Quality Assurance and Safeguards Working Arrangements for the Trial of the NDIS in New South Wales

As agreed between the National Disability Insurance Agency and New South Wales

As at 24 November 2014
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**Note:**  
The Quality Assurance and Safeguard Working Arrangements for the Trial of the NDIS in NSW have been updated to reflect new requirements under the NSW Disability Inclusion Act 2014 and Disability Inclusion Regulation 2014 which commenced on 3 December 2014. These requirements are outlined in section 5; section 6: page13; and Appendix 1: pages 16-17 of this document.
1 Background

Part 3 of the NDIS Act (2013) requires certain service providers to be registered with the National Disability Insurance Agency (the Agency).

Part 3 of the NDIS Act provides that the NDIS rules may make provision in connection with the approval of persons or entities as registered providers of supports.

With regard to compliance with prescribed safeguards and quality assurance standards and procedures, Clause 25 of the Bilateral Agreement between New South Wales and the Agency dated 7 December 2012, states that for trial:

- The existing New South Wales quality assurance and safeguards framework as set out in Schedule A will apply in the Hunter trial site as it applies to the relevant new and existing funded client support programs for the trial.
- New South Wales will identify details of the existing client support programs in the Hunter trial site and provide this information to the Agency for the purposes of registering providers.
- A range of existing and new safeguards will minimise the risk of harm to NDIS participants in the Hunter trial area, protect their right to be safe, and empower them to achieve choice and control over their lives, including in guardianship cases, where alternative decision making arrangements are unavailable, and including privacy protections and child protection.
- NDIS participants will have access to a range of NSW complaints mechanisms, with provision for complaints to be made to the Agency, the Commonwealth’s Administrative Appeals Tribunal, the NSW Ombudsman in relation to providers of supports, the Health Care Complaints Commission and any other NSW or Commonwealth body or tribunal as appropriate.
- The Agency will establish policies and procedures for employment probity checks for its own staff, the handling of allegations of abuse and neglect of NDIS participants, and notification to the NSW Government of serious complaints about service providers that it funds.

This Schedule acknowledges and sets out the agreed working arrangements between New South Wales and the Agency to ensure appropriate management and monitoring against the existing New South Wales quality assurance and safeguards framework set out in Schedule A of the Bilateral Agreement for NDIS trial between the NSW Government and the Agency. The agreement pertains to the Hunter area trial site only or for the period 1 July 2013 to 30 June 2016.
2 Guiding Principles

The Agency is working to ensure high quality services for people with disability in a choice and control environment. The Agency will ensure that processes for disability service providers in interacting with the Agency are not overly arduous but that they do ensure appropriate standards for individuals particularly where possible risk for the individual is identified.

Accordingly, the following arrangements during trial have been agreed between New South Wales and the Agency to:

• ensure that the strengths of the existing quality assurance and safeguards systems are recognised;
• provide a consistent framework and requirements for service providers operating in the Hunter trial site and other locations across New South Wales; and
• reduce the administrative burden on NSW funded service providers operating in the Hunter trial site as well as other locations across New South Wales by streamlining compliance and administrative processes.

3 Working Arrangements

3.1 Arrangements for existing Ageing, Disability and Home Care (ADHC) operated and funded service providers

Existing ADHC funded service providers are required to comply with the terms of their Funding Agreement including all relevant legislation, operational policies and guidelines (Appendix 1). The conditions in that Agreement include:

• having a commitment to person centered service delivery and establishment of arrangements to individualise client supports;
• demonstration of sound governance;
• having systems in place for ensuring probity in employment of all staff;
• meeting obligations for reporting of serious incidents; subcontracting of services and meeting privacy obligations;
• requiring a quality management system and undertaking third party verification to confirm organisational performance against the NSW Disability Service Standards (NSW DSS);
• in the case of ADHC funded community care (previously Home and Community Care (HACC) Program) service providers, compliance with the Community Care Common Standards until 30 June 2015. From 1 July 2015, these service providers will be required to implement a quality management system (if not already in place) and undertake third party
verification to confirm organisational performance against the NSW Disability Service Standards (NSW DSS);

- having a complaints management system;
- complying with all financial reporting and information disclosure requirements, and
- meeting all relevant legislation, operational policies and guidelines as required for the services funded under the Agreement.

ADHC is in the process of updating its purchasing arrangements. In future, new applicants will need to provide evidence against consolidated assessment criteria for new providers (Appendix 2) to demonstrate capacity to meet the requirements under the Funding Agreement outlined above, in addition to:

- Financial viability
- Demonstrated experience in the delivery of nominated disability supports
- Proposed and current service models and implementation strategies for new services.

The Agency will register providers to deliver supports to people with disability in receipt of NDIS packages in accordance with the NDIS Rules – Rules for registered providers of supports (Appendix 3).

The Agency will advise all current ADHC funded service providers delivering services in the trial location that the organisations’ existing funding relationship with ADHC will lead to automatic approval of registration for the NDIS on

- completion of the National Disability Insurance Agency Provider Registration form and
- agreeing to the Agency’s Terms of Business (Appendix 4).

All funded ADHC providers operating in the trial site and delivering services set out in Appendix 5 Part A and B are required to continue to meet the relevant standards and the criteria set out in Appendix 2.

3.1.1 Arrangements for ADHC funded service providers to expand service provision in trial site

Existing ADHC funded service providers who wish to deliver new supports and/or expand delivery into the trial site will need to apply directly to the Agency for registration of expanded scope, such as additional supports and/or location. However a streamlined process of registration, recognising their existing funding relationship with ADHC will also be available.

3.2 Arrangements for new providers of disability supports

New service providers delivering disability supports in the trial site will apply directly to the Agency for registration. New providers are those not funded by NSW (ADHC) or a recognised Commonwealth administered program as determined by the Agency.
All providers of disability supports identified at Attachment 5 will be required to meet the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business (Appendix 3 & 4), relevant legislation, professional requirements and industry code of practice, where applicable.

New providers of disability supports identified at Appendix 5 Part B will also be required to comply with the NSW consolidated assessment criteria (Appendix 2), relevant legislation, NSW guidelines and operational policies requirements as listed (Appendix 1). To ensure the operation of a consistent quality assurance and safeguarding framework in NSW during the trial period, some providers of disability supports must demonstrate that they meet an appropriate standard of service quality and level of safeguards for NDIS participants.

The NSW consolidated assessment criteria (Appendix 2) require new providers at the time of application, to undertake a self-assessment to demonstrate the provider’s capacity to comply with the NSW DSS. The Agency will request that the provider to provide evidence of the self-assessment for the purpose of registration.

The Agency will specify as a condition of registration that a new provider(s) of disability supports identified at Appendix 5 Part B must attain independent third party verification to confirm organisational performance against the NSW DSS within 12 months of its registration.

New providers will be required to choose a third party verifier that is accredited either by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) or International Society for Quality in Health Care (ISQua).

In the process of conducting the third party verification process, the verifier is encouraged to recognise any recent accreditation/certification of other industry standards and/or audit process undertaken by the organisation as part of assessing compliance with the NSW DSS.

Service providers are required to act on the independent feedback received from the third party verifier and implement the actions within three months for any NSW DSS that are met in part or six months for standards that are unmet. On completion of the actions, service providers are required to have their full compliance with the NSW DSS verified by the third party verifier and obtain a Verification Statement. This must occur within 12 months of the organisation’s registration with the NDIS. Providers will provide a copy of their Verification Statement to the Agency. The Agency will also notify ADHC of all registered providers who attain independent verification against the NSW DSS.

Providers may also be required to provide the Agency with a full copy of the audit report, if requested by the Agency.
3.2.1 Principle of mutual recognition

The Agency will recognise that where an organisation has attained independent third party verification against the NSW DSS, they will be deemed to meet the requirements of the proposed revised National Standards for Disability Services.

Pending further development of and transition to a nationally consistent risk-based quality management framework, ADHC and the Agency will adopt the principle of mutual recognition of other jurisdictional quality assurance systems and service standards for disability services where these align to the proposed revised National Standards for Disability Services. The mutual recognition principle aims to provide a consistent quality assurance environment to support the growth and development of an effective and viable disability provider market and reduce regulatory burden on service providers operating across jurisdictions during the NDIS trial.

3.3 Arrangements for other existing New South Wales providers

The Agency may be required to enter into MOUs or some other arrangement with other New South Wales departments, authorities or agencies, as applicable, to ensure mechanisms for the timely disclosure of information relating to complaints and serious incidents, as required, are in place.

3.4 Commonwealth Funded Disability Services

3.4.1 Arrangements for existing providers of Commonwealth funded services during trial

Existing Commonwealth disability services registration and funding arrangements will be recognised by the Agency.

3.4.2 Arrangements for existing Commonwealth funded services to expand their services

If current Commonwealth funded providers intend to expand support types they will need to apply directly to the Agency for registration of expanded scope, such as additional supports and/or location.

3.5 Arrangements for other new providers during trial

New providers not funded under existing ADHC or Commonwealth arrangements and delivering services under Appendix 5 Part A will register directly with the Agency. The NDIS Act (2013) sets out the process for registration of providers. The Act requires that the CEO must be satisfied that an applicant meets criteria prescribed by the rules. For registration with the Agency, providers must:

- Have an ABN;
• Have an account with a financial institution;
• Agree to be bound by the Agency’s Terms of Business;
• Comply with work health and safety laws;
• Have mechanisms to ensure applicant and staff compliance with laws that are subject to criminal penalties, as they relate to the provision of, or management of, funding of supports;
• Be suitable entities to provide the kinds of supports, or to manage funding of supports given their qualifications, approvals, capacity and experience.

