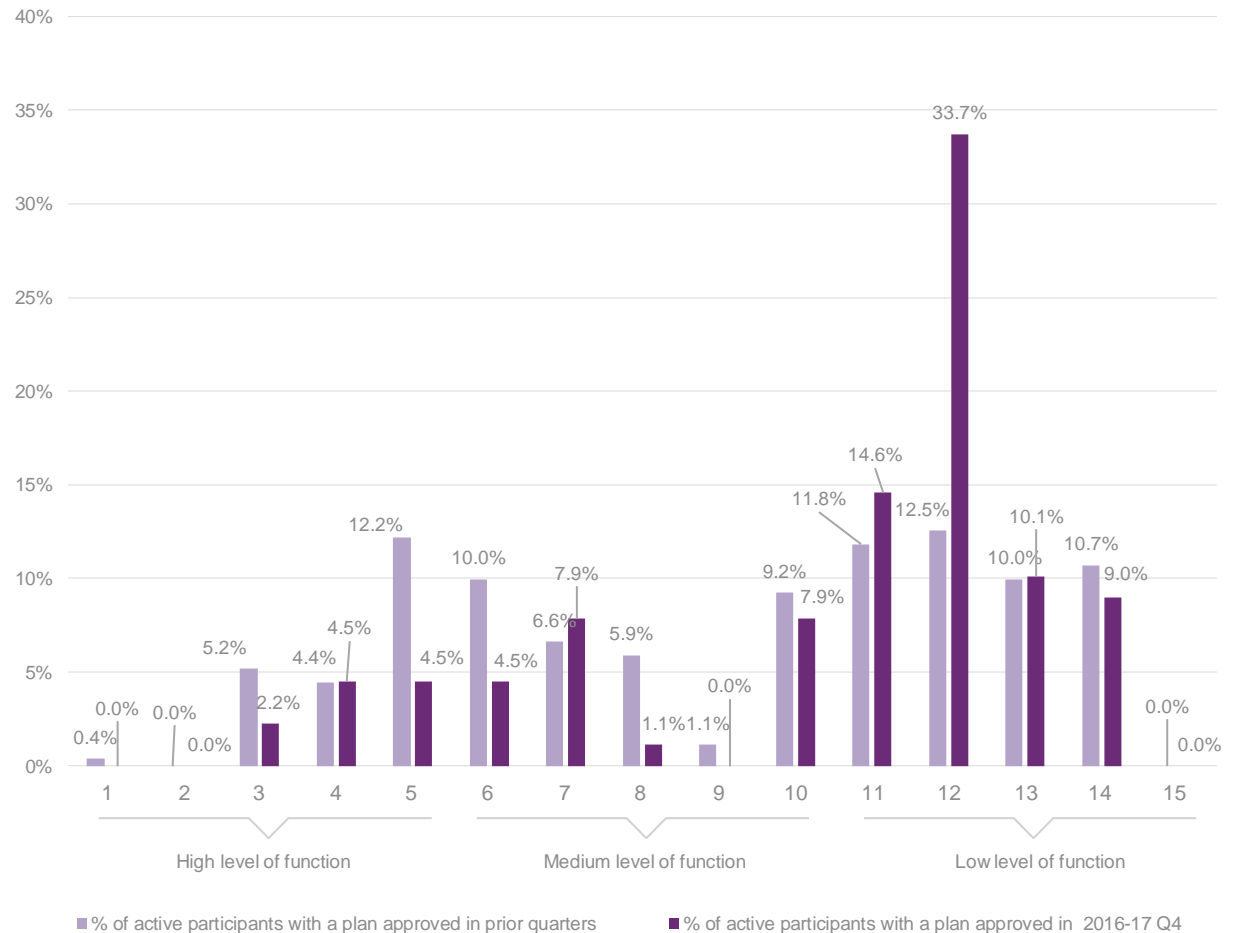
■ % of active participants with a plan approved in 2016-17 Q4

# Participant Profiles

Demographic profile of active participants with a plan approved as at 31 March 2017, compared with plan approvals in the quarter of 2016-17 Q4.

For participants with a plan approval in the current period, around 21% have a level of function between 4 and 7 (moderate to high levels of function). 67% of participants with approved plans have low level of function (level 11 and above). This result is influenced by the phasing schedule.

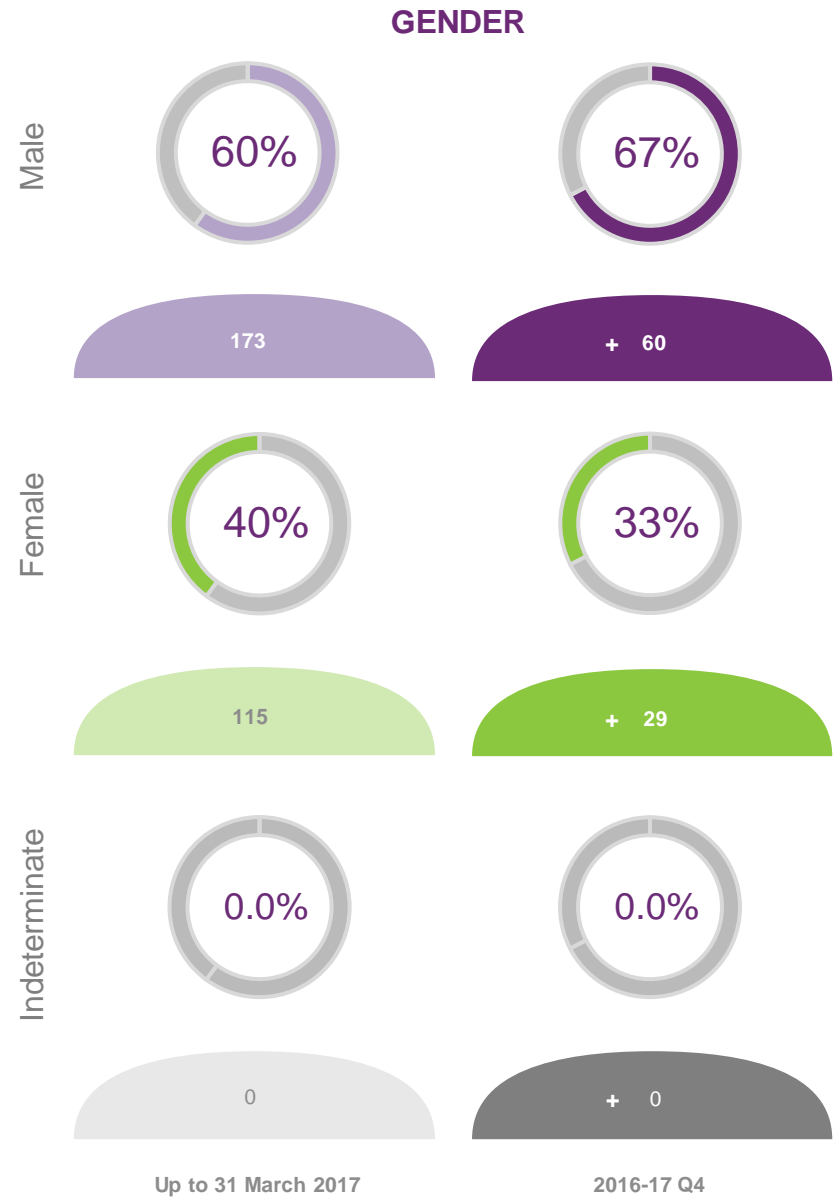
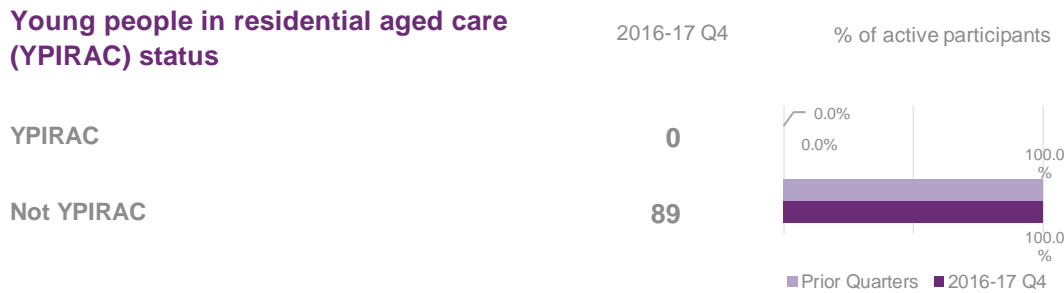
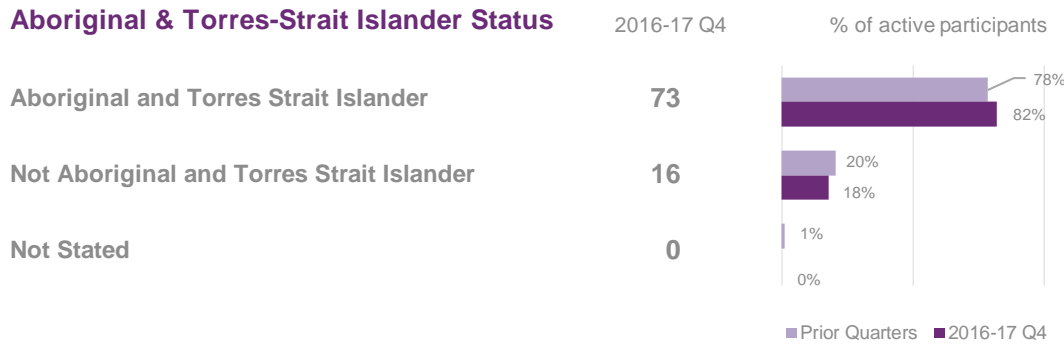
% of active participants with a plan approved by level of function



