

National Disability Insurance Agency

Quarterly Report to COAG Disability Reform Council
30 Sept 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 supports that are contained within a participant's plan, approved to be provided to support a participant's needs.
In-kind	"In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.
Aboriginal and/or Torres Strait Islander	Response of: <ul style="list-style-type: none">- 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, as is a report against the time specific key deliverable for September 2015. The next time specific deliverable will be reported against in June 2016.

Ongoing deliverables for period of trial – Update on progress

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	<ul style="list-style-type: none">• This is the Board's ninth quarterly report to COAG Disability Reform Council (CDRC) (NDIS Act, s 174).• The Chair of the Board and the CEO appear before CDRC meetings when required.• On 21 July 2015, Agency staff appeared before the Commonwealth Parliament's Joint Standing Committee on the NDIS in Darwin.• 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.• Bilateral agreements have been signed by Victoria and New South Wales and the Commonwealth. The Agency is continuing to progress the finalisation of its operational plans in collaboration with senior officials from these jurisdictions.

Ongoing deliverables for period of trial – Update on progress

Deliverable:	Status:
<p>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</p>	<ul style="list-style-type: none">• All Board meetings are run in accordance with the NDIS Act, the <i>Public Governance Performance and Accountability Act 2013</i> (PGPA Act) and the ANAO public sector governance better practice guides.• The Board has a Sustainability Committee, Audit and Risk Committee, and an ICT Committee.• The Board has held strategic planning days in April and September 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 PGPA 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 update their register of interests prior to each Board meeting and they are published on the NDIS website.
- The Board has approved the Agency's 2015-19 Corporate Plan in accordance with the new requirements under the PGPA Act, and submitted the plan to the CDRC as required by the NDIS Act.
- The Board made an unqualified risk management declaration for 2014-15 under the *National Disability Insurance Scheme—Risk Management Rules 2013* and approved the Agency's financial statements. The statements have been audited by the ANAO, an excerpt from their findings are below.

Opinion

In my opinion, the financial statements of the National Disability Insurance Scheme Launch Transition Agency:

(a) comply with Australian Accounting Standards and the Public Governance, Performance and Accountability (Financial Reporting) Rule 2015; and

(b) present fairly the financial position of the National Disability Insurance Scheme Launch Transition Agency as at 30 June 2015 and its financial performance and cash flows for the year then ended.

- The Board endorsed the Agency's inaugural 2014-15 PGPA Compliance Report and approved the Agency's implementation plan for the Commonwealth Regulator Performance Framework.
- The Agency's second annual report, which includes a summary of the Annual Financial Sustainability Report, will be tabled in the Commonwealth Parliament in October 2015.
- The IAC provided formal advice to the Board in September 2015 on capacity building for people with disability. The Agency is preparing its response.
- The Agency updated its Risk Management Strategy in September 2015 and will provide it to the CDRC in accordance with the *National Disability Insurance Scheme—Risk Management Rules 2013*.

Ongoing deliverables for period of trial – Update on progress

Deliverable:

Status:

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 Board meetings.
- The Scheme Actuary provides a report at each Board meeting.
- The Scheme Actuary sits on the Sustainability Committee and attends each Audit and Risk Committee meeting and ICT Committee meeting. The Sustainability Committee meets once per quarter.
- 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 Scheme Actuary also provides training to agency staff at both the National Office and trial sites.
- 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 and continuous improvement activities are being implemented across the Agency.
- Through internal operational reviews, the Agency collects and analyses 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 uses the information collected through internal assessments to inform continuous improvement achieved through the update of operational procedures.
- The Agency has established a National Complaints Management Framework. The Framework provides a uniform approach to support the identification, escalation and resolution of complaints and feedback.

Specific Deliverables – Update on Progress

Specific deliverables – Update on progress	
Deliverable:	Status:
1. Agreed project plan for the transition to the full NDIS in jurisdictions where there is a funding agreement in place.	<ul style="list-style-type: none">• The NDIA is collaborating closely with the Commonwealth and jurisdictions on the development of operational plans to support implementation of full Scheme arrangements consistent with bilateral agreements.• The operational plans will be supported by detailed work plans that breakdown key activities and project planning for transition.• These plans identify a programme of work and the roles and responsibilities of parties.• The NDIA has strengthened its programme/project management capability with a focus on monitoring and reporting risks, deliverables, timelines, resource requirements and interdependencies.

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.

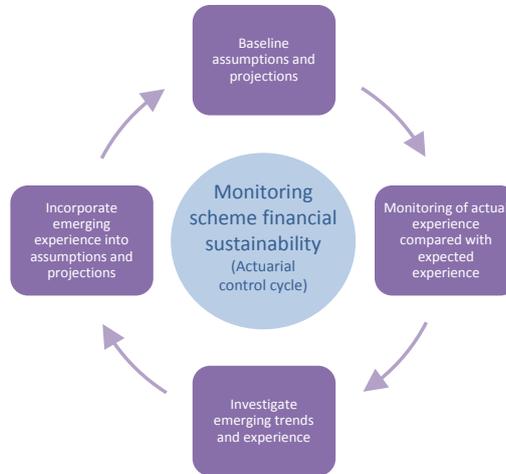
Volume: the resources available, for individual participants, to purchase supports within the scope of the Scheme.

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.

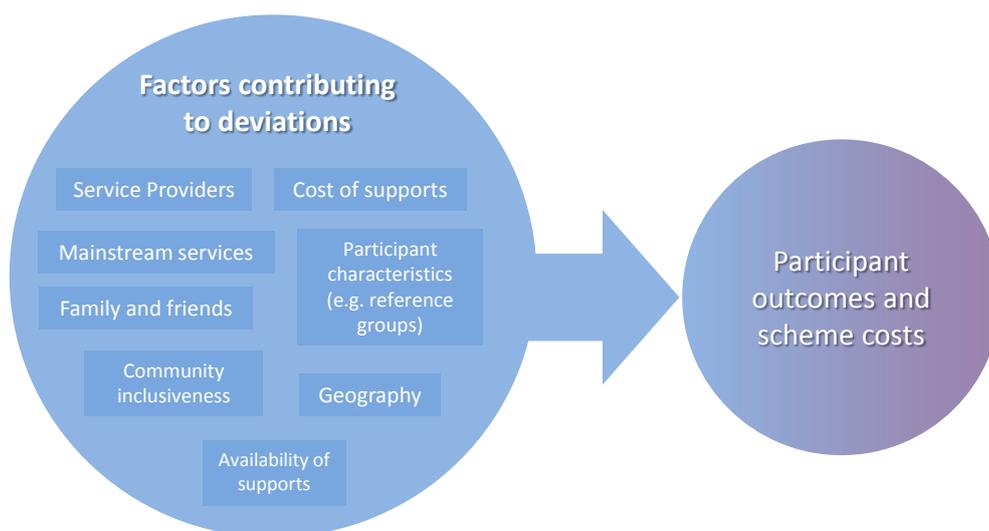
2. Monitoring framework against cost drivers

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.

3. Summary of key initiatives against cost drivers

Cost Driver	Key Initiatives Implemented by Agency
Streamlining access	<ul style="list-style-type: none"> • 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 National Quality and Innovation Team audit's decisions and monitors 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. Further, daily work in progress reports assist staff to best manage workflows. • A National Access Team has been established to improve the consistency of decision making, and to improve the staff coverage in response to peaks and troughs in work queues. • An increased operational focus on the collection of integral actuarial data has been embedded in the National Access Team.
Scope of supports funded under the Scheme	<ul style="list-style-type: none"> • 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 determine 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 some 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

Cost Driver	Key Initiatives Implemented by Agency
	<p>guidelines in relation to funding of supports.</p> <ul style="list-style-type: none"> The NDIA has redefined the supports funded to align to the NDIA Outcomes Framework. This reclassification increases the emphasis of the NDIA as funding participant outcomes, and increases the choice and control of participants in the delivery of those outcomes.
Volume of supports funded	<ul style="list-style-type: none"> 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 individual participants but allow for detailed monitoring. The piloting of reference packages commenced February 2015. This project has allowed streamlining of the planning process by collecting much information in advance of these discussions. The outputs of these projects is now informing the design of the full Scheme operating model of the NDIA, with increased emphasis on the early capture of reference package information. Operational guidelines providing information on reasonable and necessary supports assist in the planning process in allocation of resources. The IT system has been modified to escalate funded plans that vary (both positively and negatively) from the benchmarks in the reference packages to staff with higher delegations. This is to ensure that decisions deemed a higher financial risk are determined by an appropriately experienced officer. A simplification of the support catalogue has reduced the need for additional supports and funding to be included in plans. Historically, these additional supports were included for use in the event that planned supports were unexpectedly required at different times of the day.
Delivery of supports funded	<ul style="list-style-type: none"> A pilot of the NDIA outcomes framework was conducted through January, February and March 2015. The results of the pilot, along with feedback from consultation with the disability sector have been used to improve the framework. The need to develop a shorter form to assist in participant planning arose from this pilot. The outcomes framework will 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 implementation of the outcomes framework short form, and the aligning of participant funding to its domains, occurred August 2015. This will encourage the delivery of supports to strive towards achieving positive outcomes for participants, their families and carers. Further enhancements to the Short Form Outcomes Framework are being implemented to improve its operationalisation. Participant flexibility in the choice and consumption of allocated funding has been delivered through the “bundling” of similar

Cost Driver	Key Initiatives Implemented by Agency
	<p>supports. Providing increased flexibility has also reduced the need to choose a wider range of fixed supports in participant plans.</p> <ul style="list-style-type: none"> • Work to simplify the catalogue of supports to be outcomes that are focused and encourage more innovation is complete, and was implemented in August 2015. • Enhancements to the ICT system allow participants to monitor expenditure against their plan, and to invoice 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” funding arrangements.
Prices	<ul style="list-style-type: none"> • The development of the Assistive Technology 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. • Work is underway to establish an efficient pricing model for supports specific to addressing the needs of participants living with a psycho-social disability. • A number of market engagement forums have been conducted in 2015 to inform market expectations, ICT requirements for interactions with the Agency and Participants, “eMarketPlaces”, and workforce considerations.

Part 3

**Report under the Integrated NDIS Performance
Reporting Framework**

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Agency Performance

Overview

This section provides an overview of agency performance as at 30 September 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 first four trial sites commenced on 1 July 2013, the following three commenced on 1 July 2014:

- 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.

In addition to the seven trial sites, transition to full Scheme commenced in Nepean Blue Mountains in New South Wales on 1 July 2015. The LGAs in the site are Blue Mountains, Hawkesbury, Lithgow and Penrith. Information on this site is also included in this section and throughout the report.

Access requests

26,142 access requests to the Scheme have been made by individuals, with 22,595 people currently eligible¹ for the Scheme (85% of access requests), and 1,795 people (7%) found ineligible (this falls to 6% when ineligibility due to age and residency requirements are excluded). Only 355 (1.4%) of these access request decisions have been requested to be internally reviewed.

¹ Note: 22,960 participants have ever been found eligible for the Scheme. However, 365 participants are now inactive.

