

Disability Services Commission

Quarterly Report to the Commonwealth Government



June 2017

Disability Services Commission:

**Quarterly Report**

Disability Services Commission

Quarterly Report to the Commonwealth Government

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# Foreword

The twelfth Quarterly Report concludes the reporting requirements for the trial of the National Disability Insurance Scheme in Western Australia (WA NDIS). The trial commenced on 1 July 2014 and was completed on 30 June 2017. Throughout this period, the quarterly reporting framework has provided insights into outcomes achieved in the Lower South West, Cockburn and Kwinana, and Armadale, Murray and Serpentine-Jarrahdale trial sites.

This report confirms that 3,743 people have been assessed eligible for the WA NDIS as at 30 June 2017. A total of 7,523 plans have been developed throughout the trial and the high rate of goal achievement in plans has been sustained in this quarter, with 89 per cent of plans having achieved goals. This indicates that the WA NDIS planning process is supporting individuals, families and their carers to identify effective goals and strategies within their plans. Nine new service providers have been endorsed to provide supports and services in this quarter, bringing the total to 140 providers operating in the WA NDIS. This sustained market development activity enables people with disability to exercise genuine choice in the supports and services that best suits their needs.

Continued refinement of planning processes is demonstrated by the length of time from the confirmation of an individual’s eligibility to their plan being approved, with the average time being 64 days in this quarter in contrast to 88 days for the same quarter last year. This provides evidence that continuous improvement efforts have been effective.

In this quarter, the average current plan cost is $34,580 which is below the national benchmark average of $39,677. The WA NDIS has consistently demonstrated financial sustainability, with average plan costs remaining below the national benchmark average in every quarter.

The report concludes with findings from the annual participant satisfaction survey. Results indicate a high level of satisfaction with the WA NDIS. A key finding is that 83 per cent of respondents were satisfied or very satisfied with their participation in local services since developing their plan, in comparison to 57 per cent before they developed their plan.

# Key highlights

|  |  |
| --- | --- |
| **NDIS trial** | **Total** |
| Total committed plan costs | $116.1 million |
| Total number of individuals eligible for support | 3,743 |
| Total number of current plans (funded and no funding requested) | 3,356 |
| Total number of current plans (with funding) [[1]](#footnote-2) | 3,202 |
| Total number of current plans (with no funding requested) | 154 |
| Total year to date payments | $82.8 million |
| Average costs for total current plans (funded and no funding requested) | $34,580 |
| Average costs for current plans (with funding) | $36,243 |
| Number of service providers operating in the trial sites  3,743  eligible individuals as at 30/06/17  3,2021  plans (with funding) average cost $36,243  154  plans (no funding requested)  3,356  current plans as at 30/06/17 average cost $34,580  Total cost  $116.1 million | 140 |

# Actuary’s statement

WA NDIS has now reached the milestone of providing $100 million in funding, supporting 3,743 participants spread across the three trial sites. With the third and final year of the trial complete, both average costs and participant numbers are lower than initially forecast.

The proportion of participants with an approved plan has risen from 76% as at 31 December 2016 to 90% as at 30 June 2017. Following the initial delays in plan approvals in the early stages of the rollout to the Armadale, Murray and Serpentine-Jarrahdale expansion areas, active plan numbers in the expansion areas have now grown substantially. We anticipate that the high plan approval rate in the expansion areas will continue over the next quarter.

The average annualised committed cost is unchanged since 31 March 2017, at $34,600. While this funding level remains below the original budget, we continue to closely monitor the underlying cost drivers and trends.

In line with the Bilateral Agreement between the State and Commonwealth governments, the WA NDIS will begin rolling out to the local government areas of Rockingham, Mandurah, the Pilbara and Kimberley regions from 1 July 2017. The additional experience from the expansion to new sites provides further opportunities to understand the underlying cost drivers in more detail. We anticipate that WA NDIS will use these insights to continue improving outcomes for participants.

**Taylor Fry** Living life well with the NDIS

Fran from Cockburn is part of the WA NDIS in Cockburn-Kwinana.

“I’ve been extremely happy being part of the trial. I am now able to access therapy services which were much needed to help with my functioning. My funding helped me to do this.”