Note: High, medium and low function is relative within the NDIS population and not comparable to the general population.

# Participant Profiles

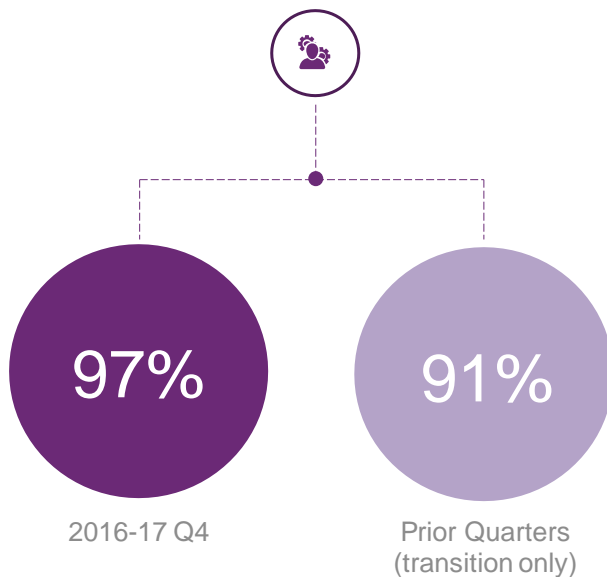
Demographic profile of active participants with a plan approved as at 31 March 2017, compared with plan approvals in the quarter of 2016-17 Q4.



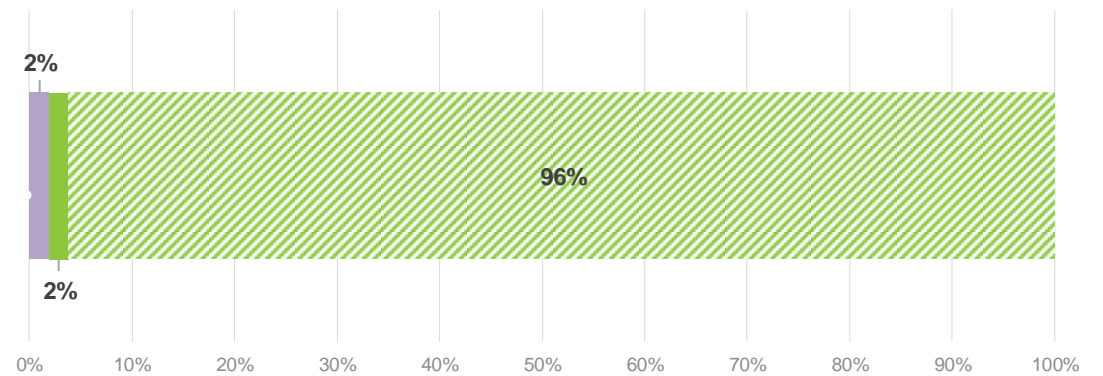
# Plan Management Support Co-ordination

The proportion of participants who are fully or partly self-managing their plan is higher in 2016-17 Q4 (4%) compared with the prior quarters of 2016-17 (2%), and 97% of participants who have had a plan approved in 2016-17 Q4 have support coordination in their plan.

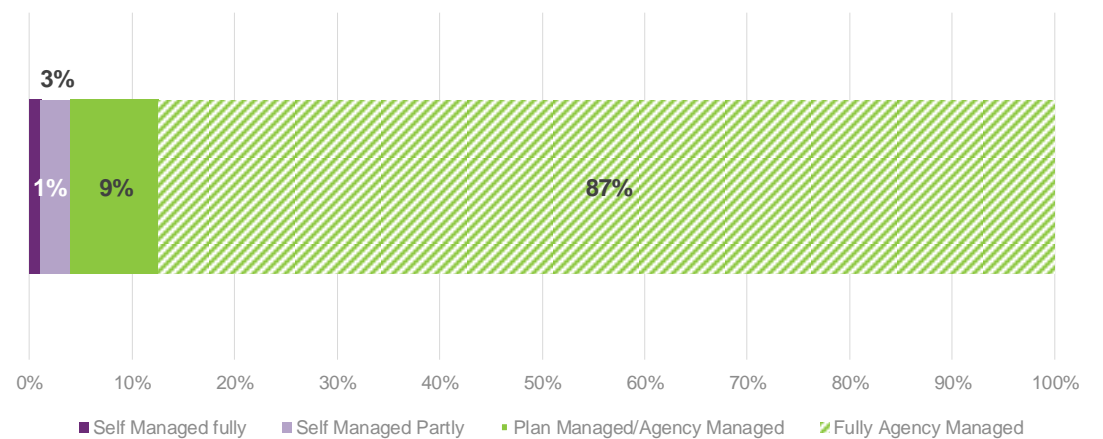
## Support Co-ordination



Prior Quarters (transition only)



2016-17 Q4

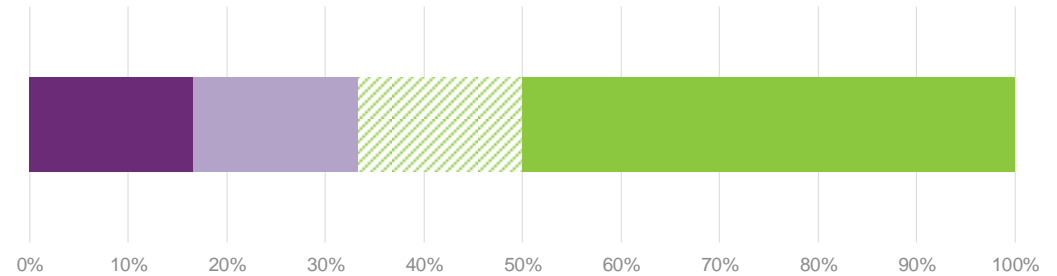


■ Self Managed fully ■ Self Managed Partly ■ Plan Managed/Agency Managed ■ Fully Agency Managed