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

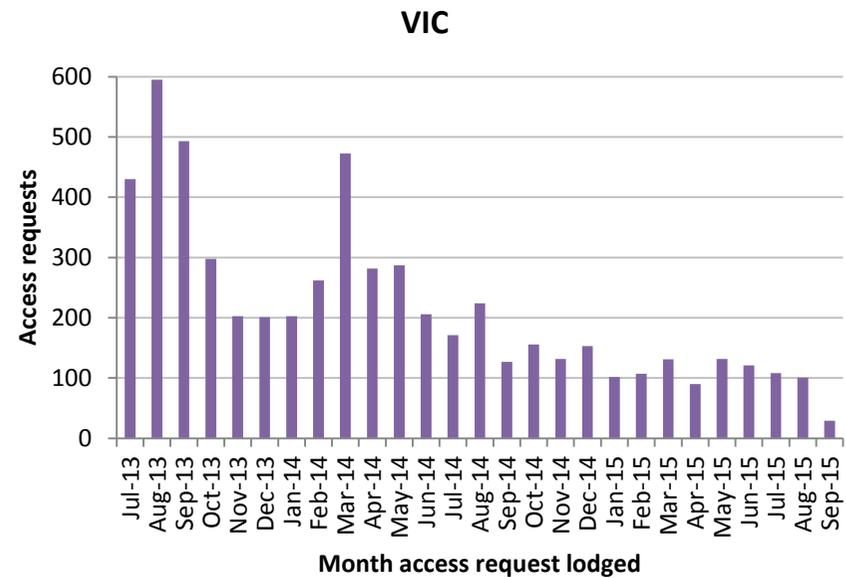
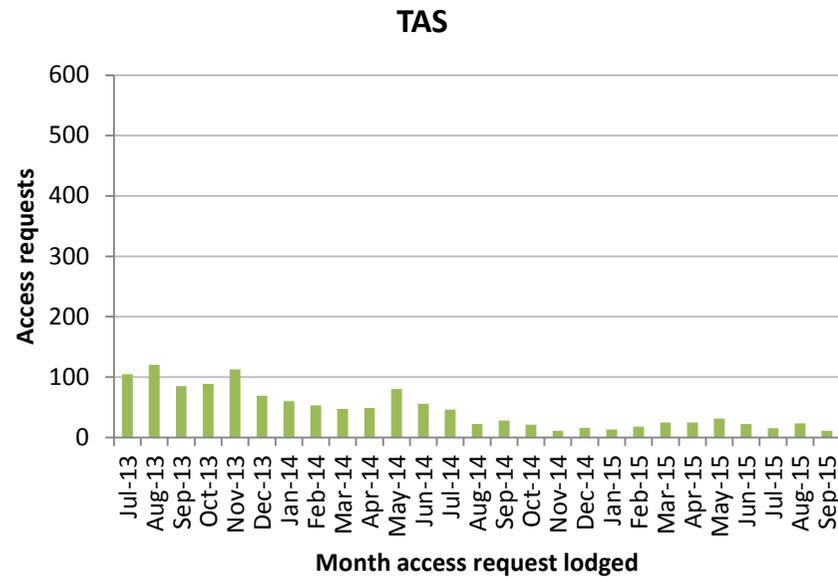
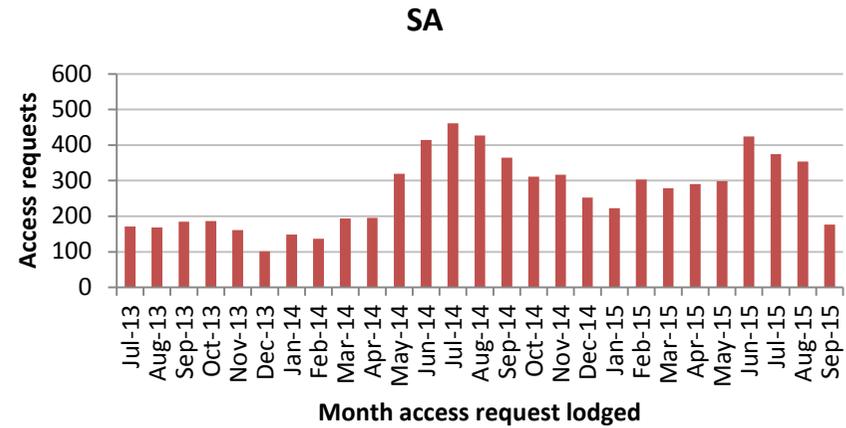
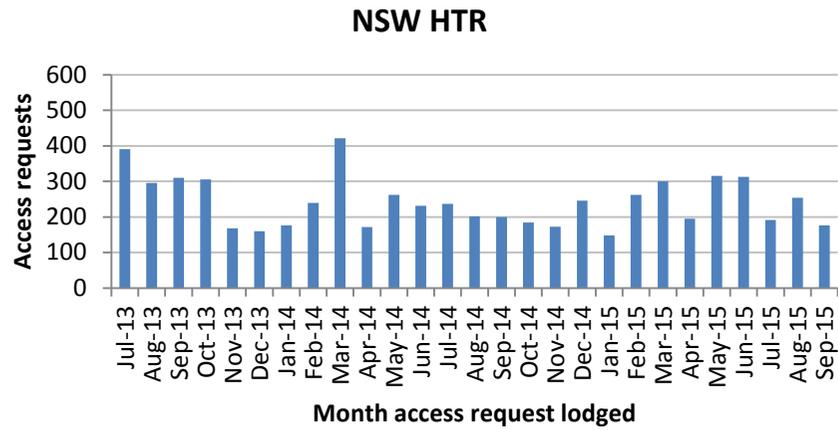
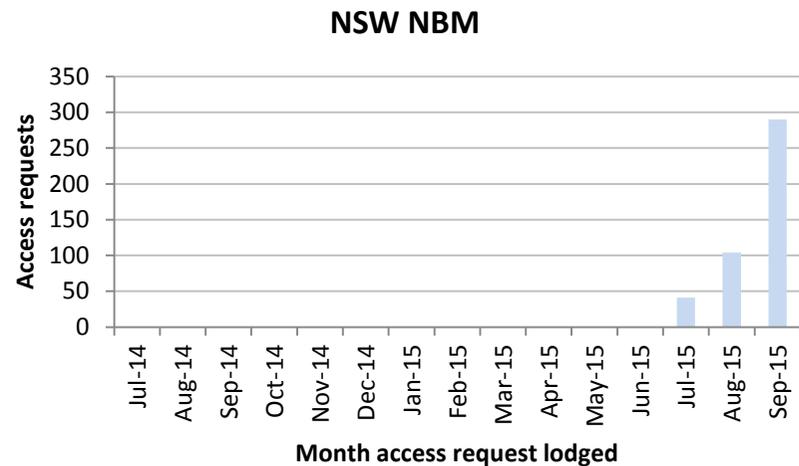
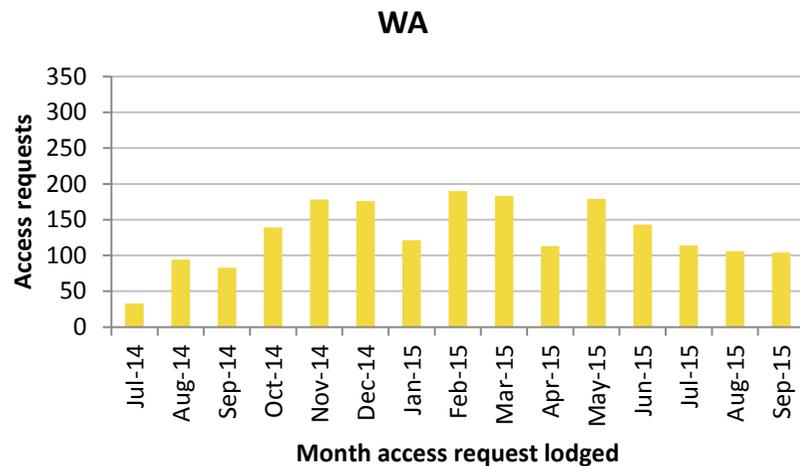
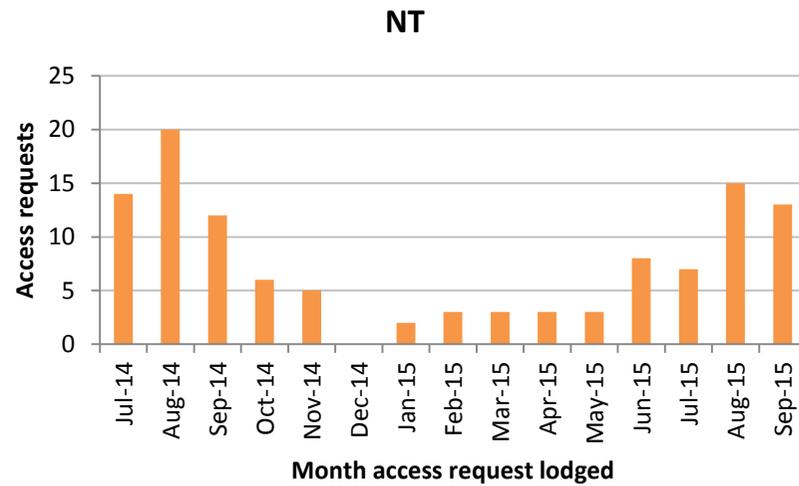
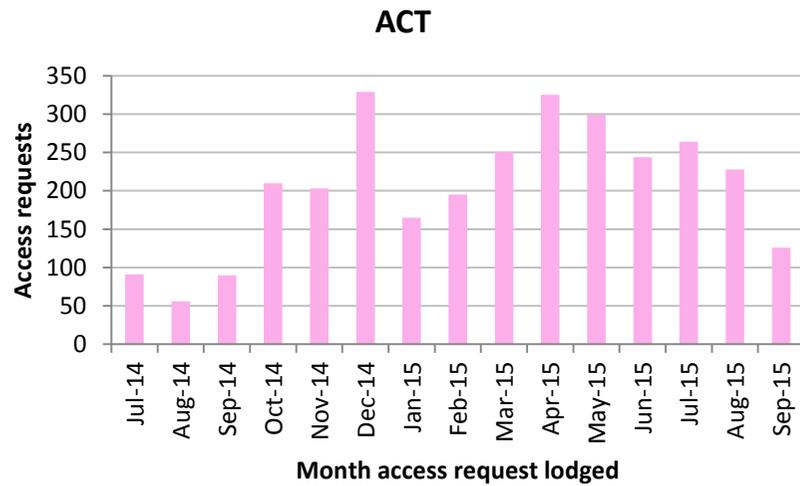


Figure 1.(b). People lodging an access request by month - ACT, NT, WA and NSW Nepean Blue Mountains (NBM) trial sites²



² Note: The vertical axis for the Northern Territory is lower than the other States/Territories to make interpreting the chart easier.
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 30 September 2015

Participants

Of the 22,960 active and inactive participants³, 19,758 have received an approved plan. Of the participants with approved plans, 5% are Aboriginal and/or Torres Strait Islander and 4% are Culturally and Linguistically Diverse (CALD). There has been an increase in the number of Aboriginal and/or Torres Strait Islander participants in the Scheme across all sites in the September 2015 quarter compared with the June 2015 quarter - some of this increase is likely to be due to improved reporting.⁴

However, there are still fewer than expected Aboriginal and/or Torres Strait Islander 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 Aboriginal and/or Torres Strait Islander participants in the trial sites that commenced on 1 July 2014 is largely in line with expected.

There are also fewer than expected participants classified as CALD. All sites have lower than expected CALD participants apart from in Tasmania where they are in line with expectations.

'Autism and related disorders' is the most common primary disability across all sites (31% of participants nationally), noting that the age-specific sites are included in this figure. In South Australia, 48% 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 (including Down syndrome and other intellectual/learning disability) is the most prevalent primary disability at 49%, due to the young adult cohort (15-24 years). In New South Wales (Hunter) 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 (30% and 22% 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 (57% of active participants). Other participants entering the NDIS have not received any disability services before, either due to unmet need or new incidence – “new” participants (43% of active participants). There are 19,542 active participants with approved plans, of whom, 11,350 (58%) were found eligible for the Scheme because they met the disability requirements (section 24 of the NDIS Act), and 8,192 (42%) participants met the early intervention requirements (section 25 of the NDIS Act). Participants in the younger age groups (particularly 0-12 year olds) often meet the early intervention requirements rather than the disability requirements. A small proportion of participants aged 13-18 have entered the Scheme because they meet the early intervention requirements. From age 19 onwards almost all participants meet the disability requirements.

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 completed for 13% of records, compared to 16% of records not completed at the end of June 2015.

Plans

29,804 plans have been approved to date, including 8,578 second plans, 1,414 third plans, 52 fourth plans, and 2 fifth 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 (78% 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 (60%). There are 34% which use a combination of agency management and self-management, and 6% are solely self-managed. 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 HTR, SA, TAS and VIC sites

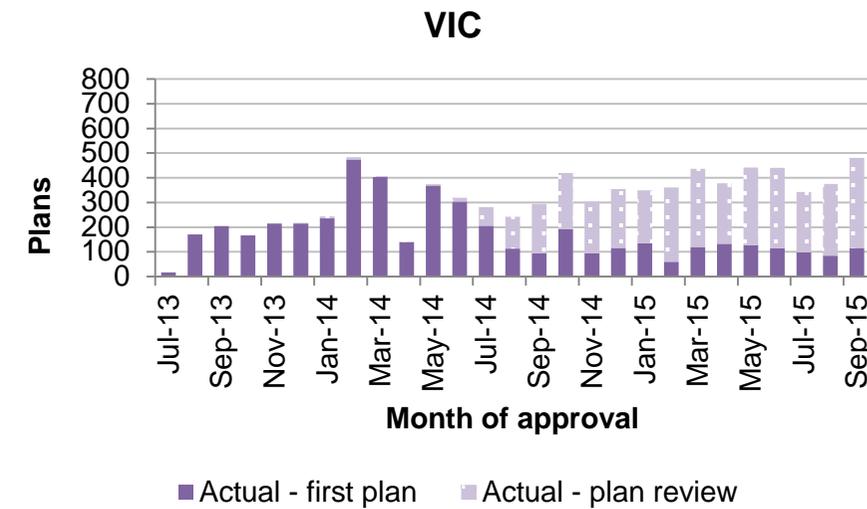
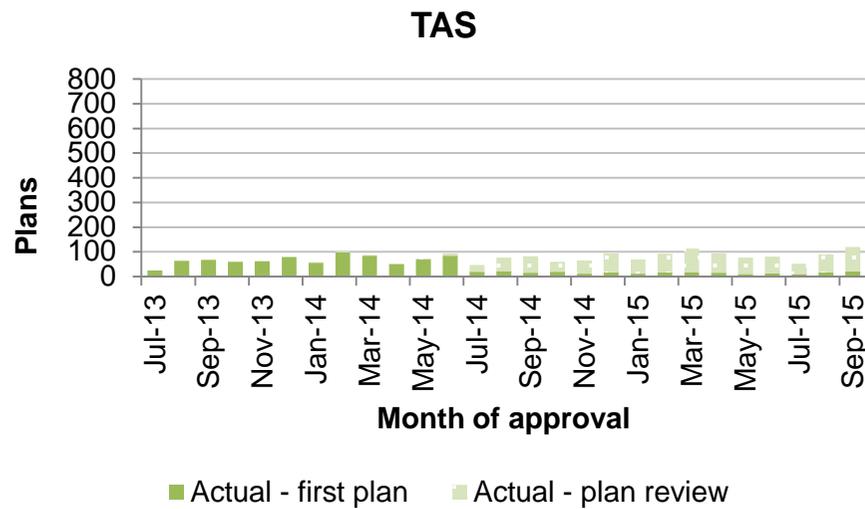
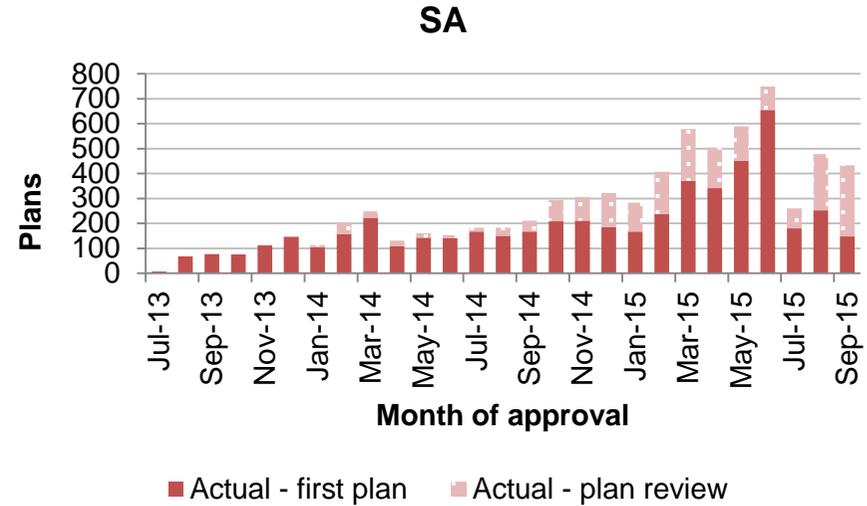
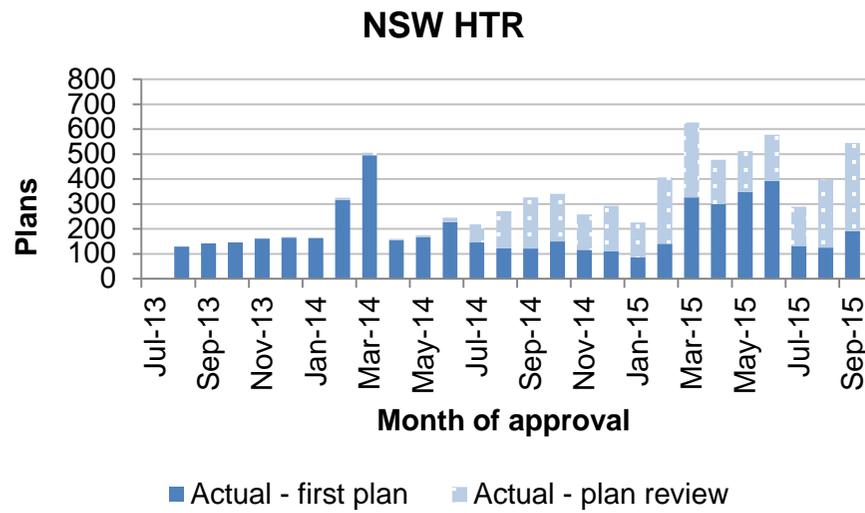
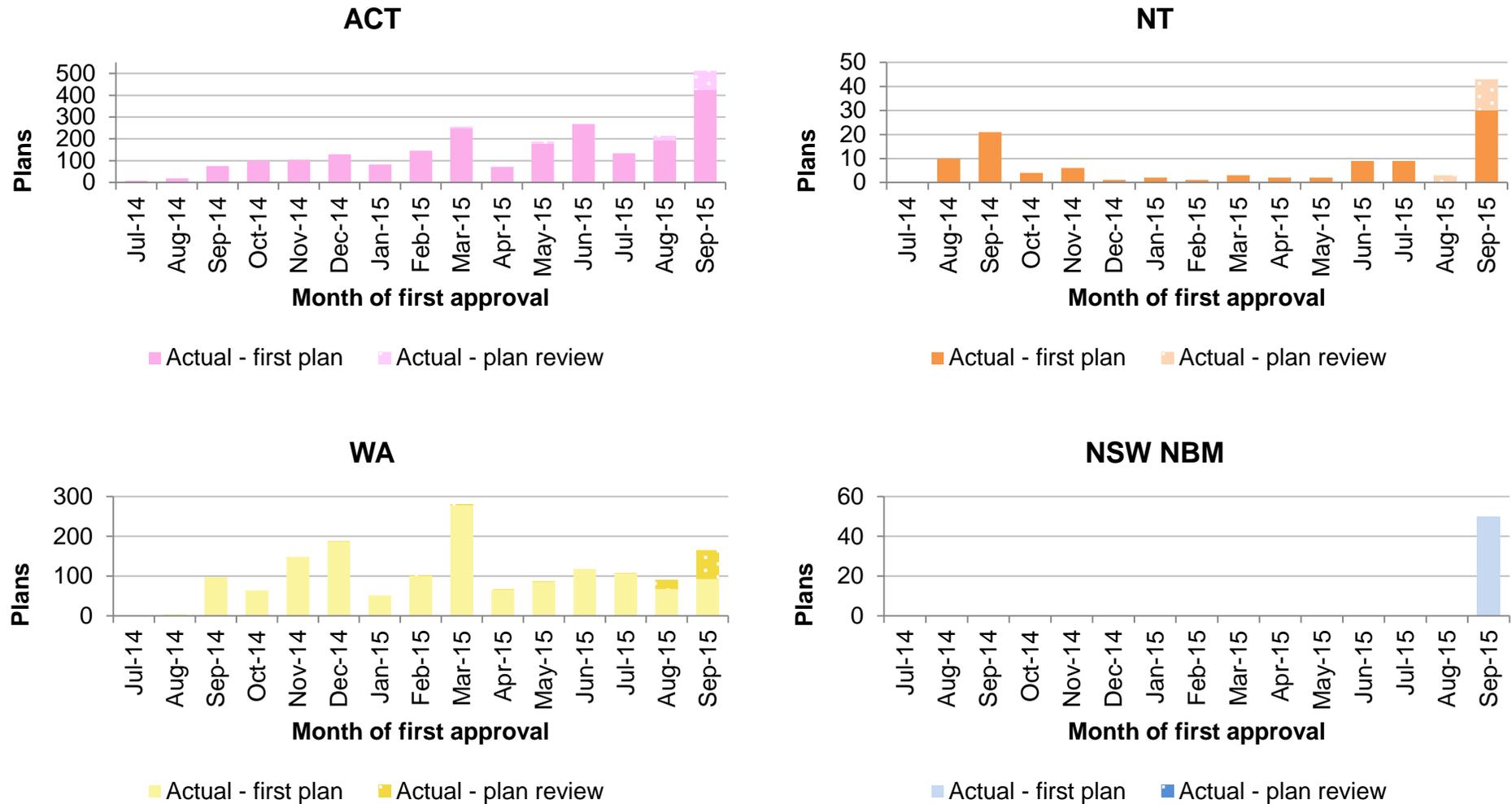