4 Complaints Management and Serious Incident Reporting

4.1 Existing arrangements – ADHC funded providers
Existing ADHC funded service providers are required to establish and publish the existence of a documented complaints process which is used to deal with any complaints received in relation to the delivery of services.

ADHC funded service providers on request must provide access to or copies of their complaints register; and all copies of all correspondence and other material in connection with any complaints must be kept for at least 7 years (or as otherwise required by Law).

Existing ADHC funded service providers are required to comply with relevant ADHC policies and guidelines and all legal requirements relating to the reporting, documenting and dealing with serious incidents (including emergencies, deaths, assaults or abuse, suspected instances of children or young people being at risk and incidents that impact the safety of people) at Appendix 1.

Existing ADHC funded service providers are also subject to quality controls such as monitoring and complaints oversight by the NSW Ombudsman and for supported accommodation services, the Official Community Visitors Scheme.

4.2 Arrangements for disability support providers in the trial site
The Agency will require all providers providing disability supports to comply with requirements set out in the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business (Appendix 3 & 4) for the management of complaints and reporting of serious incidents in relation to the delivery of services.

In addition, to ensure appropriate service and system level safeguards, the Agency will require new disability providers providing supports as identified at
Appendix 5 Part B to comply with the relevant NSW policies and guidelines and all legal requirements relating to the management of complaints and reporting of serious incidents to the Agency should they occur, such as the death of a client supported through the service (Appendix 1).

The New South Wales Government has approved amendments to the Community Services (Complaints, Reviews and Monitoring) Act 1993 (CRAMA) to facilitate NDIS participants' access to safeguards under the CRAMA, effective 1 July 2013. Specifically, the effects of the amendments are:

- NDIS participants will be able to make complaints about service providers to the Ombudsman New South Wales;
- The Ombudsman New South Wales will be able to monitor and review services provided by service providers to NDIS participants;
- Official Community Visitors will be able to visit NDIS participants living in an accommodation service if in full-time care of a service provider;
- The death of an NDIS participant who was living in residential care provided by a NDIS service provider will be able to be reviewed by the Ombudsman New South Wales.

4.3 National Disability Insurance Agency arrangements during trial

During trial the Agency will have a complaints management system for:

- Participants, providers or the wider community to lodge concerns about Agency staff.
- Participants or others to lodge concerns about providers registered with the NDIS.

Complaints and serious incidents concerning NDIS direct service staff or NDIS registered providers or supports provided as part of a participant’s plan will be managed by the Agency.

The NDIS complaints management system will draw upon best practice in complaints management such as the Commonwealth Ombudsman’s Better practice guide to complaint handling. The Agency will:

- Receive complaints about the Agency or supports provided through the NDIS directly or through the Complaints Resolution and Referral Service.
- Provide information on the role and responsibilities of the Ombudsman New South Wales to both participants of the NDIS and NDIS registered service providers.
- Use data from the complaints and review process to examine policy and practices to improve the delivery of the scheme.
- Report on the nature of these complaints and the changes made in response to these processes in the Agency annual report and other reports agreed under the Integrated Performance Reporting Framework.
• The Agency will have serious incident reporting procedures for providers to ensure that affected participants are supported in a timely and effective manner and that these incidents are appropriately addressed by the provider.

• Reports of serious incidents can also be made through the National Disability and Abuse and Neglect Hotline.

• The Agency will establish arrangements for service provision to ensure that participants’ needs will be managed in line with the supports agreed in participants’ plans or determined as a result of incident investigation and resolution.

• The Commonwealth Ombudsman is the external complaints mechanism for Commonwealth government agencies. Complaints against the Agency can be directed to the Commonwealth Ombudsman who has the power to investigate complaints.

• Work in conjunction with other existing Commonwealth and State Government complaints management and incident management systems to provide an integrated approach for participants.

4.4 ADHC role in complaints during trial

In relation to ADHC, this agreement will allow for:

• Complaints and serious incidents raised with the Agency with respect to the provision of disability supports provided by ADHC funded service providers under an ADHC Funding Agreement to be referred to ADHC.

• ADHC to investigate a complaint or serious/critical incident when:
  a complaint has been made in relation to ADHC funded services that ADHC considers material and an agreed resolution to the complaint has not been established; or
  a regulator or other public authority has made a recommendation in relation to the delivery of ADHC funded services and the service provider has not implemented the recommendation.

• The investigation undertaken by ADHC to be formal or informal and the level of investigation will be informed by the risk that ADHC considers for people that are supported through the funded services, and the risk to the use of public resources.

• Any complaint or serious incident raised with ADHC concerning the provision of supports provided by a NDIS registered provider(s) or as part of participants’ plans under the NDIS to be referred to the Agency for management.

4.4.1 Sharing of complaints and serious incidents

The Agency and NSW will work together to resolve complaints and incidents promptly and collaboratively. This will include immediate contact and action if required to ensure continuity of participants’ supports and meetings between the Agency and NSW departments as required will occur to share feedback on outcomes of complaints and serious incidents within the trial site.
This will ensure that complaints and incidents are resolved effectively and information shared between NSW and the Agency to facilitate continual improvement in service delivery in the trial, and to provide NSW with information on service providers that may be working in other areas as well as in the Hunter trial site.

5 Disability Inclusion Act 2014 and Disability Inclusion Regulation 2014

The Disability Inclusion Act 2014 and regulation commenced on 3 December 2014 and replaces the Disability Services Act 1993. The new Act takes a human rights approach to people with disability, with the Act’s objects, principles and definition of disability broadly aligning with the United Nations Convention on the Rights of Persons with Disabilities. The Act introduces new requirements for FACS funded disability service providers in NSW, which, also apply to existing and new NDIA registered service providers identified at Appendix 5 Part B by virtue of these working arrangements.

These new requirements include key safeguards to uphold the rights of people with disability to be safe from harm.

Employment screening

Existing and new NDIA registered providers must screen new and existing staff, volunteers, students, self-employed people/contractors and board members for NGOs, who work directly with people with disability before they are employed or appointed. These new requirements apply to all new staff from 3 December 2014 and all existing staff by 1 December 2015.

Service providers must undertake at least one referee check and criminal record check for these people prior to employment (for new staff) and then subsequent criminal record checks at least once every four years. A person who has been convicted of a “prescribed criminal offence”, as detailed in the Act, is not allowed to work directly with people with disability. These offences include:

- murder
- a prescribed sexual offence as defined under the Criminal Procedure Act 1986 (or equivalent law in other states or territories)
- specified other assaults under the Crimes Act 1900 (or equivalent law in other states or territories) for which the person was sentenced to two or more years’ imprisonment

However, where a person has been convicted of one of the outlined offences (excluding a prescribed sexual offence) in the past, but has not received any further convictions for an outlined offence in the 10 years before the criminal record check, excluding time served in prison for the offence, employers have the discretion to consider them for employment.
Reporting serious incidents of abuse and neglect

The Act makes changes to the Ombudsman Act 1974. These changes mean that from 3 December 2014, FACS funded and existing and new NDIA registered providers of disability supported group accommodation and centre based respite supports must report to the NSW Ombudsman all allegations and convictions of reportable serious incidents involving abuse and neglect of people with disability in their supported group accommodation services or respite centres. The head of the accommodation provider must notify the NSW Ombudsman within 30 days of becoming aware of the incident.

Further information regarding the specific requirements relating to these new safeguards including applicable policies and guidelines is outlined in Appendix 1.

6 Safeguards

People using disability services in NSW are also supported by safeguards at the disability service system level as well as general safeguards available to all members of the community. The range of safeguard mechanisms currently in place in New South Wales applicable to users of disability supports as identified at Appendix 5 in the Hunter Trial area will continue to support people during the transition to the NDIS.

In addition to the New South Wales Quality Assurance Framework and complaints mechanisms, service providers must comply with all relevant legislation, policies and guidelines that provide safeguards to users (Appendix 1).

The key requirements are as follows:

**Child Protection**
- Reporting and responding to actual or potential risk of harm to children and young people receiving services.
- Supporting young people in out-of-home care

**Health**
- Monitoring and supporting the health needs of people receiving services, including nutrition, swallowing, medication handling, epilepsy and palliative care.

**Privacy**
- Complying with any directions required under the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records Information Privacy Act 2002 (NSW) or in accordance with Information
Protection Principles, Health Privacy Principles or a relevant privacy code of practice.

**Probit in Employment**
- Employment checks of all employees and volunteers, including criminal record and other probity checks, working with children checks and having adequate employment screening policies and risk plans in place.
- Service providers must not engage a person to work directly with people with disability unless they believe the person is suitable to be involved in providing supports and services to people with disability. This includes a requirement to undertake checks when employing or appointing a person to work with people with disability. These include:
  - At least one referee check prior to employment, and
  - A criminal record check prior to employment and at least once every four years.