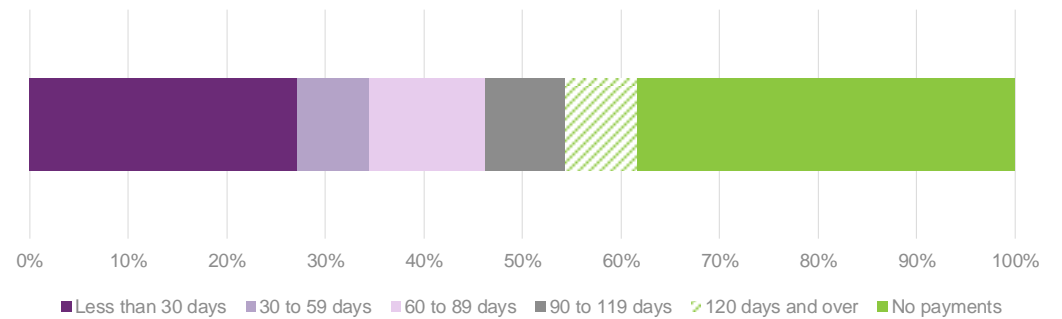
# Plan Activation

Plan activation refers to the amount of time between plan approval and the commencement of the participant receiving support. 33% of plans approved in Quarter 2 were activated within 90 days of approval, and 46% of plans approved in Quarter 3 were activated within 90 days of approval.

Duration to Plan activation for initial plans approved in 2016-17 Q2



Duration to Plan activation for initial plans approved in 2016-17 Q3



Note: There is insufficient data to present on plan activation for Quarter 1 and given that plans approved in Quarter 4 are relatively new, it would be too early to examine the duration to plan activation for these plans. Hence these have been excluded from the charts.

Plan activation can only be approximated using data on payments. As there is a lag between when support is provided and payments made, these statistics are likely to be conservative. That is, it is likely that plan activation is faster than presented. Further, in-kind supports have been excluded from the calculation, which further contributes to the conservative figures.

# Participant Outcomes

Number of questionnaires completed in 2016-17 by Short Form Outcomes Framework (SFOF) version.

Baseline outcome measures were collected on 97% of participants receiving their initial plan in 2016-17. However the numbers collected are small: only 225 participant and 55 family questionnaires have been collected. The 185 adult participants experienced very low levels of choice and control and almost 90% said they wanted more choice and control. Less than 10% had a paid job. Only about half said they were happy with their home and a similar proportion said they felt safe or very safe in their home. Only one quarter rated their health as good, very good or excellent and about three quarters had difficulty accessing health services. However, more than 50% had participated in community activities in the last year.

The number of family/carer questionnaires was very small (e.g. only 38 for family/carers of children aged under 15) so results should be interpreted with caution.

Version	Number of questionnaires collected Q1	Number of questionnaires collected Q2	Number of questionnaires collected Q3	Number of questionnaires collected Q4	Number of questionnaires
Participant 0 to school	0	2	5	9	16
Participant school to 14	0	1	10	13	24
Participant 15 to 24	0	0	14	11	25
Participant 25 and over	0	3	107	50	160
<b>Total participant</b>	<b>0</b>	<b>6</b>	<b>136</b>	<b>83</b>	<b>225</b>
Family 0 to 14	0	3	13	22	38
Family 15 to 24	0	0	1	2	3
Family 25 and over	0	0	7	7	14
<b>Total family</b>	<b>0</b>	<b>3</b>	<b>21</b>	<b>31</b>	<b>55</b>
<b>Total</b>	<b>0</b>	<b>9</b>	<b>157</b>	<b>114</b>	<b>280</b>

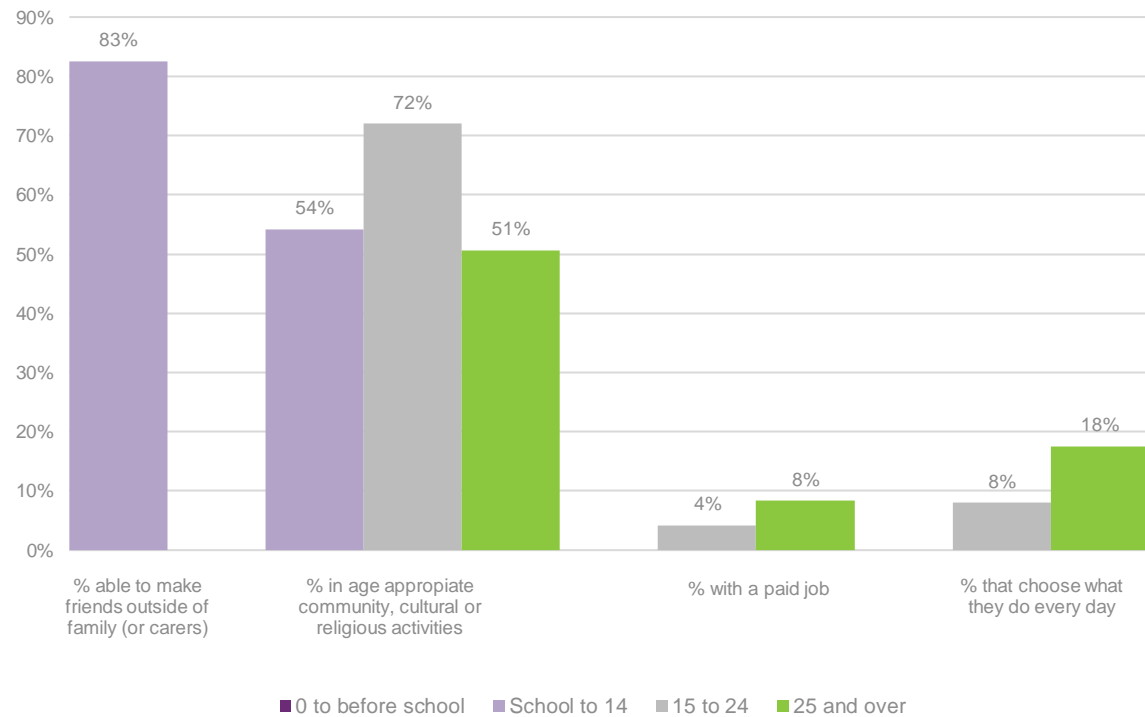
# Participant Outcomes

Key measures on baseline social, economic and independence outcomes. These will be monitored into the future.

For the 0 to before school age group, 83% of the participants reported being able to make friends outside of their family or carers. Participation in age appropriate community, cultural or religious activities was highest among the 15 to 24 year old age group with 72% and between 51% - 54% for the other age groups.

Around 8% of 25+ year olds had a paid job.

Selected key baseline indicators for participants





# Participant Satisfaction

There is insufficient data to present information on participant satisfaction in NT.

# Committed Supports and Payments

Both committed and paid supports to participants are increasing in line with the growing scheme.

To date funding committed to participants with an approved plan amounts to \$69.1 million (including support periods in the future), of which \$10.8 million has been paid.

This includes \$6.9 million of support in respect of trial, \$19.7 million in respect of 2016-17 and \$42.5 million for later years.

# Committed Supports and Payments

This section presents information on the amount committed in plans and payments to service providers and participants.



## Key Statistics

**\$69.1**

MILLION OF SUPPORTS HAS BEEN COMMITTED TO 388 PARTICIPANTS.

**\$6.9**

MILLIONS OF SUPPORTS IN RESPECT OF TRIAL

**\$19.7**

MILLIONS OF SUPPORTS IN RESPECT OF 2016-17

**\$42.5**

MILLIONS OF SUPPORTS IN RESPECT OF LATER YEARS\*

**\$10.8**

MILLION HAS BEEN PAID TO PROVIDERS & PARTICIPANTS

86% OF COMMITTED SUPPORTS WERE UTILISED IN 2014-15 AND THIS HAS DECREASED TO 80% IN 2015-16. IN 2016-17, UTILISATION OF COMMITTED SUPPORTS HAS DECREASED TO 26%.

