National **disability**insurance Agency

NATIONAL DISABILITY INSURANCE AGENCY

Quarterly Report to COAG Disability Reform Council

31 March 2015

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Key definitions:

Access request	A formal request by an individual for a determination of eligibility to access the scheme. This includes all requests and is not unique to single participants.
Active participant	Active participants are those who are currently eligible, are not deceased and have a client status of "Active".
Annualised Package Cost	Approved Package Cost, pro-rated over a 12 month period to allow like-for-like comparisons.
Culturally and Linguistically Diverse (CALD)	Country of birth is not Australia, UK, USA, Canada or South Africa, or primary language spoken at home is not English.
Payments	Payments made to providers, participants or their nominees for supports received as part of the participant's plan.
Committed support	The cost of products that are contained within a participant's plan, approved to be provided to support a participant's needs.
EI	Early Interventions.
In-kind	"In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.
Indigenous (ATSI)	Response of: - Aboriginal but not Torres Strait Islander; or - Australian Aboriginal; or - Torres Strait Islander.
LAC	Local Area Coordinators conduct community capacity and awareness building activities, and assist, if necessary, in the coordination and sourcing of participant supports.
Participant	An individual whose access request has been determined 'eligible'.
State/Territory	Based on the jurisdiction administering the participant.

Introduction

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

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

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

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

PART 1

Progress against Statement of Strategic Guidance

1. Background

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

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

The statement also requests that the Board report against a set of ongoing and time-specific key deliverables in each quarterly report. A report against the ongoing key deliverables is below. The next time specific deliverable will be reported against in September 2015.

Ongoing deliverables for period of trial – Update on progress	
Deliverable:	**Status:**
1. Provide regular information to governments, including through the quarterly report to the Ministerial Council (as set out in section 174 of the NDIS Act and the Integrated NDIS Performance Reporting Framework in the IGA), to give all jurisdictions visibility of the Agency's service delivery and fiscal outcomes and whether the Agency is meeting agreed performance targets, and keep governments informed of implementation issues as they emerge	• This is the Board's seventh Quarterly Report to COAG Disability Reform Council (CDRC) (NDIS Act, s 174). • The Board also prepared an additional 'Report on the Sustainability of the NDIS' for the seventh quarter as part of the Agency's function to report on the sustainability of the scheme. • The Chair of the Board and the CEO appear before CDRC meetings when required. • The Agency appears before the Joint Standing Committee when required. • The Chairman of the Board and the CEO continue to meet regularly with shareholder governments to discuss the ongoing roll out of the NDIS. • The Agency is supporting all jurisdictions to settle arrangements for transition to full scheme. • The Board provided its risk management framework to the CDRC in December 2014.
2. Maintain best practice standards of governance appropriate to the Agency, having regard to ANAO's Public Sector Governance Better Practice Guides and ensuring Board members undertake their duties impartially with a high degree of diligence, care and skill and at all times act in a manner that promotes the highest level of corporate governance in Board operations	• All Board meetings are run in accordance with the NDIS Act, the PGPA Act and the ANAO Public Sector Governance Better Practice Guides. • The Board has established a Sustainability Committee, Audit and Risk Committee, and an ICT Committee. • The Board will hold regular strategic planning days in 2015, to ensure it continues to undertake its governance duties at the highest level.

Ongoing deliverables for period of trial – Update on progress	
Deliverable:	**Status:**
3. Operate in accordance with all relevant legislation including the NDIS Act, the CAC Act and IGA and comply with all responsibilities under these Acts, including those relating to the annual reports, significant events, financial accountability, conduct of directors and officers, director's duty to disclose, compliance with General Policy Orders and Audit Committee	• Board members have published their register of interests on the NDIS website. • The Board has approved the Agency's Risk Management Strategy and framework. Risk management, including the active use of mitigation strategies, is a key priority for the Board. • The Board has updated its corporate plan and submitted the updated plan to CDRC, as required by the NDIS Act, and is in the process of preparing a new corporate plan for the period commencing 1 July 2015 in accordance with the new requirements under the PGPA Act. • The NDIS Independent Advisory Council provided formal advice to the Board in December 2014. The Board has provided a response to the CDRC in accordance with the NDIS Act.
4. Demonstrate evidence for how the Board has embedded a culture of decision making informed by actuarial advice throughout the Agency	• The Scheme Actuary attends all Board meetings. • The Chair of the Sustainability Committee meets regularly with the Scheme Actuary and Chief Executive, and supports close contact between the Scheme Actuary and the Board. • The Sustainability Committee meets once per quarter. • The Scheme Actuary provides a report at each Board meeting. • The Scheme Actuary also provides training to agency staff at both the National Office and trial sites. • The Scheme Actuary sits on the ICT Committee and Sustainability Committee and attends each Audit and Risk Committee meeting. • The Chief Finance Officer and Scheme Actuary collaborate to produce budget reports and financial statements.
5. Carefully monitor the use of discretionary powers set out in the legislation and the Rules, to ensure that these powers are subject to effective controls and operate consistently to support scheme sustainability and transparency in access to supports	• Quality assurance activities are being implemented across the NDIA. • Through internal operational reviews, the Agency is collecting and analysing data on discretionary decisions especially in relation to access and the approval of reasonable and necessary supports in participant plans. These include desktop reviews of participant files and interviews with staff at trial sites. • The Agency also uses internal operational reviews to closely monitor the use of delegations, ensuring they are used appropriately and consistently across trial sites, having regard to local needs. • The Agency monitors and reviews the outcome of internal reviews of decisions and AAT review of decisions and updates its processes and procedures in the light of this experience. • The Agency has developed a comprehensive set of operational guidelines to assist with consistency in decision making across the trial sites. These are reviewed and

Ongoing deliverables for period of trial – Update on progress	
Deliverable:	**Status:**
	updated regularly, having regard to Agency experience including the outcome of internal and AAT review of decisions. • Substantial research has been undertaken to refine reference packages – reference packages provide a benchmark amount for participants with similar characteristics. This allows detailed monitoring of the amount of supports provided to certain groups of participants, and identification of any cost pressures in a timely manner. It is important to note that the reference packages are not used to determine the amount provided to individual participants but allow for detailed monitoring. • Work is continuing to pilot and implement an outcomes framework for individuals. This will encourage the delivery of supports to strive towards achieving positive outcomes for participants, their families and carers. This will also provide the NDIA Board with a dynamic feedback loop to evaluate the outcomes of particular groupings of scheme participants, and the extent to which the NDIA is meeting its strategic objectives.

PART 2

Summary Report on Management of Scheme Cost Drivers

1. Overview of cost drivers

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

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

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

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

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

2. Monitoring framework against cost drivers

The National Disability Insurance Agency has developed a framework for monitoring cost drivers and financial sustainability. This framework is summarised in the diagram below:
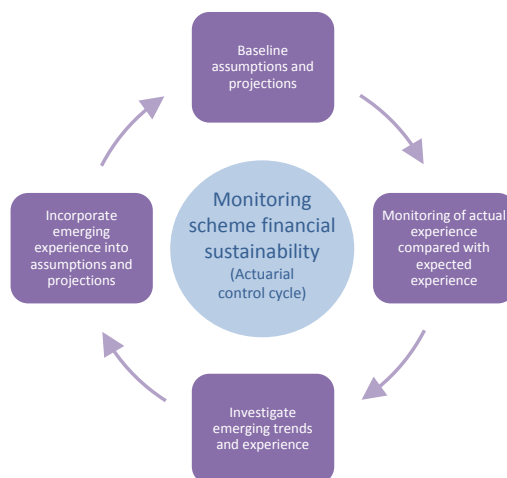
Specifically, the framework involves collecting data on the number of participants, the characteristics of these participants (to allow analysis of reference groups), the outcomes for these participants, and the cost of supports provided to participants. This allows a detailed understanding of deviations between actual and expected experience and hence identification of cost drivers. This information can then be used by the NDIA Board and NDIA management to implement any changes required to continue to ensure the NDIS remains financially sustainable.

Monitoring and investigation of actual experience compared with expected experience are continuous activities within the Agency. The Scheme Actuary prepares an annual report on the scheme's financial sustainability. The 2013/14 Summary Financial Sustainability Report was released with the NDIA Annual Report.
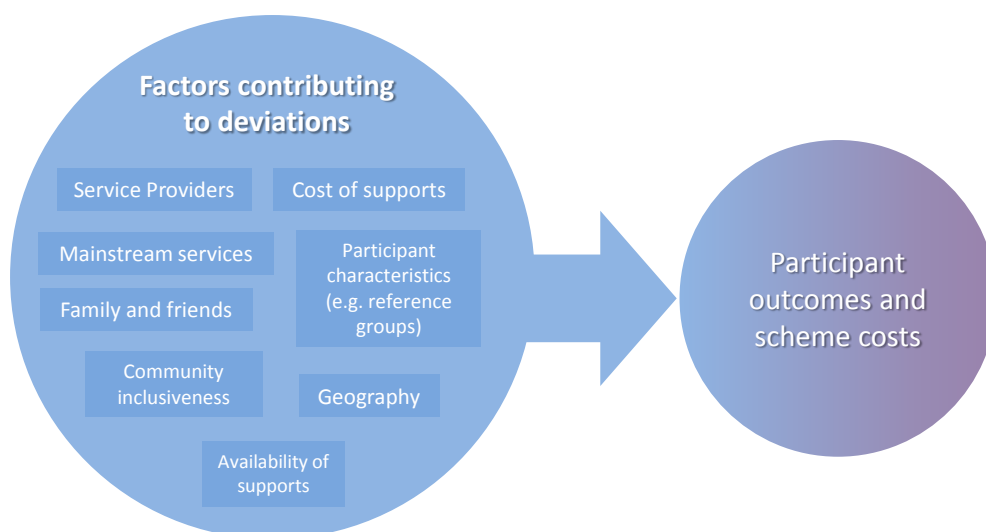
This Quarterly Report to COAG Council on Disability Reform contains:

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

- A summary of key initiatives against cost drivers.

7th Quarterly Report to COAG Disability Reform Council
31 March 2015

3. Summary of key initiatives against cost drivers

Cost Driver	Key Initiatives Implemented by Agency
Streamlining access	• Implementation of risk-based segmentation to streamline access and planning for participants in Western Australia, Northern Territory and Australian Capital Territory. This was reviewed after three months and improvements put in place. • The Agency has matured its use of data from existing State/Territory and Commonwealth programs to proactively approach potential participants. This has resulted in a more efficient and reliable phasing process, and where appropriate, pre-determined eligibility for some applicants. • Trial sites undertake regular reviews of decisions to check for local consistency. The establishment of a National Quality and Innovation Team to audit decisions will ensure national consistency. • Detailed analysis of participants who have been found ineligible is undertaken to provide some indications of where possible cost pressures may arise. • A detailed review of access for people with psychosocial disability is currently underway. • Weekly operational dashboards have been put in place, which allow timely monitoring of scheme performance.
Scope of supports funded under the scheme	• A comparative review of supports funded under the NDIS versus those proposed by the Productivity Commission indicated that the scope of supports is in line. • Establishment of expert groups in autism and sensory disability to establish the evidence base for funding appropriate early intervention options for children. • Focusing the planning conversation on the availability of community and mainstream support to meet the needs of participants before consideration of funded supports. This also encourages innovative ways for individuals to achieve desired outcomes. • Supports funded in participant plans are being classified as core, capacity or capital, improving visibility of the expected purpose and duration of the support's funding. The inclusion of capacity and capital supports indicate active work to improve participant outcomes, and in many cases, reduce the intensity of future core supports. • The NDIA has provided input (through the Inter-jurisdictional Mainstream Interface Working Group) to the review of the COAG Applied Principles and Tables of support that determine the responsibilities of the NDIS and other service systems. The findings of this review will assist in construction of appropriate operational guidelines in relation to funding of supports.
Volume of supports funded	• Substantial research has been undertaken to refine reference packages – reference packages provide a benchmark amount for participants with similar characteristics (such as age and disability). This allows detailed monitoring of the amount of supports provided to certain groups of participants, and identification of any cost pressures in a timely manner. It is important to note that the reference packages are not used to determine the amount provided to

Cost Driver	Key Initiatives Implemented by Agency
	individual participants but allow for detailed monitoring. The piloting of reference packages commenced February 2015.
	• The World Health Organisation Disability Assessment Schedule 2.0 (WHODAS 2.0) will supplement the reference packages.
	• These two projects will also allow streamlining of the planning process by collecting much information in advance of these discussions.
	• Operational guidelines providing information on reasonable and necessary supports have assisted the planning process and have contributed to the reduction in package sizes.
Delivery of supports funded	• Work is continuing to pilot and implement an outcomes framework for individuals. This will encourage the delivery of supports to strive towards achieving positive outcomes for participants, their families and carers. This will also provide the NDIA Board with a dynamic feedback loop to evaluate the outcomes of particular groupings of scheme participants, and the extent to which the NDIA is meeting its strategic objectives. The outcomes framework has been piloted through January, February and March 2015. The results of the pilot, along with feedback from consultation with the disability sector are being used to improve the framework.
	• Participant flexibility in the choice and consumption of allocated funding has been delivered through the "bundling" of similar supports. Providing increased flexibility has also reduced the need to choose a wider range of fixed supports in participant plans.
	• Further work is underway to simplify the catalogue of supports to be outcomes focused and encourage more innovation.
	• Enhancements to the ICT system allow participants to monitor expenditure against their plan, and to claim online for self-purchased supports.
	• Work is underway to develop strategies and models of support for Indigenous communities, rural and remote communities, culturally and linguistically diverse (CALD) communities, and for mental health.
	• In order to better understand links with other service systems and the use of mainstream supports, the NDIA is applying to be an accredited Data Integration Authority.
	• It is critical that the NDIA has developed a fit for purpose ICT System for full scheme roll out. A Board Committee has been formed to provide enhanced governance of this crucial component of managing cost drivers.
	• System improvements implemented to improve monitoring and reconciliation of supports delivered under Commonwealth, State and Territory "in-kind"[1] funding arrangements.
Prices	• The development of the National Aids and Equipment Strategy is continuing.
	• Work is underway to establish an appropriate sector data collection to monitor the price and cost of supports delivered.
	• An efficient price has been developed for personal care and community participation. This price has been set higher in the short term to support the sector to transition to the NDIS.

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

Cost Driver	Key Initiatives Implemented by Agency
	• Work is underway to establish an efficient pricing model for supports specific to addressing the needs of participants living with a psycho-social disability.

PART 3

Report under the Integrated NDIS Performance Reporting Framework

Index of Tables

Agency Performance

Overview

This section provides an overview of agency performance as at 31 March 2015 across the seven trial sites. The seven locations are:

- The Hunter trial site – Newcastle, Lake Macquarie, and Maitland Local Government Areas (LGAs) in New South Wales.

- The Barwon trial site – Greater Geelong, Surf Coast, Queenscliff and Colac-Otway LGAs in Victoria.

- The South Australian trial site – 0-14 year olds.

- The Tasmanian trial site – 15-24 year olds.

- The Australian Capital Territory trial site.

- The Perth Hills trial site - Swan, Kalamunda and Mundaring LGAs in Western Australia.

- The Barkly region trial site in the Northern Territory.

The first four trial sites commenced on 1 July 2013, the remaining three commenced on 1 July 2014.

Access requests

19,344 access requests to the scheme have been made by individuals, with 16,433 people currently eligible[2] for the scheme (85% of access requests), and 1,452 people (8%) found ineligible (this falls to 6% when you exclude ineligibility due to age and residency requirements). Only 245 (1.3%) of these access request decisions have been requested to be reviewed.

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[2] Note: 16,649 participants have ever been found eligible for the scheme. However, 216 participants are now inactive.