- Service providers must conduct these checks for all people who work directly with people with disability in a way that involves face to face or physical contact, including:
  - employees
  - volunteers
  - students undertaking training (other than school students on work experience)
  - self-employed person, contractor or subcontractor
  - Board members

**Serious Incident Reporting**
- Incidents of abuse or neglect must be reported by all supported group accommodation services, including centre-based respite services to the NSW Ombudsman.
- Service providers must ensure staff is aware of their obligation to notify the head of the organisation about an incident as soon as the staff member becomes aware of it.
- The head of the disability accommodation or centre-based respite provider must notify the Ombudsman within 30 days of becoming aware of the incident.

**Client Death**
- Reporting, documenting and responding to client death.

**Supporting people**
- Requirements when providing behaviour support
- Managing risks that may arise while providing support to clients
- Responding quickly and appropriately to allegations of abuse
- Supporting people to make decisions about their lives.

**Fire Safety**
• Complying with fire safety regulations required by NSW legislation.

Financial
• Including people with disability in decisions regarding their finances and wills.

7 Review Process

These working arrangements will be reviewed and refined if necessary during trial, initially at 6 months and at a minimum annually.
Appendix 1: Requirements for Providers of Disability Supports

Existing ADHC funded and new providers of disability supports as identified at Attachment 5 must ensure that services are provided in compliance with:

- the Disability Inclusion Act 2014 and Disability Inclusion Regulation 2014 (NSW);
- all the prevailing laws of NSW and Australia;
- applicable codes of conduct, professional standards or quality assurance standards; and
- NSW Disability Services Standards applicable to disability supports.

These include the following:

**Performance**

<table>
<thead>
<tr>
<th>Policy</th>
<th>Quality Policy</th>
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<tbody>
<tr>
<td>Brief Description</td>
<td>NSW Quality Framework for Disability Services is built on the National Quality</td>
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<td></td>
<td>Framework for Disability Services in Australia and is based on the NSW Disability</td>
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<td>Service Standards (NSW DSS), which align with the proposed revised National</td>
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<td></td>
<td>Standards for Disability Services.</td>
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<td>All providers must:</td>
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<td></td>
<td>• comply with the Ageing, Disability and Home Care (ADHC) Quality Framework</td>
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<td></td>
<td>Policy;</td>
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<td></td>
<td>• have a quality management system in place; and</td>
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<td></td>
<td>• have their compliance with the NSW Disability Service Standards verified</td>
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<td></td>
<td>through an independent third party.</td>
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<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
</tr>
</tbody>
</table>

**Guidelines**

- NSW Disability Services Standards (NSW DSS) and Standards in action manual

Brief Description

The NSW Disability Services Standards (NSW DSS) form the basis of ADHC’s quality requirements and have been updated to reflect contemporary practices that place people with disability at the centre of decision making and choice about their supports and services. The NSW DSS have been streamlined and align to the proposed revised National Standards for Disability Services.

Where an organisation has attained third party verification against the NSW DSS, they will be deemed to meet the requirements of the proposed revised National Standards for Disability Services.

Who the Policy Applies To

Existing ADHC funded providers and new disability support providers.

URL

## Governance

<table>
<thead>
<tr>
<th>Policy</th>
<th>Governance</th>
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<tbody>
<tr>
<td>Brief Description</td>
<td>Services have robust governance arrangements appropriate to the size of the organisation to ensure sustainability, viability, efficiency and productivity.</td>
</tr>
<tr>
<td>Who the Policy Applies to</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
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## Probity in Employment

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<tr>
<th>Policy</th>
<th>Probity in Employment</th>
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<tbody>
<tr>
<td>Brief Description</td>
<td>Service providers have procedures in place that enable services to assess the integrity, character and honesty of prospective employees, board members, volunteers. All services have in place employment policies and procedures that allow for:</td>
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<td>• Working with Children Checks;</td>
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<td></td>
<td>• At least one referee check and a criminal record check prior to employment and then subsequent criminal record checks at least once every four years, and conduct these checks for all people who work directly with people with disability in a way that involves face to face or physical contact, including:</td>
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<tr>
<td></td>
<td>o employees</td>
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<td></td>
<td>o volunteers</td>
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<td>o students undertaking training (other than school students on work experience)</td>
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<td></td>
<td>o self-employed person, contractor or subcontractor</td>
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<td>o Board members</td>
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<tr>
<td>Who the Policy Applies to</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
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## Disability Reportable Incidents Scheme

<table>
<thead>
<tr>
<th>Guidelines</th>
<th>Disability Reportable Incidents Scheme</th>
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</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Service providers of disability supported group accommodation and centre based respite are required to notify the NSW Ombudsman of 'reportable incidents' involving people with disability.</td>
</tr>
</tbody>
</table>
Guidelines | Disability Reportable Incidents Scheme
--- | ---
Service providers must report the following incidents to the NSW Ombudsman:
1. **Employee to client incidents** of sexual assault, sexual misconduct, assault, fraud, ill-treatment or neglect
2. **Client to client incidents** of sexual and physical assault (causing serious injury or involving the use of a weapon), or that forms a pattern of abuse
3. **Contravention of an AVO** taken out to protect a person with disability
4. **Serious unexplained injury** of a person with disability.

Who the Policy Applies To | Existing ADHC funded providers and new disability support providers.

### Client Death

<table>
<thead>
<tr>
<th>Legislation</th>
<th>Reviewable Deaths – children and young people, and people with disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Information about the deaths of children and adults with disability who, at the time of their death, were living in or temporarily absent from, residential or a licensed boarding house must be reported to the Ombudsman.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded residential care providers and new disability support residential care providers.</td>
</tr>
</tbody>
</table>

### Policy | Client Death

<table>
<thead>
<tr>
<th>Brief Description</th>
<th>Services must:</th>
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<tbody>
<tr>
<td></td>
<td>• Report deaths in accordance with legislative requirements and timeframes</td>
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<tr>
<td></td>
<td>• Co-operate with enquiries from external agencies such as Police, Ombudsman and Coroner</td>
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<td></td>
<td>• Review the circumstances of the death and implement and monitor appropriate actions arising from the review</td>
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<td></td>
<td>• Maintain and store records required to comply with the legislation and this policy</td>
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<td></td>
<td>• Maintain documented procedures for responding to the death of the person that give effect to this policy and meet the principles of this policy.</td>
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<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
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## Privacy

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<tr>
<th>Legislation</th>
<th><strong>The Privacy and Personal Information Protection ACT 1998 (NSW)</strong></th>
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<tbody>
<tr>
<td>Brief Description</td>
<td>Services are required to comply with 12 information protection principles. This includes obligations with respect to data security, data quality (accuracy) and rights of access and amendment to one’s own personal information, as well as how personal information may be collected, used and disclosed.</td>
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<tr>
<td>Who the Legislation Applies To</td>
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<tr>
<th>Legislation</th>
<th><strong>The Health Records and Information Privacy Act 2002 (NSW)</strong></th>
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<tbody>
<tr>
<td>Brief Description</td>
<td>Services are required to comply with 15 health privacy principles regarding information about a person’s disability and health/disability services provided to them. The principles cover the entire information ‘life cycle’ but also include some additional principles with respect to anonymity, the use of unique identifiers and the sharing of electronic health records.</td>
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<tr>
<td>Who the Legislation Applies To</td>
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<tr>
<th>Legislation</th>
<th><strong>The Privacy Code of Practice (General) 2003</strong></th>
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<tr>
<td>Brief Description</td>
<td>Allows departure from some privacy principles where an individual lacks capacity.</td>
</tr>
<tr>
<td>Who the Legislation Applies To</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Legislation</th>
<th><strong>The Health Records and Information Privacy Code of Practice 2005 (NSW)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Allows sharing of information with other service providers in limited circumstances.</td>
</tr>
<tr>
<td>Who the Legislation Applies To</td>
<td>Existing ADHC funded providers and new disability support providers.</td>
</tr>
</tbody>
</table>

## Child Protection

<table>
<thead>
<tr>
<th>Policy</th>
<th><strong>Child Protection Policy – Responding to Risk of Harm to Children and Young People</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Services are obliged to take reasonable care to protect children and young people against risks of harm that can and should be foreseen. All staff are to make a report to the Child Protection Helpline if they suspect a child or young person is at risk of significant harm.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers who provide services to children and young people.</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Legislation</td>
<td>Commission for Children and Young People Act 1998</td>
</tr>
</tbody>
</table>
| Brief Description        | Services are required to notify the Commission for Children and Young People when employment proceedings against an employee involving reportable conduct or an act of violence committed in the course of employment and in the presence of a child, are completed. These are matters where an employer (or professional or other body that supervises the professional conduct of the employee, the subject of the allegation), has found:  
  - reportable conduct, or  
  - that an act of violence committed by the employee in the course of employment and in the presence of a child has occurred, or there is some evidence it occurred, however the finding is inconclusive. |

<table>
<thead>
<tr>
<th>Who the Legislation Applies To</th>
<th>Existing ADHC funded providers and new disability support providers who provide services to children and young people.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legislation</td>
<td>Child Protection (Working with Children) Act 2012</td>
</tr>
</tbody>
</table>
| Brief Description             | The Child Protection (Working with Children) Act 2012 aims to protect children:  
  - by not permitting certain persons to engage in child-related work, and  
  - by requiring persons engaged in child-related work to have working with children check clearances.  