AS THERE IS A LAG BETWEEN WHEN SUPPORT IS PROVIDED AND WHEN IT IS PAID, THE 26% IN 2016-17 WILL INCREASE.

\*Note: The \$42.5 million committed in future years is due to current plans in place that have an end date past 30 June 2017.

# Committed Supports and Payments

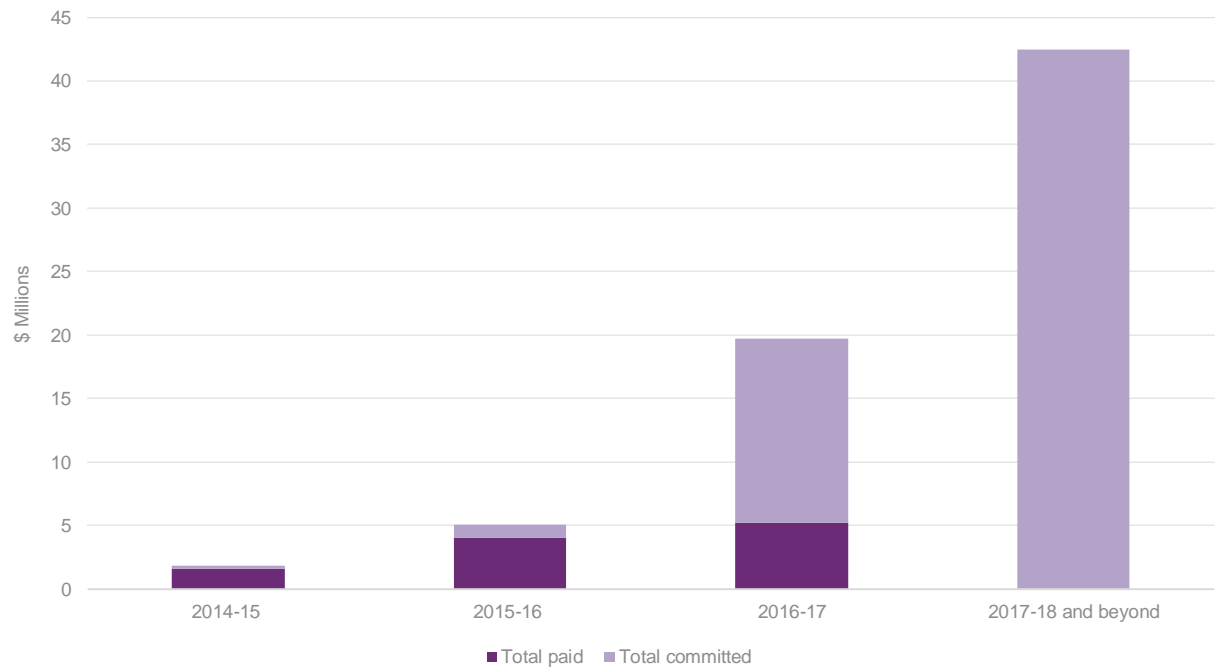
Committed amount by year that the support is expected to be provided, compared with committed supports that have been used (paid).

Of the \$69.1 million that has been committed in participant plans, \$10.8 million has been paid to date.

In particular, for supports provided in:  
 2014-15 : \$1.5m has been paid  
 2015-16 : \$4.0m has been paid  
 2016-17 to date: \$5.2m has been paid

Committed and paid by expected support year

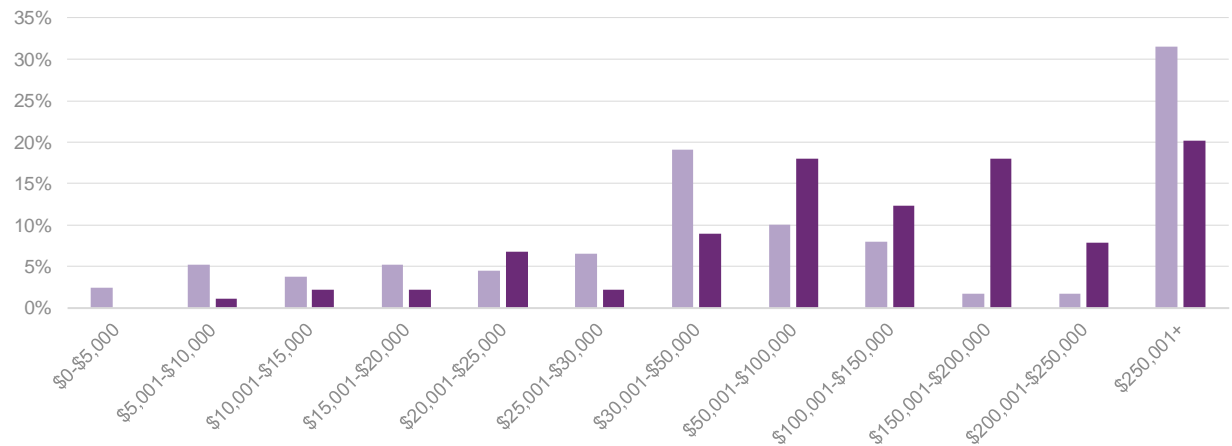
\$Million	2013-14	2014-15	2015-16	2016-17	2017-18 and beyond	Total
Total committed	N/A	1.8	5.1	19.7	42.5	69.1
Total paid	N/A	1.5	4.0	5.2	0.0	10.8



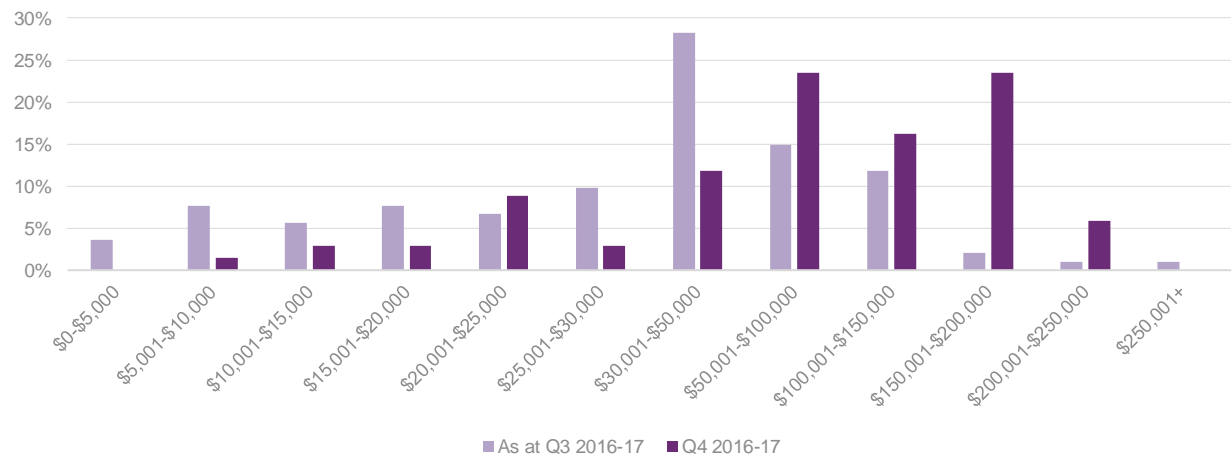
# Committed Supports and Payments

A greater proportion of initial plan approvals in 2016-17 Q4 have average annualised committed supports greater than \$30,000 compared with participants who entered in prior quarters when participants with shared supported accommodation (SSA) supports are included. This is also the case when SSA participants are excluded.