“The process was seamless and easy. All I had to do was get a referral from the hospital to NDIS and everything was dealt with from there,” Fran said.

Fran is now receiving physiotherapy to help with movement, speech therapy to help with voice control and speech, and occupational therapy to get home equipment to make daily tasks easier.

“People understand what I am saying now because I couldn’t talk properly after getting diagnosed with Parkinson’s.”

“With the help of regular exercise, thanks to physio, I am able to move around again. This is amazing given I was in a wheelchair before. With OT support I now have equipment in the house to help me do everyday things like cooking. I also get domestic help, where someone comes to clean my home.”

Since receiving this support, Fran is able to pursue things that she has delayed doing for the past 16 years. She is able to concentrate on her love of knitting and is aiming to pursue studies in the future.

Fran said that one of the best things about being part of the WA NDIS is being linked to her Local Coordinator Les Akora. Les has helped Fran explore the services she is eligible for and has continued to support Fran in progressing towards achieving her goals.

“I would like to say to others, live every day well. By accepting your condition and getting the support you need, it will help a long way in getting what you want,” Fran said.

“The WA NDIS has really helped to get the services I need and to shape my positive thinking. The Scheme has given me the chance to live life well.”

“I now have more confidence and can think positively. I have my life back and I can accept my condition better.”

# Individual Outcomes

## Measure 2 and 46: Proportion of individuals achieving plan goals

Description of measure:

This measure reports the total number of plans achieving plan goals since the commencement of the NDIS trial.

Explanation of result:

Goals have been achieved in 89 per cent of reviewed plans. This figure reflects all plan reviews undertaken since the commencement of the NDIS trial. Individuals may have had more than one plan reviewed since the trial commenced.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Total plans reviewed** | **Total plans with goals achieved** | **%** | **Total plans with goals not yet achieved** | **%** |
| 3,905 | 3,488 | 89 | 417 | 11 |

## Measure 3-7 and 47: Proportion of plan goals achieved in specific domains

Description of measure:

This measure reports the total number of plan goals achieved within specific domains for plans reviewed in the NDIS trial. A

NDIS plan may have a number of plan goals across various domains. As such, the sum of plan goals across domains will always exceed

the total number of plans reviewed.

Explanation of result:

Of all plans which have been reviewed, a total of 15,516 plan goals are identified spread across six domains. Across these domains, plan goals achieved (89 per cent) exceeded the number of plan goals not yet achieved (11 per cent). Health and wellbeing, social and independence represent the focal points of many plans, with the majority (80 per cent) of plan goals represented within these three domains.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Domain** | | | | | | | | | | | | **Totals** | | |
| **Economic** | | **Education** | | **Health and wellbeing** | | **Independence** | | **Living arrangements** | | **Social** | | **Total achieved** | **Total not achieved** | **Total plan goals** |
| A | NA | A | NA | A | NA | A | NA | A | NA | A | NA |
| 711 | 102 | 1,156 | 199 | 4,931 | 564 | 3,263 | 456 | 802 | 57 | 2,949 | 326 | 13,812 | 1,704 | 15,516 |

(A) Achieved, (NA) Not achieved

## Measure 111: Trend in proportion of total plan goals in economic and social domains

Description of measure:

The measure outlines outcomes against economic and social goals, first by determining the proportion of plans that seek these outcomes and then determining the degree of achievement of the plans that include these outcomes towards the goals. The measure is longitudinal in nature and successive reports will provide an indication of the shift in proportion of plans that include goals relating to economic and social outcomes.

Explanation of result:

In total, 5 per cent of all plan goals relate to economic outcomes. Of those, 87 per cent achieve the economic outcomes sought. Plan goals that relate to improving social outcomes represent 21 per cent of total plan goals recorded. Of those, 90 per cent achieve the social outcomes sought. The proportion of plans with social goals included decreased by one percentage point from the previous quarter. Achievement of economic and social goals remained at 87 per cent and 90 per cent respectively.

|  |  |  |
| --- | --- | --- |
| **Domain** | **Proportion of total plan goals (%)** | **Proportion with plan goals achieved (%)** |
| Economic | 5 | 87 |
| Social | 21 | 90 |

## Measure 18 and 61: Trend in proportion of individuals using different approaches to plan management options

Description of measure:

This measure reports where an individual chooses to change the way their plan is managed upon review. Plans can be managed by service providers (service provider-managed[[2]](#footnote-3)), individuals (self-managed[[3]](#footnote-4)) or jointly (combination managed[[4]](#footnote-5)).

