Here are some examples and case studies to help explain the different ways CFPs can work.

Examples

Pooling supports

This is a participant-led example.

Jeannie has a son called Marko, an NDIS participant with autism. They live in a capital city. Marko likes to play soccer and join activities with his peers. Jeannie recently enrolled Marko in an after-school soccer activity.

When she enrolled Marko, Jeanie believed the activity would:

- be good for teenagers with disability
- provide extra supports for kids with higher needs like Marko.

Jeannie took Marko to the activity three times but unfortunately the coach seemed to be having difficulties engaging with Marko. Jeannie felt the coach and the activity were not suited to help build Marko’s social and independence goals.

Jeanie wondered how she could get Marko the supports he needed. Jeanie asked other families if they were having the same problems. Jeanie found 10 families who were having the same issues as her and Marko.

Jeanie spoke to the families about using the Coordinated Funding Proposal process to help them find a provider who could give them the supports their children need. They decided to form a group and try using the CFP process.

The families put together a description of the supports they wanted, which included the time and date they want the activity, a location, the expected qualifications of the provider and any of the accessibility needs of their children.

The group approached three providers and asked them to provide a quote to deliver supports for their children. The families reviewed the quotes and selected a provider who agreed to provide the support.

A CFP can be helpful when a group of participants want to purchase supports together. The pooling of NDIS funds has been used successfully to help bring supports to participants in various locations around Australia.

Bundling

This is a participant-led example.

Byron lives in a regional town. Byron lives in his own house, manages his own NDIS plan and likes to live as independently as possible. Byron requires multiple supports including physio and speech therapies. Byron also likes to have someone come to his house once a week to help with domestic care, cleaning and meal preparation.

Byron has had trouble finding providers who can supply the supports he needs and heard that he can use the CFP process to bundle his supports to find a single organisation who can deliver a range of his support needs.

Byron puts together a description of the supports he wants to purchase and approaches several providers and asks them to quote for the delivery of all his support requirements.

Byron finds that providers are more interested in providing a bundle of supports as it is more viable and cost effective for both Byron and the provider. Byron chooses the provider that offers the best value for money while still providing a quality service that meets his needs.

A CFP can be helpful where a participant needs several different supports. In this situation, a participant can choose a provider who can deliver the mix of supports they need. The bundling of supports is another way participants can use a CFP to get the supports they need to achieve their goals.

Support coordinators

This example is led by a support coordinator.

Priyanka is a support coordinator who lives and works in a very remote community. The community is 550kms from the closet regional town. The community is not accessible during the wet season.

During the wet season the only way people can enter or leave the community is by plane. The participants in the community told Priyanka they would like to spend some time on country and visit a waterhole that only appears during the wet season, but they need some support to do this activity.

Priyanka is an active support coordinator who works hard to attract providers to her community. Priyanka heard that she could use a CFP process to pool the supports of the participants, to share the costs associated with receiving supports.

Priyanka talks to the participants about CFPs and asks if they would be interested in pooling their NDIS funds to share the costs associated with getting back to country. The participants think the CFP is a good idea and form a CFP group, with Priyanka as their team leader.

Priyanka and the CFP group get together and write a description of supports that outlines how and when they want the back to country activity to happen. The participants understand that the extra costs associated with the activity (like travel) will be shared across all of their plans.

Priyanka sends the description of supports to two providers in the closest regional town, 550km away, and to a local organisation based in the community, and asks them all to provide a quote.

The CFP group comes together again to discuss the quotes and decides the local community organisation can provide the best support. They decide to get the local organisation to deliver the activity. Priyanka informs that provider the participants have chosen them to deliver the support. The provider works with the participants to put in place service agreements.

A CFP can be helpful when a group of participants want to purchase supports together. The pooling of funds can help local organisations to understand how they can be a part of the disability support sector.

Not-for-profit

This example is led by a not-for-profit.

Got your Back, an advocacy organisation focused on helping people with a common disability in the Northern Territory, recognises that a number of their clients in various remote communities have a shared set of needs that aren’t currently being serviced.

Members from the advocacy organisation speak to their clients, their support coordinators and support networks about using the CFP process to bring providers to their communities to deliver the supports the participants require.

- The advocacy group brings together a group of clients with similar needs who live in the same community and offers to be the team leader of the CFP group.
- The advocacy group approaches a list of providers with a description of the various supports the CFP group requires.
- Together, the CFP group decides upon a provider, who then agrees to provide the supports.