Distribution of average annualised committed supports by cost band (including SSA)



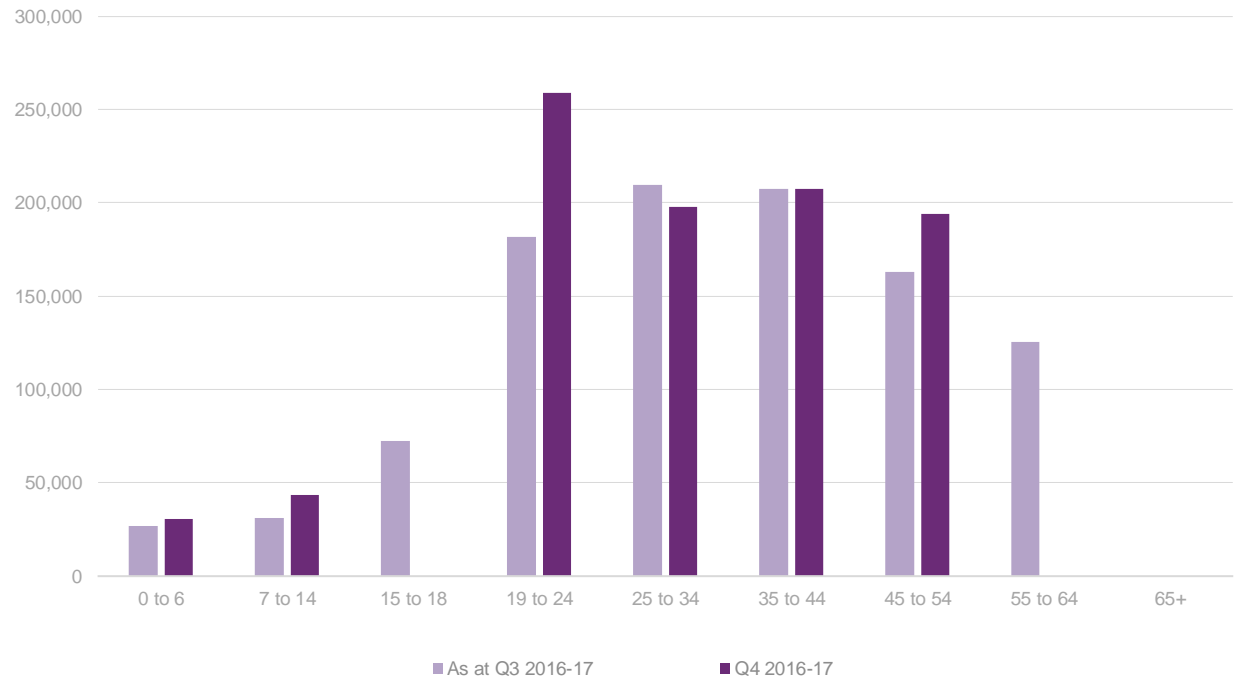
Distribution of average annualised committed supports by cost band (excluding SSA)



# Committed Supports and Payments

Average annualised committed supports for participants at most ages was higher in 2016-17 Q4, with the largest percentage increase attributable to participants aged 19 to 24. This is likely to reflect the phasing schedules outlined in the bilateral agreements.

Average annualised committed supports by age band

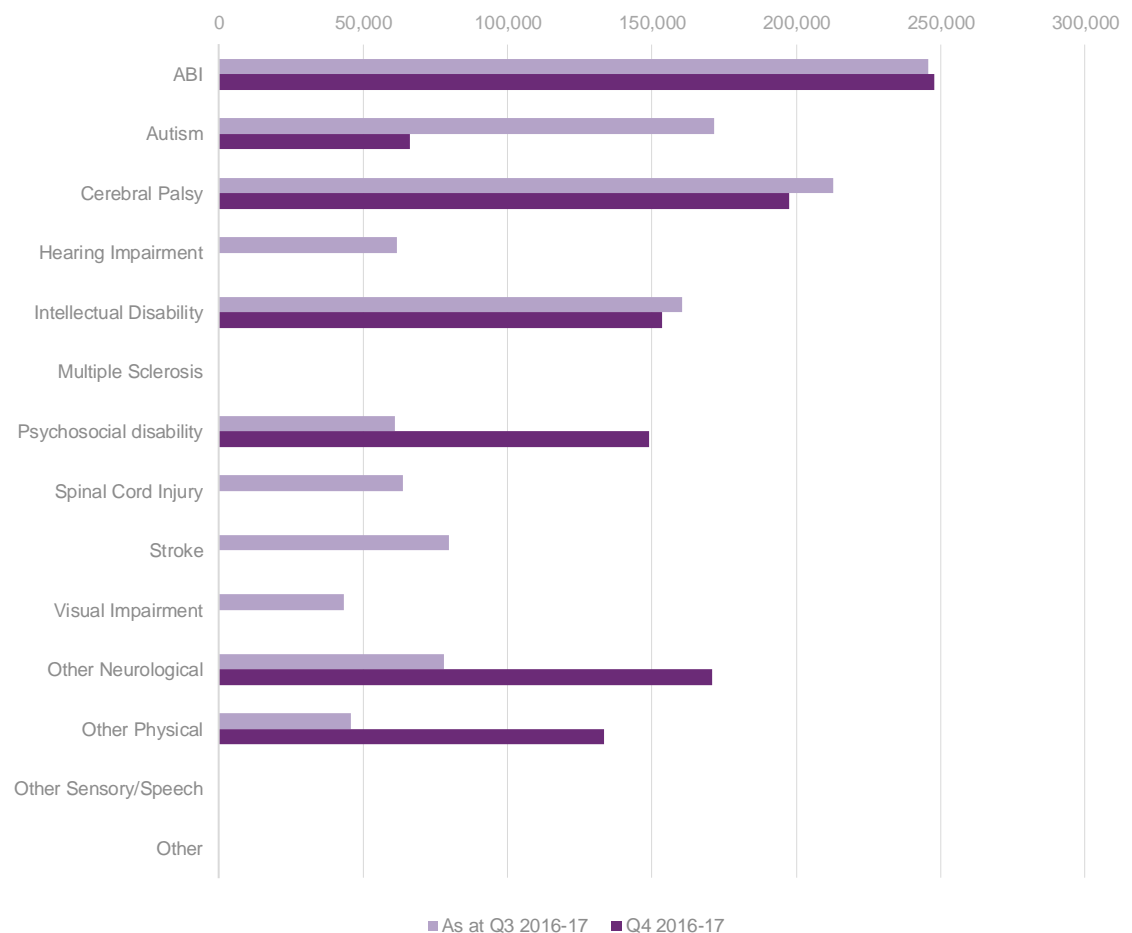


Note: Average annualised committed supports are not shown if there are insufficient data in the group

# Committed Supports and Payments

Participants with a primary disability of Other Physical and a initial plan approval in 2016-17 Q4 had the largest change in average annualised committed supports when compared with participants who entered in prior quarters.