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

NSW

SA

TAS

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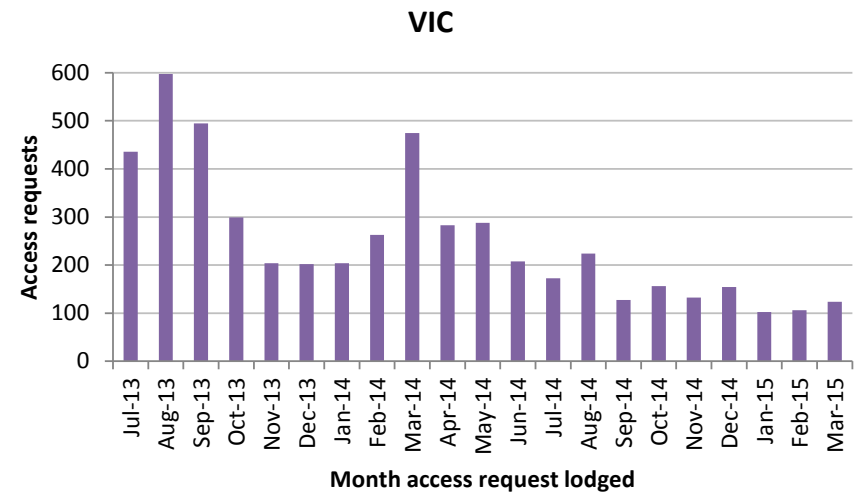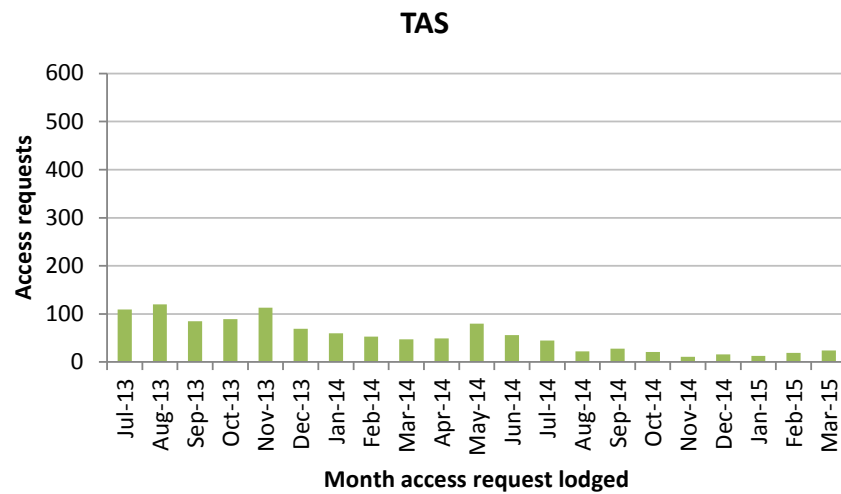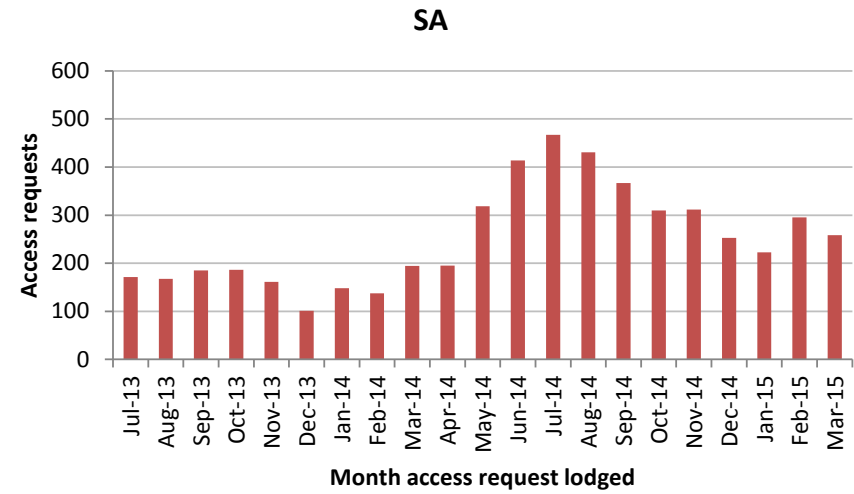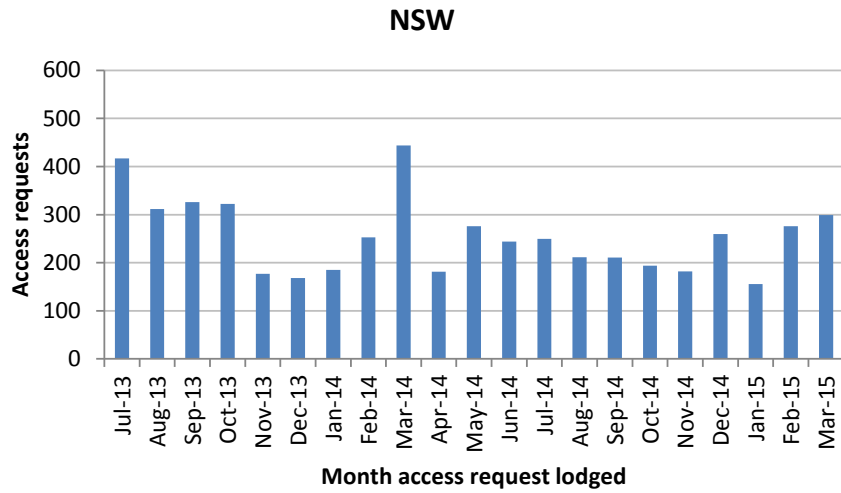
Figure 1.(b). People lodging an access request by month - ACT, NT and WA trial sites

ACT

NT

WA
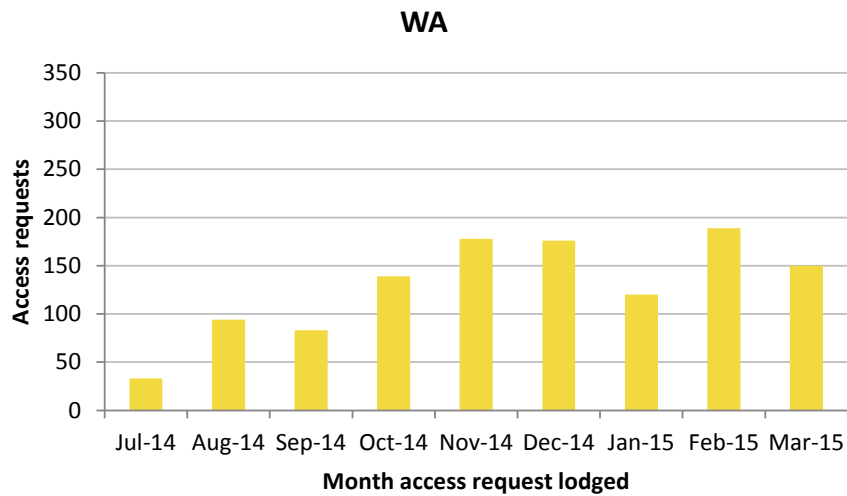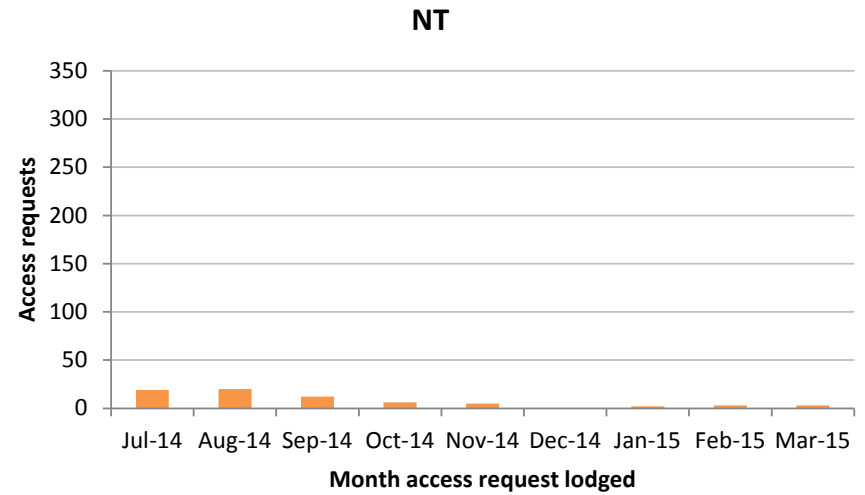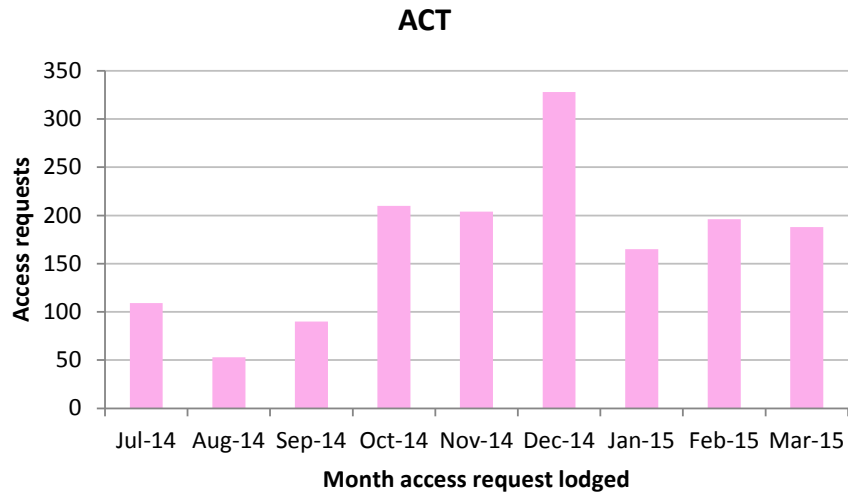
Participants

Of the 16,649 active and inactive participants[3], there are 13,610 who have received an approved plan. Of the participants with approved plans, 4% are Indigenous and 4% CALD. This is fewer than expected Indigenous participants in the trial sites that commenced on 1 July 2013 – however, this variable was not well completed particularly in 2013/14. The proportion of Indigenous participants in the trial sites that commenced on 1 July 2014 are largely in line with expected. CALD is lower than expected in New South Wales and Victoria. CALD participants are currently higher than expected in South Australia, and in line with expected in Tasmania. CALD is also lower than expected in the trial sites that commenced on 1 July 2014. Detailed exception reporting is underway to ensure these data are collected, and the data are improving.[4]

'Autism and related disorders' is the most common primary disability across all trial sites (30% of participants nationally). In South Australia, 46% of participants have Autism and related disorders listed as their primary disability due to the very young cohort of participants (0-6 year olds). In Tasmania, intellectual disability is the most prevalent primary disability at 49%, due to the young adult cohort (15-26 years). In New South Wales and Victoria, the two sites established in 2013/14 and inclusive of all ages, intellectual disability and Autism and related disorders are the most prevalent primary disabilities (32% and 23% respectively across the two sites).

A number of participants in the NDIS received funded supports from existing Commonwealth and State/Territory disability programs – "existing" participants. Other participants entering the NDIS have not received any disability services before, either due to unmet need or new incidence – "new" participants. There are currently 8,747 (65%) active participants with approved plans received funded supports from existing programs and 4,759 new participants (35%).[5]

There are 13,507 active participants with approved plans, of whom 8,370 (62%) were found eligible for the scheme because they met the disability requirements (section 24 of the NDIS Act) and 5,137 (38%) participants met the early invention requirements (section 25 of the NDIS Act). [6] Younger participants are more likely to meet the early intervention requirements which aim to improve, stabilise or lessen the impact of the person's impairment on their functional capacity.

13,430 active participants have funded supports in their approved plans, and 11,486 (86%) of these participants receive at least one early intervention support. Participants aged 0-4 years are more likely to receive early intervention supports (97%).

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

[4] Indigenous status is not filled out for 21% of records, compared to 50% of records not filled out at the end of June 2014.

[5] One active participant with an approved plan does not have information on whether they were previously accessing existing disability programs. This information is being sought.

[6] One active participant with an approved plan does not have information on how they entered the scheme. This information is being sought.

Plans

18,911 plans have been approved to date, including 5,072 second plans, 221 third plans and eight fourth plans. These plans are likely to include a focus on supporting participants with their goals across independence, social participation and/or health & wellbeing. They are also likely to contain multiple funded supports (79% of plans). The most common funded supports in dollar terms are daily tasks in shared living arrangements, community participation, and assistance with personal activities. The most commonly funded support in South Australia, however, is early childhood support.

These plans are mostly solely agency managed (63%). There are 32% which use a combination of agency management and self-management, and 5% are solely self-managed. The proportion solely self-managed has increased from 4% last quarter, largely due to an increase in South Australia from 10% to 12%. Note: the management of the plan in this instance refers to the financial management of the plan. Participants can self-direct their supports whilst the agency manages the financial side of the plan.

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

NSW

SA

TAS

VIC

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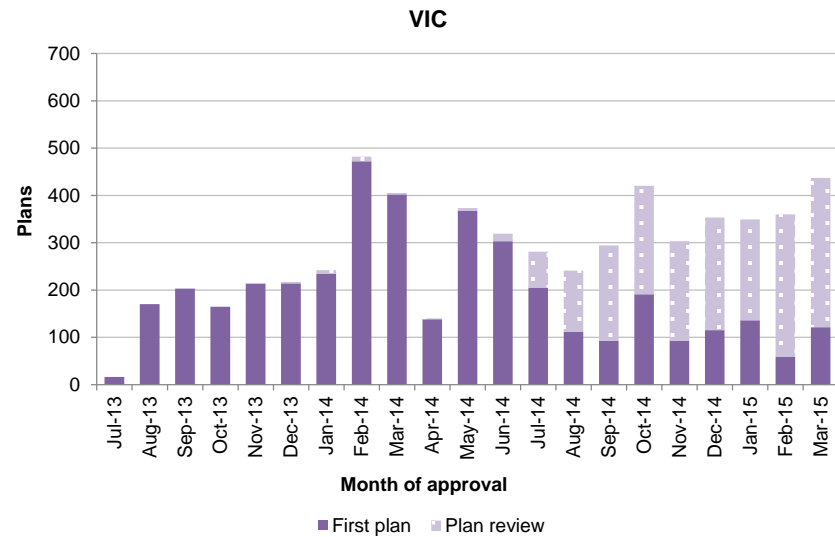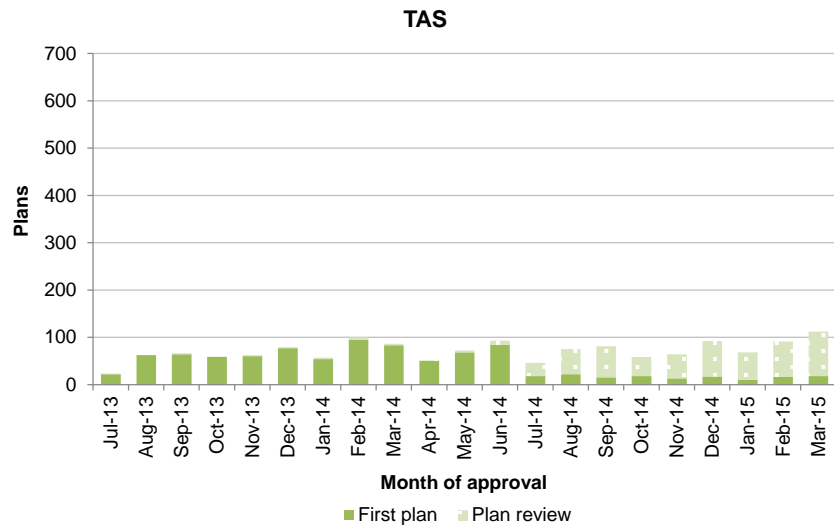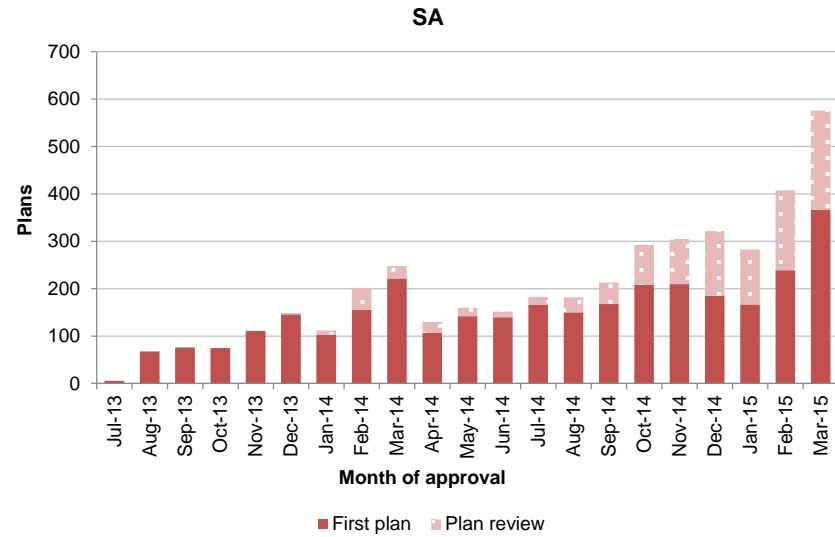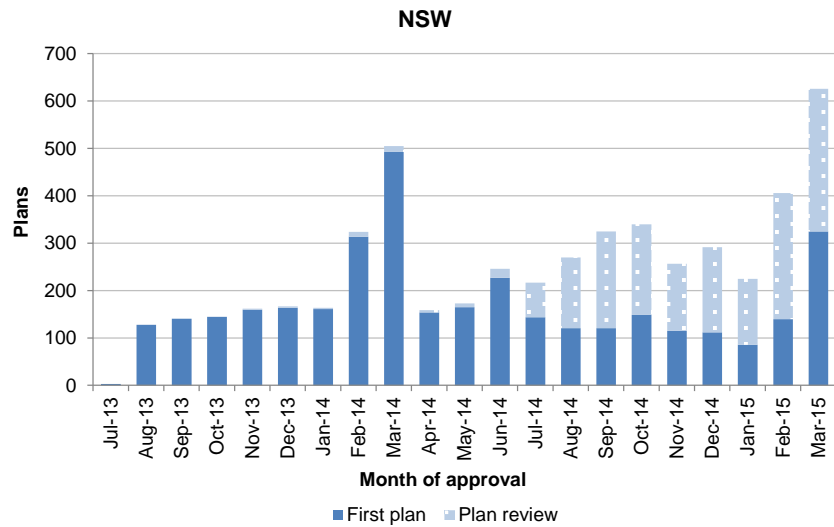
Figure 2.(b). Approved plans by month that the plan was first approved – ACT, NT and WA trial sites