Explanation of result:

Approximately 18 per cent of individuals who had their plans reviewed during this financial year changed the way their plan is managed. The capacity for individuals to determine how their plan is managed is integral to ensuring that people with disability have choice and control over the services they receive.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Change of approach** | | | | | | | |
| Total plans reviewed | Self-managed to service provider-managed | % | Service provider- managed to self managed | % | Combination managed to self/service provider- managed | % | Self/service provider- managed to combination managed | % |
| 2,110 | 17 | <1 | 10 | <1 | 0 | 0 | 351 | 17 |

**Measure 19 and 62: Trend in proportion of individuals using each or a combination of plan management options**

Description of measure:

This measure reports the plan management options used by individuals who have an approved plan. Plans can be managed by service providers, individuals (self-managed) or jointly (combination-managed).

Explanation of result:

The majority of approved plans are service provider-managed (59 per cent) or combination managed (35 per cent). Six per cent of individuals self-manage their entire plan. Aggregating plans that are jointly managed by an individual or their family along with a service provider (combination-managed) together with those who choose to self-manage their entire plan illustrates that around 41 per cent of all funded plans include an aspect of management by the person with disability, their family or carers.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Totals** | | | **Plan Management Options** | | | | | |
| Total current plans | Number of unfunded plans | Number of funded plans[[5]](#footnote-6) | Service provider- managed[[6]](#footnote-7) | % | Self-managed[[7]](#footnote-8) | % | Combination- managed[[8]](#footnote-9) | % |
| 3,356 | 154 | 3,202 | 1,891[[9]](#footnote-10) | 59 | 187 | 6 | 1,124 | 35 |

## Measure 24: Disaggregation for new individuals by individual group

Description of measure:

This measure reports the number of individuals deemed eligible by disability type during the quarter.

Explanation of result:

Autism is the most commonly identified primary disability among individuals who became eligible to participate in the NDIS during the quarter. This pattern is consistent with what has been observed in previous quarters.

|  |  |
| --- | --- |
| **Primary disability** | **Number of new individuals** |
| Acquired brain injury | 17 |
| Autism | 181 |
| Deaf/blind | \* |
| Developmental delay | 16 |
| Hearing | 18 |
| Intellectual disability | 139 |
| Neurological | 55 |
| Physical | 43 |
| Psychiatric/psychosocial disorders[[10]](#footnote-11) | 38 |
| Specific learning/attention deficit disorder (other than intellectual) | \* |
| Speech | \* |
| Vision | 9 |
| Other | \* |
| **Total** | **515[[11]](#footnote-12)** |

## Measure 38-43, and 99: Information about individuals assessed eligible for NDIS

Description of measure:

This measure provides demographic details and other characteristics for all individuals who are accessing NDIS with a current approved plan plus individuals found eligible who do not yet have a completed plan.

Explanation of result:

The most commonly identified primary disability is intellectual disability, followed by autism. Those primary disability categories represent 55 per cent of individuals assessed as eligible for the NDIS.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | **Gender** | | | **Age** | | | | | |
| **Primary disability** | **Individuals** | **CALD[[12]](#footnote-13)** | **ATSI[[13]](#footnote-14)** | **M** | **F** | **X** | **0-4** | **5-14** | **15-24** | **25-44** | **45-64** | **65+** |
| Acquired brain injury | 104 | \* | \* | 64 | 40 | \* | \* | 10 | 6 | 23 | 55 | 9 |
| Autism | 1,022 | 78 | 30 | 794 | 228 | \* | 90 | 658 | 216 | 47 | 10 | \* |
| Deaf/blind | 18 | \* | \* | 7 | 11 | \* | \* | \* | \* | 6 | 9 | \* |
| Developmental delay | 244 | 38 | 19 | 168 | 76 | \* | 120 | 124 | \* | \* | \* | \* |
| Hearing | 112 | \* | \* | 54 | 58 | \* | 14 | 27 | 6 | 24 | 38 | \* |
| Intellectual disability | 1,052 | 83 | 63 | 619 | 433 | \* | 7 | 236 | 315 | 321 | 167 | 6 |
| Neurological | 343 | 13 | \* | 140 | 203 | \* | \* | 18 | 25 | 59 | 227 | 10 |
| Physical | 401 | 27 | 11 | 219 | 182 | \* | 15 | 54 | 43 | 91 | 179 | 19 |
| Psychiatric/psychosocial disorders[[14]](#footnote-15) | 361 | 18 | 13 | 163 | 198 | \* | \* | \* | 19 | 132 | 203 | 5 |
| Specific learning/ADHD (other than intellectual) | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* |
| Speech | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* |
| Vision | 74 | \* | 6 | 32 | 42 | \* | \* | 15 | \* | 16 | 33 | \* |
| Other | 7 | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* | \* |
| **Total** | **3,743** | **269** | **148** | **2268** | **1475** | **\*** | **255** | **1,152** | **638** | **720** | **923** | **55** |