Average annualised committed supports by primary disability group

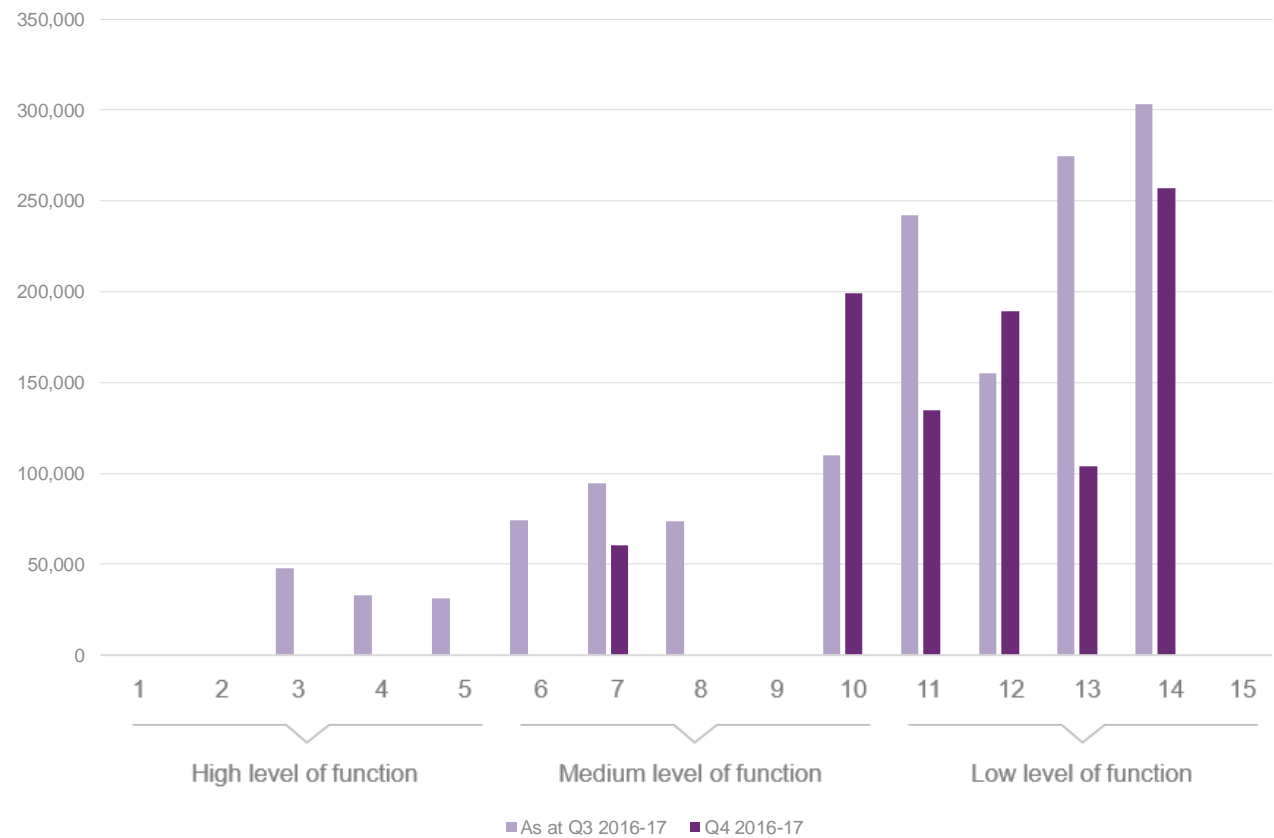


Note: Average annualised committed supports are not shown if there are insufficient data in the group

# Committed Supports and Payments

The average annualised committed supports for participants with a initial plan approval as at 30 June 2017 and prior quarters is lower for participants at most levels of function.

Average annualised committed supports by level of function



Note 1: Average annualised committed supports are not shown if there are insufficient data in the group.

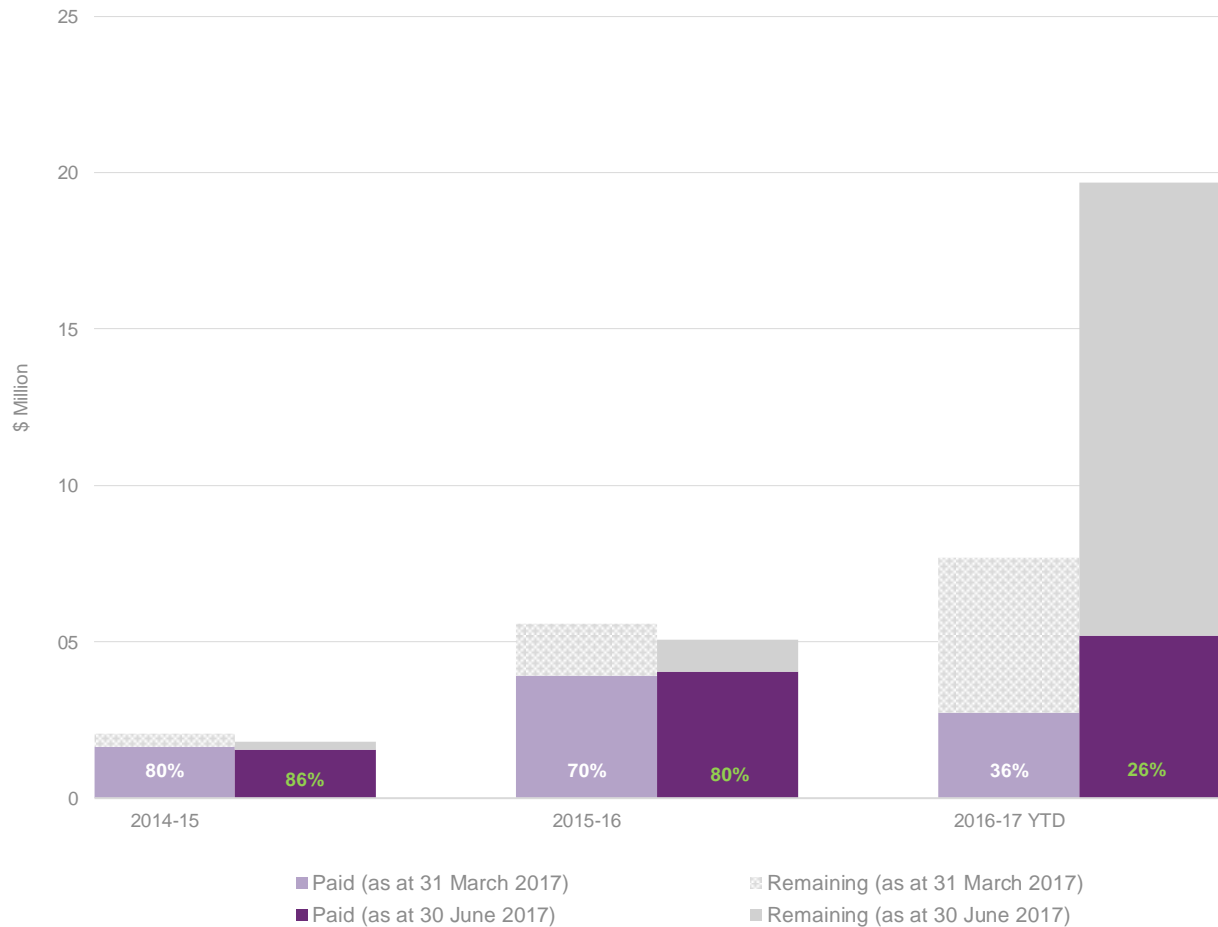
Note 2: High, medium and low function is relative within the NDIS population and not comparable to the general population.



# Committed Supports and Payments

Utilisation of committed supports by year that the support was expected to be provided as at 31 March 2017, compared with 30 June 2017. As there is a lag between when support is provided and when it is paid, the 26% in 2016-17 will increase.

Utilisation of committed supports as at 31 March 2017 and 30 June 2017



The utilisation of committed supports has increased for supports provided in 2015-16. This percentage has decreased during 2016-17 YTD.

# Financial Sustainability

Financial Sustainability was covered in the national version of the COAG report.

# Providers and Markets

The scale and extent of the market continues to grow, with a 14% increase in the number of providers during the quarter to 383.

# Providers and Markets

This section contains information on registered service providers and the market, with key provider and market indicators presented.

## Provider registration

- To provide supports to NDIS participants, a service provider is required to register and be approved by the NDIA.
- Providers register with the NDIA by submitting a registration request, indicating the types of support (registration groups) they are accredited to provide.
- Providers are approved to deliver disability supports and services to participants of the NDIS if they have at least one registration group approved.

## How providers interact with participants

- NDIS participants have the flexibility to choose the providers who support them.
- Providers are paid for disability supports and services provided to the participants.