ACT

NT

WA

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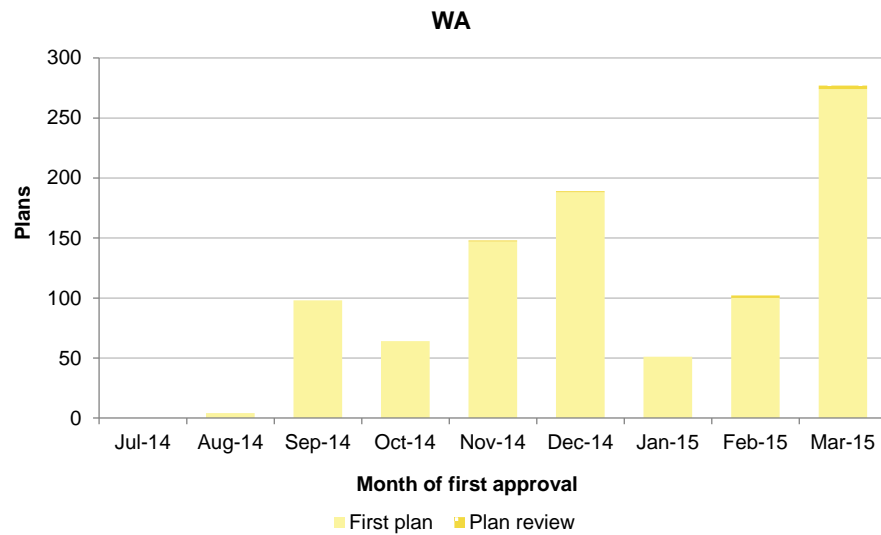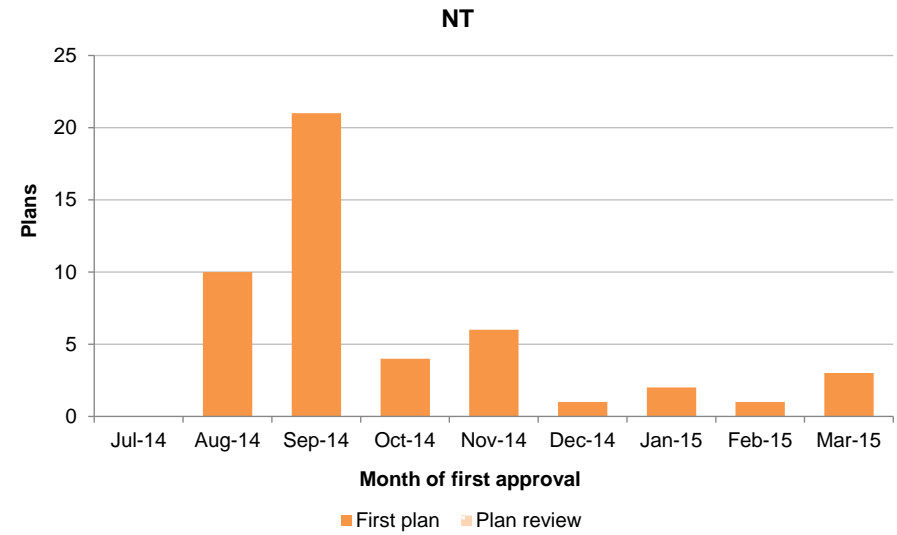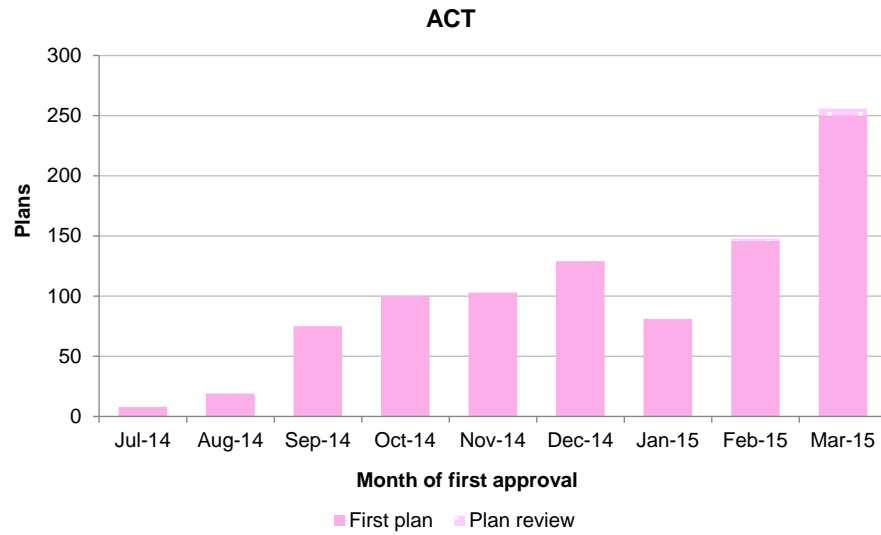
In addition to supports provided through plans, 73% of participants are also accessing mainstream services. A large number of these mainstream services include services related to education (47%) or self-care (42%).

Figure 3. Types of mainstream supports accessed in participants' plans
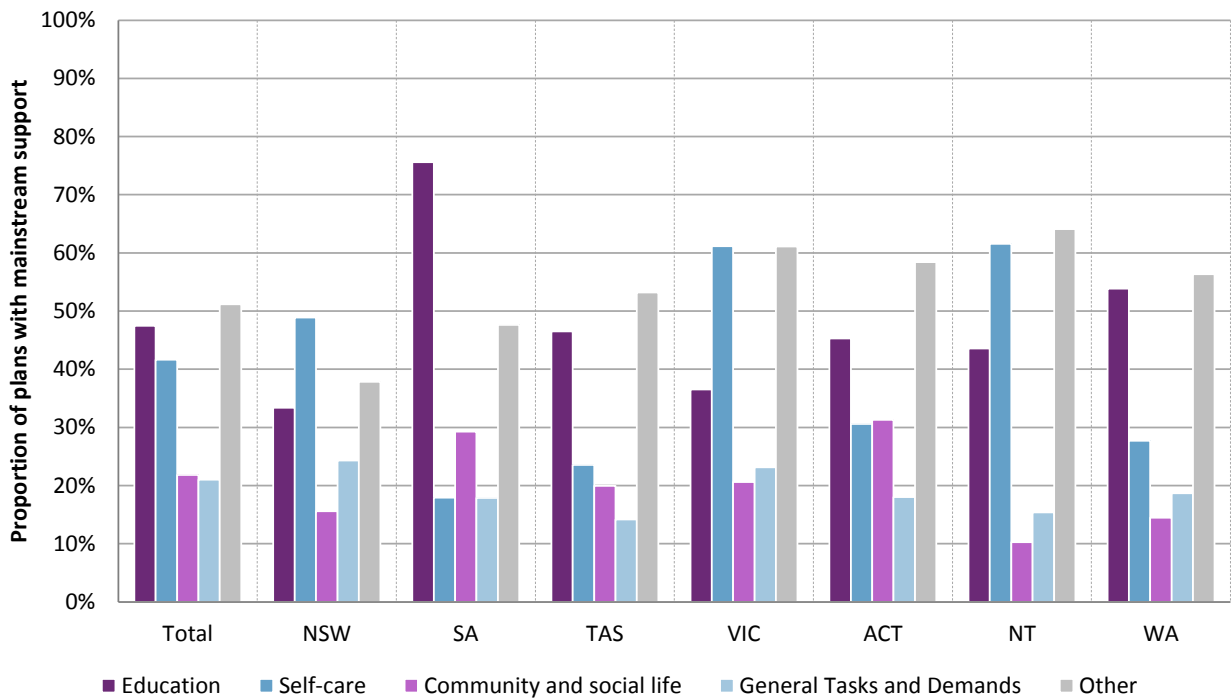
Committed funds

Overall, $754.0 million has been committed for participant support costs to date, with $282.3 million and $239.9 million committed in the New South Wales and Victorian trial sites respectively (noting $80.8 million and $21.2 million have been committed to participants in each of the Stockton large residence in the New South Wales trial site and the Colanda large residence in the Victorian trial site respectively). Figure 4 shows the committed support expected to be provided each month by state.

These support costs are mostly allocated to a very small proportion of high-cost participants – only 11% of participants have an annualised package cost over $100,000, but these participants account for 52% of total committed supports.[7] On the other hand, 70% have an annualised package cost below $30,000, and account for only 23% of annualised committed funding.

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[7] Committed support is the dollar amount of support that has been made available to participants in their statements of support.

Figure 4. Committed supports expected to be provided by month of support provision
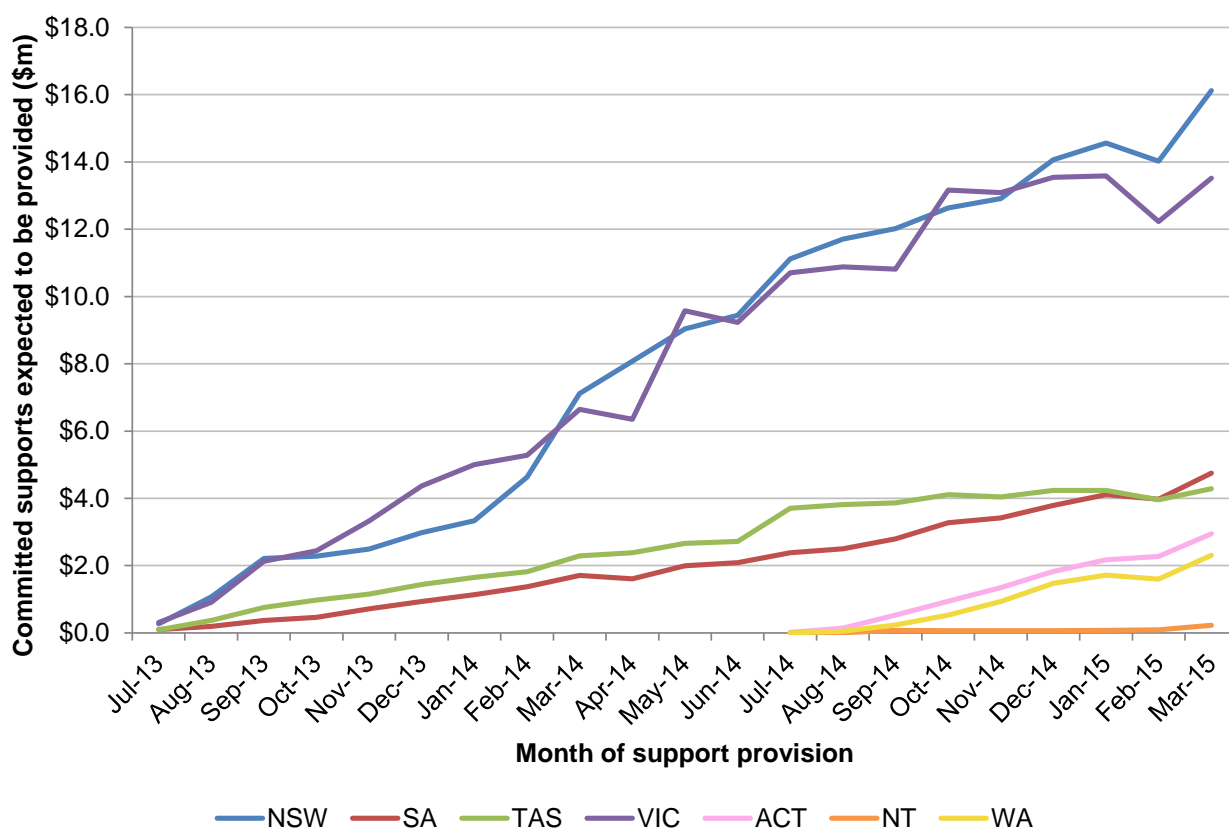
Overall, the average annualised package cost across all trial sites is approximately $40,800 including the Stockton and Colanda large residences, and $34,900 excluding both Stockton and Colanda large residences.[8] This is higher in the Tasmanian trial site at approximately $54,700, and is lowest in South Australia at $18,400. These differences are driven by the age specifications in the Tasmanian and South Australian trial sites. However, it is important to note, that average annualised package cost is not an appropriate measure of scheme performance when considered in isolation, and should be considered in combination with the number of scheme participants, the distribution of packages committed to these participants, and actual payments for supports provided.

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

The first 21 months of scheme experience indicate that overall costs of the scheme are in line with expectations. However, the average package costs are higher than expectations because of the lower number of low cost participants entering the scheme. The number of higher cost participants and medium cost participants are in line with expected.

In addition to package costs, $46.2 million has been committed to research and innovation projects.