A new Working with Children Check will commence on 15 June 2013 and will apply to NDIS registered providers of support who engage workers in child-related work. |

<table>
<thead>
<tr>
<th>Who the Legislation Applies To</th>
<th>Existing ADHC funded providers and new disability support providers who provide services to children and young people.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legislation</td>
<td>Ombudsman Act 1974 (NSW)- Employment related child protection</td>
</tr>
<tr>
<td>Brief Description</td>
<td>Services must notify the NSW Ombudsman of allegations against employees that constitute sexual offences, misconduct, assault, ill-treatment, neglect and behaviour that causes psychological harm to children. Designated government and non-government agencies are required to notify the Ombudsman of such allegations arising in the course of the employee’s work or outside their work; whereas all other public authorities are covered by the Act if the allegations arise in the course of the person’s employment with the authority.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Who the Legislation Applies To</th>
<th>Existing ADHC funded providers and new disability support providers who provide services to children and young people.</th>
</tr>
</thead>
</table>
| Legislation Applies To | providers who provide:  
|-----------------------|-------------------------------------------------------------------
|                       | • substitute residential care services to children and young people;  
|                       | • child care centres or residential child care centres |
| **Guidelines**        | **Child Wellbeing & Child Protection NSW Interagency Guidelines** |
| **Brief Description** | The Guidelines outline the legislative framework for cooperative and coordinated work between government agencies, community sector agencies and families in the care and protection of children and young people. The Interagency Guidelines include agencies’ responsibilities to create safe environments and to respond to children and young people whom they suspect to be ‘at risk of harm’. |
| **Who the Policy Applies To** | Existing ADHC funded providers and new disability support providers who provide services to children and young people. |
| **Policy**            | **Memorandum of Understanding Between Community Services and Aging, Disability and Home Care on Children and Young People with a Disability** |
| **Brief Description** | Sets out the principles services must comply with regarding collaborative assessment, planning and service delivery by Community Services and ADHC in relation to any child or young person with a disability in NSW covered under the MoU. |
| **Who the Policy Applies To** | Existing ADHC funded providers and new disability support providers who provide case management for children and young people in statutory out of home care. |
| **Policy**            | **Out of Home Care: Policy to guide the provision of out-of-home care placements for children and young people with a disability** |
| **Brief Description** | The policy outlines for services:  
|                       | • The types of out-of-home care placements and supports that are available to children (aged 0-15 years) and young people (aged 16-17 years) with a disability  
|                       | • Best practice principles to guide the provision of out-of-home care placements  
|                       | • Practice guidelines for the establishment and provision of out-of-home care placements for children and young people with a disability. |
| **Who the Policy Applies To** | Existing ADHC funded providers and relevant new disability support providers who provide:  
|                       | • statutory and supported out-of-home care placements to children and young people with a disability;  
<p>|                       | • long-term voluntary out-of-home care placements to |</p>
<table>
<thead>
<tr>
<th>Policy</th>
<th>Health care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Services ensure that each person with disability, residing in an accommodation service or using a centre based respite service, is supported to be as healthy as possible by having an annual health assessment with a General Practitioner and a Health Care Plan that is implemented and reviewed regularly. When there is an observable change in the person’s health or wellbeing, staff support the person to access appropriate health services as soon as possible.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers who provide accommodation support services (including group homes and large, medium and small residential centres) and centre-based respite services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Policy</th>
<th>Nutrition and Swallowing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Services ensure that each person with disability residing in an accommodation support service or using a centre based respite centre has an annual nutrition assessment to identify nutrition and swallowing risks and eating and drinking support needs. If the person’s support and nutritional needs change or risks are identified, management plans are developed by appropriate health care professionals for immediate implementation by the service provider.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers who provide accommodation support services (including group homes and large, medium and small residential centres) and centre-based respite services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Policy</th>
<th>Palliative Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Services will support a person with disability who has been diagnosed with a progressive advanced disease or terminal illness to develop, implement and review a palliative care plan.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers who provide accommodation support services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Policy</th>
<th>Medication Handling in Community-Based Health Services/Residential Facilities in NSW - Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description</td>
<td>Guidelines for handling medication.</td>
</tr>
<tr>
<td>Who the Policy Applies To</td>
<td>Existing ADHC funded providers and new disability support providers who provide community based accommodation support services.</td>
</tr>
</tbody>
</table>
### Epilepsy Policy

**Brief Description**
Services ensure that all people with epilepsy have an Epilepsy Management Plan that is developed in consultation with a General Practitioner or neurologist and is reviewed at least once a year. A person with epilepsy and ongoing seizures can be at risk of injury during a seizure and regular audits of the person’s environment are required to minimise that risk. Specific risk management strategies are to be implemented for a person with epilepsy and ongoing seizures during any water based activity. Support staff are required to understand their role in responding to a convulsive seizure.

**Who the Policy Applies To**
Existing ADHC funded providers and new disability support providers who provide accommodation and respite support services.

**URL**

### Fire Safety Policy

**Brief Description**
Services are responsible for ensuring:
- The environment in which services are provided is safe and hazards are minimised
- All employees are familiar with all fire emergency equipment and facilities in the workplace and participate in regular fire safety programs
- Emergency management and evacuation plan and procedures are in place taking into account the support needs of people with disability
- Engagement occurs with the local community in developing fire safety procedures.

**Who the Policy Applies To**
Existing ADHC funded providers and new disability support providers.

**URL**

### Supporting People Policy

**Brief Description**
Minimum requirements for services in providing a behaviour support service to adults, children or young people with an intellectual disability.

**Who the Policy Applies To**
Existing ADHC funded providers and new disability support providers.

**URL**
| Brief Description | Services are to ensure that risks to people with disability are identified so that adverse effects on their lifestyle, health and wellbeing and safety can be prevented, minimised or eliminated. Services are required to meet their Work Health and Safety obligations to provide maximum safety for the person with disability, support staff, management, contractors, volunteers and others, whatever the situation or location. |
|-------------------|
| **Who the Policy Applies To** | Existing ADHC funded providers and new disability support providers. |
| **Policy** | Abuse and Neglect |
| **Brief Description** | Services are obliged to prevent abuse and neglect to a person in the first instance. When prevention strategies fail to protect the person, services are to recognise, respond to and report any form of abuse and neglect as appropriate. Wherever possible, people with disability are supported to understand when they are being abused and to know how to report it to the right authority. |
| **Who the Policy Applies To** | Existing ADHC funded providers and new disability support providers |
| **Policy** | Decision Making and Consent |
| **Brief Description** | Services are required to involve the person in all decisions that affect the person’s life. No other person can make decisions for a person who is 16 years and older except when the person lacks capacity to make some decisions. Services will support people to make their own decisions and family and others provide informal decision making support where it is needed. A guardian with a specific decision making function is legally appointed to make critical decisions, for example, choosing accommodation. |
| **Who the Policy Applies To** | Existing ADHC funded providers and new disability support providers |
| **Legislation** | Community Services (Complaints, Reviews and Monitoring) Act 1993 (CRAMA) No 2 |
| **Brief Description** | NSW Government has approved amendments to the Community Services (Complaints, Reviews and Monitoring) Act 1993 (CRAMA) to facilitate NDIS participants’ access to safeguards under the CRAMA including:
- NDIS participants will be able to make complaints about service providers to the Ombudsman New South Wales;
- The Ombudsman New South Wales will be able to monitor and review services provided to NDIS participants;
- Official Community Visitors will be able to visit NDIS participants living in an accommodation service if in full-time care of a service provider;
- The death of a NDIS participant living in residential care |
<table>
<thead>
<tr>
<th>Who the Policy Applies To</th>
<th>Existing ADHC funded providers and new disability support providers.</th>
</tr>
</thead>
</table>
## Appendix 2: Consolidated assessment criteria for new providers

<table>
<thead>
<tr>
<th>Reference</th>
<th>Assessment Criteria</th>
<th>Disability supports</th>
</tr>
</thead>
</table>
| **Part 1** | Administration | - Legal name  
- Australian Business Number  
- Street address  
- Postal address  
- Website details  
- Primary contact details  
- Referee details  
- Current funding from FACS Agency, NSW Health or Juvenile Justice  
- Organisation’s legal status including legal entity registration number, GST registration status  
- Registration with ACNC (if applicable)  
- Location(s) of existing services  
- Core business of the organisation/organisation’s mission statement |
|  |  | **This information is noted, not assessed** |