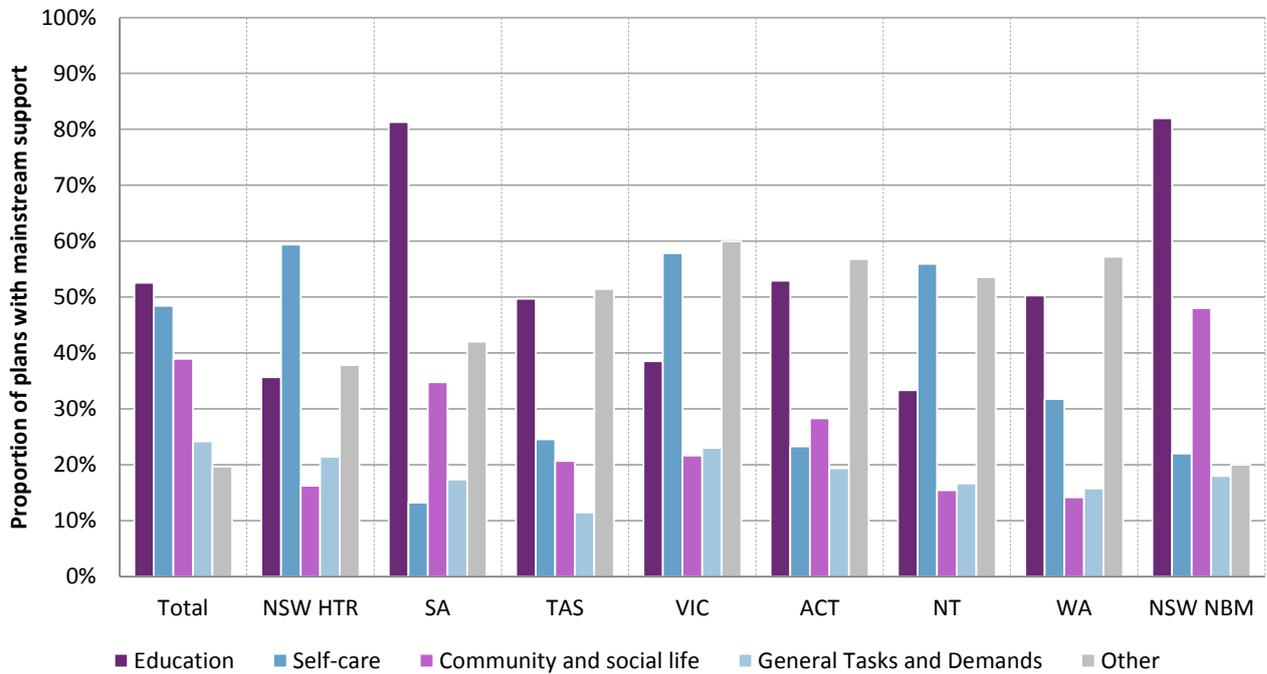
Figure 2.(b). Approved plans by month that the plan was first approved – ACT, NT, WA and NSW NBM sites⁵



⁵ Note: The vertical axis for the Northern Territory and NSW NBM are lower than the other States/Territories to make interpreting the chart easier.
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In addition to supports provided through plans, 87% of participants are also accessing mainstream services (up from 83% last quarter). A large number of these mainstream services include services related to education (53%) or self-care (48%).

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



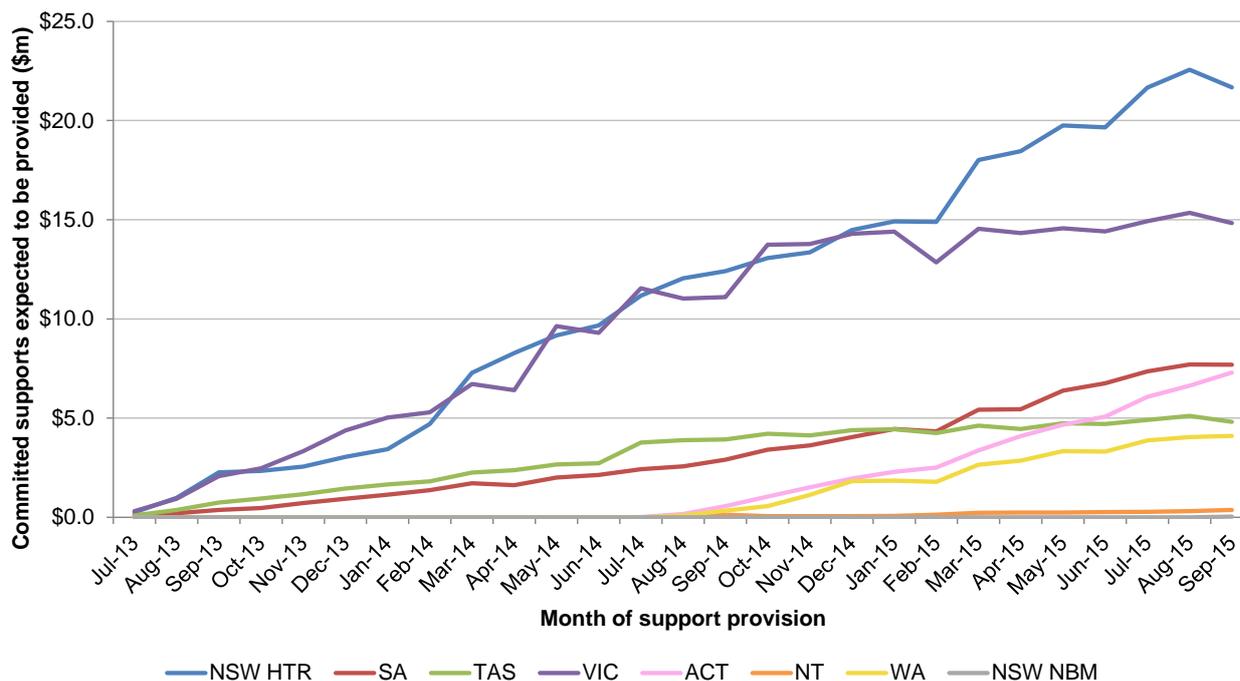
Committed funds

Overall, \$1.2 billion has been committed for participant support costs to date, with \$425.5 million and \$355.8 million committed in the New South Wales and Victorian sites respectively (noting \$102.8 million and \$38.2 million have been committed to participants in each of the Stockton and Kanangra large residences 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/Territory.

A significant proportion of support costs are allocated to a very small proportion of high-cost participants – only 10% of participants have an annualised package cost over \$100,000, but these participants account for 49% of total committed supports.⁶ On the other hand, 71% have an annualised package cost below \$30,000, and account for only 26% of annualised committed funding.

⁶ 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

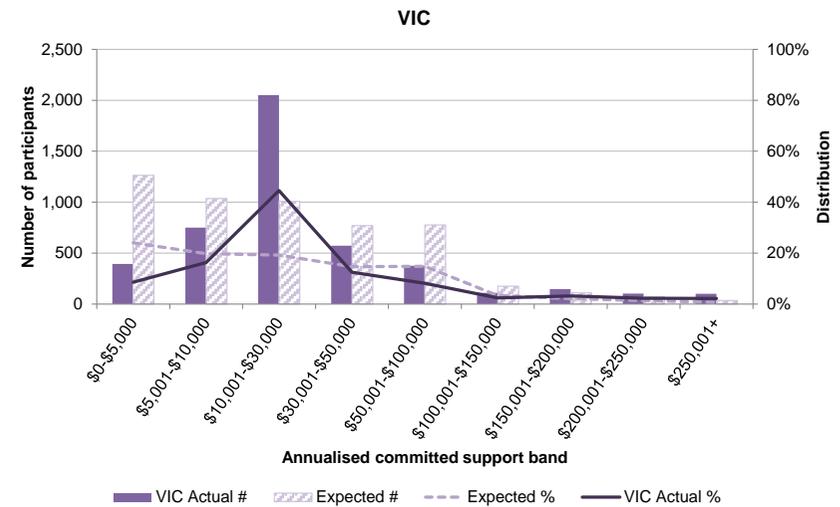
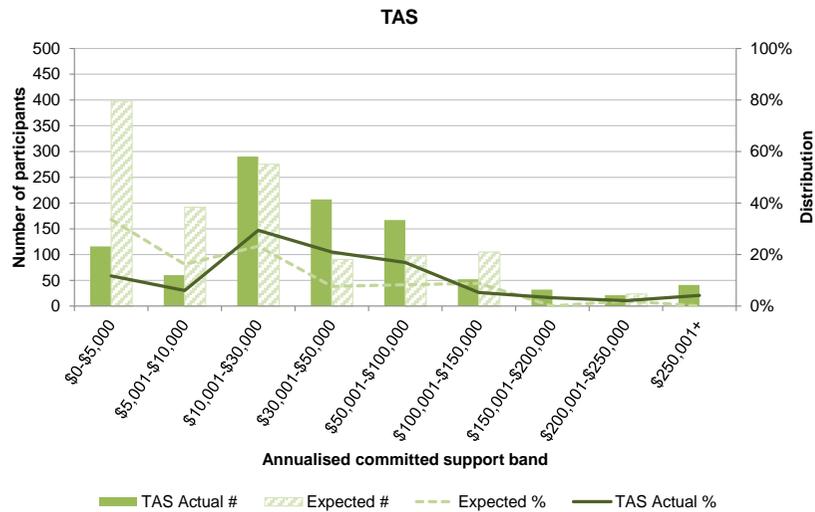
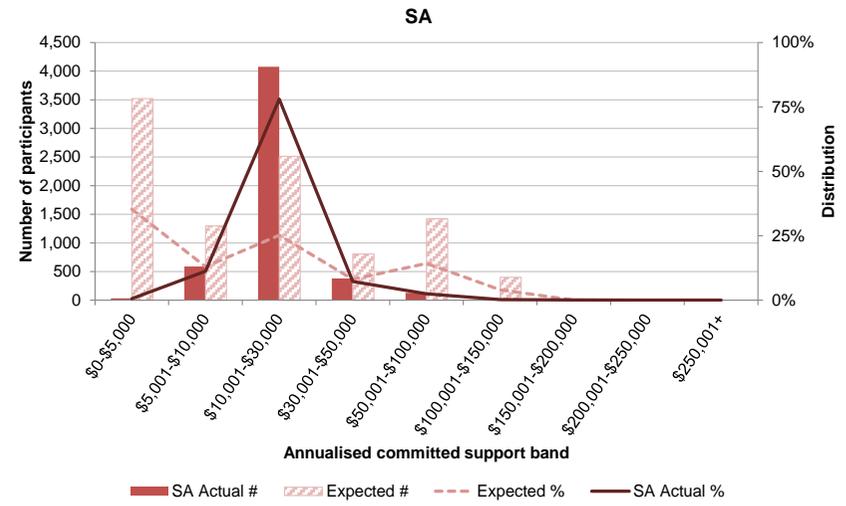
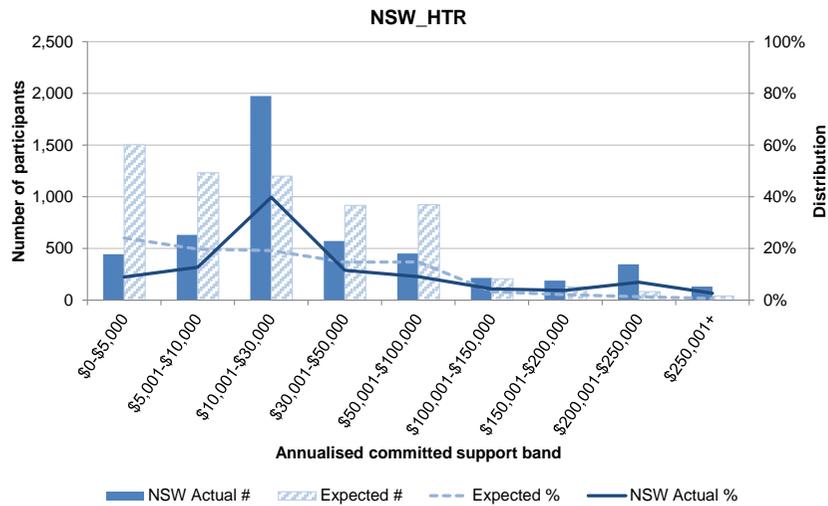


Overall, the average annualised package cost across all sites is approximately \$39,000 including the Stockton, Colanda and Kanangra large residences, and \$34,800 excluding the Stockton, Colanda and Kanangra large residences.⁷ This is higher in the Tasmanian trial site at approximately \$58,200, and is lowest in South Australia at \$18,700. 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 first 27 months of Scheme experience indicates that overall costs of the Scheme are in line with expectations. However, the average package costs are higher than expectations because fewer low cost participants have entered the Scheme. The number of higher cost participants and medium cost participants are in line with expected.