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

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

NSW

SA

TAS

VIC

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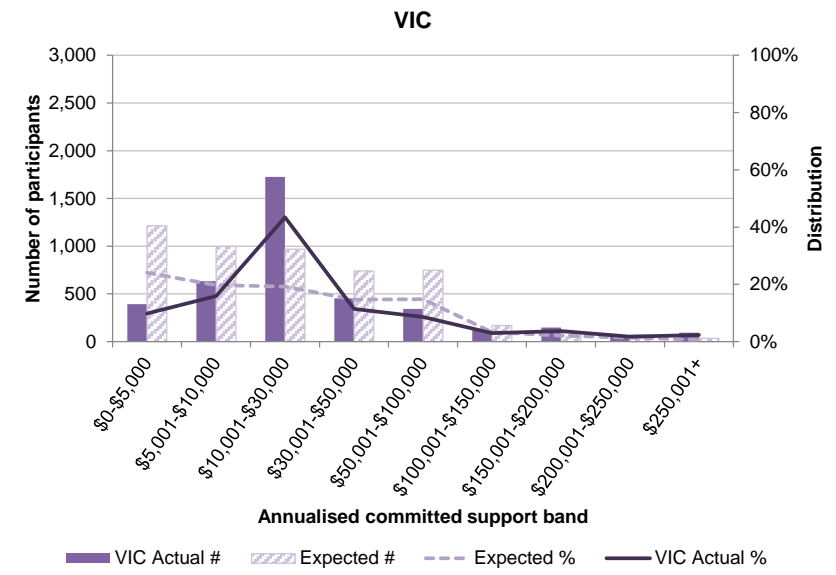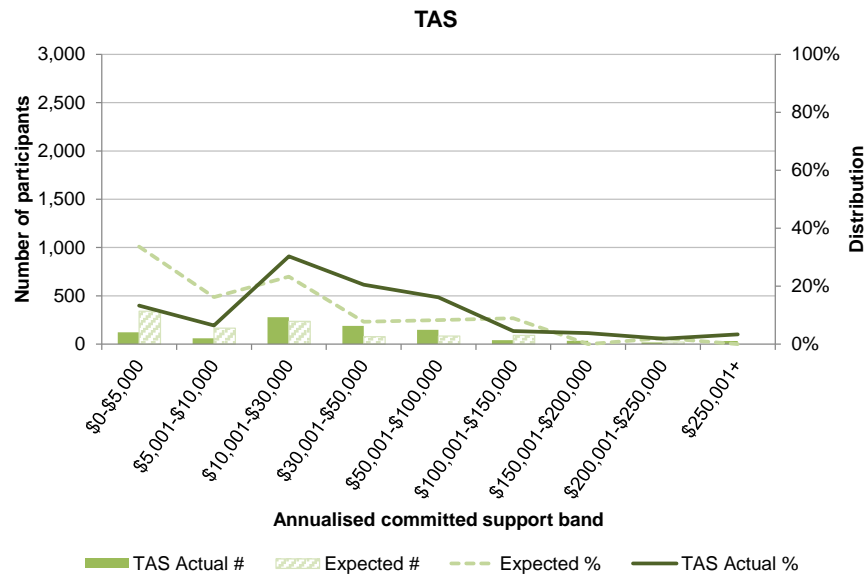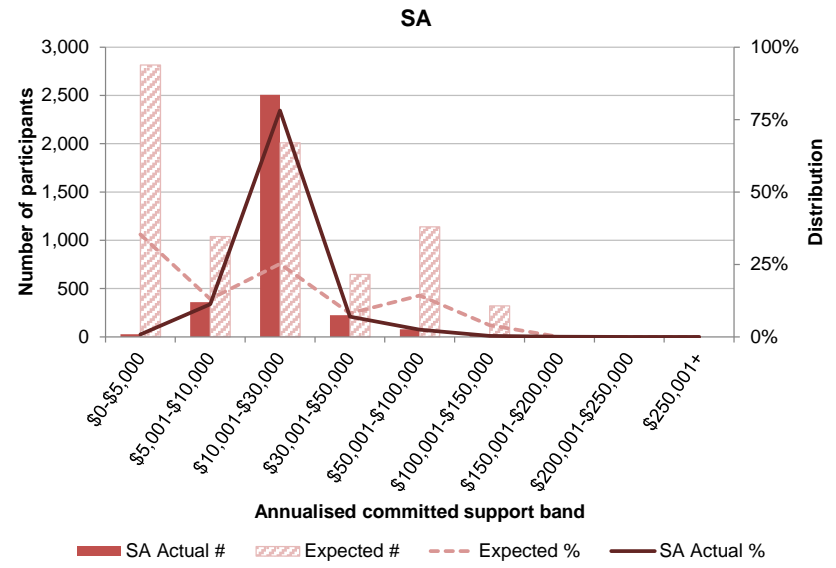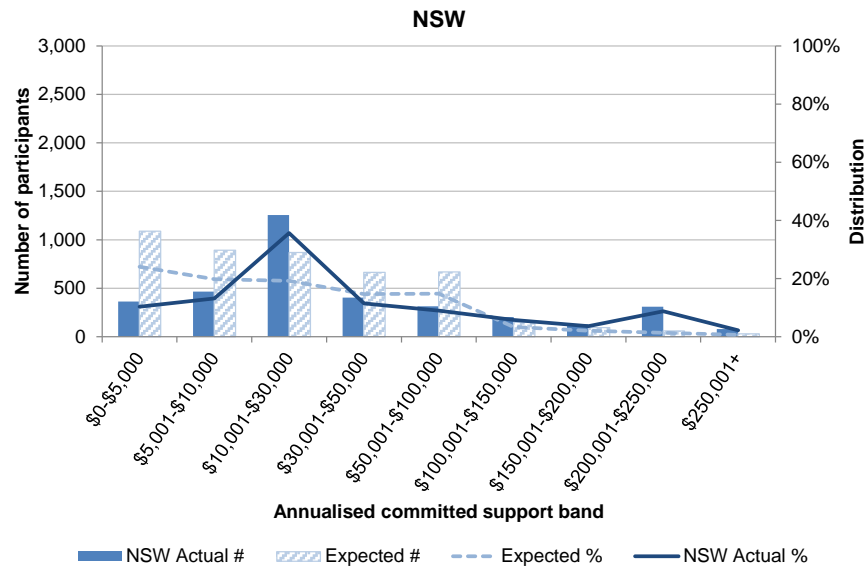
Figure 5.(b). Distribution of package costs by trial site – ACT, NT and WA trial sites

ACT

NT

WA

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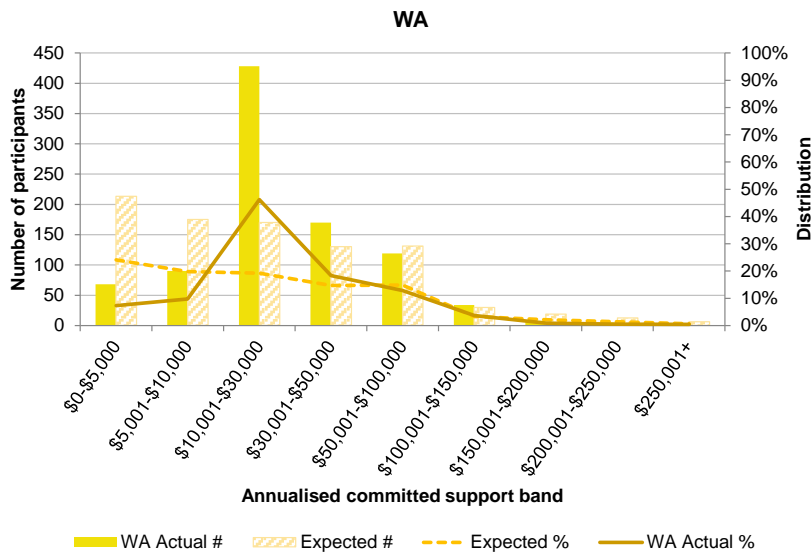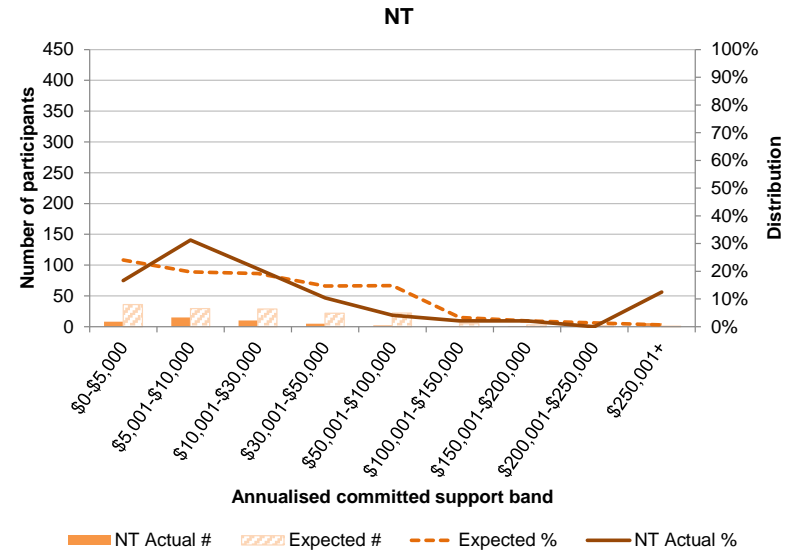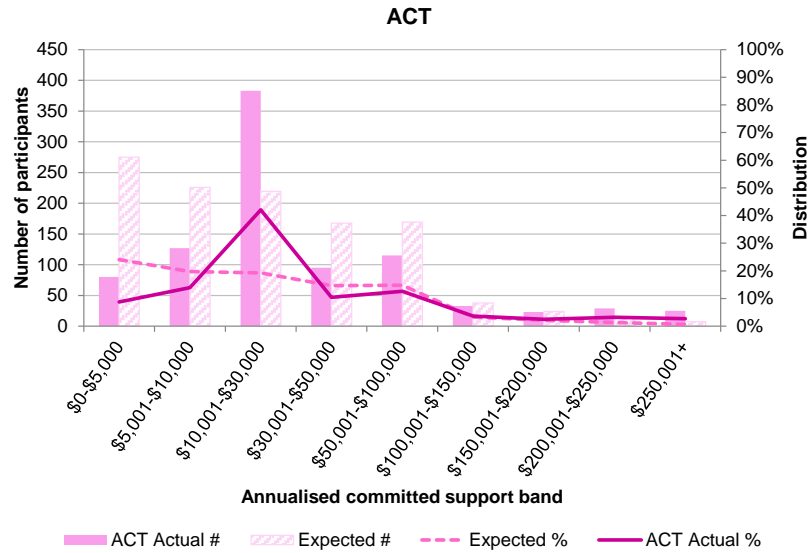
Payments made

79% of participants with funded supports have had at least one claim for payment against their plan (90% of those with plans over three months in length). Most of the payments are made in cash (68% of participant plans or 93% of all services received).

Payments made for participant supports total $72.7 million for supports provided in 2013/14 (52% of total committed supports[9] in this year) and $155.8 million for supports provided in the first three quarters of 2014/15 (49% of committed support). The draft off system reconciliation process undertaken to date to determine the amount of in-kind provided in 2013/14 indicates that a further $11.4 million of supports were provided in-kind in 2013/14 – hence 60% of committed support has been claimed for 2013/14. Estimating in-kind supports to date for 2014/15 indicates that a further $38.9 million has been provided in the first three quarters of 2014/15, meaning 61% of committed support provided in 2014/15 has been paid.

The largest amounts overall have been paid for daily tasks/shared living ($72.5 million) and community participation ($54.1 million). $192.6 million has been paid in cash, and $35.9 million has been paid in-kind (or $86.1 million if the off system payments are included).

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

Service Providers

There are 1,877 registered service providers, of whom:

- 1,814 (97%) operate in one state/territory only,
- 1,393 (74%) are small/medium enterprises, and
- 1,562 (83%) have not been previously registered with the Department of Social Services. A number of these providers are small/medium enterprises.

These service providers have received a total of $213.3 million for participant supports, which is over 90% of the total payments made to date. The remaining $15.1 million has been paid to participants who are self-managing.[10]

Participant satisfaction

Of the 1,440 participants surveyed for their satisfaction, the majority are highly satisfied with the Agency, with an overall rating of 1.64 on a scale of -2 (very poor) to +2 (very good), with slightly lower levels of satisfaction in South Australia, the Australian Capital Territory and Western Australia. The overall satisfaction rating is calculated as a weighted average of the satisfaction ratings of each participant surveyed. Participants are provided a paper survey after their plan is agreed with their planner; not all participants choose to complete and submit their survey. The participant is given the choice of submitting

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[9] Committed support is the dollar amount of support that has been made available to participants in their statements of support.

[10] Not including the off system payments.

the survey anonymously. Paper surveys are handed to participants by their planner to complete, and once completed are returned to the business support officer. Hence, the planner does not see the paper surveys.

To date there have been 26 appeals with the Administration Appeal Tribunal, 14 due to access issues (0.1% of all access requests), and 12 due to plan issues (0.1% of all active and inactive[11] participants with an approved plan). Of these appeals, 24 have reached a resolution – 12 have been varied (participant won the appeal) and the other 12 have been dismissed, withdrawn or affirmed (the original decision confirmed).

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

1. Participant Outcomes

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

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

Work is underway to implement an outcomes framework, which will allow the Agency to report against scheme outcomes.

Table 1.1.1. Information about participants with approved plans

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

State/Territory	Total	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	3,568	4%	2%	60%	40%	0%	7%	26%	12%	19%	34%	2%
SA	3,212	4%	6%	71%	29%	0%	37%	63%	0%	0%	0%	0%
TAS	924	8%	2%	64%	36%	0%	0%	0%	90%	10%	0%	0%
VIC	4,021	2%	2%	59%	41%	0%	7%	29%	14%	22%	26%	1%
ACT	911	3%	9%	64%	36%	0%	38%	14%	25%	7%	13%	3%
NT	48	94%	79%	60%	40%	0%	6%	27%	10%	29%	27%	0%
WA	926	4%	5%	65%	35%	0%	9%	44%	21%	16%	10%	0%
Total	**13,610**	**4%**	**4%**	**63%**	**37%**	**0%**	**16%**	**34%**	**16%**	**14%**	**18%**	**1%**

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

Primary Disability	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Autism and Related Disorders	22%	46%	30%	22%	23%	4%	40%	30%
Cerebral Palsy	5%	4%	7%	4%	7%	13%	6%	5%
Deafness/Hearing Loss	3%	4%	0%	1%	2%	0%	0%	2%
Developmental Delay	3%	14%	2%	7%	20%	4%	1%	8%
Down Syndrome	4%	3%	7%	4%	4%	4%	6%	4%
Global Developmental Delay	3%	10%	2%	3%	5%	4%	6%	5%
Intellectual Disability	22%	1%	36%	23%	12%	19%	18%	17%
Multiple Sclerosis	2%	0%	0%	3%	3%	2%	2%	2%
Schizophrenia	5%	0%	1%	6%	2%	6%	1%	3%
Other Intellectual/learning	5%	5%	6%	5%	5%	4%	6%	5%
Other Neurological	14%	2%	5%	10%	6%	17%	7%	9%
Other Physical	4%	2%	2%	3%	4%	17%	3%	3%
Other Psychiatric	2%	0%	2%	8%	1%	0%	0%	3%
Other Sensory/Speech	4%	8%	1%	3%	4%	6%	3%	4%
Total	*3,568*	*3,212*	*924*	*4,021*	*911*	*48*	*926*	*13,610*

Table 1.1.1 shows the demographic information of participants with an approved plan. Overall, 4% of participants with approved plans to date identify as Aboriginal and/or Torres Strait Islander. Indigenous status is not well completed in the system with 21% of records not stated (this has improved from 38% of records being not stated at the end of December). With 21% of records missing, comparison of Indigenous rates with expected rates is difficult. There has been an increase in the number of Indigenous participants in the scheme across all trial sites in the March 2015 quarter compared with the December 2014 quarter –

some of this increase is likely to be due to the improved reporting. However, there are still fewer than expected Indigenous participants in the trial sites that commenced on 1 July 2013, with the exception of the Victorian trial site. These trial sites are more affected by the missing records. The proportion of Indigenous participants in the trial sites that commenced on 1 July 2014 are largely in line with expected.

Overall 4% of participants with approved plans are classified as Culturally and Linguistically Diverse (CALD). CALD is lower than expected in New South Wales and Victoria. CALD participants are currently higher than expected in South Australia, and in line with expected in Tasmania. CALD is also lower than expected in the trial sites that commenced on 1 July 2014.

The proportion of males and females is in line with expected for the New South Wales, South Australian, Tasmanian and Victorian trial sites. The new trial sites have relatively more males than females due to the specific age groups currently in these trial sites.

Participants with Autism and related disorders represent the highest proportion of approved plans overall, at 30%. The second highest proportion is represented by participants with intellectual disability (including Down syndrome and other intellectual/learning disability) at 26%.

The proportions of disability vary between the States/ Territories due to the difference in the trial site phasing. For example in South Australia, there is a high proportion of participants with developmental and global developmental delay (24% combined) reflecting the younger age group of the cohort (0-6 year olds). In Tasmania participants with intellectual disability (including Down syndrome and other intellectual/learning disability) represent 49% of all participants due to the 15-24 age cohort in this site.