## Key Statistics

**383**

APPROVED PROVIDERS

**65-100%**

OF PAYMENTS MADE BY THE NDIA ARE RECEIVED BY 25% OF PROVIDERS

**16%**

OF SERVICE PROVIDERS ARE INDIVIDUAL/SOLE TRADERS

ASSISTANCE WITH PRODUCTS FOR PERSONAL CARE/SAFETY HAS THE HIGHEST NUMBER OF APPROVED SERVICE PROVIDERS, FOLLOWED BY PERSONAL MOBILITY EQUIPMENT AND ASSISTIVE EQUIPMENT FOR RECREATION

# Providers and Markets

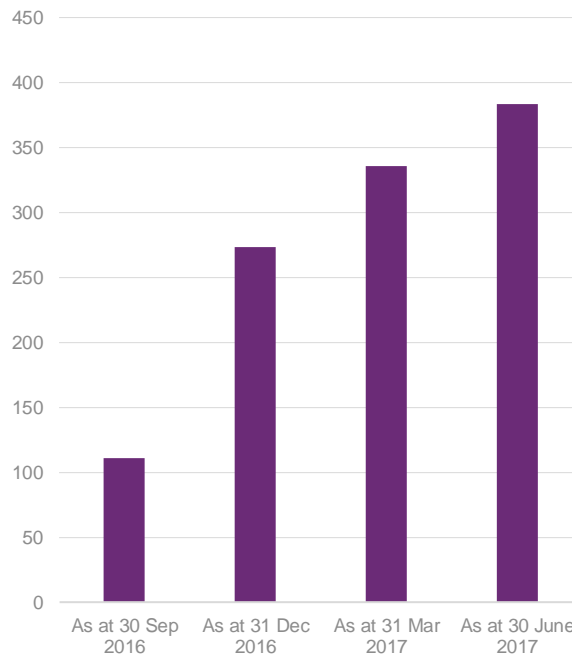
Increase in number of providers over time.

As at 30 June 2017, there were 383 registered service providers of which 60 were individual/sole trader operated business while the remaining 323 providers were registered as a company or organisation.

**0.49**  
AVERAGE NUMBER OF PROVIDERS PER PARTICIPANT

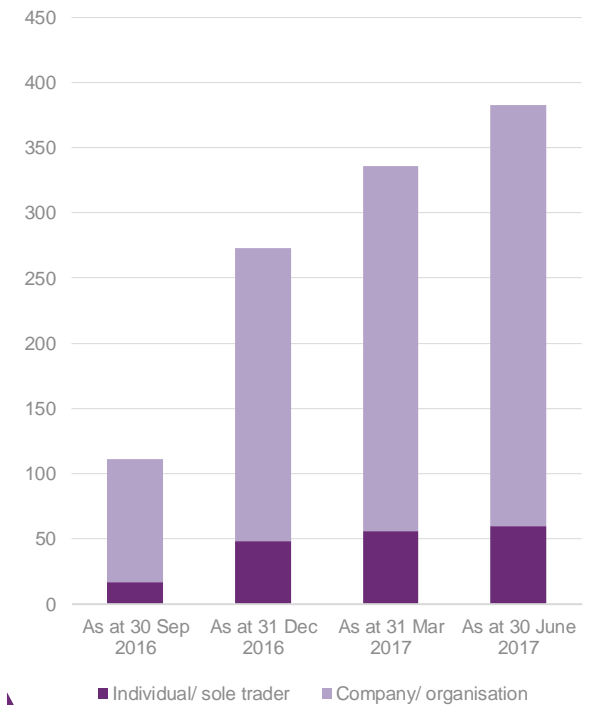
**0.36**  
AVERAGE NEW PROVIDERS PER PARTICIPANT

Approved providers over time



The number of approved service providers increased by 14% from 336 to 383 in the quarter.

Type of provider



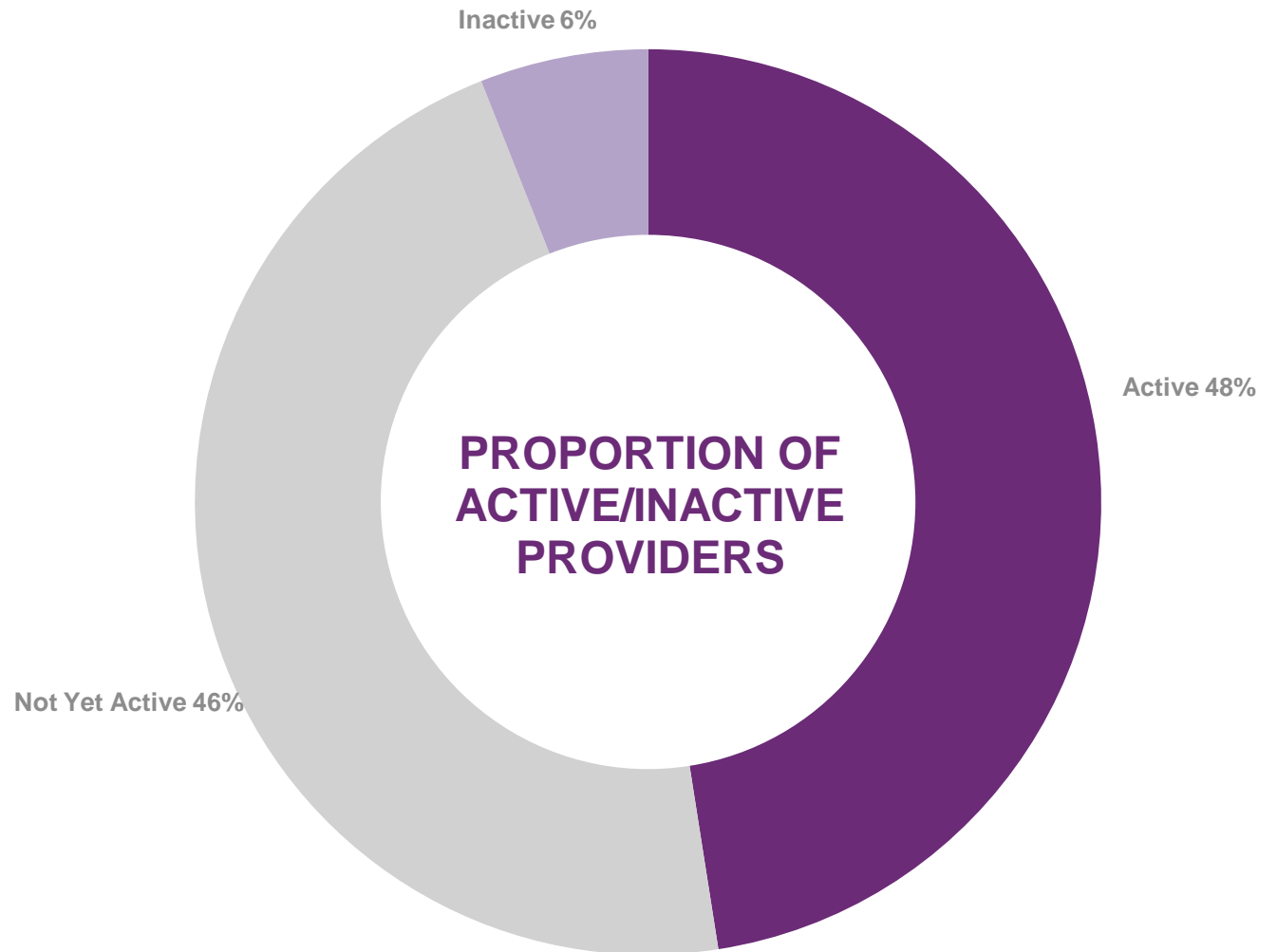
16% of approved service providers are individual/sole traders.