| **Part 2** | Financial Viability and Governance | - Undertaking to provide policies and procedures to comply with all relevant legislation and policies as referenced in the ADHC Funding Agreement (see ATT 2) within seven days at ADHC request.  
- An outline of the governance structure of the organisation, including Board qualifications.  
- Financial viability, demonstrated by two recent annual financial statements.  
- Undertaking to provide evidence of appropriate insurance to cover the organisation’s activities within seven days at ADHC request.  
- Litigation or solvency issues (including potential liabilities issues), or adverse action taken against the organization by a Responsible Authority – if issues compromise or risk the ability of the organisation to provide consistent and appropriate services under a Funding Agreement, may assess as ‘not met’ and/or request updates to inform future reassessment as the issues develop or are resolved. |
<table>
<thead>
<tr>
<th>This information is assessed as met / not met</th>
<th>Operational processes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Staff and management, including:</td>
</tr>
<tr>
<td></td>
<td>- staff supervision and support</td>
</tr>
<tr>
<td></td>
<td>- staff qualifications, training and development</td>
</tr>
<tr>
<td></td>
<td>- management structure and infrastructure support (such as human resources, accounting services etc.)</td>
</tr>
<tr>
<td></td>
<td>- awards or standard salary packages staff are paid under</td>
</tr>
<tr>
<td></td>
<td>- volunteers: approximate numbers of volunteers and functions performed by them.</td>
</tr>
<tr>
<td></td>
<td>• Evidence of processes that enable people with disability, families and carers to be involved in decision making</td>
</tr>
<tr>
<td></td>
<td>• Explanation for how the organisation supports the effective delivery of services to people with disability, their families and carers.</td>
</tr>
<tr>
<td></td>
<td>• Undertaking to provide the organisation’s policy on Workplace Health and Safety within seven days at ADHC request.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance and quality monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>• NSW Disability Service Standards - for each of the six standards, the organisation must use the Key Performance Indicator (KPI) Guide available on the ADHC website (<a href="http://www.adhc.nsw.gov.au/sp/quality/key_performance_indicator_kpi_guide">http://www.adhc.nsw.gov.au/sp/quality/key_performance_indicator_kpi_guide</a>) to undertake a self-assessment provided in Appendix A to demonstrate their capacity to comply with the NSW Disability Services Standards, AND</td>
</tr>
<tr>
<td>• Implement a quality management system (if not already in place) and attain independent third party verification to confirm organisational performance against the NSW DSS within 12 months of its registration.</td>
</tr>
<tr>
<td>• For organisations funded through the ADHC community care support program compliance with the Community Care Common (CCC) Standards will continue to apply until 30 June 2015. From 1 July 2015, these providers will be required to implement a quality management system (if not already in place) and undertake third party verification to confirm organisational performance against the NSW Disability Service Standards (NSW DSS).</td>
</tr>
<tr>
<td>• Principle of mutual recognition - where an organisation meets other jurisdictional quality assurance systems and service standards for disability services that align to the proposed revised National Standards for Disability Services, they will be deemed to meet the requirements of the NSW DSS.</td>
</tr>
<tr>
<td>• For applicants not currently funded by ADHC, outline current or previous examples of contract compliance with respect to government funded human services programs both State and Commonwealth.</td>
</tr>
<tr>
<td>• Certification with Professional bodies - provide evidence where available including status of the certification or existing accreditation.</td>
</tr>
</tbody>
</table>

If an organisation provides the information in Part 1 and meets the criteria in Part 2 (above), it can be listed as an organisation that is eligible to hold an ADHC Funding Agreement.

To be listed as eligible to provide specific services in particular locations, an organisation must wait for ADHC to announce that it is looking for new providers in that area, and must then be successful in a competitive selection process. The criteria for this process are set out in Part 3 (below). These criteria can be amended as necessary for different service types.
<table>
<thead>
<tr>
<th>Focus on Outcomes</th>
<th>Experience in service delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Overview of the service model                                                   • A detailed description of services provided within the last five years that are relevant or similar to the provision of the nominated service</td>
<td></td>
</tr>
<tr>
<td>- Aims                                                                           • Description and evidence of capability in providing services to Aboriginal and CALD communities</td>
<td></td>
</tr>
<tr>
<td>- Principles                                                                     • Consortium details (where relevant) including model, legal structure and operating protocols between members</td>
<td></td>
</tr>
<tr>
<td>- Outcomes                                                                       • Sub-contracting details and the agreements covering these arrangements</td>
<td></td>
</tr>
<tr>
<td>- Required components                                                             • Detail activities or services to be delivered</td>
<td></td>
</tr>
<tr>
<td>- Locations                                                                      • Demonstrate and detail ability, experience and commitment to meeting the current needs of service users - this involves demonstrating strategies for applying a person centred approach in the delivery of the service (including advocating on the client's behalf and making referrals to mainstream and other services), reviewing service user needs, and consideration of the needs of all service users, including Aboriginal people and people from culturally and linguistically diverse backgrounds and geographically isolated areas.</td>
<td></td>
</tr>
<tr>
<td>- Service model structure                                                         • Detail strategies and procedures which illustrate how the service in this location will identify and respond to the changing needs of service users through life stages, changing family dynamics or increased support needs</td>
<td></td>
</tr>
<tr>
<td>- Services to be provided                                                         • Demonstrate that regular monitoring and review systems are implemented for each service user and the existence of administrative arrangements that will ensure this system is met in this location for this service type</td>
<td></td>
</tr>
<tr>
<td>- Hours of operation</td>
<td></td>
</tr>
<tr>
<td>• Detail strategies and procedures which illustrate how the service in this location will identify and respond to the changing needs of service users through life stages, changing family dynamics or increased support needs</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 3: NDIS Rules – Rules for registered providers of supports

National Disability Insurance Scheme (Registered Providers of Supports) Rules 2013

National Disability Insurance Scheme Act 2013 (the Act)
The Act establishes the National Disability Insurance Scheme (NDIS).
People who are participants in the NDIS will be assisted to develop a personal, goal-based plan about how they will be provided with general supports and reasonable and necessary supports.
The NDIS will respect the interests of people with disability in exercising choice and control about matters that affect them.

These Rules are made for the purposes of sections 70 to 73 of the Act.
These Rules are about registered providers of supports—how they become approved and the requirements that apply to them. When the Agency manages the funding of supports under a participant’s plan, only registered providers can provide those supports (in other cases, anyone can provide the supports). These Rules also apply to the registration of registered plan management providers.
These Rules commence on the day they are registered.

The Hon Jenny Macklin MP
Minister for Families, Community Services and Indigenous Affairs
Minister for Disability Reform

14 June 2013
## Contents

**National Disability Insurance Scheme (Registered Providers of Supports) Rules 2013**

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</table>
Part 1 What these Rules are about

1.1 Each participant in the NDIS launch will have a plan, prepared in conjunction with the participant and approved by the CEO of the Agency. Among other things, a participant’s plan sets out the supports that will be funded for the participant.

1.2 For each participant, someone (or more than one person) will be identified as managing the funding for supports under the participant’s plan. Funding can be managed by the participant, the Agency, a plan nominee, or a registered plan management provider.

1.3 Unless a participant’s plan is managed by the Agency, there is no restriction on who may provide supports under the plan. Participants are able to exercise choice about the selection of their providers. It is only when funding for a participant’s supports is managed by the Agency that the supports must be provided by a registered provider of supports: see subsection 33(6) of the Act. Where the funding is managed by the Agency, the participant will select the registered providers who will provide their supports, independently or with assistance.

1.4 A person or entity can apply to be a registered provider of supports. An applicant can seek approval to manage the funding for supports under plans (a registered plan management provider), to provide supports, or both. Where an applicant seeks to be both a provider of supports and a registered plan management provider there must be mechanisms in place for dealing with conflicts of interest. Applications are made to the CEO of the Agency and are to be accompanied by the information and documents that the CEO requires (for example, information about the supports that the applicant proposes to provide and the applicant’s experience in providing those supports).

1.5 A provider’s registration can be revoked on a number of grounds. One is that the provider no longer meets the approval criteria.

1.6 These Rules set out the criteria for approval as a registered provider and the requirements with which a registered provider is to comply.

1.7 The Act sets out a number of objects and principles for the NDIS. The following are particularly relevant to these Rules:

Objects

(a) to enable people with disability to exercise choice and control in the pursuit of their goals and the planning and delivery of their supports;

(b) to promote the provision of high quality and innovative supports that enable people with disability to maximise independent lifestyles and full inclusion in the mainstream community;
**Principles**

(c) people with disability should be supported to participate in and contribute to social and economic life to the extent of their ability;

(d) people with disability should be supported to exercise choice, including in relation to taking reasonable risks, in the pursuit of their goals and the planning and delivery of their supports;

(e) people with disability have the same right as other members of Australian society to respect for their worth and dignity and to live free from abuse, neglect and exploitation;

(f) people with disability have the same right as other members of Australian society to pursue any grievance;

(g) people with disability have the same right as other members of Australian society to be able to determine their own best interests, including the right to exercise choice and control, and to engage as equal partners in decisions that will affect their lives, to the full extent of their capacity;

(h) people with disability should have their privacy and dignity respected;

(i) innovation, quality, continuous improvement, contemporary best practice and effectiveness in the provision of supports to people with disability are to be promoted.

1.8 These Rules also are intended to give effect to the principle that regulation should minimise the administrative and regulatory burden on registered providers of supports and prospective registered providers of supports and to reduce barriers to entry to the NDIS.
Part 2  Outline of these Rules

2.1 When a person or entity (the applicant) applies to be a registered provider of supports, the CEO of the Agency considers the applicant against a set of criteria. Those criteria are set out in Part 3.

2.2 Part 4 sets out some requirements that apply to registered providers of supports. The requirements are that providers notify the Agency if particular things happen, such as the provider being the subject of a complaint to, or an adverse action by, a responsible authority.

2.3 Part 5 sets out circumstances in which a provider’s approval as a registered provider of supports can be revoked.

2.4 Part 6 deals with other matters, including interpretation of these Rules.
Part 3  Criteria for approval as a registered provider of supports

3.1 Registered providers of supports are approved by the CEO of the Agency. There are 2 steps to be fulfilled for approval to be given.

3.2 First, the person or entity seeking approval (the applicant) makes an application and provides supporting information. Applications are made in writing, in the approved form (if there is one), and are to include or attach any information or documents that the CEO requires.