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

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

State/Territory	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Participants with approved plans
NSW	752	851	1,905	2,233	1,110	2,428	11	**3,568**
SA	17	1,378	1,637	2,564	97	2,472	1	**3,212**
TAS	417	322	293	558	306	594	8	**924**
VIC	999	995	2,240	2,683	1,367	3,032	5	**4,021**
ACT	163	380	413	535	229	533	0	**911**
NT	8	9	20	36	10	22	0	**48**
WA	175	197	319	474	98	550	0	**926**
Total	**2,531**	**4,132**	**6,827**	**9,083**	**3,217**	**9,631**	**25**	**13,610**

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

Primary Disability	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Participants with approved plans
Autism and Related Disorders	421	1,694	2,025	2,874	473	3,117	5	4,033
Cerebral Palsy	118	171	381	467	212	462	1	665
Deafness/Hearing Loss	53	112	99	188	31	196	0	295
Developmental Delay	35	395	470	754	79	754	3	1,037
Down Syndrome	149	142	278	393	160	449	2	574
Global Developmental Delay	9	242	324	517	42	476	0	666
Intellectual Disability	854	499	1,071	1,358	965	1,635	12	2,351
Multiple Sclerosis	53	21	147	162	108	143	0	242
Schizophrenia	167	67	292	236	207	305	0	445
Other Intellectual/learning	143	212	333	437	142	431	0	692
Other Neurological	214	179	633	792	447	733	0	1,169
Other Physical	74	90	258	289	130	256	0	418
Other Psychiatric	166	105	295	213	147	295	1	421
Other Sensory/Speech	75	203	221	403	74	379	1	602
Total	*2,531*	*4,132*	*6,827*	*9,083*	*3,217*	*9,631*	*25*	*13,610*

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

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

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

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

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

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

State	Communication	Community - Social and Civic	Domestic Life	Education	Employment	General Tasks and Demands	Interpersonal Relationships	Learning and Knowledge	Mobility	Self-care	Participants with plans
NSW	3,138	2,148	1,195	70	429	2,093	482	126	1,106	2,582	**3,568**
SA	3,115	940	552	22	4	631	76	386	862	1,431	**3,212**
TAS	697	648	308	70	233	632	72	83	271	666	**924**
VIC	3,462	2,877	1,500	201	643	2,554	752	375	1,432	3,158	**4,021**
ACT	774	452	196	33	87	366	80	116	184	474	**911**
NT	39	38	7	5	3	15	1	4	20	40	**48**
WA	840	532	177	33	147	324	89	56	192	662	**926**
Total	**12,065**	**7,635**	**3,935**	**434**	**1,546**	**6,615**	**1,552**	**1,146**	**4,067**	**9,013**	**13,610**

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

Primary Disability	Communication	Community - Social and Civic	Domestic Life	Education	Employment	General Tasks and Demands	Interpersonal Relationships	Learning and Knowledge	Mobility	Self-care	Participants with plans
Autism & Related Disorders	3,768	1,977	824	160	234	1,538	715	348	590	2,398	4,033
Cerebral Palsy	595	477	324	23	59	410	51	28	517	565	665
Deafness/Hearing Loss	283	57	20	4	20	50	11	3	57	80	295
Developmental Delay	983	329	131	22	21	234	91	93	184	387	1,037
Down Syndrome	545	413	190	31	125	367	68	101	234	468	574
Global Developmental Delay	629	211	92	13	9	166	44	127	162	319	666
Intellectual Disability	1,971	1,744	811	109	633	1,610	314	223	690	1,849	2,351
Multiple Sclerosis	195	166	168	1	30	165	6	3	172	220	242
Schizophrenia	299	308	112	8	90	298	33	22	45	380	445
Other Intellectual/learning	607	362	195	31	78	315	63	71	261	442	692
Other Neurological	999	852	648	14	127	807	78	35	719	1,011	1,169
Other Physical	327	249	207	4	23	229	13	15	259	325	418
Other Psychiatric	299	282	114	6	72	243	41	41	41	333	421
Other Sensory/Speech	565	208	99	8	25	183	24	36	136	236	602
Total	*12,065*	*7,635*	*3,935*	*434*	*1,546*	*6,615*	*1,552*	*1,146*	*4,067*	*9,013*	*13,610*

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

Table 1.2.2. Delivery of agreed supports[12] as planned

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

State	Claimed (Supports provided in 2013/14)	Committed Supports expected to be provided (2013/14)	Proportion claimed (2013/14)	Claimed (Supports provided from Jul 14 - Mar 15)	Committed Supports expected to be provided (Mar 2015 quarter)	Proportion claimed (Mar 2015 quarter)
NSW	$26,900,016	$52,954,249	51%	$50,060,200	$119,155,058	42%
SA	$5,317,730	$12,684,648	42%	$14,567,858	$30,982,309	47%
TAS	$9,729,334	$18,316,059	53%	$16,963,779	$36,251,287	47%
VIC	$30,677,968	$55,576,985	55%	$69,280,445	$111,535,812	62%
ACT	$0	$0	n/a	$3,270,163	$12,177,569	27%
NT	$0	$0	n/a	$21,755	$664,718	3%
WA	$0	$0	n/a	$1,651,860	$8,832,390	19%
Total	**$72,625,047**	**$139,531,940**	**52%**	**$155,816,060**	**$319,599,143**	**49%**
Total (incl. in-kind off system reconciliation for 2013/14 and estimated 2014/15 in-kind supports that have not been invoiced in the system)	**$83,996,775**	**$139,531,940**	**60%**	**$194,728,707**	**$319,599,143**	**61%**

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[12] Committed support is the dollar amount of support that has been made available to participants in their statements of support.

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

Primary Disability	Payments (Supports provided in 2013/14)	Committed Supports expected to be provided (2013/14)	Proportion paid (2013/14)	Payments (Supports provided from Jul 14 - Mar 15)	Committed Supports expected to be provided (Mar 2015 quarter)	Proportion paid (Mar 2015 quarter)
Autism And Related Disorders	$13,042,031	$25,315,682	52%	$29,759,700	$61,805,994	48%
Cerebral Palsy	$8,759,116	$17,390,483	50%	$14,559,900	$29,208,707	50%
Deafness/Hearing Loss	$661,900	$1,482,901	45%	$1,057,937	$2,725,189	39%
Developmental Delay	$2,627,378	$4,837,334	54%	$5,665,071	$10,969,033	52%
Down Syndrome	$4,992,269	$10,196,673	49%	$9,412,533	$18,990,562	50%
Global Developmental Delay	$1,192,374	$2,749,632	43%	$3,253,618	$6,951,125	47%
Intellectual Disability	$19,856,627	$34,184,775	58%	$49,919,835	$101,409,228	49%
Multiple Sclerosis	$1,917,852	$3,602,951	53%	$2,669,073	$4,793,137	56%
Schizophrenia	$2,130,518	$3,327,204	64%	$5,001,246	$9,337,663	54%
Other Intellectual/learning	$3,579,602	$7,098,909	50%	$6,953,113	$16,348,123	43%
Other Neurological	$10,417,806	$21,550,176	48%	$18,607,221	$37,417,600	50%
Other Physical	$1,648,604	$3,804,952	43%	$3,273,308	$7,549,858	43%
Other Psychiatric	$863,386	$1,730,179	50%	$3,183,942	$6,915,665	46%
Other Sensory/Speech	$935,585	$2,260,089	41%	$2,499,564	$5,177,258	48%
Total	*$72,625,047*	*$139,531,940*	*52%*	*$155,816,060*	*$319,599,143*	*49%*
Total (incl. in-kind off system reconciliation for 2013/14 and estimated 2014/15 in-kind supports that have not been invoiced in the system)	*$83,996,775*	*$139,531,940*	*60%*	*$194,728,707*	*$319,599,143*	*61%*

Table 1.2.2 shows the total dollar amount claimed to date compared with the estimated funds committed for supports delivered to date. Of the $319.6m in supports committed in participant plans to be provided in the nine months from July 2014 to March 2015, to date 61% has been delivered and claimed. This measure remains too immature to interpret meaningfully due to the complexity of participants and providers transitioning to the scheme from existing funding arrangements. There is also a lag between when a support is provided and when claims are made. Illustrating this lag between support provision and provider claiming, the proportion of supports claimed for 2013/14 has increased from 58% to 60%.

Table 1.2.3. Proportion of participants with payments, by plan length and state/territory

State	All Plans	Plans 3mth+	Plans <3mth
NSW	85%	92%	45%
SA	81%	93%	45%
TAS	86%	89%	15%
VIC	88%	93%	26%
ACT	49%	76%	24%
NT	15%	17%	0%
WA	35%	53%	15%
Total	**79%**	**90%**	**33%**

Table 1.2.3 shows the proportion of participants by trial site with funded supports that have had at least one claim for payment. For plans that have been in place for at least 3 months, 90% have had at least one claim for payment compared with 33% for plans in place for less than three months. This result highlights the lag between when supports are provided and paid.

Table 1.2.4. Length of time from access request to plan approval

Table 1.2.4.(a) Average days from access request to plan approval

State	Average Days 2013/14 [13]	Average Days 2014/15
NSW	46	89
SA	60	128
TAS	42	115
VIC	66	90
ACT	n/a	58
NT	n/a	36
WA	n/a	31
Total	**56**	**88**

Table 1.2.4.(b) Proportion of plans approved within 90 days of access request

State	Sep 14 – Dec 14
NSW	31%
SA	14%
TAS	26%
VIC	41%
ACT	70%
NT	67%
WA	88%
Total	**47%**

Table 1.2.4(a) shows the average number of days between when an access request is made and support is approved, for each of 2013/14 and 2014/15. This measure will be not be included in subsequent reports as censored data is used in the calculation and hence is not an appropriate measure whilst the scheme is being rolled out. Further, some participants are found eligible and then cannot have a plan approved until the program/service provider is scheduled to phase into the scheme. This phasing can be significantly later than when the access request was received and this will impact this result.

Table 1.2.4(b) presents the proportion of plans approved within 90 days of an access request being submitted during the 2nd quarter of 2014/15. This is a more appropriate measure of the time taken between access requests and plan approval. The 2014/15 trial sites performance is comparable with the first year's performance of the 2013/14 trial sites. Plan reviews in the trial sites that commenced in 2013/14 have diverted resources and this explains the difference between these trial sites and the trial sites that commenced in 2014/15. Further, the higher than expected number of children in the South Australian trial site compared with the bilateral agreement, has diverted resources to assessing eligibility rather than approving plans.

The Agency is working on streamlining both the planning and reviewing processes and has improved reporting for this purpose in order to improve results.

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[13] Note: These figures have decreased slightly from last quarter. This is due to corrections in the data to some plans.

Table 1.2.5. Service provider characteristics and market profile

Footprint	Allied Health	Disability Support	Disability Equipment	Plan Management	Total
National	51	57	47	28	63
State	1,402	1,230	1,224	218	1,814
Provider Type					
Non-Government Organisation	356	390	213	160	420
Small/Medium Enterprise	1,050	844	1,018	74	1,393
Other Private	16	21	15	3	27
Public	31	32	25	9	37
Total	**1,453**	**1,287**	**1,271**	**246**	**1,877**

Type	Providers Registered
New NDIS	1562
Previously DSS	315

Table 1.2.5 shows the market profile and characteristics of registered service providers. 97% of registered providers operate in one state/territory only. The majority of registered providers are small/medium enterprises (74%), and have not been previously registered with the Department of Social Services (DSS) (83%).

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

As mentioned previously, work is underway on an outcomes framework which measures choice and control. Participants receive individual plans and flexibility in spending the money in their plan. The introduction of bundled supports from 1 July 2014 has also increased this flexibility. This section presents data on participants' self-management and satisfaction, and information on appeals and complaints.

Table 1.3.1. Trends in proportion of participants using each, or a combination, of plan management options[14]

State	Agency Managed	Combination	Self-Managed
NSW	51%	47%	1%
SA	70%	19%	12%
TAS	50%	46%	4%
VIC	72%	28%	0%
ACT	50%	37%	13%
NT	92%	8%	0%
WA	67%	26%	7%
Total	**63%**	**32%**	**5%**

Table 1.3.1 shows the distribution of plan management options being used by active[15] participants. 5% of plans are solely self-managed, and 32% of plans use a combination of agency management and self-management, up from 4% and 29% in the last quarter respectively.

Note: the management of the plan in this instance refers to the financial management of the plan. Participants can self-direct their supports whilst the agency manages the financial side of the plan.

Note: Whilst a participant is receiving in-kind[16] support, they cannot solely manage their plan.

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

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

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

Table 1.3.2. Access requests made

Definitions

Closed	A participant's access to the Scheme has ceased due to death, or they have chosen to exit the Scheme.
Eligible	Prospective participant fulfils the criteria to access the NDIS.
In progress	The access request is in progress and is yet to be determined.
Ineligible	Does not fulfil the access criteria or adequate information has not been provided.
Revoked	Where the delegate of the CEO is satisfied that the person no longer meets the eligibility requirements.
Withdrawn	Prior to an eligibility determination, the prospective participant requests a withdrawal or where requested information has not been received within a reasonable period.

Table 1.3.2.(a) Access requests made

State	Closed	Eligible	In progress	Ineligible	Revoked	Withdrawn	Total
NSW	73	4,172	130	631	39	163	5,208
SA	7	4,538	317	270	3	36	5,171
TAS	15	977	36	42	5	39	1,114
VIC	54	4,415	71	338	9	190	5,077
ACT	3	1,214	222	93	5	6	1,543
NT	0	53	2	11	0	3	69
WA	1	1,064	29	67	1	0	1,162
Total	**153**	**16,433**	**807**	**1,452**	**62**	**437**	**19,344**

Table 1.3.2.(b) Proportions of access requests made

State	Closed	Eligible	In progress	Ineligible	Revoked	Withdrawn	Total
NSW	1%	80%	2%	12%	1%	3%	5,208
SA	0%	88%	6%	5%	0%	1%	5,171
TAS	1%	88%	3%	4%	0%	4%	1,114
VIC	1%	87%	1%	7%	0%	4%	5,077
ACT	0%	79%	14%	6%	0%	0%	1,543
NT	0%	77%	3%	16%	0%	4%	69
WA	0%	92%	2%	6%	0%	0%	1,162
Total	**1%**	**85%**	**4%**	**8%**	**0%**	**2%**	**19,344**

Table 1.3.2 shows the number and distribution of access requests made by the current status of the request. To date, approximately 85% of people submitting access requests have been found eligible, and a further 4% are in progress. Around 8% of access requests have been deemed ineligible. When you exclude ineligibility due to age and residency requirements this decreases to 6%.

Table 1.3.3. Reviews of decisions (internal)

State	Affirmed	Set aside	Pending	Outcome not recorded[17]	Total
NSW	8	18	13	23	**62**
SA	3	20	8	7	**38**
TAS	2	1	0	1	**4**
VIC	19	51	9	36	**115**
ACT	1	2	11	5	**19**
NT	0	0	0	0	**0**
WA	0	1	6	0	**7**
Total	**33**	**93**	**47**	**72**	**245**

Table 1.3.3 shows the number of decisions that participants, providers, or their agents, have formally requested to be reviewed. Reviews can be requested for decisions on access requests (19,344) or plan decisions (13,610). Given the total number of decisions, there have been very few requests for review (245), with the majority from Victoria (115).

Table 1.3.4. Total appeals by outcome with the Administrative Appeals Tribunal (AAT)

State	Affirmed	Set aside	Pending	Varied	Dismissed	Withdrawn	Total
NSW	1			1	2		**4**
SA	2			1	1	2	**6**
TAS				1			**1**
VIC	1		1	9	2	1	**14**
ACT			1				**1**
NT							**0**
WA							**0**
Total	**4**	**0**	**2**	**12**	**5**	**3**	**26**

Table 1.3.4 shows that there have been 26 appeals to the Administrative Appeals Tribunal of which two are pending. Of the 24 appeals to have reached a resolution, 12 have been varied (participant won the appeal), the other 12 have been dismissed, withdrawn or affirmed (the original decision confirmed).

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[17] The National Quality and Innovation Team continue to follow this up directly with trial sites to ensure better recording of resolutions.

Table 1.3.5. Appeals by Category with the AAT

State	Access Issues	Plan Issues	Total
NSW	3	1	4
SA	3	3	6
TAS	1		1
VIC	7	7	14
ACT		1	1
NT			0
WA			0
Total	**14**	**12**	**26**

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

Table 1.3.6. Complaints by outcome and average resolution time

State	Closed - referred to another agency	Closed - resolved	Closed - unresolved	Open	Total
NSW	1	139	11	10	**161**
SA	1	61	3	17	**82**
TAS	0	24	1	1	**26**
VIC	1	153	22	10	**186**
ACT	0	15	1	10	**26**
NT	0	0	0	0	**0**
WA	0	7	1	4	**12**
National Office	3	44	4	13	**64**
Total	**6**	**443**	**43**	**65**	**557**

Table 1.3.6 shows the number of complaints submitted. In total, there have been 557 complaints, of which 186 are from Victoria (33% down from 35% in the previous quarter) and 161 are from NSW (29%). Complaints can be lodged by participants, providers, organisations and members of the general community.

Table 1.3.7. Complaint type

State	Provider	Agency	Reasonable and Necessary Supports	Other	Total
NSW	3	99	40	19	**161**
SA	0	67	9	6	**82**
TAS	0	18	1	7	**26**
VIC	4	130	31	21	**186**
ACT	0	18	2	6	**26**
NT	0	0	0	0	**0**
WA	0	9	2	1	**12**
National Office	3	33	3	25	**64**
Total	**10**	**374**	**88**	**85**	**557**

Table 1.3.7 shows the distribution of the total complaints to date by complaint type. The majority (67%) of complaints are agency related, with a further 16% relating to the amount of reasonable and necessary supports in participant plans.