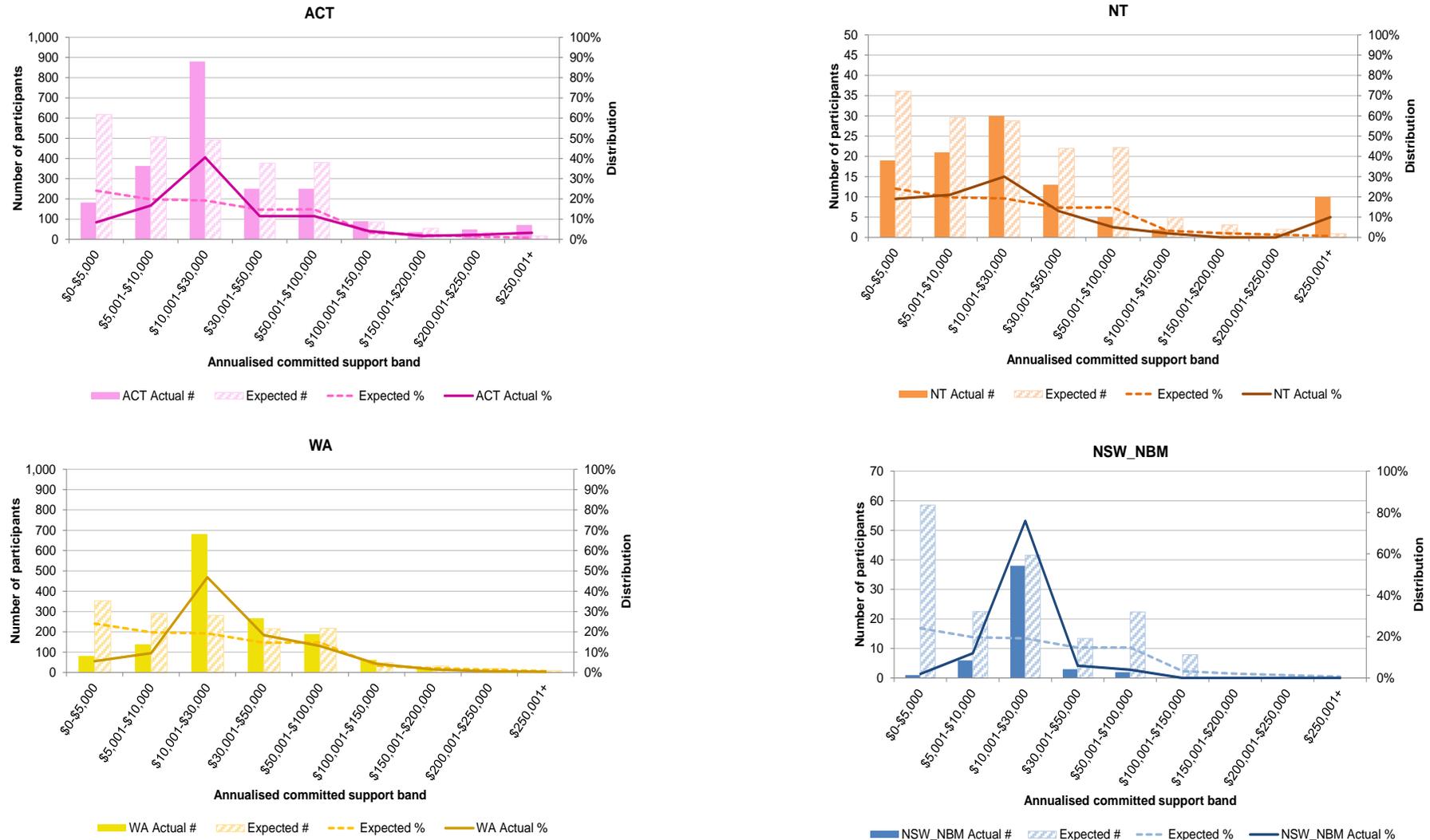
⁷ Note: the bilateral agreements for the 2015-16 year indicate that the average participant cost is \$38,588.

Figure 5.(a). Distribution of package costs by trial site – NSW HTR, SA, TAS and VIC trial sites⁸



⁸ Note: The vertical axes are not uniform across all the States/Territories to make interpreting the charts easier.
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Figure 5.(b). Distribution of package costs by trial site – ACT, NT, WA and NSW NBM trial sites⁹



⁹ Note: The vertical axis for the Northern Territory and Nepean Blue Mountains are lower than the other States/Territories to make interpreting the chart easier.
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Payments made

84% of participants with funded supports have had at least one payment against their plan (92% of those with plans active for three months or more).

Payments made for participant supports total \$90.1 million for supports provided in 2013-14 (65% of committed support¹⁰ in this year), \$358.5 million for supports provided during 2014-15 (72% of committed support in this year), and \$102.7 million for supports provided in 2015-16 (57% of committed support in this year to 30 September). Note: payments to date include in-kind support reconciled off the system and adjustments for capital items committed in one financial year but provided in a different financial year.

Note: work is underway on the 2015-16 in-kind off-system reconciliation.

The largest amounts overall have been paid for daily tasks/shared living (\$146.3 million) and community participation (\$96.0 million). \$373.6 million has been paid in cash, and \$66.5 million has been paid in-kind (or \$178.5 million if the off-system payments are included).

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

Service providers

There are 2,080 registered service providers, of whom:

- 2,000 (96%) operate in one State/Territory only.
- 728 (35%) are individual/sole traders and 545 (26%) are private sector companies.

These service providers have received a total of \$405.3 million for participant supports, which is 92% of the total payments made to date. The remaining \$34.2 million has been paid to participants who are self-managing.¹¹

Participant satisfaction

Of the 1,819 participants surveyed for their satisfaction, the majority are highly satisfied with the Agency, with an overall rating of 1.63 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 contacted by a member of the engagement team after their plan is agreed with their planner; not all participants choose to complete and submit their survey. The participant's responses remain anonymous to their planners.

¹⁰ Committed support is the dollar amount of support that has been made available to participants in their statements of support.

¹¹ Not including the off-system payments.

To date there have been 44 appeals with the Administration Appeal Tribunal - 20 due to access issues (0.07% of all access requests), and 24 due to plan issues (0.14% of all active and inactive¹² participants with an approved plan). Of these appeals, 30 have reached a resolution – 15 have been varied (participant won the appeal) and the other 15 have been dismissed, withdrawn or affirmed (the original decision confirmed).

¹² 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	Aboriginal and/or Torres Strait Islander	CALD	M	F	X
NSW HTR	5,047	6%	2%	61%	39%	0%
SA	5,235	4%	6%	72%	28%	0%
TAS	1,003	9%	2%	64%	36%	0%
VIC	4,685	2%	2%	59%	41%	0%
ACT	2,176	4%	8%	65%	35%	0%
NT	100	94%	71%	54%	46%	0%
WA	1,462	4%	5%	66%	34%	0%
NSW NBM	50	2%	4%	70%	30%	0%
Total	19,758	5%	4%	65%	35%	0%

State / Territory	0-4	5-14	15-24	25-44	45-64	65+
NSW HTR	7%	27%	13%	19%	32%	2%
SA	28%	72%	0%	0%	0%	0%
TAS	0%	0%	87%	13%	0%	0%
VIC	7%	30%	14%	21%	26%	2%
ACT	21%	38%	20%	6%	12%	3%
NT	6%	26%	7%	25%	36%	0%
WA	8%	42%	21%	16%	13%	1%
NSW NBM	36%	60%	4%	0%	0%	0%
Total	14%	41%	15%	12%	17%	1%

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

Primary Disability	NSW HTR	SA	TAS	VIC	ACT	NT	WA	NSW NBM	Total
Autism and Related Disorders	23%	48%	30%	22%	26%	2%	39%	62%	31%
Cerebral Palsy	5%	3%	7%	4%	6%	9%	7%	2%	5%
Deafness/Hearing Loss	3%	3%	0%	1%	2%	2%	1%	0%	2%
Developmental Delay	4%	14%	2%	7%	16%	4%	1%	16%	8%
Down Syndrome	4%	2%	7%	4%	4%	2%	5%	4%	4%
Global Developmental Delay	3%	9%	2%	3%	4%	3%	5%	2%	5%
Intellectual Disability	19%	2%	36%	22%	13%	18%	15%	2%	15%
Multiple Sclerosis	2%	0%	0%	3%	2%	1%	2%	0%	2%
Psychosocial Disability	9%	0%	3%	14%	3%	3%	2%	0%	6%
Other Intellectual/learning	5%	4%	6%	5%	4%	5%	6%	2%	5%
Other Neurological	13%	2%	5%	10%	6%	19%	9%	4%	8%
Other Physical	4%	2%	2%	4%	5%	26%	5%	0%	4%
Other Sensory/Speech	5%	10%	1%	3%	6%	6%	3%	6%	6%
Total	5,047	5,235	1,003	4,685	2,176	100	1,462	50	19,758

Table 1.1.1 shows the demographic information of participants with an approved plan.

Overall, 5% of participants with approved plans to date identify as Aboriginal and/or Torres Strait Islander. Aboriginal and/or Torres Strait Islander status is not well completed in the system with 13% of records not stated (this has improved from 16% of records being not stated at the end of June 2015). With 13% of records missing, comparison of Aboriginal and/or Torres Strait Islander rates with expected rates is difficult. There has been an increase in the number of Aboriginal and/or Torres Strait Islander participants in the Scheme across all sites in the September 2015 quarter compared with the June 2015 quarter – some of this increase is likely to be due to improved reporting. However, there are still fewer than expected Aboriginal and/or Torres Strait Islander 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 Aboriginal and/or Torres Strait Islander participants in the trial sites that commenced on 1 July 2014 is largely in line with expected.

Overall 4% of participants with approved plans are classified as Culturally and Linguistically Diverse (CALD), which is below expected levels. All sites have lower than expected proportion of CALD participants apart from in Tasmania where it is in line with expectations.

The proportion of males and females is in line with expected for the New South Wales (HTR), South Australian, Tasmanian and Victorian trial sites. The sites that commenced in 2014-15 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 31%. The second highest proportion is represented by participants with intellectual disability (including Down syndrome and other intellectual/learning disability) at 24%. The proportions of disability vary between the States/Territories due to the difference in the site phasing. For example, in South Australia, there is a high proportion of participants with developmental and global developmental delay (23% 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 year 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/Territory¹³

State	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Approved Plans
NSW HTR	1,100	1,180	2,649	3,163	1,496	3,434	8	5,047
SA	39	2,291	2,867	4,137	169	4,036	0	5,235
TAS	479	359	313	607	333	637	5	1,003
VIC	1,129	1,105	2,519	3,039	1,431	3,422	1	4,685
ACT	345	746	845	1,126	468	1,100	0	2,176
NT	9	13	26	49	14	32	0	100
WA	357	339	546	893	183	977	0	1,462
NSW NBM	NA	NA	NA	NA	NA	NA	NA	50
Total	3,458	6,033	9,765	13,014	4,094	13,638	14	19,758

¹³ Note: in early September 2015 the information collected on outcomes domains was changed to reflect the participant outcomes framework. Hence, the information in this table will change over time to reflect this adjustment. Further, at this stage, no data is available for the Nepean Blue Mountain Site.

Table 1.1.2(b). Support needs for participants with approved plans by life domain, split by primary disability¹⁴

Primary Disability	Economic Participation	Education	Health and Wellbeing	Independence	Living Arrangements	Social Participation	Not Identified	Approved Plans
Autism and Related Disorders	661	2,558	3,167	4,428	617	4,719	3	6,184
Cerebral Palsy	158	221	481	613	259	589	1	901
Deafness/Hearing Loss	77	149	131	247	40	260	0	405
Developmental Delay	44	572	726	1,160	123	1,092	0	1,674
Down Syndrome	184	183	359	509	197	575	1	736
Global Developmental Delay	15	360	468	742	61	673	0	948
Intellectual Disability	1,127	691	1,387	1,722	1,168	2,110	7	2,974
Multiple Sclerosis	76	28	192	210	124	181	0	306
Psychosocial Disability	433	204	794	603	498	829	1	1,220
Other Intellectual/learning	193	307	469	619	194	628	1	985
Other Neurological	283	240	832	1,036	551	956	0	1,589
Other Physical	101	124	363	438	169	362	0	726
Other Sensory/Speech	106	396	396	687	93	664	0	1,109
Total	3,458	6,033	9,765	13,014	4,094	13,638	14	19,758

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 sites, the most commonly funded life domains are Social participation and Independence, followed by Health & Wellbeing.

¹⁴ Note: in early September 2015 the information collected on outcomes domains was changed to reflect the participant outcomes framework. Hence, the information in this table will change over time to reflect this adjustment. Further, at this stage, no data is available for the Nepean Blue Mountain Site.
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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 & 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

Core	A support that enables a participant to complete activities of daily living and enables them to work towards their goals and meet their objectives.
Capacity building	A support that enables a participant to build their independence and maximise skills so as to progress towards their goals.
Capital	An investment, such as assistive technologies, equipment and home or vehicle modifications.
Existing supports	Supports entered into a participants plan prior to June 2014 when support item purpose was introduced. Reporting against this measure does not occur for plans developed after June 2014.