3.3 Second, the CEO considers the application and any supporting information against the criteria set out in this Part.

3.4 If the CEO approves the applicant as a registered provider, the CEO will issue a written instrument to that effect.

3.5 An approval can be limited in scope. It can cover a particular class of supports, or a particular class of persons. The instrument of approval may also provide for the approval to expire on a particular day.

3.6 The criteria for approval prescribed in this Part continue to be important after an applicant is approved as a registered provider as the failure to continue to fulfil the criteria is a basis on which a registered provider’s approval can be revoked. Accordingly, even though each criterion is expressed to apply to an applicant, the criteria continue to apply to a person or entity after being registered.

Paragraphs 3.1 to 3.6 summarise Part 3 of Chapter 4 of the Act.

The criteria

3.7 The applicant is to have:

(a) an ABN (ABN means an Australian Business Number, as shown in the Australian Business Register established under the A New Tax System (Australian Business Number) Act 1999); and

(b) an account with a financial institution (paragraph 6.4 defines financial institution).

3.8 The applicant is to declare its agreement to be bound by the Agency’s terms of business (as in force from time to time).

3.9 The applicant is to declare that it complies with, and has mechanisms in place to ensure ongoing compliance with, all employment and workplace health and safety laws that apply to the applicant (for example, if the Fair Work Act 2009 applies to an applicant, the applicant must not represent to an individual that his or her contract of employment with the applicant is, or would be, a contract for
services under which the individual is engaged as an independent contractor: see subsection 357(1) of the *Fair Work Act 2009*).

3.10 The applicant is to declare that it has mechanisms in place to ensure that any contractors engaged for the provision of supports or the management of funding for supports comply with all employment and workplace health and safety laws that apply to the contractors in that provision or management.

3.11 The applicant is to declare that the applicant and its staff comply with, and that the applicant has mechanisms in place to ensure ongoing compliance with, all laws:

(a) that apply to the applicant and its staff in the provision of supports or the management of funding for supports (as the case requires); and

(b) the contravention of which is punishable by a criminal penalty.

3.12 For an applicant for registration in relation to the provision of supports—the applicant is to be a suitable person or entity to provide the kinds of supports that they propose to provide, having regard to the following considerations:

(a) the qualifications and approvals relevant to the provision of those kinds of supports held by the applicant and the applicant’s staff (paragraph 6.4 defines *approvals*);

(b) the applicant’s capacity to provide those kinds of supports;

(c) the applicant’s experience in providing those kinds of supports;

(d) if the applicant proposes to provide supports to a particular participant—whether that participant has stated that he or she considers the applicant to be suitable to provide those supports.

3.13 For an applicant for registration in relation to managing the funding for supports under plans—the applicant is to be a suitable person or entity to manage such funding, having regard to the following considerations:

(a) the qualifications and approvals relevant to the management of funding for supports held by the applicant and the applicant’s staff (paragraph 6.4 defines *approvals*);

(b) the applicant’s capacity to manage the funding for supports;

(c) the applicant’s experience in managing the funding for supports;

(d) if the applicant proposes to manage funding for a particular participant—whether that participant has stated that he or she considers the applicant to be suitable to manage that funding.
3.14 To avoid doubt, if a person or entity applies to be a registered provider of supports in relation to both the provision of supports and managing the funding of supports under plans, the criteria in both of paragraphs 3.12 and 3.13 apply.

Conflict of interest

3.15 If an applicant seeks approval in relation to both the provision of supports and managing the funding for supports under plans, the applicant is to have mechanisms in place for dealing with conflicts of interest when performing both of those roles in relation to the same participant.

Paragraphs 3.7 to 3.15 prescribe criteria for paragraph 70(1)(d) (and 72(1)(a)) of the Act.
Part 4  Requirements for registered providers

4.1  A registered provider of supports must notify the Agency if:

(a)  a complaint has been made to a responsible authority about the standard, effectiveness or safety of the provision of supports by the provider, or an employee or contractor of the provider, and the authority has taken action as a result of the complaint (other than a decision not to investigate the complaint); or

(b)  the provider, or an employee or contractor of the provider, has been the subject of adverse action by a responsible authority relating to their provision of supports or management of the funding for supports, regardless of whether those supports are provided or funded under the Act; or

(c)  the provider, or an employee or contractor of the provider, has been the subject of adverse action by a responsible authority in respect of an approval held by the provider or the employee or contractor (paragraph 6.4 defines approval); or

(d)  the provider becomes an insolvent under administration; or

(e)  the provider becomes aware that it has failed to comply with an employment or workplace health and safety law that applies to the provider (including, for example, the Fair Work Act 2009 if that Act applies to the provider); or

(f)  the provider becomes aware that a contractor engaged for the provision of supports or the management of funding for supports has failed to comply with an employment or workplace health and safety law that applies to the contractor in that provision or management; or

(g)  the provider becomes aware that the provider or an employee or contractor of the provider has failed to comply with a law of a kind mentioned in paragraph 3.11.

4.2  The provider must notify the Agency of the matter as soon as possible after becoming aware of the matter.

4.3  If paragraph 4.1(a) applies, the provider must also notify the Agency of the action that the provider takes in relation to the complaint (for example, to resolve or address the complaint).

This Part prescribes requirements with which registered providers must comply, under subsection 73(2) of the Act.
Part 5  Revocation

5.1 There are 3 grounds on which the CEO may revoke the approval of a person or entity as a registered provider of supports. The first is that they no longer meet the approval criteria in Part 3. The second is that their application for approval contained information that was false or misleading in a material particular. The third is that:

(a) a circumstance set out in this Part exists; and
(b) that circumstance presents an unreasonable risk to one or more participants.

Paragraph 5.1 summarises subsection 72(1) of the Act.

5.2 The circumstances are the following:

(a) the person or entity (the provider) contravenes the Agency’s terms of business (as in force from time to time) (the provider agrees to be bound by the Agency’s terms of business as part of its approval: see paragraph 3.8);
(b) the provider, or an employee or contractor of the provider, is the subject of adverse action by a responsible authority relating to their provision of supports or management of funding for supports, regardless of whether those supports are provided or funded under the Act;
(c) the provider, or an employee or contractor of the provider, is the subject of adverse action by a responsible authority in respect of an approval held by the provider or the employee or contractor (paragraph 6.4 defines approval);
(d) the provider, or an employee or contractor of the provider, contravenes a law of a kind mentioned in paragraph 3.11;
(e) the provider is an insolvent under administration;
(f) the provider contravenes an employment or workplace health and safety law that applies to the provider (including, for example, the Fair Work Act 2009 if that Act applies to the provider);
(g) the provider does not have suitable mechanisms in place to ensure that any contractors engaged for the provision of supports or the management of funding for supports comply with all employment and workplace health and safety laws that apply to the contractors in that provision or management;
(h) the provider, or an employee or contractor of the provider, contravenes a requirement in Part 4.

Paragraph 5.2 prescribes circumstances for the purposes of paragraph 72(1)(c) of the Act.
Part 6 Other matters

Citation

6.1 These Rules may be cited as the National Disability Insurance Scheme (Registered Providers of Supports) Rules 2013.

Interpretation

6.2 These Rules include text that summarises provisions of the Act. The boxed notes identify such text, which does not form an operative part of these Rules.

6.3 Terms and expressions that are used in the Act have the same meaning in these Rules unless these Rules display a contrary intention—see the Acts Interpretation Act 1901 and the Legislative Instruments Act 2003, which include definitions and rules of interpretation that apply to all Commonwealth legislation. For convenience, the more important definitions from the Act are identified or reproduced in paragraph 6.4.

6.4 In these Rules:

*Act* means the National Disability Insurance Scheme Act 2013.

*Agency*—see section 9 of the Act.

*applicant* means a person or entity that applies to be a registered provider of supports.

*approvals*:

(a) means any approvals, licences, registrations, authorisations or certifications (however described) that an applicable law of the Commonwealth, a State or a Territory requires to be held by, or by a member of the staff of, an applicant or a registered provider of supports; and

(b) where child-related work is involved—includes working with children checks required by a law of the Commonwealth, a State or a Territory for engagement in child-related work.

*CEO*—see section 9 of the Act.

*child*—see section 9 of the Act.

*entity*—see section 9 of the Act.

*financial institution* means:

(a) an ADI (short for authorised deposit-taking institution) for the purposes of the Banking Act 1959; or

(b) the Reserve Bank of Australia; or
(c) a **State bank**, meaning a person who carries on State banking within the meaning of paragraph 51(xiii) of the Constitution.

**NDIS**—see section 9 of the Act.

**NDIS rules**—see section 9 of the Act.

**participant**—see section 9 of the Act.

**responsible authority** means a body which, under a law of the Commonwealth or of a State or Territory, can receive complaints about, or take action against, a person or entity in providing supports to a person with disability (regardless of how the functions and powers of the body are expressed in that law). For example, a body regulating the provision of disability supports could be a responsible authority; so could a body charged with general fair trading and consumer protection functions.

**staff**, in relation to a person or entity, means the staff of the person or entity who:

(a) provide, or are to provide, the supports that the person or entity provides or proposes to provide under the Act; or

(b) manage, or are to manage, the funding of supports under plans.