Table 1.3.8 Satisfaction with the Agency

Table 1.3.8.(a) Participant/Carer/ Family satisfaction with the Agency and life experience
(Note: Satisfaction is reported on a scale of -2 *very poor* to +2 *very good*, with 0 = *neutral*)

State	Participant/ family/ carer satisfaction	Experience satisfaction
NSW	1.77	1.04
SA	1.49	1.06
TAS	1.76	1.35
VIC	1.76	1.14
ACT	1.57	0.83
NT	-	0.53
WA	1.35	1.04
Total	**1.64**	**1.09**

Table 1.3.8.(b) Participant/ Carer/ Family satisfaction with the Agency

State	Very good	Good	Neutral	Poor	Very Poor	Total
NSW	79%	19%	2%	1%	0%	100%
SA	63%	27%	6%	3%	1%	100%
TAS	78%	20%	2%	0%	0%	100%
VIC	80%	17%	3%	0%	0%	100%
ACT	61%	36%	3%	0%	0%	100%
NT	-	-	-	-	-	-
WA	55%	33%	7%	3%	2%	100%
Total	**72%**	**23%**	**4%**	**1%**	**0%**	**100%**

Table 1.3.8 shows participant satisfaction with the Agency, and in particular, the planning process. Experience satisfaction measures a participant's overall satisfaction with their current life experience and outcomes. Of the 1,440 participants who have been surveyed 95% have responded that their planning process was either good, or very good, maintaining the high level of satisfaction with the Agency at 1.64.

Note: This survey is completed after the planning process by the participant, their family, or carer. It is conducted by an employee who has not been involved in the planning process, and responses are strictly confidential.

Note: Participant satisfaction extending beyond the planning process will be measured using the outcomes framework when implemented.

2. Financial Sustainability

Note: A number of measures relating to financial sustainability are addressed in the 'Report on the sustainability of the scheme' 2014/15 3rd quarterly report.

For the ACT, NT and WA trial sites, which commenced on 1 July 2014, only three quarters of data are available. The phasing schedules significantly impact the information presented for these sites.

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

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

Table 2.1.1. Total amount of committed supports[18]

State	Committed costs	Proportion
NSW	$282,286,593	37%
SA	$77,569,099	10%
TAS	$79,327,943	11%
VIC	$239,928,665	32%
ACT	$41,722,582	6%
NT	$2,671,127	0%
WA	$30,521,814	4%
Total	**$754,027,823**	**100%**

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

Table 2.1.2. Total payments ($, in-kind[19])

State	Cash	In-Kind	Total
NSW	$76,413,904	$546,312	$76,960,216
SA	$18,064,998	$1,820,590	$19,885,587
TAS	$24,584,555	$2,108,559	$26,693,113
VIC	$68,715,984	$31,242,429	$99,958,413
ACT	$3,218,673	$51,490	$3,270,163
NT	$20,875	$880	$21,755
WA	$1,564,915	$86,945	$1,651,860
Total payments	**$192,583,903**	**$35,857,205**	**$228,441,108**
Total (incl. in-kind off system reconciliation for 2013/14 and estimated 2014/15 in-kind supports that have not been invoiced in the system)	**$192,583,903**	**$86,141,580**	**$278,725,483**

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[18] Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.
[19] "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 2.1.2 shows total payments to date by trial site. The majority of payments are from the New South Wales and Victorian trial sites (77% of payments, combined). This is expected as these are the largest trial sites. The 2014/15 trial sites have made very few payments. This is expected as there is a lag between support provision and payment.

Table 2.1.3. Operating Expenses Ratio (% total costs)[20]

	%
Operating expenses ratio	27.4%

Table 2.1.3 shows the operating expenses ratio. This figure is down from 28.4% reported in the previous quarter.

Table 2.1.4. Annualised support package distributions[21]

Annualised committed support band	Active plans	%
$0-$5,000	1,059	8%
$5,001-$10,000	1,749	13%
$10,001-$30,000	6,587	49%
$30,001-$50,000	1,540	11%
$50,001-$100,000	1,120	8%
$100,001-$150,000	442	3%
$150,001-$200,000	344	3%
$200,001-$250,000	428	3%
$250,001+	238	2%
Total	**13,507**	**100%**

Table 2.1.4 shows the majority of participants have annualised package costs of between $5,001 and $30,000 (62%) and few participants have high cost plans of over $100,000 (11%). Of the 13,507 active[22] participants with approved plans, 70% have an annualised package cost of less than $30,000. This group accounts for only 23% of annualised committed funding. Conversely, 11% of participants have an annualised package cost over $100,000 and these participants account for 52% of total committed supports[23]. As expected, the bulk of committed funding is being allocated to a very small proportion of high-needs participants.

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[20] The numerator includes all operating expenses of the Agency including sector development grants but excludes participant payments and CICD Grants. The denominator is total expenses incurred by the Agency including all grants, operating expenses and participant support.

[21] This table includes participants with active plans only. The total of 13,507 is slightly lower than the 13,610 active and inactive participants with an approved plan reported elsewhere in this report.

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

[23] Committed support is the dollar amount of support that has been made available to participants in their statements of support.

Table 2.1.5. Length of time from access request to commencement of services

Table 2.1.5.(a) Average length of time from access request to commencement of services

State	Days
NSW	94
SA	118
TAS	114
VIC	113
ACT	n/a
NT	n/a
WA	n/a
Total	**106**

Table 2.1.5.(b) Proportion of participants with approved plans receiving support within 180 days of access request

State	Jul 14 – Sep 14
NSW	69%
SA	35%
TAS	33%
VIC	63%
ACT	79%
NT	17%
WA	53%
Total	**51%**

Table 2.1.5(a) shows the average length of time from when an access request is submitted before an invoice for support is received. This measure will be not be included in subsequent reports as censored data is used in the calculation and hence is not an appropriate measure whilst the scheme is being rolled out. Further, some participants are found eligible and then cannot have a plan approved until the program/service provider is scheduled to phase into the scheme. This phasing can be significantly later than when the access request was received and this will impact this result.

Table 2.1.5(b) is the updated table which shows the proportion of participants with approved plans who have received support within 180 days of submitting an access request during the 1st quarter of 2014/15. This is a more appropriate measure of the time taken between access requests and plan approval. The results are driven by the lower proportion of plans approved within 90 days of an access request being submitted reported in Table 1.2.4. Further, in-kind arrangements are affecting this measure, as not all in-kind services provided are invoiced in the system.

The Agency is working on streamlining both the planning and reviewing processes and has improved reporting for this purpose in order to improve results.

Note: in the Tasmanian and Northern territory trial sites the number of approved plans in the quarter was low and hence these figures should be treated with caution.

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

Support Category	Participant	Service Provider	Total
Accommodation/Tenancy	$10,771	$213,791	$224,561
Assess-Skill, Ability, Needs	$37,397	$1,603,726	$1,641,123
Assist Access/Maintain Employ	$59,005	$2,222,285	$2,281,290
Assist Prod-Pers Care/Safety	$646,104	$3,425,758	$4,071,862
Assist-Integrate School/Ed	$131,814	$524,386	$656,200
Assist-Life Stage, Transition	$90,762	$5,539,520	$5,630,282
Assist-Personal Activities	$2,678,231	$30,426,597	$33,104,827
Assist-Travel/Transport	$3,218,255	$3,419,874	$6,638,129
Assistive Equip-Recreation	$108,649	$185,004	$293,653
Assistive Prod-Household Task	$23,567	$40,257	$63,824
Behaviour Support	$26,478	$853,845	$880,323
Comms & Info Equipment	$339,643	$331,856	$671,499
Community Nursing Care	$42,500	$257,319	$299,819
Daily Tasks/Shared Living	$633,875	$71,836,215	$72,470,090
Development-Life Skills	$306,712	$3,032,924	$3,339,636
Early Childhood Supports	$2,282,645	$16,352,270	$18,634,915
Equipment Special Assess Setup	$20,159	$220,651	$240,810
Hearing Equipment	$70,387	$38,999	$109,385
Home Modification	$127,765	$1,709,173	$1,836,937
Household Tasks	$342,973	$1,417,931	$1,760,904
Interpret/Translate	$9,535	$152,520	$162,055
Other Innovative Supports	$188,902	$510,037	$698,939
Participate Community	$2,292,407	$51,782,555	$54,074,962
Personal Mobility Equipment	$307,404	$5,962,009	$6,269,413
Physical Wellbeing	$211,627	$152,018	$363,644
Plan Management	$3,289	$289,013	$292,302
Therapeutic Supports	$669,317	$9,522,706	$10,192,023
Training-Travel Independence	$37,707	$243,136	$280,843
Vehicle modifications	$146,590	$800,183	$946,773
Vision Equipment	$43,535	$266,548	$310,083
Total	**$15,108,002**	**$213,333,106**	**$228,441,108**
Total (incl. in-kind off system reconciliation for 2013/14 and estimated 2014/15 in-kind supports that have not been invoiced in the system)			**$278,725,483**

Table 2.1.6 shows total payments (cash & in-kind[24]) expenditure split by support cluster, excluding the off system reconciliation. Support clusters are groupings of similar supports. A single plan may have funding over many support clusters. Payees can include participants who are self-managing or providers who invoice against a plan. The majority of payments are made to providers (93%). The total payments made have increased from approximately $153 million in the previous quarter to over $228 million excluding the in-kind off system reconciliation, and $279 million when this reconciliation is included.

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

Table 2.1.7. Average and median costs of individual support packages[25]

State	Average annualised committed	Median annualised committed
NSW	$41,246	$20,653
SA	$18,418	$15,713
TAS	$54,736	$30,173
VIC	$35,986	$17,630
ACT	$46,178	$16,575
NT	$55,777	$11,377
WA	$33,657	$22,321
Total	**$34,907**	**$17,547**

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

Table 2.1.8. Value of and number of active approved packages by participant group[26]

Primary Disability	Number	Committed costs[27]	Average annualised cost
Autism and Related Disorders	4,025	$149,916,715	$26,996
Cerebral Palsy	658	$71,003,992	$64,874
Deafness/Hearing Loss	295	$6,333,597	$14,013
Developmental Delay	1,036	$27,260,797	$16,685
Down Syndrome	571	$45,434,613	$47,541
Global Developmental Delay	666	$16,928,205	$18,994
Intellectual Disability	2,338	$232,796,406	$56,923
Multiple Sclerosis	237	$12,314,477	$33,683
Schizophrenia	441	$20,836,835	$35,815
Other Intellectual/learning	687	$38,528,065	$35,415
Other Neurological	1,131	$88,302,676	$46,060
Other Physical	405	$17,130,065	$28,189
Other Psychiatric	419	$14,474,973	$26,662
Other Sensory/Speech	598	$12,766,408	$16,192
Total	*13,507*	*$754,027,823*	*$34,907*

Table 2.1.8 shows the number of active participants[28] who have approved plans, the total cost committed in these plans and the average annualised cost of the plans, split by primary condition group. The average annualised costs by primary disability group will be affected by the underlying age distributions of each group. The overall average annualised plan amount to date is $34,907[29] excluding the Stockton and Colanda large residences, or $40,825 when the Stockton and Colanda large residences are included.

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[25] Note: Average annualised cost excludes participants from the Stockton large residential centre in NSW and Colanda large residence in VIC.

[26] Note: Average annualised cost excludes participants from the Stockton large residential centre in NSW and Colanda large residence in VIC.

[27] Committed costs are not annualised and include costs committed to inactive participants.

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

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

Note: annualising plan values adds uncertainty to estimates. It is not an appropriate measure of scheme performance when considered in isolation from other metrics. It is important to consider the number of scheme participants, the distribution of packages committed to these participants, and actual payments for supports provided. All of these factors contribute to the overall cost. The phasing of participants also influences plan costs by trial site. For example, New South Wales is phasing by provider and Barwon is phasing by program. As a result, plan costs to date are not comparable across trial sites.

Table 2.1.9. Number of participants receiving supports paid for with cash and/or in-kind[30] supports by state/territory

State	Cash	In-kind	Cash & In-kind	Total
NSW	2,863	3	146	3,012
SA	1,971	23	614	2,608
TAS	450	5	306	761
VIC	1,310	180	2,019	3,509
ACT	391	16	31	438
NT	6	0	1	7
WA	231	43	49	323
Total	**7,222**	**270**	**3,166**	**10,658**

Table 2.1.9 shows that almost all participant plans that have had at least one claim are receiving cash payments (68%) or a combination of cash payments and in-kind supports (30%) against their claims. Note: Not all participants at this stage have received service providers who have invoiced for support provided.

Table 2.1.10. Ratio of cash to in-kind services by state/territory

State	Cash Services	In-kind Services
NSW	100%	0%
SA	95%	5%
TAS	95%	5%
VIC	88%	12%
ACT	99%	1%
NT	95%	5%
WA	88%	12%
Total	**93%**	**7%**

Table 2.1.10 shows the distribution of services funded through cash and in-kind arrangements by trial site. Victoria and Western Australia have the highest percentage of in-kind supports at 12%, while Tasmania (previous highest) continues to decrease from 7% to 5%. Note: A number of in-kind supports have been claimed off the system, and a reconciliation process has been undertaken. These results have not yet been allocated to participants and are not included in the above table - the above results should be interpreted cautiously.

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

Table 2.1.11. Participant numbers

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

State	Total	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	3,568	151	78	2,140	1,428	0	254	919	419	689	1,224	63
SA	3,212	137	194	2,282	930	0	1,189	2,023	0	0	0	0
TAS	924	73	17	589	335	0	0	0	836	88	0	0
VIC	4,021	70	83	2,369	1,652	0	289	1,171	551	894	1,059	57
ACT	911	28	84	581	330	0	345	132	226	65	116	27
NT	48	45	38	29	19	0	3	13	5	14	13	0
WA	926	39	44	601	324	1	87	403	194	145	94	3
Total	**13,610**	**543**	**538**	**8,591**	**5,018**	**1**	**2,167**	**4,661**	**2,231**	**1,895**	**2,506**	**150**

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

	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Autism and Related Disorders	786	1,493	275	891	211	2	375	4,033
Cerebral Palsy	186	139	65	151	67	6	51	665
Deafness/Hearing Loss	108	122	4	38	19	0	4	295
Developmental Delay	117	441	16	267	185	2	9	1,037
Down Syndrome	155	96	65	161	39	2	56	574
Global Developmental Delay	95	322	16	126	49	2	56	666
Intellectual Disability	778	38	330	915	111	9	170	2,351
Multiple Sclerosis	80	0	1	118	24	1	18	242
Schizophrenia	183	0	5	232	16	3	6	445
Other Intellectual/learning	184	161	56	181	49	2	59	692
Other Neurological	517	78	48	399	52	8	67	1,169
Other Physical	139	60	16	129	40	8	26	418
Other Psychiatric	86	1	15	306	10	0	3	421
Other Sensory/Speech	154	261	12	107	39	3	26	602
Other Not recorded	0	0	0	0	0	0	0	0
Total	*3,568*	*3,212*	*924*	*4,021*	*911*	*48*	*926*	*13,610*

Table 2.1.11 shows the number of participants accessing supports.

The corresponding distribution of participants is shown in Table 1.1.1.

Table 2.1.12. Total number of plans developed

State	Total plans developed
NSW	5,275
SA	4,254
TAS	1,497
VIC	5,985
ACT	919
NT	48
WA	933
Total	**18,911**

Table 2.1.12 shows the total number of plans completed. This includes 5,072 second plans, 221 third plans and eight fourth plans. 103 participants with approved plans have since left the scheme via participant-initiated request, death or Agency-initiated eligibility revocation.

Table 2.1.13. Number of plans with single supports

State	Single items	Ratio
NSW	605	17%
SA	1,265	39%
TAS	74	8%
VIC	401	10%
ACT	308	34%
NT	6	13%
WA	162	17%
Total	**2,821**	**21%**

Table 2.1.13 shows the number of approved plans that only contain a single type of support. Overall, 21% of approved plans only contain a single type of support, up from 20% last quarter. South Australia has 1,265 of these plans, which make up 39% of all approved plans in South Australia.

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

Of the 13,507 active participants with approved plans, 8,370 (62%) were found eligible for the scheme because they met the disability requirements (section 24 of the NDIS Act), and 5,137 (38%) participants met the early invention requirements (section 25 of the NDIS Act). Younger participants are more likely to meet the early intervention requirements which aim to improve, stabilise or lessen the impact of the person's impairment on their functional capacity. 13,430 active participants have funded supports in their approved plans, and 11,486 of these contain at least one funded support for early intervention.