## Measure 44: Areas of support identified by individuals

Description of measure:

This measure provides the distribution of long term goals within areas of support identified for all individuals with an approved plan and includes plans with no funding requested at the end of the quarter. A NDIS plan may have a number of long term goals represented across various support areas.

Explanation of result:

Within approved plans, 2,001 long term goals are identified, spread across four support areas[[15]](#footnote-16). The most common support area is independence (42 per cent), followed by health and wellbeing (29 per cent) and social participation (19 per cent).

|  |  |  |  |
| --- | --- | --- | --- |
| **Support areas** | | | |
| Economic participation | Health and wellbeing | Independence | Social participation | Total long term goals[[16]](#footnote-17) |
| 186 | 588 | 850 | 377 | 2,001 |
| 9% | 29% | 42% | 19% |  |

## Measure 49: Plans requiring early review

Description of measure:

This measure provides the total number of plans reviewed including reviews of plans for individuals who requested an early review.

Explanation of result:

Since the trial commenced, 3,905 plans have been reviewed, of which 307 were reviewed early.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Total plans developed** | **Total plans reviewed** | **%** | **Plans reviewed early** | **%** |
| 7,523 | 3,905 | 52 | 307 | 4 |

## Measure 50: Active individuals

Description of measure:

This measure reports the total number of individuals deemed eligible at the end of the quarter for supports and services.

Explanation of result:

A total of 3,743 individuals were deemed eligible for supports and services at the end of the quarter.

|  |  |
| --- | --- |
|  | **Total number (end of quarter)** |
| Individuals eligible for support | 3,743 |

## Measure 54: Support strategies funded by support clusters

Description of measure:

This measure provides the total strategies in each of the Commission’s defined support clusters for individuals with approved funded plans only. NDIS plans generally have more than one strategy for each support cluster.

Explanation of result:

Within the 3,202 current plans (with funding), there are 16,365 strategies spread across the ten support clusters. Ninety-two per cent of the total funded strategies are contained within the following four key clusters: therapy and specialist support, equipment, wellbeing and daily living.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Support clusters** | | | | | | | | | | **Totals** |
| Accommodation | Behaviour support and specialist care | Communication | Daily living | Episodic coordination of support | Equipment | Family and carer support | Other | Therapy and specialist support | Wellbeing | Total funded strategies |
| 204 | 241 | 63 | 3,159 | 69 | 4,612 | 634 | 18 | 4,044 | 3,321 | 16,365 |
| 1% | 1% | <1% | 19% | <1% | 28% | 4% | <1% | 25% | 20% |  |

## Measure 55: Access to support

Description of measure:

This measure outlines the time taken from an individual’s consent requesting eligibility and their eligibility being confirmed, to their plan for supports being approved. This measure includes approved plans with no funding requested.

Explanation of result:

On average, an individual consents to request eligibility and has their plan approved within 81 days. The timeframe from confirmation of eligibility to plan approval is 64 days, on average.

|  |  |
| --- | --- |
| **Average time from consent to plan approval (days)** | **Average time from eligibility to plan approval (days)** |
| 81 | 64 |

## Measure 57-60: Service provider characteristics and market profile

Description of measure:

This measure outlines the details of service providers currently endorsed to provide supports and services in the NDIS trial.