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

State	Core	Capacity Building	Capital	Existing	Total Plans
NSW HTR	3,274	4,209	1,018	2,139	5,047
SA	1,840	5,097	1,236	1,313	5,235
TAS	583	801	87	737	1,003
VIC	2,656	4,406	1,087	2,898	4,685
ACT	1,056	2,046	315	57	2,176
NT	58	94	34	3	100
WA	594	1,415	158	81	1,462
NSW NBM	19	50	3	0	50
Total	10,080	18,118	3,938	7,228	19,758

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

Primary Disability	Core	Capacity Building	Capital	Existing	Total Plans
Autism and Related Disorders	2,441	5,907	700	1,887	6,184
Cerebral Palsy	652	829	454	404	901
Deafness/Hearing Loss	207	350	152	166	405
Developmental Delay	490	1,600	200	444	1,674
Down Syndrome	488	662	140	397	736
Global Developmental Delay	328	911	162	279	948
Intellectual Disability	1,906	2,535	368	1,486	2,974
Multiple Sclerosis	272	266	174	145	306
Psychosocial Disability	667	1122	137	458	1221
Other Intellectual/learning	540	879	225	365	985
Other Neurological	1,210	1,374	718	739	1,589
Other Physical	488	645	297	205	726
Other Sensory/Speech	390	1,037	211	253	1,109
Other Not recorded	1	1	0	0	1
Total	10,080	18,118	3,938	7,228	19,758

Table 1.2.1 shows the distribution of funded support by category. Committed funding may address more than one support category. Across each of the sites, the most commonly funded support category is capacity building.

Table 1.2.2. Delivery of agreed supports¹⁵ as planned

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

State	Paid (Supports provided in 2013-14)	Committed Supports expected to be provided (2013-14)	Proportion paid (2013-14)	Paid (Supports provided in 2014-15)	Committed Supports expected to be provided (2014-15)	Proportion paid (2014-15)	Paid Supports provided in Jul 2015 - Sep 2015	Committed Supports expected to be provided Jul 2015 - Sep 2015	Proportion paid Jul 2015 - Sep 2015
NSW HTR	\$27,575,087	\$53,992,367	51%	\$87,310,152	\$182,222,234	48%	\$26,894,184	\$65,906,159	41%
SA	\$5,421,240	\$12,754,706	43%	\$28,408,074	\$51,737,749	55%	\$9,772,492	\$22,755,339	43%
TAS	\$9,736,058	\$18,246,168	53%	\$34,262,758	\$51,502,855	67%	\$6,977,507	\$14,825,497	47%
VIC	\$31,019,882	\$55,896,459	55%	\$114,136,317	\$160,601,536	71%	\$24,317,430	\$45,125,309	54%
ACT	\$0	\$0	n/a	\$12,700,521	\$27,265,807	47%	\$7,626,261	\$20,010,634	38%
NT	\$0	\$0	n/a	\$773,532	\$1,498,269	52%	\$450,361	\$961,225	47%
WA	\$0	\$0	n/a	\$8,099,782	\$19,715,279	41%	\$4,631,576	\$12,014,404	39%
NSW NBM	\$0	\$0	n/a	n/a			\$2,734	\$36,403	8%
Total	\$73,752,268	\$140,889,701	52%	\$285,691,137	\$494,543,728	58%	\$80,672,545	\$181,634,970	44%
Total (incl. in-kind off system reconciliation and capital adjustments)	\$90,920,458	\$140,889,701	65%	\$358,509,498	\$497,243,728¹⁶	72%	\$102,682,156	\$181,634,970	57%

¹⁵ Committed support is the dollar amount of support that has been made available to participants in their statements of support.

¹⁶ For Victoria, this includes \$2.7 million of support for attendant care in schools used in 2014-15 which has not been put into committed supports.

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

Primary Disability	Paid (Supports provided in 2013-14)	Committed Supports expected to be provided (2013-14)	Proportion paid (2013-14)	Paid (Supports provided in 2014-15)	Committed Supports expected to be provided (2014-15)	Proportion paid (2014-15)	Paid Supports provided in Jul 2015 - Sep 2015	Committed Supports expected to be provided Jul 2015 - Sep 2015	Proportion paid Jul 2015 - Sep 2015
Autism And Related Disorders	\$13,207,130	\$25,619,593	52%	\$56,940,250	\$97,887,401	58%	\$17,970,423	\$40,530,715	44%
Cerebral Palsy	\$8,988,576	\$17,307,765	52%	\$26,863,256	\$44,035,624	61%	\$6,969,014	\$13,881,133	50%
Deafness/Hearing Loss	\$671,192	\$1,481,715	45%	\$2,104,182	\$4,090,205	51%	\$396,098	\$1,313,173	30%
Developmental Delay	\$2,527,308	\$4,703,515	54%	\$10,219,254	\$17,316,380	59%	\$3,354,327	\$6,966,047	48%
Down Syndrome	\$4,960,064	\$10,379,144	48%	\$15,876,203	\$27,928,205	57%	\$4,306,415	\$10,447,428	41%
Global Developmental Delay	\$1,158,616	\$2,655,396	44%	\$6,107,021	\$11,172,951	55%	\$1,992,241	\$4,590,057	43%
Intellectual Disability	\$20,176,986	\$34,829,005	58%	\$89,004,712	\$154,976,476	57%	\$22,782,666	\$53,928,178	42%
Multiple Sclerosis	\$1,873,326	\$3,511,022	53%	\$4,895,928	\$7,535,492	65%	\$1,344,035	\$2,433,460	55%
Psychosocial Disability	\$3,024,894	\$5,115,928	59%	\$14,563,111	\$24,362,819	60%	\$4,502,590	\$9,799,927	46%
Other Intellectual/learning	\$3,586,385	\$7,071,252	51%	\$13,669,250	\$25,529,162	54%	\$4,311,778	\$10,027,013	43%
Other Neurological	\$11,004,716	\$22,063,353	50%	\$34,141,409	\$58,383,397	58%	\$8,844,296	\$19,076,449	46%
Other Physical	\$1,692,952	\$3,939,055	43%	\$6,629,171	\$12,869,858	52%	\$2,044,100	\$4,584,635	45%
Other Psychiatric	\$836,537	\$1,674,065	50%	\$5,458,166	\$10,193,920	54%	\$1,528,335	\$3,994,840	38%
Other Sensory/Speech	\$880,122	\$2,212,959	40%	\$4,677,389	\$8,455,759	55%	\$1,853,953	\$4,054,148	46%
Other Not recorded	\$0	\$0	n/a	\$0	\$0	n/a	\$611	\$2,606	23%
Total	\$73,752,268	\$140,889,701	52%	\$285,691,137	\$494,543,728	58%	\$80,672,545	\$181,634,969	44%
Total (incl. in-kind off system reconciliation and capital adjustments)	\$90,920,458	\$140,889,701	65%	\$358,509,498	\$497,243,728¹⁷	72%	\$102,682,156	\$181,634,970	57%

¹⁷ For Victoria, this includes \$2.7 million of support for attendant care in schools used in 2014-15 which has not been put into committed supports.

Table 1.2.2 shows the total dollar amount paid to date compared with the estimated funds committed for supports delivered to date. Of the \$181.7m in supports committed in participant plans to be provided since the start of the 2015-16 year, to date 57% has been delivered and paid for by the Scheme. This measure remains too immature to interpret meaningfully due to the complexity of participants and providers transitioning to the Scheme from existing funding arrangements. Also, the 2015-16 in-kind offline reconciliation is continuing to be undertaken which means the 57% will increase. Lastly, there is also a lag between when a support is provided and when payments are made.

Table 1.2.3. Proportion of participants with payments, by plan length and State/Territory

State	All Plans	Plans 3mth+	Plans <3mth
NSW HTR	89%	93%	42%
SA	87%	94%	29%
TAS	89%	92%	28%
VIC	89%	94%	19%
ACT	64%	84%	25%
NT	37%	57%	5%
WA	75%	84%	33%
NSW NBM	4%	0%	4%
Total	84%	92%	28%

Table 1.2.3 shows the proportion of participants by site with funded supports that have had at least one payment against their plan, noting that payments are made within two working days of an invoice being received. For plans that have been in place for at least 3 months, 92% have had at least one payment against their plan compared with 28% for plans in place for less than three months. This result is in line with previous quarters, with the exception of quarter four of 2014-15 which saw a sharp increase in payments most likely due to it being the final quarter of the financial year. Overall the result highlights the lag between when supports are provided and paid.

Note: in-kind supports provided off-line are excluded from this analysis. Hence, Table 1.2.3 underestimates the proportion of plans with payments.

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

State	1 Apr 15 – 30 Jun 15
NSW HTR	81%
SA	69%
TAS	13%
VIC	31%
ACT	30%
NT	86%
WA	67%
NSW NBM	NA ¹⁸
Total	57%

Table 1.2.4 presents the proportion of plans approved within 90 days of an access request being submitted during the 4th quarter of 2014-15. This is a more appropriate measure of the time taken between access requests and plan approval than calculating average days. This is due to average days requiring censored data in the calculation. 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. It is also important to note that the ratio between new participants and those entering the Scheme via a state funded program can influence the results, as the information required to make a determination is not always as readily available.

¹⁸ Due to the 3 month lag in recording this measure, no data has been collected from the NBM site as yet.

Plan reviews in the trial sites that commenced in 2014-15 have diverted resources and this explains the decrease in the percentage of plans approved within the first 90 days of access request in these States/Territories (ACT 51% to 30%, NT 100% to 86% and WA 87% to 67%).

Tasmania has a relatively well-known participant base and a clear phasing schedule meaning that access requests are often submitted well in advance of the participant phasing into the Scheme, so the 13% should be treated with caution.

Noting these considerations, the Agency remained consistent in this measure from the last quarter - total plans approved within 90 days of access requests being submitted only fell by one percent from 58% to 57% in the last quarter.

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

Table 1.2.5. Service provider characteristics and market profile

Footprint	Allied Health	Disability Support	Disability Equipment	Plan Management	Total
National	66	73	61	34	80
State	1,486	1,343	1,412	213	2,000
Provider Type					
Australian Private Company	373	308	391	41	545
Australian Public Company	121	126	99	59	151
Family or Other trust	124	101	132	17	167
Incorporated Entity	267	305	183	99	324
Individual/Sole Trader	549	462	563	11	728
Other Private	23	26	19	10	32
Other Public	30	31	26	8	36
Partnership	65	57	60	2	97
Total	1,552	1,416	1,473	247	2,080

Type	Providers Registered
New NDIS	1748
Previously DSS	332

Table 1.2.5 shows the market profile and characteristics of registered service providers. 96% of registered providers operate in one State/Territory only. Individual/sole traders are the most common provider type (35%), followed by private companies (26%). The majority of registered providers are new to the NDIS (84%) – that is, they were not previously registered with DSS.

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 plans. The introduction of bundled supports from 1 July 2014 has also increased this flexibility. Further, from 1 August 2015 the catalogue of supports has been simplified further and brought into line with the participant outcomes framework. This will allow increased flexibility and innovation.

This section presents data on participants' self-management and satisfaction, and information on appeals and complaints.

Table 1.3.1. Trends in the proportion of participants using each, or a combination, of plan management options¹⁹

State	Agency Managed	Combination	Self-Managed
NSW HTR	50%	49%	1%
SA	66%	21%	13%
TAS	49%	46%	4%
VIC	72%	28%	1%
ACT	46%	40%	13%
NT	95%	4%	1%
WA	57%	34%	8%
NSW NBM	68%	8%	24%
Total	60%	34%	6%

Table 1.3.1 shows the distribution of plan management options being used by active²⁰ participants. 6% of plans are solely self-managed, and 34% of plans use a combination of agency management and self-management, up from 33% in the last quarter.

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-kind²¹ support, they cannot solely manage their plan.

¹⁹ These numbers are rounded to the nearest whole percentage, and the rounded numbers may not add to 100% across plan management options.

²⁰ 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.

²¹ "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 HTR	127	5,436	130	686	38	186	6,603
SA	20	6,307	322	367	5	65	7,086
TAS	27	1,091	23	49	5	40	1,235
VIC	100	4,872	77	359	10	211	5,629
ACT	14	2,685	181	184	5	18	3,087
NT	0	103	3	4	0	3	113
WA	11	1,703	83	145	1	8	1,951
NSW NBM	0	398	38	1	0	1	438
Total	299	22,595	857	1,795	64	532	26,142

Table 1.3.2(b) Proportions of access requests made

State	Closed	Eligible	In progress	Ineligible	Revoked	Withdrawn	Total
NSW HTR	2%	82%	2%	10%	1%	3%	6,603
SA	0%	89%	5%	5%	0%	1%	7,086
TAS	2%	88%	2%	4%	0%	3%	1,235
VIC	2%	87%	1%	6%	0%	4%	5,629
ACT	0%	87%	6%	6%	0%	1%	3,087
NT	0%	91%	3%	4%	0%	3%	113
WA	1%	87%	4%	7%	0%	0%	1,951
NSW NBM	0%	91%	9%	0%	0%	0%	438
Total	1%	86%	3%	7%	0%	2%	26,142

Table 1.3.2 shows the number and distribution of access requests made by the current status of the request. To date, approximately 86% of people submitting access requests have been found eligible, and a further 3% are in progress. Around 7% of access requests have been deemed ineligible. When ineligibility due to age and residency requirements are excluded the proportion decreases to 6%.

Table 1.3.3. Reviews of decisions (internal)

State	Affirmed	Set aside	Pending	Outcome not recorded	Total
NSW ²²	19	37	13	33	102
SA	7	33	10	10	60
TAS	2	1	0	1	4
VIC	25	57	11	44	137
ACT	8	7	13	12	40
NT	0	0	0	0	0
WA	4	2	2	4	12
Total	65	137	49	104	355

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 (26,142) or plan decisions (19,758). Given the total number of decisions, there have been very few requests for review (355), with the majority from Victoria (137).

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	0	3	1	2	0	7
SA	2	0	2	1	2	2	9
TAS	0	0	0	1	0	0	1
VIC	2	1	5	11	2	1	22
ACT	0	0	1	1	0	0	2
NT	0	0	0	0	0	0	0
WA	0	0	2	0	1	0	3
National Office	0	0	0	0	0	0	0
Total	5	1	13	15	7	3	44

Table 1.3.4 shows that there have been 44 appeals to the Administrative Appeals Tribunal of which 13 are pending. Of these appeals, 30 have reached a resolution – 15 have been varied (participant won the appeal) and the other 15 have been dismissed, withdrawn or affirmed (the original decision confirmed).