Table 2.2.1. Participants with early intervention supports

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

State	Number	Proportion	ATSI	CALD	M	F	X	0-4	5-14	15-24	25-44	45-64	65+
NSW	2,932	84%	118	69	1,730	1,202	0	231	712	324	565	1,051	49
SA	3,191	100%	135	193	2,269	922	0	1,178	2,013	0	0	0	0
TAS	630	71%	39	12	399	231	0	0	0	561	69	0	0
VIC	3,174	80%	51	66	1,886	1,288	0	269	893	458	714	799	41
ACT	790	88%	25	75	511	279	0	339	103	165	64	94	25
NT	27	56%	26	21	18	9	0	0	3	3	9	12	0
WA	742	81%	29	37	493	249	0	82	352	133	103	69	3
Total	**11,486**	**86%**	**423**	**473**	**7,306**	**4,180**	**0**	**2,099**	**4,076**	**1,644**	**1,524**	**2,025**	**118**

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

Primary Disability	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Autism and Related Disorders	77%	100%	71%	76%	78%	50%	86%	86%
Cerebral Palsy	95%	99%	91%	96%	94%	50%	94%	95%
Deafness/Hearing Loss	93%	100%	50%	83%	94%	.	75%	94%
Developmental Delay	85%	99%	67%	84%	97%	0%	89%	93%
Down Syndrome	88%	100%	81%	90%	95%	0%	80%	89%
Global Developmental Delay	88%	100%	87%	82%	100%	0%	86%	93%
Intellectual Disability	86%	100%	66%	86%	86%	67%	68%	82%
Multiple Sclerosis	86%	.	0%	89%	96%	100%	78%	88%
Schizophrenia	62%	.	25%	57%	69%	33%	33%	59%
Other Intellectual/learning	89%	99%	74%	90%	79%	0%	66%	88%
Other Neurological	89%	100%	81%	91%	87%	63%	82%	89%
Other Physical	89%	100%	60%	86%	87%	100%	96%	89%
Other Psychiatric	65%	100%	57%	47%	50%	.	67%	51%
Other Sensory/Speech	85%	99%	75%	84%	87%	67%	88%	91%
Total	*2,932*	*3,191*	*630*	*3,174*	*790*	*27*	*742*	*11,486*

Table 2.2.1 shows the proportion of participants receiving early intervention supports by trial site. South Australia has the highest proportion at 100%, increasing from 98% last quarter, reflecting the lower age of participants in this trial site. On average there has been a 4% increase from last quarter across the board for all disabilities in receiving early intervention support. The highest percentage continues to be participants living with cerebral palsy, deafness or a development delay with a range of 93-95%. A number of these participants are children.

Table 2.2.2. Total cost of investment in research and innovation (including the sector development fund)[31]

	Committed
Research / Innovation	**$46,160,817**

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

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

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[31] Note that the total cost of investment and innovation funds has decreased since the last quarter. This is a result of ongoing re-estimation of costs, and is attributable to changes in cost estimates for some projects, and some projects no longer going forward.

3. Community Inclusion

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

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

Table 3.1.1. Proportion of participants accessing mainstream services

State	Participants accessing mainstream services	Proportion accessing mainstream services[32]
NSW	2,425	69%
SA	2,472	77%
TAS	671	73%
VIC	3,294	83%
ACT	572	63%
NT	39	81%
WA	401	43%
Total	**9,874**	**73%**

Table 3.1.1 shows that the majority of participants with approved plans are also accessing mainstream supports (73%).

Table 3.1.2. Support categories with mainstream services

Support categories	NSW	SA	TAS	VIC	ACT	NT	WA	Total
Self-care	1,185	443	158	2,014	175	24	111	4,110
Education	810	1,869	312	1,203	259	17	216	4,686
General Tasks and Demands	590	442	95	763	103	6	75	2,074
Community and social life	378	723	134	679	179	4	58	2,155
Community - Social and Civic	286	400	105	732	169	3	114	1,809
Mobility	203	249	53	641	47	5	26	1,224
Carer/Family Support	137	268	38	296	50	7	30	826
Employment	133	1	121	346	36	3	31	671
Domestic Life	119	28	46	370	44	10	24	641
Communication	109	376	13	145	40	1	21	705
Interpersonal Relationships	113	110	29	151	13	0	24	440
Learning and Knowledge	54	207	29	126	53	0	17	486
Total	*2,425*	*2,472*	*671*	*3,294*	*572*	*39*	*401*	*9,874*

Table 3.1.2 shows the most common mainstream supports are education and self-care with 4,686 and 4,110 utilised respectively by participants with approved plans[33].

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[32] The variability between the states/territories may be partially explained by inconsistencies in reporting. Further work with the trial sites is underway to address this issue. Further, there are some issues with missing data in some states/territories. This is also being addressed.

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

3.2. Effectiveness of LAC community capacity building activities

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

State/Territory	
NSW	- Preplanning workshops- 8 events, 124 attendees - Community conversations – 4 events, 31 attendees - Community forums – 3 events, 47 attendees - Council interagency meetings - South lakes interagency meeting - Lake Macquarie Interagency Meeting - Maitland Interagency - Participated in "Linked Up Aboriginal Aged & Disability Road Show Newcastle Hunter" providing information and networking within the local aboriginal communities - Mindaribba Land Council - Awabikal Land Council - Biriaban Land Council - Attended Community CALD Engagement working group reviewing need to ensure optimal engagement with CALD community - Information sessions provided for: - Multi-Cultural Playgroup - Callaghan college- information session to families supporting children with disability - Siblings & Young Caeres Network - Maitland Community Centre Staff
SA	- Commencement of service delivery from Murray Bridge site has resulted in increased community development and awareness activities in the Murray and Mallee region. - Meetings have been held with key Indigenous leaders and elders in the local area to make introductions and map out how to assist Aboriginal community members to access the scheme. - Community Information sessions were held regularly in NDIA offices in Murray Bridge, Elizabeth and St Marys. Sessions were also held in Regional communities – Ceduna, Port Augusta and Whyalla and for the Vietnamese Community in Western Adelaide. - Information sessions were provided at regional and metropolitan special and mainstream schools to increase awareness. Specific sessions were also delivered for culturally and linguistically diverse groups in these settings. - Pre-planning workshops were held regularly at each office and have also been delivered in regional communities and for culturally and linguistically diverse groups. Support to access community and mainstream services continues to be provided by Local Area and Plan Support Coordinators at the workshops. - Coordinators provide information, linkage and capacity building for participants who are eligible but not yet phasing in. Coordinators refer families to mainstream and community services such as child care, recreational organisations, user led community groups and health services. - Coordinators were involved in local area networks, key stakeholder and interagency forums, providing information about the NDIS while raising

State/Territory	
	awareness of opportunities for inclusion within these networks. For example at My Time meetings. • An information session was held with the Department for Communities and Social Inclusion funded community based Financial Counsellors to develop their understanding of the NDIS and funds management. • Information sessions have been provided to Local Health Networks including presentations at Grand Rounds of Paediatric teams at the three major hospitals.

TAS	• Increased community awareness activities have been undertaken by the engagement team and the LACs (outsourced in Tasmania) in the last quarter. The focus has been:
	  o Connecting and promoting the NDIS to TasTAFE, and having LACs share information from TasTAFE with participants as a mainstream and community option.
	  o Meeting with LINC (State Library Services) about the mainstream and community opportunities for participants to be engaged with. This has led to the establishment of an 'anime book club' (Japanese based pop-culture) for young people, both with and without disability to attend. LACs have also promoted the NDIS to the literacy support services, who are now connecting with participants to increase their literacy and numeracy skill as a mainstream opportunity.
	  o Ongoing discussions are occurring with the State Governments' Department of Premier and Cabinet – Sport and Recreation. The aim is to connect with community based sporting groups and associations to build awareness and promote inclusion of people with disability into mainstream opportunities, and also provide information and linkages for participants in their local area.
	  o Engaging with the employment (DES) and further education (such as RTOs, Apprenticeship/Traineeship centres) to provide information to participants and to act as a link.

VIC	• Facilitation of the Independent advisory council meetings with participants and providers • Fortnightly presentations to staff occurring to link community, mainstream and funded providers to facilitate improved awareness to staff groups of services, activities that are occurring in the region • Regular attendance at and active facilitation to expand peer based support networks. • 30 Staff volunteered at the annual Having a Say Conference the largest self-advocacy conference in Australia, roles included assisting with "Come and try activities " and manning an information booth that was very busy with queries from attendees wanting a better understanding of NDIS • Facilitating stronger understanding of supports available via specialist services such as the Office Of Professional Practice as well as training with the Office of Disability Services Commissioner to improve staff understanding of complaints process and the interface with NDIA process • Facilitated information sessions to The Department of Education, schools, alternative education settings and vocational training groups around enhanced opportunities and engagement of students with a disability. • Attended several expos/forums to provide information on the scheme. Including: • Positive Partnerships • Housing forum • Employment forum • Autism forum
ACT	• Plan Support Coordinators are assisting with the pre-planning workshops and are working with various community groups to connect with participants and potential participants to assist in completing Access Request Forms and raise awareness of the NDIS.

State/Territory	
NT	• Several very productive community consultations and meetings were conducted during the course of the extended visit by Bruce Bonyhady (Chair of the NDIS Board) to the Barkly Trial Site in March 2015, including: Julalikari Council Aboriginal Corporation, Ali Curung community members, Anyinginyi Health Aboriginal Corporation and Papulu Apparr-Kari Aboriginal Corporation. • As a key follow up action to the Chair of the NDIS Board's visit to the Ali Curung community it was agreed by local community members that they would initiate a local disability committee to identify issues of need and to identify potential future actions. (First meeting held 24 March). • The Barkly Trial Site is continuing to work closely with Barkly Regional Arts to progress the 'story plates' ceramic art project designed to facilitate local community discussion groups about what disability means to individual communities and to promote awareness about the Scheme. The Chair of the NDIS Board launched the 'story plates' project at Tennant Creek on 4 March 2015. • Culturally appropriate NDIS 'key messages' to support local community understanding and awareness about the scheme have been workshopped with local stakeholders, with the final set of messages to be presented for endorsement at the next Barkly Trial Site Local Advisory Group (LAG) meeting.
WA	• Regular meetings continue with WA state Disability Services Commission to ensure smooth transition of participants to the trial site. • Meeting with Rise Network re sector capacity enhancement for people with exceptionally complex and challenging needs/behaviour • Meeting with Association for Relatives and Friends of the Mentally Ill - ARAFMI re service provision and working relationship with ARAFMI • General information session with Department of Training and Workforce Development • Second workshop for providers held re Support Coordination • Workshops for participants re self-management have commenced • General information discussion held with the Commissioner for Children and Young People • Discussion with Kalparrin re development and implementation of plan implementation information workshops for participants – these have commenced • Discussion with local National Disability Coordination Officers(NDCO) re partnership with NDIA and identified gaps in transition opportunities for school leavers • General information presentation to Swan Districts Hospital staff • Presence at public expo in Midland area • Education Department School Principals' forum – general information session held for schools in the Perth Hills Trial Site at Midland office • School Holiday Program discussion hosted by Rise • NDIS Presentation to MS Society • Advisory Group Meeting and Advisory network meeting held in February • Independent Living Centre Expo hosted by NDIS Perth Hills Trial Site. Over 100 participants and other stakeholders attended • Presentation provided to the Ministerial Advisory Committee on the NDIS • NDIA Providers Expo held at the Midland office for more than 48 registered providers and an additional 5 advocacy and provider support organisations. More than 100 people came through the expo • Overview of the NDIS and the Perth Hills Trial Site provided to Department of Education representatives at Crown Perth. The audience included 100 network principals representing 770 schools across WA. Network principals each represent around 10 schools and share information with their networks. • East Metro and Midlands Inclusion Support Agency meeting about the interface between NDIS and ISAs • Swan Emergency Accommodation and NDIS Meeting

State/Territory	
	• NDIS presentation to the Tertiary Education Disability Access Network (TEDAN) • Insurance Principles Forum held at Bentley Technology Park as part of NDIS Board visit • NDS Sector Interest Group with NDS provider members. Discussion about Information Linkages and Capacity Building. • Provided NDIS referral and general information to allied health staff at Royal Perth Hospital • Meeting held with advocacy agencies to form partnership and closer working relationship • Child and Adolescent Health Service and NDIS regular meeting • NDIA complex equipment prescription workshop to set some interim local benchmarks whilst we move towards national benchmarks

3.3. Effectiveness of LAC community capacity building activities

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

State/Territory	
NSW	• Establishing a strong network with Soul Café who provide free food and support services for local community members in need, organising future Popup information stalls to assist with understanding and accessing the NDIS. • Developing strong relationship with the Assistive Mentor Program from the Independent Living Centre including this resource in preplanning workshops. *CICD update:* • CICD Mum's cottage update –with the funds received Ipads and associated equipment has been purchased and is beginning to be incorporated in the activity calendar. The 2 newsletters Messages from Mum's Cottage and Aspired have notification of the CICD funding and a formal thanks to the NDIS. A further follow up will occur in 3 months. • CICD toy Library update - speciality toys for children with disability to promote greater inclusion have been purchased. An open day was held on Saturday 21st of March to celebrate 40 years of community service, local community dignitaries attended and the CICD grant was officially recognised. A further follow up will occur in 3 months.
SA	• Local Area Coordinators have been recruited to and are working within Indigenous and Remote communities. These roles have been outsourced to local organisations, Tullawon Health Service, Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) Women's Council. • First Peoples Disability Network (FPDN) have been engaged to employ two LACs. They have commenced assisting Aboriginal people in regional and metropolitan areas to access the NDIS. • A workshop was held with FPDN to develop working arrangements and a plan for providing capacity building and joint FPDN/NDIA engagement activities in remote communities. Meetings have also been held with regard to FPDNs roles and activities as a DSO in SA & NT. • Registrations of Interest have been received for the Local and Youth Advisory Groups and nominees have been invited to initial workshops. • Engagement commenced with Express Yourself Self Advocacy Group for people with intellectual disability. An information session was provided to build capacity of this group and develop their understanding of the NDIS. This group will support local NDIA staff with the development of resources and engagement strategies for people living with intellectual disability. • Meetings have been held with Access2Arts, a disability-led organisation that works across all art forms to increase access and support the professional development of artists with disability and their members. Working with this group provides opportunities for information linkage and capacity building within the arts sector. • A meeting was held with the Disability Support Organisation, Families4Families, to discuss ongoing collaboration and opportunities to increase the capacity building activities they offer. • CICD Funding proposal for NPY Women's Council approved. Funding to be used to host a workshop to develop resources and approaches to build the capacity of Anangu (aboriginal people from the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands), and through them, of remote communities in the APY Lands to utilise the NDIS. • CICD proposals have been discussed with a number of organisations and twelve applications have been received. Applications are currently being reviewed.
TAS	• The Agency held a 2 day workshop for internal staff and LACs on 'Engaging with the community', 'Self-Management' and 'Whose Plan Is It Anyway?' The latter being training specifically looked at engaging with people living with mental illness. • A Community Forum was held by the Agency in Smithton, in the Circular Head region of North West Tasmania. This forum was for regional and rural

State/Territory	
	services, NDIA providers and the wider community to help build the connections across the community for people with disability and to explore the specific issues facing providers and community services in the rural and regional environment. • The Agency organised a rural and regional forum in Deloraine, located in the Meander Valley LGA around 'respite services'. This brought participants, their families and carers, registered providers and other interested stakeholders together to talk about the need for specific services for this rural community.
VIC	• Weekend refresher for 150 local GP's and provided a table with resources and information to improve understanding of the scheme • Continuation of community conversations to access the broader Barwon community and provide information and referral, in the last quarter this program was expanded to maternal health and community health centres • 45 staff from agency attended Cultural awareness training with Local Aboriginal Co Op to enhance knowledge of working with Aborignal and orress Strait Islander participants • Delivery of training program to local support coordinators to enhance understanding of NDIA process and requirements, 93 attendees • Developed regular meetings with Deakin University Inaugural Chair in Disability and Inclusion to discuss opportunities for joint activities and projects in the local community • Continued collaboration and work with local Rural Access Workers to strengthen partnership and synergies in work
ACT	• Plan Support Coordinators are undertaking some community capacity building in developing and implementing participant plans but the priority for the quarter was on developing plans to meet bilateral targets.
NT	• Anyinginyi Health Aboriginal Corporation have continued to take action to recruit further part-time allied health professionals – which has enhanced the ability of many NDIS participants to be able to access therapeutic supports in their plans. Apart from the Northern Territory Department of Health's 'Remote Allied Health Team', which is operated out of Alice Springs, Anyinginyi still present as the key provider of locally based allied health therapies across most of the Barkly into the future, and so these initial steps in building locally based allied health provider capacity continue to be very encouraging. However, it is also important to note that while this capacity is still developing across the more remote communities of the Barkly the Northern Territory Government will still continue to provide allied health services to these communities. • The Agency is now also embarking on a process of inviting organisations to submit proposals for expanded service delivery, as an approved or pending NDIS provider for one or more support categories identified. As part of this process to encourage interest, the Agency is also flagging that transition grants may be also offered to individuals or organisations that are selected to fill additional service delivery needs, and based on their ability to deliver appropriate and accessible services that meet minimum standards of alignment with the standard NDIS operating model and offer value for money.
WA	• Planning for CICD projects is ongoing. Discussions with DADAA, Inclusion WA, Mundaring Arts Centre continue to develop local co-design initiatives. • Meeting with state group - Integrated Football to discuss initiatives for developing the program more widely • Relationships established and strengthened with a range of new stakeholders including DDWA, advocacy groups who will assist in disseminating information and partnering in future initiatives