# Providers and Markets

Change in the activity status of providers

As at 30 June 2017 48% of providers were active in the last quarter, 46% were yet to have evidence of activity and 6% were inactive. Of the overall stock of providers, 11 began delivering new supports in the quarter.

**11**  
NUMBER OF PROVIDERS DELIVERING NEW SUPPORTS



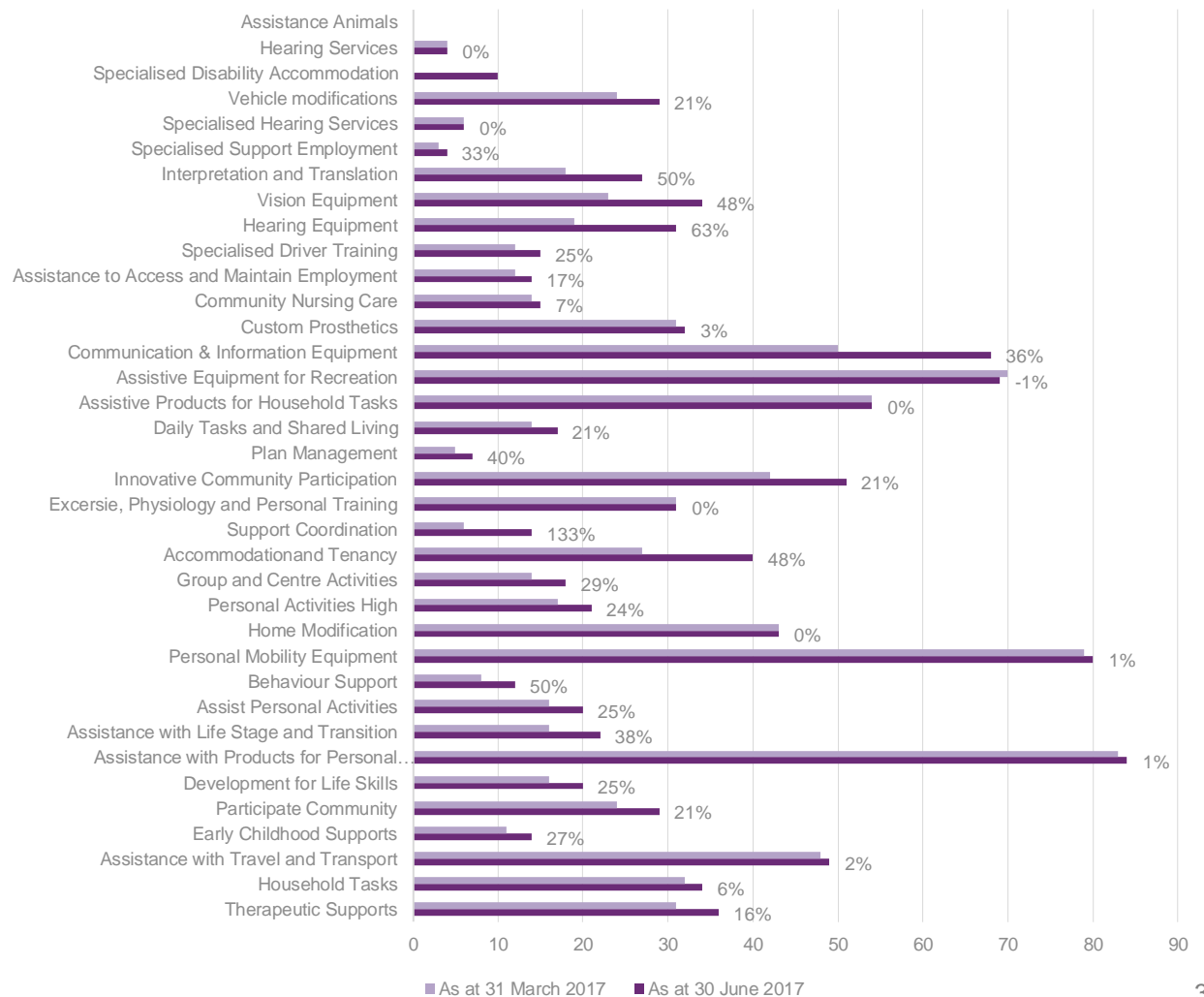
# Registration groups

The increase in approved providers from 31 March 2017 to 30 June 2017 varies by registration group.

Assistance with Products for Personal Care/Safety has the highest number of approved service providers and has seen a 1% increase since the previous quarter.

The largest percentage increase in approved providers was for the Support Coordination registration group in the quarter, increasing from 6 as at 31 March 2017 to 14 as at 30 June 2017. This was followed by Hearing Equipment, Behaviour Support and Interpretation and Translation.

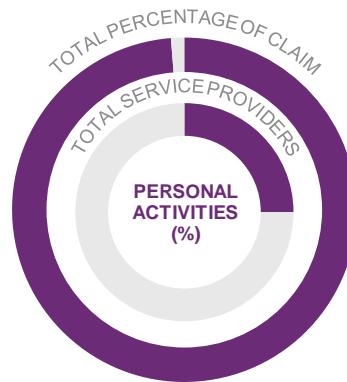
Approved providers by registration group and percentage increase over the quarter



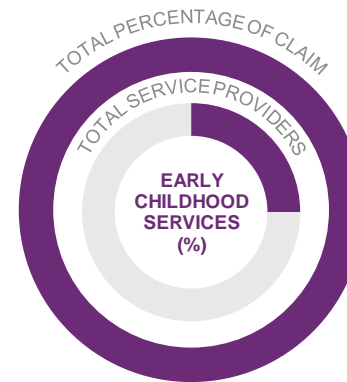
# Market share of top providers

The largest 25% of providers by claims accounted for 65-100% of all claims in the period across all service provider major registration groups

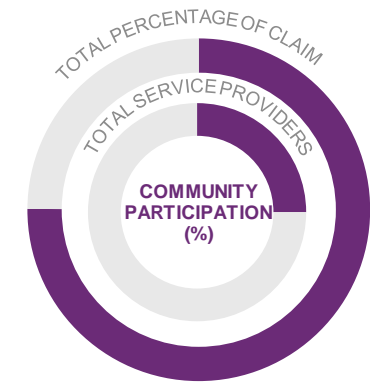
Market share of the top 25% of providers by registration group.



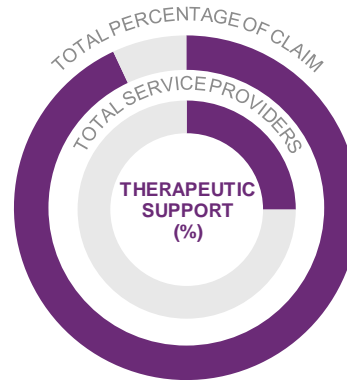
99%



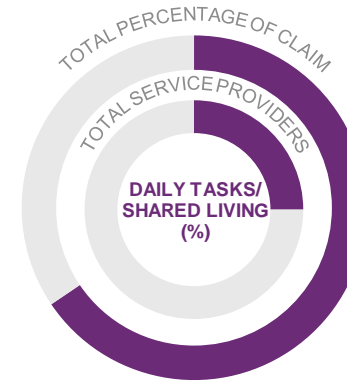
100%



75%



93%



66%

25% of providers have received 99% of payments during the quarter of 2016-17 Q4 for personal activities.



# Information, Linkages and Capacity Building

Information, Linkages and Capacity Building was covered in the national version of the COAG report.

# Mainstream Interface

The proportion of participants entering in the current quarter accessing mainstream services is lower compared to prior quarters.

# Mainstream Interface

88% of active participants with a plan approved in 2016-17 Q4 access mainstream services, a decrease from prior quarters. Participants are accessing mainstream services predominantly for health and wellbeing, lifelong learning and daily activities