²² Decision review data is collated at the site level. No requests have been made to review decisions made at the Nepean Blue Mountains site.

Table 1.3.5. Appeals by Category with the AAT

State	Access Issues	Plan Issues	Total
NSW	4	3	7
SA	6	3	9
TAS	1	0	1
VIC	8	14	22
ACT	0	2	2
NT	0	0	0
WA	1	2	3
National Office	0	0	0
Total	20	24	44

Table 1.3.5 shows that of the appeals lodged to date, just under half were related to access issues (20) and just over half related to plan issues (24).

Table 1.3.6. Complaints by outcome

State	Closed - referred to another agency	Closed - resolved	Closed - unresolved	Open	Total
NSW ²³	3	196	11	18	228
SA	1	76	4	20	101
TAS	0	33	1	2	36
VIC	1	208	26	1	236
ACT	0	31	3	4	38
NT	0	1	0	1	2
WA	1	20	1	6	28
National Office	4	96	9	41	150
Total	10	661	55	93	819

Table 1.3.6 shows the number of complaints submitted. In total, there have been 819 complaints, of which 236 are from Victoria (29%) and 228 are from NSW (28%). Complaints can be lodged by participants, providers, organisations and members of the general community.

²³ Complaints data is collected at the state/territory level. No complaints have been made regarding the Nepean Blue Mountains site.

Table 1.3.7. Complaint type

State	Provider	Agency	Reasonable and Necessary Supports	Other	Total
NSW	10	135	50	33	228
SA	0	82	11	8	101
TAS	0	27	2	7	36
VIC	5	159	42	30	236
ACT	2	28	2	6	38
NT	0	1	0	1	2
WA	0	20	2	6	28
National Office	4	94	6	46	150
Total	21	547	115	137	819

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 14% relating to the amount of reasonable and necessary supports in participant plans.

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 ²⁴
NSW	1.75	1.04
SA	1.51	1.06
TAS	1.75	1.35
VIC	1.75	1.14
ACT	1.52	0.83
NT	-	0.53
WA	1.37	1.04
Total	1.63	1.09

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

State	Very good	Good	Neutral	Poor	Very Poor	Total
NSW	76%	22%	1%	1%	0%	100%
SA	66%	26%	5%	3%	1%	100%
TAS	80%	19%	2%	0%	0%	100%
VIC	80%	16%	3%	0%	0%	100%
ACT	56%	41%	3%	0%	0%	100%
NT	-	-	-	-	-	-
WA	53%	36%	7%	2%	3%	100%
Total	71%	24%	3%	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

²⁴ Life Experience satisfaction is no longer collected during planning. This measure is part of the outcomes framework being base-lined in 2015-16. Reporting will be included in the 2015-16 end of year report.

and outcomes. Of the 1,819 participants who have been surveyed, 95% have responded that their experience was either good or very good.

2. Financial sustainability

Note: A number of measures relating to financial sustainability are addressed in the 'Report on the sustainability of the Scheme' 2015-16 1st quarterly report.

For the ACT, NT and WA trial sites, which commenced on 1 July 2014, only five 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 supports²⁵

State	Committed costs	Proportion
NSW HTR	\$424,655,086	35%
SA	\$136,267,287	11%
TAS	\$115,410,254	10%
VIC	\$355,798,792	30%
ACT	\$105,041,156	9%
NT	\$5,404,344	0.5%
WA	\$54,978,783	5%
NSW NBM	\$879,407	0.1%
Total	\$1,198,435,110	100%

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

²⁵ Committed support is the dollar amount of support that has been made available to participants in their statements of support – their package of supports.

Table 2.1.2. Total payments (\$, in-kind²⁶)

State	Cash	In-Kind	Total
NSW (HTR)	\$140,582,571	\$1,196,852	\$141,779,424
SA	\$40,382,216	\$3,219,590	\$43,601,806
TAS	\$42,681,984	\$8,294,339	\$50,976,323
VIC	\$116,667,967	\$52,805,662	\$169,473,630
ACT	\$19,942,395	\$384,387	\$20,326,782
NT	\$1,206,725	\$17,168	\$1,223,893
WA	\$12,114,103	\$617,256	\$12,731,359
NSW (NBM)	\$2,734	\$0	\$2,734
Total payments	\$373,580,696	\$66,535,255	\$440,115,950
Total (incl. in-kind off system reconciliation for 2013/14 and estimated 2014/15 in-kind supports that have not yet been paid)	\$440,115,950	\$111,996,163	\$552,112,113

Table 2.1.2 shows total payments to date by site. The majority of payments are from the New South Wales (HTR) and Victorian sites (71% of payments, combined). This is expected as these are the largest sites. The newer sites have made fewer payments than the 2013-14 trial sites. This is expected as they have had less Scheme experience and there is a lag between support provision and payment.

Table 2.1.3 Operating Expenses Ratio (% total costs)²⁷

	%
Operating expenses ratio	20.4%

Table 2.1.3 shows the operating expenses ratio. This figure has fallen from 27.0% reported in the previous quarter. This reduction should be treated with some caution however as the figure of 20.4% relates only to the first quarter of the 2015/16 year only.

²⁶ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

²⁷ The numerator includes all operating expenses of the Agency including sector development grants but excludes participant payments. The denominator is total expenses incurred by the Agency including all grants, operating expenses and participant support.

Table 2.1.4 Annualised support package distributions²⁸

Annualised committed support band	Active Plans	%
\$0-\$5,000	1,268	6%
\$5,001-\$10,000	2,560	13%
\$10,001-\$30,000	10,020	51%
\$30,001-\$50,000	2,264	12%
\$50,001-\$100,000	1,570	8%
\$100,001-\$150,000	544	3%
\$150,001-\$200,000	430	2%
\$200,001-\$250,000	527	3%
\$250,001+	359	2%
Total	19,542	100%

Table 2.1.4 shows that the majority of participants have annualised package costs of between \$5,001 and \$30,000 (64%) and few participants have high cost plans of over \$100,000 (10%). Of the 19,542 active²⁹ participants with approved plans, 71% have an annualised package cost of less than \$30,000. This group accounts for only 26% of annualised committed funding. Conversely, 10% of participants have an annualised package cost over \$100,000 and these participants account for 49% of total committed supports.³⁰ As expected, the bulk of committed funding is being allocated to a very small proportion of high-need participants.

²⁸ This table includes participants with active plans only. The total of 19,542 is slightly lower than the 19,758 active and inactive participants with an approved plan reported elsewhere in this report.

²⁹ 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.

³⁰ Committed support is the dollar amount of support that has been made available to participants in their statements of support.

Table 2.1.5 Proportion of participants with approved plans receiving support within 180 days of access request

State	Jan 15 – Mar 15
NSW HTR	83%
SA	64%
TAS	27%
VIC	56%
ACT	60%
NT	75%
WA	77%
NSW NBM	NA ³¹
Total	68%

Table 2.1.5 shows the proportion of participants with approved plans who have received support within 180 days of submitting an access request during the 3rd quarter of 2014-15. This is a more appropriate measure of the time taken between access requests and receiving supports than calculating average days. This is due to average days requiring censored data in the calculation. 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.

Further, in-kind claiming is affecting this measure, as not all in-kind services provided are invoiced in the system. Despite this, the total proportion of this measure has increased to 68%, from 54% last quarter. This increase should be treated with caution, however, as due to the time lag required to report this measure, payments made in the final months of the last financial year (a high claim period) are included in this quarter's reporting period.

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

Note: In the Tasmanian trial site the number of access requests received in the 1st quarter of 2014-15 was very low and hence these figures should be treated with caution.

³¹No data has been collected from the NBM site as yet due to the lag in data needed to record this measure.

Table 2.1.6. Payments to providers and participants split by support cluster – since 1 July 2013

Support Category	Participant	Service Provider	Total
Accommodation/Tenancy	\$16,019	\$391,132	\$407,151
Assess-Skill, Ability, Needs	\$97,684	\$2,815,582	\$2,913,266
Assist Access/Maintain Employ	\$116,284	\$5,451,806	\$5,568,090
Assist Prod-Pers Care/Safety	\$1,192,998	\$6,547,153	\$7,740,150
Assist-Integrate School/Ed	\$293,412	\$1,382,404	\$1,675,816
Assist-Life Stage, Transition	\$287,894	\$10,421,497	\$10,709,391
Assist-Personal Activities	\$5,742,057	\$51,228,026	\$56,970,083
Assist-Travel/Transport	\$6,559,793	\$5,931,317	\$12,491,110
Assistive Equip-Recreation	\$164,610	\$479,634	\$644,244
Assistive Prod-Household Task	\$56,273	\$87,854	\$144,128
Behaviour Support	\$92,445	\$1,761,536	\$1,853,981
Comms & Info Equipment	\$528,885	\$772,595	\$1,301,481
Community Nursing Care	\$69,793	\$706,283	\$776,076
Daily Tasks/Shared Living	\$1,376,687	\$144,933,812	\$146,310,499
Development-Life Skills	\$791,197	\$6,576,003	\$7,367,199
Early Childhood Supports	\$7,138,381	\$37,121,264	\$44,259,645
Equipment Special Assess Setup	\$41,474	\$480,691	\$522,164
Hearing Equipment	\$132,147	\$134,604	\$266,750
Home Modification	\$271,466	\$3,244,909	\$3,516,375
Household Tasks	\$832,650	\$2,831,876	\$3,664,526
Interpret/Translate	\$28,293	\$249,607	\$277,900
Other Innovative Supports	\$378,928	\$1,072,903	\$1,451,831
Participate Community	\$5,873,448	\$90,374,010	\$96,247,458
Personal Mobility Equipment	\$522,879	\$10,899,973	\$11,422,852
Physical Wellbeing	\$320,742	\$226,672	\$547,414
Plan Management	\$13,343	\$663,361	\$676,704
Therapeutic Supports	\$1,373,197	\$16,129,154	\$17,502,351
Training-Travel Independence	\$72,163	\$424,923	\$497,086
Vehicle modifications	\$305,251	\$1,437,340	\$1,742,590
Vision Equipment	\$93,942	\$553,696	\$647,638
Total	\$34,784,333	\$405,331,617	\$440,115,950
Total (incl. in-kind off system reconciliation)			\$552,112,113

Table 2.1.6 shows total payments (cash & in-kind³²) 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 (92%). The total payments made have increased from approximately \$330 million in the previous quarter (\$396

³² "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

million including the in-kind off system reconciliation) to over \$440 million excluding the in-kind off system reconciliation, and \$552 million when this reconciliation is included.

Table 2.1.7. Average and median costs of individual support packages³³

State	Average annualised committed	Median annualised committed
NSW HTR	\$42,118	\$18,249
SA	\$18,662	\$15,383
TAS	\$58,154	\$32,414
VIC	\$35,947	\$17,753
ACT	\$44,602	\$17,953
NT	\$48,276	\$16,154
WA	\$35,487	\$23,546
NSW NBM	\$17,623	\$12,850
Total	\$34,831	\$17,186

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

Table 2.1.8. Value of and number of active approved packages by participant group – since 1 July 2013³⁴

Primary Disability	Number	Committed costs*	Average annualised cost
Autism and Related Disorders	6,168	\$251,336,964	\$26,899
Cerebral Palsy	888	\$99,904,301	\$62,801
Deafness/Hearing Loss	403	\$9,378,674	\$13,636
Developmental Delay	1,669	\$45,556,758	\$16,540
Down Syndrome	728	\$72,784,258	\$51,817
Global Developmental Delay	945	\$28,195,443	\$21,089
Intellectual Disability	2,935	\$354,998,068	\$59,269
Multiple Sclerosis	297	\$18,885,840	\$36,000
Psychosocial Disability	1,207	\$60,763,062	\$50,342
Other Intellectual/learning	979	\$62,244,946	\$37,508
Other Neurological	1,519	\$137,988,911	\$49,955
Other Physical	702	\$31,981,467	\$29,303
Other Sensory/Speech	1,101	\$24,356,961	\$16,164
Other Not recorded	1	\$59,458	\$59,499
Total	19,542	\$1,198,435,110	\$34,831

Table 2.1.8 shows the number of active participants³⁵ who have approved plans, the total cost committed in these plans and the average annualised cost of the plans, split by primary disability

³³ Note: Average and median annualised costs exclude participants from the Stockton and Kanangra large residential centres in NSW and Colanda large residence in VIC.

³⁴ Note: Average annualised cost excludes participants from the Stockton and Kanangra large residential centres in NSW and Colanda large residence in VIC.

³⁵ 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.

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 \$34,800³⁶ excluding the Stockton, Colanda and Kanangra large residences, or \$39,000 when the Stockton, Colanda and Kanangra large residences are included.

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 site. For example, New South Wales is phasing by service provider. As a result, plan costs to date are not comparable across sites.

Table 2.1.9. Number of participants receiving supports paid for with cash and/or in-kind³⁷ supports by State/Territory

State	Cash	In-kind	Cash & In-kind	Total
NSW HTR	4,218	19	264	4,501
SA	3,740	16	931	4,687
TAS	478	2	386	866
VIC	1,649	172	2,388	4,209
ACT	1,146	45	207	1,398
NT	28	1	8	37
WA	823	2	270	1,095
NSW NBM	4	0	0	4
Total	12,086	257	4,454	16,797

Table 2.1.9 shows that almost all participant plans that have had at least one invoice are receiving cash payments (72%) or a combination of cash payments and in-kind supports (27%) against their plans. Note: This measure does not include participants who have received supports, but their service provider is yet to invoice for the support provided. Further, this measure excludes in-kind payments made off-system.

Table 2.1.10. Ratio of cash to in-kind services by State/Territory

State	Cash Services	In-kind Services
NSW HTR	99%	1%
SA	96%	4%
TAS	95%	5%
VIC	88%	12%
ACT	98%	2%
NT	97%	3%
WA	94%	6%
NSW NBM	100%	0%
Total	94%	6%

³⁶ Note: the bilateral agreements for the 2015-16 year indicate that the average participant cost is \$38,588.

³⁷ "In-kind" supports are existing Commonwealth or State/Territory government programs delivered under existing block grant funding arrangements.

Table 2.1.10 shows the distribution of payments for services funded through cash and in-kind arrangements by site. Victoria has the highest percentage of in-kind payments at 12%, while New South Wales has the lowest at 0.6%. Note: Nepean Blue Mountains is yet to fund any services through in-kind arrangements and a number of in-kind supports have been invoiced off the system. These results have not yet been allocated to participants and are not included in the above table - the above results should be interpreted with caution.