The term includes any individual engaged by the person or entity, whether as an employee, a contractor or otherwise, and includes any individual engaged by a contractor of the person or entity.
Appendix 4: NDIS - Terms of Business

Introduction

The National Disability Insurance Scheme Act 2013 provides for the making of Rules and requirements for registered providers of support. The Rule – National Disability Insurance Scheme (Registered Providers of Support) Rules - states that registered providers must agree to the NDIS Terms of Business. This document sets out those terms and should be read in conjunction with the Rule.

Service Delivery

Supports are to be delivered in accordance with the Objectives and Principles of the National Disability Insurance Scheme Act 2013, all relevant NDIS Rules and Guidelines, the provider’s own Code of Conduct, Code of Ethics or Service Charter and any legislative or other requirements of the Commonwealth, State or Territory authority that is relevant to the type of support delivered.

*Competence:* Providers are expected to maintain a high level of competence in providing supports to NDIS participants and regularly update their knowledge and skills. A complaint, found to be proven, about the incompetence of a provider may result in revocation of the provider’s registration.

*Service agreements:* It is expected that providers will work with a participant to establish written or verbal agreement about the nature, quality and price of supports to be provided. All supports delivered will be in accordance with that agreement. Such agreements will accord with the NDIS Model Agreement and incorporate input from participants including internal management of complaints and cessation of supports. Service agreements need to be consistent with NDIS’s pricing arrangements and guidelines.

*Withdrawal or termination of services:* If a provider intends to withdraw or terminate their services to a NDIS participant, adequate notice must be given to enable the participant, their nominee or the Agency to replace those support services. The time frame for notice will vary according to the nature and frequency of the support and will be included in the agreement with the participant. The Agency is to be advised of an impending termination of services, if there is any risk to continuity of supports to a participant.

Business practices
Providers are to comply with all applicable Commonwealth, State and Territory laws in relation to conducting a business and governance arrangements.

Providers must not accept any offer of money, gifts, services or benefits that would cause them to act in a manner contrary to the interests of the participant.

**Conflict of Interest:** A conflict of interest, or potential conflict of interest (a situation where a provider could be influenced, or seen to be influenced by a financial or personal interest in carrying out their duties) is to be managed by bringing it to the attention of the agency and participant and providing assurance as to how it will be managed by the provider. A provider must have no financial or other personal interest that could directly or indirectly influence or compromise the choice of provider or provision of supports to a participant.

A plan management provider must disclose any financial interests in providing advice or management supports to a participant.

**Subcontracting:** Where a registered provider subcontracts the provision of supports, the subcontracted provider must comply with these terms and any employment or any workplace health and safety law that applies to the contractor in that provision or management. The provider must have mechanisms in place to ensure the subcontractor is compliant with workplace health and safety and employment laws.

Where a registered provider engages an individual as an independent contractor for the provision of supports or the management of supports, it will pay the independent contractor at least the amount payable as if the individual were employed in accordance with the *Fair Work Act 2009*.

Where a registered provider engages an entity as a contractor for the provision of supports or the management of supports, it will pay the entity an amount that accords with the applicable industrial instrument in relation to the work performed in fulfilment of that contract by each partner or member of the entity, including the *Fair Work Act 2009* where that is applicable.

The participant must be informed of, and understand, the subcontracting arrangements.

**Anti-discrimination:** When providing supports, a provider must provide services consistent with the Objectives and Principles of the *National Disability Insurance Scheme Act 2013* and comply with anti-discrimination legislation and not discriminate on grounds of gender, marital status, pregnancy, age, ethnic or national origin, disability, sexual preference, religious or political belief.
Insurances: A provider must maintain an adequate level of relevant insurances including professional indemnity, public liability and workers compensation insurance when employing workers.

Records management: A provider is to keep proper and accessible records of the supports delivered to NDIS participants including financial records that are fit for audit. Adequate records must be maintained as evidence of the provision and payment for a support. Financial records are to be retained for at least 5 years. All other records are to be retained for a length of time in accordance with the relevant State or Territory laws.

Pricing and Payment conditions: Providers can charge for supports delivered in accordance with the NDIS pricing arrangements and guidelines, after the support has been provided. Prepayment is not generally permitted for supports.

A claim for payment is to be submitted within a reasonable time (30 days) after the date of providing the support.

For a self-managing participant, a provider must clearly set out for the participant the costs to be paid, timing of delivery and the payment method. No charges are to be added to the price of the support, including credit card surcharges, or requested from the participant.

No fee additional to the agreed price for the support is to be levied upon a participant for reasonable and necessary supports set out in a participant’s plan.

Serious incident reporting: Providers are required to report serious incidents to the NDIS State Manager and to the relevant statutory authority in the local jurisdiction. A serious incident is:

- The death of, or serious injury to, a participant,
- Allegations of, or actual sexual or physical assault of a participant,
- Significant damage to property or serious injury to another person by a participant,
- An event that has the potential to subject a participant or NDIS to high levels of adverse public scrutiny.

Interactions with NDIA

 Provision of information: Providers must supply any information requested by NDIA in relation to the provision of supports within a reasonable time frame or as specified in the request.

Providers may be reviewed by NDIA in relation to supports funded for a NDIS participant. Providers must cooperate fully with NDIA officers who are undertaking review activities.

Where a decision by NDIA is the subject of a merits review or complaint, or a request for information is made under the Freedom of Information Act 1982, the
provider is required to cooperate in providing any documents or other
information requested.

*Provider information updates* will be provided via the NDIS web site and/or
provider portal. Providers will be responsible for updating their knowledge and
information about any changes to NDIS’s requirements published on the
website or portal. The Agency will provide alerts when new information is
available.

*False declarations:* A provider must not make false or misleading declarations in
their dealings with *NDIS* or during the delivery of their supports. A declaration
may be misleading if information is omitted or presented in a manner that
enables a misleading view of a situation to be formed.

Providers must not collude with other parties with the intention of providing false
or misleading information. Providers must take all measures to maintain the
integrity of the services they provide and their records.

*Notification:* It is the responsibility of the provider to maintain accurate contact
details with *NDIS*. A registered provider must advise *NDIS* of any changes
to the information contained within the application for registration as soon as
is practicable. Paragraph 4.1 of the *NDIS Rule – Registered Providers*
contains further detail about the requirement for providers to notify *NDIS*
about changes in their compliance with the criteria for registration.

**Identification as a NDIA provider and use of NDIA logo**

Registered providers may identify their *NDIA* registration by stating
“*<Organization/person’s name>* is registered to provide supports for NDIS
participants."

The *NDIS* logo is not to be used by a provider in any publicity material.

*Public comments:* As members of the community, all providers have the right to
take part in public debate on issues of public concern. However, service
providers must be careful that public comments made as a private individual
cannot be construed as an official comment on behalf of *NDIS* or the
Government.

The provider must not represent themselves as spokespersons for *NDIA*.

If elected or nominated as a spokesperson for a professional or community
association, service providers are entitled to make public comments about
relevant issues. In making such statements, providers must clearly
acknowledge that comments are made on behalf of that association and cannot
be attributed to *NDIS*. 
Confidentiality

Providers must treat all information obtained as an NDIS provider as confidential.

All information related to participants must be stored in a secure manner. Providers must have a secure storage system for their records.

Participant information may be disclosed if the law requires the disclosure or when there is reason to believe that the use or disclosure is reasonably necessary for:

- Reducing or preventing a serious or imminent threat to an individual’s life, health or safety, or preventing a serious threat to public health or safety.
- Preventing, detecting, investigating, prosecuting or punishing of criminal offences and other breaches of the law that attract a penalty.
- Preventing, detecting, investigating or remedying of seriously improper conduct or proscribed conduct.
- The preparation or conduct of proceedings before any court or tribunal.

With the exception of an imminent threat to life, health or safety, all requests for disclosure must be referred to the NDIS Privacy Contact Officer for consideration prior to release.

Complaints

Providers are to have clear and accessible complaints handling and dispute resolution processes. Records related to complaints are to be maintained for at least 5 years or as required by any other law.

All complaints to NDIS about a provider will be resolved in accordance with the Complaints Procedure of NDIS, or the State authority, whichever applies.