Providers

This is a provider-led example.

The Can Do cooperative is made up of a group of five different organisations who provide a range of NDIS supports across the state. The cooperative recently carried out an internal workforce audit, revealing the members of the cooperative had the capacity to provide various supports for up to 250 participants, in addition to their current workload.

Although the cooperative advertised their available capacity through various online groups and newspapers, they were unable to identify and connect with new participants who needed supports. The Can Do cooperative decided to reach out to a local support coordinator to see if they could help to identify participants needing supports. The support coordinator was happy to engage with the Can Do cooperative and mentioned they were in the process of initiating a CFP with their support coordination network. The support coordinators had been working to form a CFP group.

The participants they were working with had various support needs and were having troubles attracting providers into their town. The support coordinators supported the CFP group to put together a description of the supports and approached the consortium to provide quotes that covered their support needs. Through the CFP process the participants engaged a number of different cooperative members to provide their supports. The cooperative of providers enable the participants to approach a number of providers with one description of supports and ask them for a quote.

More information

For more information about CFPs, email cfp@ndis.gov.au or call the NCC on 1800 800 110.

Case studies

Broome

Following the exit of a major orthotics and prosthetics (O/P) provider from a very remote region, the NDIA considered options for how to ensure NDIS participants in the area could receive the O/P supports they need. The NDIA approached support coordinators representing NDIS participants who needed O/P supports and established a CFP group with support coordinators.

In consultation with participants, the support coordinator CFP group invited four O/P providers to submit a quote to provide the supports outlined in a scope of work request. Three of the providers

were from a capital city and one was based in the region.

Based on the pricing and service offerings outlined in their quotes, the CFP group chose the locally- based provider to deliver the supports. The provider completed functional assessments and supplied quotes for each participant's specific O/P needs.

The CFP project ran for approximately six months, during which time 10 participants received their orthotics and prosthetics supports from the chosen provider. The final number of participants receiving O/P was lower than originally identified, due to participants being uncontactable or choosing to receive supports through other providers.

The CFP helped the provider establish their service offering in Broome. Since the closure of the CFP, the provider expanded their service offering to the other main regional towns across the Kimberley and continues to connect with NDIS participants and m their orthotics and prosthetics needs. The provider has expanded their services into remote NT and SA. Now, participants in various remote and very remote regions are able to receive O/P supports from this provider.

Tiwi Islands and West Arnhem

The NDIA assisted local support coordinators in the Tiwi Islands and West Arnhem to form a CFP group and initiate CFPs for 39 participants requiring speech pathology supports. Two CFP projects in the two locations were run in tandem as the support coordinators working in both locations were the same. The CFP working group, in consultation with the participants, invited six providers, three in each location, to submit a quote to provide the supports outlined in the scope of work request.

Based on the pricing, service offering and cultural competency outlined in their responses, the CFP group selected two providers to deliver the supports.

Improving confidence in remote services

The NDIA has worked with support coordinators in a number of remote and very remote communities to use CFPs to bring NDIS services into communities.

In one remote community, a CFP was used to deliver allied health assessments to a group of children. One of these children, 'Maya', is a 10 year old who has been an NDIS participant for two years but due to her location and socioeconomic situation, has been unable to travel with her family into town and receive an allied health assessment. Maya goes to school most days and while the

teacher was doing their best to work with Maya, she was struggling to communicate her needs and was becoming frustrated. There are a number of NDIS participants like Maya in their community and surrounds.

Maya's support coordinator decided to engage with other support coordinators in the region to form a CFP group. The group was made up of Maya and 7 other participants. The CFP group, with help from their support coordinators, approached three different organisations who can provide multidisciplinary therapy supports and asked them to provide a quote to carry out holistic assessments for Maya and the seven other participants.

By grouping together the costs of travel and accommodation, the multidisciplinary teams could see multiple participants during the visit, making it a cost effective and efficient trip. The CFP group received the quotes and made a joint decision on which provider they preferred.

With Maya's family's consent her assessment was shared with Maya's teacher which helped them implement the strategies outlined in the report. Now Maya feels like she can be part of the class and communicate her needs. This has made being in the classroom a more enjoyable experience for Maya and Maya is more open to learning and expanding her language skills.

More information

For more information about CFPs, email cfp@ndis.gov.au or call the NCC on 1800 800 110.

This page current as of
3 May 2026