Table 2.1.11. Participant numbers

Table 2.1.11(a). Participant numbers, split by gender, CALD and Aboriginal and/or Torres Strait Islander status

State / Territory	Total	Aboriginal and/or Torres Strait Islander	CALD	M	F	X
NSW HTR	5,047	287	99	3,080	1,967	0
SA	5,235	228	310	3,763	1,472	0
TAS	1,003	88	18	643	360	0
VIC	4,685	100	99	2,786	1,898	1
ACT	2,176	79	175	1,423	751	2
NT	100	94	71	54	46	0
WA	1,462	65	70	967	494	1
NSW NBM	50	1	2	35	15	0
Total	19,758	942	844	12,751	7,003	4

Table 2.1.11(b). Participant numbers, split by age and site

State / Territory	0-4	5-14	15-24	25-44	45-64	65+
NSW HTR	336	1,382	678	952	1,590	109
SA	1,444	3,778	13	0	0	0
TAS	0	0	877	126	0	0
VIC	319	1,426	652	988	1,207	93
ACT	450	837	432	133	266	58
NT	6	26	7	25	36	0
WA	116	613	303	237	183	10
NSW NBM	18	30	2	0	0	0
Total	2,689	8,092	2,964	2,461	3,282	270

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

Primary Disability	NSW HTR	SA	TAS	VIC	ACT	NT	WA	NSW NBM	Total
Autism and Related Disorders	1,152	2,527	301	1,034	571	2	566	31	6,184
Cerebral Palsy	262	164	70	167	127	9	101	1	901
Deafness/Hearing Loss	133	151	5	62	41	2	11	0	405
Developmental Delay	210	725	16	342	356	4	13	8	1,674
Down Syndrome	221	117	71	166	83	2	74	2	736
Global Developmental Delay	129	478	16	145	96	3	80	1	948
Intellectual Disability	966	114	358	1,010	284	18	223	1	2,974
Multiple Sclerosis	100	0	1	127	44	1	33	0	306
Psychosocial Disability	442	5	23	641	78	3	28	0	1,220
Other Intellectual/learning	270	229	61	238	97	5	84	1	985
Other Neurological	671	121	50	455	141	19	130	2	1,589
Other Physical	222	102	19	167	118	26	72	0	726
Other Sensory/Speech	268	502	12	131	140	6	47	3	1,109
Other Not recorded	1	0	0	0	0	0	0	0	1
Total	5,047	5,235	1,003	4,685	2,176	100	1,462	50	19,758

Table 2.1.12. Total number of plans developed

State	Total plans developed
NSW HTR	8,066
SA	7,264
TAS	2,001
VIC	8,431
ACT	2,306
NT	116
WA	1,570
NSW NBM	50
Total	29,804

Table 2.1.12 shows the total number of plans completed. This includes 8,578 second plans, 1,414 third plans, 52 fourth plans and 2 fifth plans. 216 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_HTR	935	19%
SA	2,060	39%
TAS	76	8%
VIC	416	9%
ACT	482	22%
NT	8	8%
WA	230	16%
NSW NBM	0	0%
Total	4,207	22%

Table 2.1.13 shows the number of approved plans that only contain a single type of support. Overall, 22% of approved plans only contain a single type of support, down from 23% last quarter. South Australia has 2,060 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 19,542 active participants with approved plans, 11,350 (58%) were found eligible for the Scheme because they met the disability requirements (section 24 of the NDIS Act), and 8,192 (42%) participants met the early intervention 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.

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
NSW HTR	4,257	86%
SA	4,688	90%
TAS	696	71%
VIC	4,209	91%
ACT	1,949	90%
NT	84	84%
WA	1,014	70%
NSW NBM	50	100%
Total	16,947	87%

Table 3.1.1 shows the proportion of participants with an approved plan accessing mainstream supports. This measure has increased from 83% to 87% in the last quarter.

Table 3.1.2. Support categories with mainstream services

Support categories	NSW HTR	SA	TAS	VIC	ACT	NT	WA	NSW NBM	Total
Self-care	2,528	620	171	2,434	454	47	322	24	6,576
Education	1,518	3,810	346	1,621	1,032	28	510	41	8,865
General Tasks and Demands	913	815	80	970	378	14	160	10	3,330
Community and social life	693	1,631	144	912	552	13	144	9	4,089
Community - Social and Civic	596	884	110	1,112	683	8	314	9	3,707
Mobility	295	269	48	699	104	7	70		1,492
Carer/Family Support	220	512	30	347	146	11	80	3	1,346
Employment	221	5	139	376	88	4	100		933
Domestic Life	257	46	40	457	110	20	73		1,003
Communication	135	450	11	150	135	1	31		913
Interpersonal Relationships	154	140	23	183	51		44	1	595
Learning and Knowledge	71	253	34	124	82	2	39	1	605
Total	4,257	4,688	696	4,209	1,949	84	1,014	50	16,947

Table 3.1.2 shows the most common mainstream supports are education and self-care, with 8,865 and 6,576 utilised respectively by participants with approved plans³⁸.

³⁸ 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 Local Area Coordinators (LAC) community capacity building activities

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

State/Territory	Community awareness activity
NSW HTR	<p>During the period July – September 2015 Hunter Trial Site Engagement and Local Area Coordinator Teams connected with 8,336 individuals through the following activities:</p> <ul style="list-style-type: none"> • NAIDOC week • Provider forums/workshops • Community Expos • School Leaver Expo • Interagency meetings • NDIA Information Desks at local shopping centres and markets • Interagency meetings • Mainstream Interface meetings • Information sessions • NSW Council for Intellectual Disability Conference • Disability Sector conferences
SA	<ul style="list-style-type: none"> • LACs employed through Tullawon Health Service, NPY Women’s Council and the First People’s Disability Network have undertaken 80 community awareness activities throughout this quarter, specifically targeted at increasing access and knowledge of the NDIS with Indigenous families in SA. LACs engage broadly within a community or region and develop long term trusted relationships with community members, service providers and key stakeholders. • Attendance at the Yalata (remote community) Festival to provide information to community members about the NDIS and how they can engage with the Scheme. • Attendance at a workshop in Alice Springs with the Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) Women’s Council and ten senior women from the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands to discuss progress to date, share learnings and recommendations, create new communication and engagement tools and take advice on further rollout for adults in SA. • First Peoples Disability Network (FPDN) have two staff working as Local Area Coordinators who are based at the NDIA St Marys office. This enables close cooperation between NDIA and FPDN to ensure access for Aboriginal participants in metropolitan Adelaide and selected regional areas. • Community Information Sessions were held at NDIA offices in St Marys, Elizabeth and Murray Bridge, a total of 10 sessions were attended by 73 people. • The South Australian Trial Site hosted information booths at the NAIDOC week Family Fun Day, the Seniors Information Service Disability, Ageing, and Lifestyle Expo in Adelaide and the Playford Council’s Annual Positive Futures Employment, Education and Training Expo.

State/Territory	Community awareness activity
	<ul style="list-style-type: none"> Information sessions were provided at state, independent and Catholic Schools including Adelaide North Special School, Roma Mitchell Secondary School, Our Lady of La Vang Special School, Mark Oliphant College and Salisbury North Primary School. Coordinators presented information sessions to Leadership groups within the Education Sector - Special Education Principals and Leaders, Hills Early Childhood Leaders and the Western Education Principals Partnership. Coordinators presented to a number of student groups at Universities. These presentations included a workshop for students from Flinders University with disability who are nearing graduation about their Pathways Beyond University, an information session for 270 students from Disability, Education, Health and Human Services enrolled in the Perspectives on Disability course at Flinders University and presentations to Allied Health students at The University of Adelaide.
TAS	<p>NDIA engagement team and outsourced Local Area Coordinators (LACs) have connected with close to 4,000 individuals at 260 functions. Highlights of engagement include:</p> <ul style="list-style-type: none"> Agency staff and LACs participated in the Gearing up Expos in Hobart, Launceston and Burnie. An estimated 2,300 people with disabilities, their families and carers, visited the three venues to explore what was on offer in the way of programs and equipment for people with disability. The 28th Annual Speak Out conference for people with Intellectual Disability was held in Launceston with the theme exploring options under the NDIS. Agency staff and LACs providing information in various sessions to the 120 delegates attending. Monthly drop-in sessions for participants and families/carers commenced in Hobart, Launceston and Devonport offices. Participated in local NAIDOC activities around the State. <p>Various forums and workshops were hosted for registered and potential service providers including: pricing catalogue workshops and coordination of supports workshops; attendance at various forums such as Commonwealth Program - Partners in Recovery and NDS forums; speaking with various provider Boards and provider staff meetings; and monthly drop-in sessions for new providers at all three offices.</p>
VIC	<p>Community awareness activities undertaken by LACs within the period</p> <ul style="list-style-type: none"> Facilitation of Regional Working Group planning International Day of Persons with a Disability Meeting with PTV (Public Transport Victoria) in relation to the transport needs in Barwon Meeting with PTV (Public Transport Victoria) Accessibility Strategic Reference Group representatives Presentation to Regional Financial Planners Association Participation in joint Awareness project Justice Bus visiting Colac Older Adults Wellness Conference – Awareness Table Community Conversation Gellibrand Neighbourhood House
ACT	<p>Community awareness activities undertaken in the period:</p> <ul style="list-style-type: none"> 48 Pre-planning workshops with 294 attendees 25 Managing your Plan workshops with 115 attendees 1 Supports Coordination workshop with 35 attendees Attendance at 3 expos 2 Provider Support Workshops with 74 attendees

State/Territory	Community awareness activity
NT	<ul style="list-style-type: none"> • Continued to participate in or organise community meetings (planned and opportunistic) throughout the Barkly region. The trial site participates in monthly Barkly Regional Coordination meetings, convened by the local representative of the Office of the Chief Minister. • The Barkly trial site Local Advisory Group continues to meet regularly, providing a collaborative forum for identifying and resolving difficulties faced by people with disability in the trial site region through sharing local knowledge, and it continues to meet regularly. Two Forums were held in Tennant Creek in July 2015 midway through the two year trial period. These forums were a platform for the NDIA to listen to any concerns and to gather feedback to better inform the second year of trial. Outcomes of the forum have been collated into key themes which the NDIA will build on. • As a result of the forums held in July the Barkly Trial Site the Local Advisory Group has endorsed the creation of a local action plan based on the key themes of: Carers and families, Participants and community, Scheme Understanding, Training/Employment and Communication. • The NDIA joined locals in Tennant Creek to celebrate the Desert Harmony Festival. The NDIA sponsored this year's event which had a strong disability theme. Staff attended events throughout the festival to talk to the community about the NDIS and what it means for people with disability in the Barkly region. • Trial site staff joined in local NAIDOC week celebrations which again was an opportunity to talk about the NDIS in the Barkly. <p>The trial site continues to meet with key Government and non-government agencies in the region.</p>
WA	<p>The following community awareness activities were undertaken within the period by the Engagement Team:</p> <ul style="list-style-type: none"> • 12 month anniversary activities • Expo for organisations providing Support Coordination held at the trial site • Local connections continue to be forged with local Aboriginal groups, with meetings held with local workers and providers. • National Disability Services Sector Interest Group meetings continue to be held at the NDIA - Midland Office to discuss timely issues such as Support Coordination and Pricing. • Reaching out to CALD participants continues via workshops and general information sessions with EDAC • Connections with child health services continue through workshops and presentations • General Community Information Sessions continue with consistently good attendance • Presentations provided to a variety of groups are ongoing, including to organisations and workers new to the disability industry and people with spinal cord injury. • Presence at expos and general info forums is ongoing including the annual state-wide careers expo.
NSW NBM	<p>In the Nepean Blue Mountains region the Agency has partnered with UnitingCare to provide Community Connector services. 12 FTE Community Connectors have conducted 25 NDIS Information Sessions, with approximately. 113 members of the community attending. These sessions also provided information EarlyLinks and AbilityLinks (community resources) open to people in the region.</p>

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	Community capacity building activity
NSW HTR	<ul style="list-style-type: none"> • 18 x pre-planning/plan readiness workshops • Facilitated provider workshops in the delivery of Coordination of Supports to increase capacity and capability in the sector for the provision of this support to participants. • Actively supported Australian Disability Enterprises to full transition of their DSS funded program into individualised funding for participants. • Participation in NSW Regional Support Workers Conferences developing an understanding of the changes required by front line staff to empower participants in achieving their individual outcomes. • Planning and supporting people with complex needs in the NDIS Workshop. Provided opportunity to explore interface issues and sharing of best practice and strategies in supporting participants with complex needs. • Early Childhood Intervention Workshop which included presentation from Hunter New England Health Service and panel of service providers sharing best practice in working partnerships within the Scheme. • Outreach to James Fletcher Campus, coaching and supporting clinicians and individuals to make application to the Scheme.
SA	<ul style="list-style-type: none"> • LACs employed through Tullawon Health Service, NPY Women’s Council and the First Peoples Disability Network have undertaken 93 community capacity building activities throughout this quarter. LACs have focussed on working with communities to ensure children with disabilities can be included in activities such as accessing swimming pools safely and appropriately, and engaging in activities during school holidays at the youth hubs. LACs have also been working with service providers who deliver services in the region or community to ascertain their capacity to increase their service footprint. • NPY Women’s Council have developed a poster in language that is now on display in every community on the APY Lands to ensure that people in community understand the key messages about the NDIS. The poster describes that the NDIS in South Australia is currently looking at children born after 1 July 2000, who have impairments, or delays in areas such as communication, learning or mobility. • Engagement with stakeholders delivering services on the APY Lands and in Alice Springs to provide an update on NDIS progress and provider registration. The Agency is following-up with the organisations to support them through the registration process. • Engagement with stakeholders in Ceduna including; the local hospital, Aboriginal Health service, South Australian Government agencies and key Indigenous organisations to provide an update on NDIS progress and to provider registration. • Pre-planning workshops were held in metropolitan and regional communities. A continuing focus of these workshops is to support families to access community and mainstream services. 10 workshops were attended by 108 people. • Plan implementation workshops were delivered to support families to implement their plan and engage with Mainstream and Community supports. 19 workshops were attended by 138 people across the NDIA offices at St Marys, Elizabeth and Murray Bridge. • Coordinators facilitate referrals to mainstream and community services such as child care, schools, recreational organisations, and user led community groups and health services to assist families and participants to build capacity. • Coordinators meet regularly with Express Yourself, a self-advocacy group for people with intellectual disability, to receive advice on engagement and

