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For information about what supported independent living (SIL) does and doesn't include and how we make SIL funding decisions, please read our [Supported independent living operational guideline](#) or go to the [SIL funding and budgets](#) page.

This guidance is to be viewed alongside the guideline and the [NDIS Pricing Arrangements and Price Limits](#).

- [Supported independent living provider guidance \(PDF 178KB\)](#)
- [Supported independent living provider guidance \(DOCX 49KB\)](#)

How to support participants to explore home and living options

If a participant has a new goal to explore home and living options or a change in circumstances, they are encouraged to complete a [Home and Living supporting evidence form](#).

They can submit this form:

- within 100 days of their plan end date, for consideration during a scheduled plan review
- with a Change of situation or change of details form, or
- with a Request for a review of a decision form.

Participants don't have to complete the form but it helps document any home and living goals, their current circumstances, strengths, barriers and ongoing requirements.

The form will help them select the correct option based on their current needs.

Supported independent living funding decision process

The aim of the home and living supports decision process is to make sure we fund the right option for participant's care and support that will work for them now, and in the long-term.

We consider if the supports will assist the participant to:

- pursue their goals
- improve or sustain their functional capacity, helping participants do more things with less support
- reduce or sustain their need for person-to-person supports
- create better connections with their family, community, health services, education and employment.

The NDIA continually seeks to improve the accuracy and timelines of our SIL decision making processes. We will continue to work on practice improvements to that purpose.

[Roster of care](#) submissions help to communicate the type and level of support a participant requires.

It sits alongside other information we need to decide what supports meet the participant's needs and the amount of support that is reasonable and necessary, including:

- any assessments of the participant's support and accommodation needs
- allied health professional reports
- daily support need reports.

We only require a roster of care in two situations:

- As part of the supporting information for a participant's first plan with SIL.
- If the participant has experienced a change in circumstances, and this change in support needs can't be delivered within the participant's existing funding.

We do not require a roster of care if one of the above situations is not present.

A roster of care does not determine the amount or type of support the participant will get in their plan. Any supports must be discussed and agreed with the participant and delivered within their approved budget.

The NDIA does not approve or endorse a participant's roster of care. We do not provide any feedback about an individual's roster of care. If there are concerns about a roster of care, providers should work with the participant, and their support coordinator, to ensure the roster of care supports the participant to pursue their goals.

Pricing arrangements and price limits

Assistance in Supported Independent Living support items are in the Assistance with Daily Life support category, listed in the NDIS Pricing Arrangements and Price Limits.

This set of supports provide assistance with, or supervision of, tasks of daily life in a shared living environment, with a focus on developing the skills of each individual to live as autonomously as possible.

The support is provided to each person living in the shared arrangement in accordance with their need.

The [Supported independent living operational guideline](#) provides detail about the types of services that are included and excluded from SIL.

We do not consider vacancy costs when we make a SIL funding decision. Providers must not increase the price of supports or claim additional funds from other participant's plans to cover vacancy periods.

Service agreements should include how providers manage vacancies.

Please refer to the [NDIS Pricing Arrangements and Price Limits and Support Catalogue](#) for more information.

View the Supported independent living guideline for information on vacancies in shared living arrangements.

SIL service bookings

When we decide a participant's SIL funding we will automatically create 2 service bookings for the participant's current SIL provider.

One service booking will be created for the annual SIL plan value (all supports excluding irregular supports) under the category Core – Assistance with Daily Life. A second line item level service booking will be created for irregular supports.

Without service bookings in place, providers cannot claim for supports delivered, unless the participant's plan is plan managed.

Providers can create or adjust service bookings with participant consent at any time. Learn more about [managing service bookings](#).

Occasionally SIL budgets may be plan-managed. If this occurs, providers must work with the participant's plan manager to organise payment, as advised by the participant.

Learn how to make payments requests in the [myplace provider portal step-by-step guides](#).

Provider compliance

All providers must deliver supports within the approved funding amount, as agreed to by the participant. This means participants pay the same amount for SIL under an automatically extended plan as under their original plan.

Details about provider's compliance obligations and the NDIA's compliance monitoring, including what actions may be taken, can be found on:

- [Your legal requirements](#)
- [Provider compliance monitoring](#)

Providers concerned they may be in breach of, or at risk of breaching, their responsibilities under the [Provider Payment Assurance Program](#) should contact the NDIA on 1800 800 110 or email provider.support@ndis.gov.au.

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