APPENDIX 1

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

For reasons detailed in Appendix 3, not all measures documented in the Intergovernmental Agreement were able to be reported on for 2014/15 Q3. These are listed below:

1. People with disability lead lives of their choice
- Proportion of plans requiring early review (%)
- Planning and goal setting completed on time (%)
- Trends in proportion of participants using different approaches to decision supports
- Carer satisfaction with agency

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

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

APPENDIX 2

Accessible tables for Agency performance overview graphs

Table 1. People lodging an access request by month

State/ Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
National	**1,132**	**1,196**	**1,091**	**896**	**655**	**540**	**597**	**706**	**1,160**	**708**	**962**	**922**	**1,095**	**1,055**	**918**	**1,036**	**1,024**	**1,187**	**780**	**1,085**	**1,046**
NSW	417	311	326	322	177	168	185	253	444	181	276	244	249	211	210	194	182	260	156	276	299
SA	171	167	185	186	161	101	148	137	194	195	319	414	467	431	367	310	312	252	222	296	258
TAS	109	120	85	89	113	69	60	53	47	49	80	56	45	22	28	21	11	16	13	19	24
VIC	435	597	495	299	204	202	204	263	475	283	288	208	173	224	127	157	132	155	102	106	123
ACT													109	53	90	210	204	328	165	196	188
NT													19	20	12	6	5	0	2	3	3
WA													33	94	83	139	178	176	120	189	150

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

State/ Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
National	**47**	**428**	**484**	**442**	**544**	**601**	**552**	**1,037**	**1,200**	**449**	**742**	**754**	**541**	**438**	**591**	**734**	**687**	**747**	**533**	**701**	**1,358**
NSW	3	128	141	145	160	164	161	314	493	154	165	227	144	121	121	149	115	112	86	140	325
SA	6	68	76	75	111	146	103	156	222	107	142	140	166	150	168	208	210	185	167	239	367
TAS	22	62	64	58	60	77	54	95	83	50	68	84	18	22	15	18	13	17	10	16	18
VIC	16	170	203	164	213	214	234	472	402	138	367	303	205	112	93	191	93	115	136	59	121
ACT													8	19	75	100	103	129	81	146	250
NT													0	10	21	4	6	1	2	1	3
WA													0	4	98	64	147	188	51	100	274

Table 2.(b) Plan reviews by month that the plan was first approved for 2013/14 trial sites.

State/Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
National	1	0	2	2	6	11	23	71	44	31	36	56	194	363	516	545	499	631	526	815	929
NSW	0	0	0	0	2	3	3	10	12	5	8	19	73	149	204	191	142	180	139	266	301
SA	0	0	0	0	0	3	9	46	26	23	18	12	17	32	45	85	95	137	116	169	209
TAS	1	0	2	1	2	2	3	5	3	1	4	9	28	53	66	40	51	75	58	75	94
VIC	0	0	0	1	2	3	8	10	3	2	6	16	76	129	201	229	210	238	213	301	316
ACT													0	0	0	0	0	0	0	2	6
NT													0	0	0	0	0	0	0	0	0
WA													0	0	0	0	1	1	0	2	3

Table 3. Types of mainstream supports accessed in participants plans

Support categories	Total	NSW	SA	TAS	VIC	ACT	NT	WA
Number of plans with mainstream supports	*9,874*	*2,425*	*2,472*	*671*	*3,294*	*572*	*39*	*401*
Education	47%	33%	76%	46%	37%	45%	44%	54%
Self-care	42%	49%	18%	24%	61%	31%	62%	28%
Community and social life	22%	16%	29%	20%	21%	31%	10%	14%
General Tasks and Demands	21%	24%	18%	14%	23%	18%	15%	19%
Other	51%	38%	48%	53%	61%	58%	64%	56%

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

State/ Territory	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
National	$0.8	$2.5	$5.5	$6.2	$7.7	$9.7	$11.1	$13.1	$17.8	$18.4	$23.3	$23.5	$27.9	$29.1	$30.3	$34.7	$35.8	$39.0	$40.4	$38.2	$44.2
NSW	$0.3	$1.1	$2.2	$2.3	$2.5	$3.0	$3.3	$4.6	$7.1	$8.1	$9.0	$9.4	$11.1	$11.7	$12.0	$12.6	$12.9	$14.1	$14.6	$14.0	$16.1
SA	$0.1	$0.2	$0.4	$0.5	$0.7	$0.9	$1.1	$1.4	$1.7	$1.6	$2.0	$2.1	$2.4	$2.5	$2.8	$3.3	$3.4	$3.8	$4.1	$4.0	$4.7
TAS	$0.1	$0.4	$0.8	$1.0	$1.2	$1.4	$1.7	$1.8	$2.3	$2.4	$2.7	$2.7	$3.7	$3.8	$3.9	$4.1	$4.0	$4.2	$4.2	$4.0	$4.3
VIC	$0.3	$0.9	$2.1	$2.4	$3.3	$4.4	$5.0	$5.3	$6.6	$6.4	$9.6	$9.2	$10.7	$10.9	$10.8	$13.2	$13.1	$13.5	$13.6	$12.2	$13.5
ACT													$0.0	$0.1	$0.5	$0.9	$1.3	$1.8	$2.2	$2.3	$2.9
NT													$0.0	$0.0	$0.1	$0.1	$0.1	$0.1	$0.1	$0.1	$0.2
WA													$0.0	$0.0	$0.2	$0.5	$0.9	$1.5	$1.7	$1.6	$2.3

Table 5. Distribution of package costs by trial site

	NSW	NSW	SA	SA	TAS	TAS	VIC	VIC	ACT	ACT	NT	NT	WA	WA
Annualised committed support band	**Actual**	**Expected**	**Actual**	**Expected**	**Actual**	**Expected**	**Actual**	**Expected**	**Actual**	**Expected**	**Actual**	**Expected**	**Actual**	**Expected**
Total	3,521	4,523	3,207	7,974	919	1,011	3,976	5,041	910	1,142	48	150	926	885
$0-$5,000	363	1,089	26	2,815	122	340	392	1,213	80	275	8	36	68	213
$5,001-$10,000	465	894	360	1,039	59	164	633	997	127	226	15	30	90	175
$10,001-$30,000	1,255	869	2,506	2,009	278	235	1,727	969	383	219	10	29	428	170
$30,001-$50,000	404	664	224	648	188	78	454	740	95	168	5	22	170	130
$50,001-$100,000	315	670	79	1,140	148	84	342	747	115	169	2	22	119	131
$100,001-	203	151	11	322	41	90	119	168	33	38	1	5	34	29
$150,001-	128	95	1	0	35	0	148	106	23	24	1	3	8	19
$200,001-	309	61	0	0	17	21	68	68	29	16	0	2	5	12
$250,001+	79	30	0	0	31	0	93	33	25	8	6	1	4	6

APPENDIX 3

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

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q2 report?
1	**Participant Outcomes**		
1.1.1.	Information about participants with approved plans	Summary of demographics for participants, defined as people eligible for funding as per the Act, who have had or currently have an approved plan for funding in place.	Yes
1.1.2.	Support needs for participants	For participants, identifies the life domains which supports are being funded to address identified need. Note: Approved funding may address more than one life domain.	Yes
n/a	Proportion of participants achieving their life goals as specified in their plan	The outcome of a review of a participant's goals. Goals refer to the overarching, personal goals of participants.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Proportion of participants achieving their plan goals (total)	The outcome of a review of a participant's plan objectives (plan goals). Plan objectives refer to the identified aims within a plan, for which funding is allocated to support the achievement.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Proportion of participants achieving their plan goals in one or more specific domains	The outcome of review of a participant's plan objectives (plan goals), with identification of the aggregated life domain the objective was related to.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Planning and goal setting completed on time (%)	Reports the proportion of plan reviews that are completed on or before the previous plan's scheduled end date.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Plans requiring early review (%)	Reports the proportion of plans that were, or are due to be, reviewed less than 12 months after the plan commenced	No- an appropriate measure is required to be developed. There is also insufficient scheme development for this measure to be meaningful.

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Active Participants (Tier 2 and Tier 3)	On plan review, number of participants who change the way funding is utilised to support their needs.	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
n/a	Availability of provider services (%)	Proportion of identified support needs that have at least one registered provider servicing the residential area of the participant.	No. Data is not currently available for this measure.
1.2.1.	Funded support purpose	Support purposes for which supports have been funded. Note: A single plan can contain funding in multiple support purposes.	Yes
n/a	Proportion of participants with support packages within expected ranges (reference +/- x %)	Delegations are determined by the instrument of Delegation. This measure reports the delegation required to approve committed plans	No. Data is not currently available for this measure
1.2.2.	Delivery of agreed supports as planned	Proportion of funds committed for supports delivered to date that have been claimed.	Yes - insufficient time for meaningful development
1.2.3.	Proportion of participants with a claimed support	Proportion of participants with funded supports in support category that have had at least one claim for payment.	Yes
1.2.4.	Length of time from access request to plan approval	Proportion of plans approved within 90 days of access request.	Yes
1.2.5.	Service provider characteristics and market profile	Market profile of registered providers	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Trends in proportion of participants using different approaches to decision supports	At plan review, proportion of participants who choose to change the way their plan is managed	No - insufficient scheme development for any plan reviews. Reporting to commence following finalisation of outcomes framework.
1.3.1.	Trends in proportion of participants using each, or a combination, of plan management options	Split of plan management options being used by active participants.	Yes
1.3.2.	Access requests made	Number of formal requests for access, with status of request.	Yes
n/a	Access requests accepted for funding	Number of eligible access requests that have established plans for funding.	No- Reported in 1.3.2
1.3.3.	Reviews of decisions	Number of decisions that have been formally requested to be reviewed. Outcome of reviews are classified as: **Affirmed** = original decision was maintained; **Set Aside** = original decision was overturned **Pending** = review is still underway	Yes
1.3.4.	Total appeals by outcome with the Administration Appeal Tribunal	Number of appeals submitted to the AAT. Outcome of reviews are classified as: **Affirmed** = participant loses appeal; **Set Aside** = participant wins appeal **Pending** = appeal is still underway **Varied** = participant wins appeal **Dismissed** = appeal is dismissed **Withdrawn** = participant withdraws appeal	Yes
1.3.5.	Appeals by Category with the Administration Appeal Tribunal	Number of appeals submitted.	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
1.3.6.	Complaints by outcome and average resolution time	Number of complaints submitted by participants, providers, staff, and/or the general community.	Yes
1.3.7.	Complaint type	Number of complaints submitted by participants, providers, staff, and/or the general community.	Yes
1.3.8.	Participant/Carer/Family satisfaction with the Agency and life experience	On a scale of -2 very poor to +2 very good, with 0 = neutral, self-reported satisfaction of participants and their carers. "Participant/Carer/Family Satisfaction" reports satisfaction of participants/Carers/Family with the Agency, and in particular, the planning process. "Experience Satisfaction" reports the overall satisfaction of a participant with their current life experience and outcomes.	Yes
2	**Financial Sustainability**		
n/a	Growth in future commitments	Reports growth in projected liabilities, as per actuarial modelling	No – This measure is currently addressed in the actuarial financial sustainability report
2.1.1.	Total committed supports	Reports costs of supports committed to be funded for Tier 3 participants.	Tier 2 activities are not captured during the trial phase of the NDIS.
2.1.2.	Total payments ($, in-kind)	Total payments for plans, split by cash and in-kind.	Yes
2.1.3.	Operating Expenses Ratio (% total costs)	Operating Expenses as a proportion of total costs.	Yes
2.1.4.	Annualised support package distributions	Distributions of annualised funded support packages.	Yes
2.1.5.	Length of time from access request to commencement of services	Proportion of participants with approved plans receiving support within 180 days of access request.	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Management of prudential risk	Reports liabilities and assets of the Agency	Work on an *Insurances Principles and Financial Sustainability Manual* is underway. This document sets out a prudential governance framework.
2.1.6.	Payments to providers and participants, split by support cluster	Payments against plans, split by support type and payee.	Yes
2.1.7.	Average and median costs of individual support packages	Reports average and median annualised committed funds in each trial site	Yes
2.1.8.	Value of and number of active approved packages by participant group	Number of plans with approved funding, the total costs committed in those plans, and the average annualised cost of the plans.	Yes
2.1.9.	Number of participants receiving supports paid for with cash and/or in-kind supports	Number of participants who have had claims against plans. This does not represent total expenditure	Yes
2.1.10.	Ratio of cash to in-kind services by participant group	Ratio of supports paid for through cash or in-kind arrangements	Yes
n/a	Average cost of supports per assessor	Average value of funds committed in plans per planner	No - insufficient scheme experience for informed adjustment to actuarial model
2.1.11.	Tier 3 participant numbers, and people supported by Tier 2	Reports number of people accessing Tier 3 supports.	Partial - system for capturing Tier 2 activities was not implemented for 2013-14
2.1.12.	Total number of plans developed	Total number of plans that have been developed and approved. This measure includes plans that have now been superseded.	Yes

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Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
2.1.13.	Number of plans with single supports	Number of plans approved that only contain a single type of support	Yes
n/a	Current and future funding resources	Current annualised costs of approved plans, and the un-annualised committed value of plans	Projections will be provided in the annual financial sustainability report.
n/a	Current expenditure compared to projections	Actual expenditure compared to actuarial projections	Projections will be provided in the annual financial sustainability report.
n/a	Projected expenditure compared to projected revenue	Comparison of projected expenditure to projected revenue	Projections will be provided in the annual financial sustainability report.
n/a	Long term cost trends (population, price and wage growth)	Monitors long term economic assumptions	Projections will be provided in the annual financial sustainability report.
n/a	Average client lifetime cost of support	Average actuarial estimate of individual participants' future cost liabilities.	No - insufficient scheme experience for informed adjustment to actuarial model
n/a	Number of Tier 2 supports with LAC funding and purpose of funding	Number of supports with Tier 2 funding. Note: This is not the same as number of participants - supports are not necessarily attached to individuals	No - system for capturing Tier 2 activities was not implemented for 2013-14
n/a	Average cost of internal reviews	Average cost of administering internal reviews)	No - system is not in place for capturing internal review costs
n/a	Average cost of appeals	Average cost of administering appeals	No - system is not in place for capturing appeal costs for 2013-14

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2014-15 Q1 report?
n/a	Proportion of participants with reduced needs after intervention supports	Reports growth in annual committed costs for participants who have had early intervention supports as part of the previous plans.	Analysis of participant's who have received second plans will be included in the financial sustainability report. Note: only a small number of participant's have received second plans. This analysis will become more meaningful as the scheme progresses.
2.2.1.	Proportion of participants with early intervention supports	Proportion of currently approved plans with non-zero supports that have supports identified as early intervention supports - included to reduce long term need for lifetime supports	Yes
2.2.2.	Total cost of Investment in research and innovation (including the sector development fund)	Costs for investment into research and innovation which includes the sector development fund.	Yes
3	**Community Inclusion**		
3.1.1	Proportion of participants accessing mainstream services	Proportion of participants with active approved funded supports who are also accessing mainstream supports	Yes
3.1.2	Support categories with mainstream services	Number of mainstream services, by support category	Yes
3.2.1	Community awareness activities undertaken within the period	Reports community awareness activities undertaken by LACs	Yes
3.3.1	Community capacity building activities undertaken by LACs within the period	Reports community capacity building activities undertaken by LACs	Yes
n/a	Community capacity building activities undertaken by funded NGOs within the period	Reports funding provided to Non-Government Organisations to undertake community capacity building activities.	No – Difficult to measure with accuracy. Further work is being conducted to ensure reporting on this is possible.