State/Territory	Community capacity building activity
	<p>access to the Scheme and to support this group to become plan ready.</p> <ul style="list-style-type: none"> • The SA Youth Advisory Group for young people 12-24 years has established regular meeting times. They provide advice to the trial site on engaging and communication with young people about the Scheme. They are currently finalising their action plan for 2016. • The Director of Assistive Technology from the Markets and Sector Branch presented a draft of the NDIS Assistive Technology Strategy at a meeting of the SA Local Advisory Group for consultation and feedback. • Coordinators met with Agencies including: Families SA, Disability SA, Centrelink and the Department for Education and Child Development and Regional Development Boards to discuss local support needs, regional challenges and opportunities to address barriers to participation and inclusion. • Coordinators participated in a focus group to explore pathways and opportunities for people from African communities to connect with the NDIA in South Australia. • A number of organisations have commenced projects funded through Community Inclusion and Capability Development (CICD) Grants 2014/15. <ul style="list-style-type: none"> ○ Access2Arts ‘Reasonable and Necessary’. This project encourages people living with disability to think about their goals and futures by providing a fun and creative way to share goals. This participatory arts project is now live and online at reasonableandnecessary.org ○ Access2Arts 30 x 30, will actively dismantle barriers that disable and exclude people with disability. The project will achieve this through creating 30 unique activities with South Australian organisations. Through this Access2Arts also aims to lift the knowledge and skills of these organisations in providing more inclusive services and activities across culture, recreation, leisure and sport. ○ Ninti One, a national not-for-profit organisation that builds opportunities for people in remote Australia through research, innovation and community development. The project will engage Anangu living on the APY lands in the development of a service and support model which will be locally relevant, inclusive and beneficial for people with disability. The project will gain an understanding of perceptions and attitudes to disability held by Anangu living on the APY Lands and a report will be produced, providing advice on the practical application of disability supports guided by the ideas, needs and attitudes of Anangu, for use in designing effective service delivery models on the APY lands. ○ Siblings Australia, to respond to the identified need for sibling peer support programs in South Australia that can provide a space that siblings can come together with others who understand their experience, have fun and learn ways of managing any challenges. It is expected that the program will increase siblings understanding of their brother or sisters disability and assist in developing stronger family relationships and increase the sustainability of children with disabilities family networks. ○ Tullawon Health Service (THS), to increase community inclusion and capacity within the remote community the NDIA funded wheelchair modifications to the commuter bus owned by THS ○ Autism SA, to support individuals with Autism Spectrum Disorder (ASD) participate in their local Community Autism SA will devise an Autism friendly charter to assist businesses, organisations and venues build capacity, inclusivity, understanding and awareness of ASD.
TAS	<p>NDIA engagement team and outsourced Local Area Coordinators (LACs) have focused on Information Linkages and Capacity Building (ILC/Tier 2) organisations in this quarter.</p> <ul style="list-style-type: none"> • Worked closely with the consortium led by SpeakOut who are funded to establish 20 peer support groups in Tasmania. • Disseminated information to ILC providers such as epilepsy, the neuro muscular alliance, mental health providers, advocacy organisations, and a range of sole/small providers of specialised services such as OTs, and speech pathologists. • Worked with a provider in the South of Tasmania to support young people with learning disabilities to prepare to get their learner’s permit for driving

State/Territory	Community capacity building activity
	<p>(L plates).</p> <ul style="list-style-type: none"> • Worked with mainstream real estate services to explore with developers a range of alternate accommodation options, including long-term private rental options. • Supporting allied health professionals with the registration process for the NDIS.
VIC	<p>Community capacity building activities undertaken by LACs within the period</p> <ul style="list-style-type: none"> • Awareness Presentation to Barwon Aged Care Assessment Team and Transitional Care Package Team • Brian Injury Awareness Week activities – LAC’s provided support in an information table in the major shopping centre to engage the community • Participation in community network meetings (3219) and Early Years Reference Groups in Surfcoast Shire and City of Greater Geelong • Targeted Relationship Building activities by LAC’s with individual services in the Early Years and Kindergarten services in the Surf Coast and City of Greater Geelong • Committee for Geelong Diversity Field Officer Launch Breakfast
ACT	<ul style="list-style-type: none"> • 2 Community Conversations were held with 12 attendees
NT	<p>Trial site staff continue to work with Anyinginyi Health Aboriginal Corporation through a Community Inclusion and Capability Development (CICD) grant to support the engagement of a locally based project officer. The ‘Parlpuru Ninjlkari’ Project officer will work within local Indigenous communities to raise awareness of available disability and health supports, help facilitate building relationships and trust with local communities, identify training gaps, identify other community service needs, identify and encourage the entrance of new providers, and support more people to apply for the NDIS.</p>
WA	<p>The following community capacity building activities were undertaken by the Engagement team within the period</p> <ul style="list-style-type: none"> • Self-Management Workshops held twice weekly, conducted by the finance team for participants • Pre-planning workshops held weekly on Monday mornings and evenings • CICD grants activities have commenced including accessible Community Arts, transition from school to employment, reducing social isolation, leadership for people with intellectual disability. • Interface with DHS and associated agencies continues. • Siblings forum hosted at the site • Engagement activities to bring in new participants include meeting at local emergency accommodation outreach in Midland and working closely with the Street Doctor and clinicians to identify potential participants • Contact with local Advocacy agency, MIDLAS continues to build mutual understanding. • Psych hostels project has commenced to engage effectively with people living in psychiatric hostels and bring them into the Scheme
NSW NBM	<p>Community Connectors have focused on the individual capacity building of participants (and potential participants), their families and carers for the launch of the Nepean Blue Mountains region.</p> <p>However, they have conducted 11 Plan Readiness Workshops which has built the understanding of the NDIS and the NDIA of 55 families in the region.</p>

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 2015/16 Q1. 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

3. People with disability are included in their community

- Community capacity building activities undertaken by funded NGOs within the period

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

Table 1(a): Financial year 2013/2014

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
<i>National</i>	1,096	1,179	1,073	879	645	531	587	692	1,136	698	947	908
NSW HTR	391	296	310	306	168	160	176	240	422	172	262	233
SA	170	168	185	186	161	101	148	137	194	195	318	413
TAS	105	120	85	89	113	69	60	53	47	49	80	56
VIC	430	595	493	298	203	201	203	262	473	282	287	206
ACT												
NT												
WA												
NSW NBM												

Table 1(b): Financial year 2014/2015

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
<i>National</i>	1,052	1,042	905	1,028	1,017	1,170	775	1,077	1,166	1,039	1,205	921
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
NSW HTR	237	201	200	185	173	247	148	262	300	195	314	268
SA	461	427	365	311	315	250	223	302	277	289	283	317
TAS	45	22	28	21	11	16	13	18	25	25	27	13
VIC	171	224	127	156	132	153	102	107	131	90	130	102
ACT	91	54	90	210	203	328	166	195	247	324	271	121
NT	14	20	12	6	5	0	2	3	3	3	4	7
WA	33	94	83	139	178	176	121	190	183	113	176	93
NSW NBM												

Table 1(c): Financial year 2015/2016

State/Territory	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16
<i>National</i>	1,116	1,185	925									
NSW HTR	192	254	176									
SA	375	354	176									
TAS	15	23	11									
State/ Territory	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16
VIC	108	101	29									
ACT	264	228	126									
NT	7	15	13									
WA	114	106	104									
NSW NBM	41	104	290									

Table 2 First approved plans by month that the plan was first approved

Table 2(a):Financial year 2013/2014

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
NSW HTR	0	0	0	0	2	3	3	9	11	5	8	18
SA	0	0	0	0	0	3	9	46	26	23	18	12
TAS	0	0	0	0	2	1	2	4	2	1	4	9
VIC	0	0	0	0	1	3	7	9	2	2	6	15
ACT												
NT												
WA												
NSW NBM												
National	1	2	2	2	6	11	24	71	47	32	36	56

Table 2(b):Financial year 2014/2015

State/Territory	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15
NSW HTR	73	149	205	191	142	182	139	266	301	179	164	186
SA	16	32	45	85	95	137	116	169	208	163	139	95
TAS	28	54	67	40	54	76	58	76	95	79	66	67
VIC	75	129	201	229	210	238	214	302	317	245	314	326
ACT	0	0	0	0	0	0	0	2	6	1	9	0
NT	0	0	0	0	0	0	0	0	0	0	0	0
WA	0	0	0	0	0	1	0	2	3	2	2	0
NSW NBM												
National	194	363	515	544	499	633	526	815	929	666	689	674

Table 2(c): Financial year 2015/2016

State/ Territory	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16
NSW HTR	157	272	354									
SA	80	226	286									
TAS	42	72	99									
VIC	246	290	365									
ACT	2	21	89									
NT	0	3	13									
WA	1	24	73									
NSW NBM	0	0	0									
National	528	908	1279									

Table 3. Types of mainstream supports accessed in participants plans

Support categories	Total	NSW	SA	TAS	VIC	ACT	NT	WA	NSW NBM
Number of plans with mainstream supports	16,947	4,257	4,688	696	4,209	1,949	84	1014	50
Education	53%	36%	81%	50%	39%	53%	33%	50%	82%
Self-care	48%	59%	13%	25%	58%	23%	56%	32%	22%
Community and social life	39%	16%	35%	21%	22%	28%	15%	14%	48%
General Tasks and Demands	24%	21%	17%	11%	23%	19%	17%	16%	18%
Other	20%	38%	42%	51%	60%	57%	54%	57%	20%

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

Table 4(a):Financial year 2013/2014

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
National	\$0.8	\$2.5	\$5.5	\$6.2	\$7.8	\$9.8	\$11.2	\$13.2	\$18.0	\$18.7	\$23.5	\$23.8
NSW HTR	\$0.2	\$1.0	\$2.2	\$2.3	\$2.5	\$3.0	\$3.4	\$4.7	\$7.2	\$8.2	\$9.0	\$9.5
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
TAS	\$0.1	\$0.4	\$0.7	\$1.0	\$1.2	\$1.4	\$1.7	\$1.8	\$2.3	\$2.4	\$2.7	\$2.7
VIC	\$0.3	\$0.9	\$2.1	\$2.5	\$3.3	\$4.4	\$5.0	\$5.3	\$6.7	\$6.4	\$9.7	\$9.3
ACT												
NT												
WA												
NSW NBM												

Table 4(b):Financial year 2014/2015

State/Territory	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15
National	\$28.9	\$29.8	\$31.4	\$36.1	\$37.6	\$41.1	\$42.4	\$40.8	\$48.8	\$49.9	\$53.7	\$54.2
NSW HTR	\$11.1	\$11.9	\$12.2	\$12.8	\$13.1	\$14.2	\$14.8	\$14.5	\$17.3	\$17.9	\$18.9	\$18.8
SA	\$2.4	\$2.6	\$2.9	\$3.3	\$3.6	\$4.0	\$4.3	\$4.2	\$5.1	\$5.2	\$6.1	\$6.4
TAS	\$3.7	\$3.8	\$3.9	\$4.2	\$4.1	\$4.4	\$4.4	\$4.2	\$4.6	\$4.4	\$4.6	\$4.5
VIC	\$10.0	\$11.0	\$10.9	\$13.4	\$13.40	\$13.9	\$13.9	\$12.5	\$13.9	\$13.8	\$14.2	\$13.9
ACT	\$0.0	\$0.2	\$0.6	\$1.0	\$1.4	\$1.9	\$2.2	\$2.3	\$3.1	\$3.9	\$4.5	\$4.8
NT	\$0.0	\$0.0	\$0.1	\$0.1	\$0.1	\$0.1	\$0.1	\$0.1	\$0.2	\$0.2	\$0.2	\$0.2
WA	\$0.0	\$0.1	\$0.3	\$0.5	\$1.1	\$1.7	\$1.8	\$1.7	\$2.5	\$2.8	\$3.1	\$3.2
NSW NBM												

Table 4(c):Financial year 2015/2016

State/Territory	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16
National	\$59.1	\$61.7	\$60.8									
NSW HTR	\$21.7	\$22.6	\$21.7									
SA	\$7.4	\$7.7	\$7.7									
TAS	\$4.9	\$5.1	\$4.8									
VIC	\$14.9	\$15.4	\$14.8									
ACT	\$6.1	\$6.6	\$7.3									
NT	\$0.3	\$0.3	\$0.4									
WA	\$3.9	\$4.0	\$4.1									
NSW NBM	\$0	\$0	\$0.0									

Table 5. Distribution of package costs by site

	NSW HTR	NSW HTR	SA	SA	TAS	TAS	VIC	VIC	ACT	ACT	NT	NT	WA	WA	NSW NBM	NSW NBM
Annualised committed support band	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected
Total	4,958	6,248	5,221	9,978	986	1,184	4,602	5,244	2,171	2,567	100	150	1,454	1,467	50	
\$0-\$5,000	444	1504	32	3523	116	398	393	1262	182	618	19	36	81	353	1	
\$5,001-\$10,000	632	1235	589	1301	60	192	750	1037	363	508	21	30	139	290	6	
\$10,001-\$30,000	1975	1201	4075	2514	290	275	2051	1008	880	493	30	29	681	282	38	
\$30,001-\$50,000	572	917	379	811	207	91	573	770	250	377	13	22	267	215	3	
\$50,001-\$100,000	452	926	129	1426	167	98	376	777	250	380	5	22	189	217	2	
\$100,001-\$150,000	216	208	12	403	52	105	110	175	90	85	2	5	62	49	0	
\$150,001-\$200,000	189	131	5	0	32	0	146	110	36	54	0	3	22	31	0	
\$200,001-\$250,000	346	85	0	0	21	24	103	71	49	35	0	2	8	20	0	
\$250,001+	132	41	0	0	41	0	100	35	71	17	10	1	5	10	0	

Appendix 3
Definition of measures reported in
Quarterly Report to the COAG Disability
Reform Council

1. Participant outcomes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
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 2015-16 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 invoiced.	Yes
1.2.3.	Proportion of participants with invoiced support	Proportion of participants with funded supports in support category that have had at least one payment.	Yes
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
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.	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
		Outcome of reviews are classified as: Affirmed = original decision was maintained; Set Aside = original decision was overturned Pending = review is still underway	
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

2. Financial sustainability

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
n/a	Management of prudential risk	Reports liabilities and assets of the Agency	No - Work on an <i>Insurances Principles and Financial Sustainability Manual</i> 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 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	Yes

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
		of the plans.	
2.1.9.	Number of participants receiving supports paid for with cash and/or in-kind supports	Number of participants who have had payments 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
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	No - Projections will be provided in the annual financial sustainability report.
n/a	Current expenditure compared to projections	Actual expenditure compared to actuarial projections	No - 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	No - 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	No - 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	No - system for capturing Tier 2 activities was not implemented for 2013-14

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
		individuals	
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
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.	No - Analysis of participant's who have received second plans will be included in the financial sustainability report. This analysis will become more meaningful as the Scheme progresses.
n/a	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	No. The data item previously being used to report this measure was reviewed and deemed not meaningful. Work is underway to better report against this measure.
n/a	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.	No- The relevant grants (sector development fund) have been transferred to the Department of Social Services.

3. Community Inclusion

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
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

Measure as indicated in Integrated Performance Framework	Title	Brief Description	Included in 2015-16 Q1 report?
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.