References

National Disability Insurance Scheme Act 2013

Freedom of Information Act 1982
## Appendix 5: Disability Supports

### Part A

<table>
<thead>
<tr>
<th>PROPOSED NDIS SUPPORTS¹</th>
<th>RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014²</th>
<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistance with household tasks includes:</td>
<td>In-home accommodation support Meals Other food services Domestic assistance Home maintenance Linen service Personal Care: low level assistance with daily self-care tasks in order to help a client maintain hygiene and grooming.</td>
<td>• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.</td>
</tr>
</tbody>
</table>

- Delivered meals
- House and / or yard maintenance
- House cleaning
- Assistance with specialised equipment for household tasks

- Therapeutic supports includes:
  - Individual and group multidisciplinary interventions
  - Individual therapy (OT, Physio, Psychology, Social Work, Speech and Language pathology)
  - Group therapy (OT, Physio,)

- Therapy support for individuals
- Nursing care
- Allied health care

<table>
<thead>
<tr>
<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.</td>
</tr>
<tr>
<td>• Meet the relevant professional requirements under the National Registration and Accreditation Scheme (National Scheme) for registered health practitioners.</td>
</tr>
</tbody>
</table>

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¹ NDIS Supports – Draft NDIS Support Catalogue (Version 1.1 27 March 2013)
² Current designated disability services funded under the Disability Inclusion Act 2014 and related alignment to NDIS Supports – Draft NDIS support Catalogue (Version 1.1 27 March 2013). Note: Not all ADHC funded disability supports listed may be provided in the Hunter launch site.
<table>
<thead>
<tr>
<th>PROPOSED NDIS SUPPORTS¹</th>
<th>RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014²</th>
<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
</table>
| Psychology, Social Work, Speech and Language pathology)  
• Nursing  
• Podiatry  
• Therapy for children with autism  
• Therapeutic program delivered by Therapy assistant  
• Individual/group family focussed information and training  
• Specialised assessment of skills, abilities and needs | Behaviour/specialist intervention (Psychologist) | • Meet the eligibility requirements for membership of the Australian Association of Social Workers (AASW) |
| • Behaviour support interventions including intensive behaviour support / management plan;  
• Training for carers and others in behaviour management strategies. | | • Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
• Meet the relevant professional requirements under the National Registration and Accreditation Scheme (National Scheme) for registered health practitioners. |
| Therapeutic supports includes:  
• Counselling for an individual or as part of a group | Counselling:  
• Counselling provides clients and carers with assistance to understand and manage situations, behaviours and | • Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
• Meet the relevant professional requirements under the National |

¹ Quality Assurance and Safeguards Working Arrangements for the Launch of the NDIS in NSW 18 Oct 2013
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<table>
<thead>
<tr>
<th>PROPOSED NDIS SUPPORTS¹</th>
<th>RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014²</th>
<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>relationships associated with their need for care.</td>
<td>Registration and Accreditation Scheme (National Scheme) for registered health practitioners; or</td>
</tr>
<tr>
<td>Assistance to participate in community, social and civic activities.</td>
<td>Flexible respite: • Recreation/holiday programs • Social support • HACC respite</td>
<td>Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.</td>
</tr>
<tr>
<td>Assistance with travel / transport arrangements</td>
<td>Transport</td>
<td>Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business. Meet relevant industry requirements where applicable.</td>
</tr>
<tr>
<td>Home modifications</td>
<td>Home modifications</td>
<td>Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business. Meet relevant industry requirements where applicable.</td>
</tr>
<tr>
<td>Assistive equipment and personal mobility equipment</td>
<td>Provision of goods and equipment</td>
<td>Comply with the NDIS Rules – Rules for registered providers of</td>
</tr>
</tbody>
</table>

¹ PROPOSED NDIS SUPPORTS
² RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014
³ QUALITY ASSURANCE REQUIREMENTS
<table>
<thead>
<tr>
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<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Plan management: • Financial and service intermediary activities • Financial intermediary activities</td>
<td>supports and Agency’s Terms of Business. • Meet relevant industry requirements where applicable.</td>
</tr>
<tr>
<td></td>
<td>Plan management</td>
<td>• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business. • Satisfy NDIS registration requirements including an assessment of qualifications, approvals, experience and capacity</td>
</tr>
</tbody>
</table>
## Part B

### Proposed NDIS Supports

<table>
<thead>
<tr>
<th>Proposed NDIS Supports</th>
<th>Related Disability Supports Funded Under the NSW Disability Inclusion Act 2014</th>
<th>Quality Assurance Requirements</th>
</tr>
</thead>
</table>
| Assistance with self-care and other activities in a group program or shared living arrangement | Supported accommodation:  
  - Large Residences  
  - Group homes  
  - Emergency accommodation support  
  - Accommodation support for young people with disability to transition from the parental responsibility of the Minister for Community Services and to live as independently as possible.  
  - Accommodation support for young people with intellectual disability who have exited a correctional facility and appropriate community integration along with pre and post release clinical case management services. |  
  - Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
  - Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
  - meet all relevant legislation, operational policies and guidelines outlined at Attachment 1.  
  - Comply with the terms of ADHC consolidated assessment criteria at Attachment 2; |
| Assistance in a shared living arrangement for 7 persons or more (low, standard and complex level) |  
  - Accommodation support for young people with disability to transition from the parental responsibility of the Minister for Community Services and to live as independently as possible.  
  - Accommodation support for young people with intellectual disability who have exited a correctional facility and appropriate community integration along with pre and post release clinical case management services. |  
  - Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
  - Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
  - meet all relevant legislation, operational policies and guidelines outlined at Attachment 1.  
  - Comply with the terms of ADHC consolidated assessment criteria at Attachment 2; |
| Assistance with self-care and other activities in a group program or shared living arrangement |  
  - Accommodation support for young people with disability to transition from the parental responsibility of the Minister for Community Services and to live as independently as possible.  
  - Accommodation support for young people with intellectual disability who have exited a correctional facility and appropriate community integration along with pre and post release clinical case management services. |  
  - Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
  - Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
  - meet all relevant legislation, operational policies and guidelines outlined at Attachment 1.  
  - Comply with the terms of ADHC consolidated assessment criteria at Attachment 2; |
| Assistance in a shared living arrangement for 6 persons or less (low, standard and complex level) |  
  - Accommodation support for young people with disability to transition from the parental responsibility of the Minister for Community Services and to live as independently as possible.  
  - Accommodation support for young people with intellectual disability who have exited a correctional facility and appropriate community integration along with pre and post release clinical case management services. |  
  - Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
  - Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
  - meet all relevant legislation, operational policies and guidelines outlined at Attachment 1.  
  - Comply with the terms of ADHC consolidated assessment criteria at Attachment 2; |

### Quality Assurance Requirements

- Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.
- Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;
- meet all relevant legislation, operational policies and guidelines outlined at Attachment 1.
- Comply with the terms of ADHC consolidated assessment criteria at Attachment 2;
<table>
<thead>
<tr>
<th>PROPOSED NDIS SUPPORTS&lt;sup&gt;1&lt;/sup&gt;</th>
<th>RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014&lt;sup&gt;2&lt;/sup&gt;</th>
<th>QUALITY ASSURANCE REQUIREMENTS</th>
</tr>
</thead>
</table>
| includes:  
• Day time week days  
• Saturdays  
• Sundays and public holidays  
• Night time sleep over |  
• Attendant care  
• High complex needs | Rules for registered providers of supports and Agency’s Terms of Business;  
• Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
• meet all relevant legislation, operational policies and guidelines outlined at Attachment 1;  
• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2. |
| Assistance provided in a host family or alternative family situation | Alternative family placement – out-of-home care for children with disability |  
• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business;  
• Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards; and  
• meet all relevant legislation, operational policies and guidelines outlined at |
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</tr>
</thead>
</table>
| Individual or group multidisciplinary early childhood interventions | Early childhood intervention:  
• Early childhood special education (centre-based, mainstream and in-home);  
• Therapy services  
• Information and referral; and  
• Coordination of early childhood intervention services with other specialist and mainstream services in the local area  
Family support places and early interventions:  
• Enable inclusion of children and young people with disability and their families in mainstream services and in community life  
• Support the development of children and young people’s skills and their capacities  
• Build the resilience and | Attachment 1;  
• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2.  
• Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
• meet all relevant legislation, operational policies and guidelines outlined at Attachment 1;  
• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.  
• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2. |
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</table>
| Group based activities in a centre | Centre-based respite and day programs  
Overnight respite | • Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business;  
• Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;  
• Meet all relevant legislation, operational policies and guidelines outlined at Attachment 1;  
• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2. |
| Overnight assistance in a centre or group residence |  | |
| Assistance in coordinating or managing life stages, transitions and supports:  
  • Life/transition planning  
  • Complex supports coordination | Case management, local coordination and development  
Client Care Coordination  
Case Management |  |
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<tr>
<td></td>
<td></td>
<td>operational policies and guidelines outlined at Attachment 1;</td>
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<td></td>
<td>• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2.</td>
</tr>
<tr>
<td>Assistance to participate in community, social and civic activities includes:</td>
<td>Learning and Life Skills development:</td>
<td>• Comply with the NDIS Rules – Rules for registered providers of supports and Agency’s Terms of Business.</td>
</tr>
<tr>
<td>• Group based activities in a centre</td>
<td>• Ongoing support</td>
<td>• Undertake third party verification to confirm organisational performance against the NSW Disability Service Standards;</td>
</tr>
<tr>
<td>• Group based community activities</td>
<td></td>
<td>• Meet all relevant legislation, operational policies and guidelines outlined at Attachment 1;</td>
</tr>
<tr>
<td>• Development of skills to increase independence in community, social and recreational participation</td>
<td></td>
<td>• Comply with the terms of ADHC consolidated assessment criteria at Attachment 2;</td>
</tr>
<tr>
<td>• Development of skills in household tasks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Public transport training and support</td>
<td></td>
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<tr>
<td>Social skills training includes:</td>
<td></td>
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<tr>
<td>• Group social skills development</td>
<td></td>
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<tr>
<td>• Individual social skills development</td>
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<tr>
<td>PROPOSED NDIS SUPPORTS¹</td>
<td>RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014²</td>
<td>QUALITY ASSURANCE REQUIREMENTS</td>
</tr>
<tr>
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</tbody>
</table>
| Development of life skills includes:  
  - Training in planning and management;  
  - Numeracy, literacy, money/financial management training and skills development  
  Assistance coordinating or managing life stages, transitions and supports includes:  
  - Mentoring and peer support |                                                                                   |                               |

¹ PROPOSED NDIS SUPPORTS
² RELATED DISABILITY SUPPORTS FUNDED UNDER THE NSW DISABILITY INCLUSION ACT 2014

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