Explanation of result:

At the end of the quarter, there were 140 service providers operating in the NDIS trial. Nine new providers were endorsed by the Commission during the quarter. Eighty-nine per cent of registered providers in the trial are operating in Western Australia only. Thirty-four per cent of service providers are for-profit organisations.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Service Provider Profile** | | **Allied Health** | **Disability Support** | **Disability Equipment** | **Plan Management** | **Other** | **Total Service Providers****[[17]](#footnote-18)** |
| **Footprint** | |  |  |  |  |  |  |
|  | National | 6 | 16 | 2 | 7 | 4 | 16 |
| State | 52 | 108 | 19 | 23 | 13 | 124 |
| **Total** |  | **58** | **124** | **21** | **30** | **17** | **140** |
| **Provider Type** | |  |  |  |  |  |  |
|  | Not-for-Profit Organisations | 35 | 85 | 16 | 26 | 15 | 88 |
|  | For Profit Organisations | 23 | 36 | 3 | 3 | 2 | 48 |
|  | Public and Government Agencies[[18]](#footnote-19) | 0 | 3 | 2 | 1 | 0 | 4 |
| **Total** | | **58** | **124** | **21** | **30** | **17** | **140** |

## Measure 63-64: Requests for eligibility determination

Description of measure:

This measure details the number of individuals who requested an eligibility assessment and the outcome of this assessment.

Explanation of result:

As at 30 June 2017, 3,743 individuals were deemed eligible for supports and services. Since the start of the trial 2,665 people have requested an eligibility assessment to join existing Commission clients who were participants in the trial. Of the individuals who requested an eligibility assessment, 70 per cent were deemed eligible and 19 per cent were deemed ineligible.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | | **Eligibility decision** | | | |
| Requests for eligibility[[19]](#footnote-20) | Assessment in progress | % | Eligible | % | Not Eligible[[20]](#footnote-21) | % |
| 2,665 | 154 | 6 | 1,880 | 70 | 511 | 19 |

## Measure 65-71: Review / Appeal of decisions

Description of measure:

This measure outlines the number of internal reviews and appeals against decisions made about eligibility, nature and quantum of support (reasonable/necessary), self-management of funding, extension of grace period, review of plans, and consideration of compensation. The request for a review of decision can be made by the person or their representative.

Explanation of result:

There were five requests for review and no requests for appeal during the quarter. Two review decisions were made, one of which upheld the original decision. No requests for an appeal decisions were made during the quarter.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Category of review/appeals requests[[21]](#footnote-22)** | | | | | | | |
|  | Eligibility | Reasonable and necessary | Self-management of funds | Extension of grace period | Review of Plan | Consideration of compensation | Total |
| Review numbers by category | 1 | 4 | 0 | 0 | 0 | 0 | 5 |
| Appeal numbers by category | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Category of review/appeals decisions** | | | | | |
|  | Original decision upheld | Original decision amended | Original decision withdrawn | Original decision overturned | Total |
| Review outcomes | 1 | 0 | 0 | 1 | 2[[22]](#footnote-23) |
| Appeal outcomes | 0 | 0 | 0 | 0 | 0 |

## Measure 72-75: Formal Complaints

Description of measure:

This measure outlines the number of formal complaints received during the quarter relating to Commission provided services in NDIS. This is a separate process to the review and appeals process referred to in measure 65-71 (Review / Appeal of decisions).

Explanation of result:

Four complaints were received during the quarter.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **National Disability Services Standard to which the complaint relates[[23]](#footnote-24)** | | | | | |
| Rights | Participation and inclusion | Individual outcomes | Feedback and complaints | Service access | Service management |
| 1 | 0 | 1 | 0 | 0 | 2 |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Category of complaint[[24]](#footnote-25)** | | | | | | | | | |
| Service eligibility | Funding policy | Quality of service | Lack of resources | Communication | Staff conduct | Conduct of other person using the service | Breach of Carers Charter | Other policy/ procedure | Other (please specify) |
| 0 | 2 | 4 | 0 | 2 | 1 | 0 | 0 | 0 | 0 |

## Measure 84: Average length of time from eligibility consent date to commencement of services / connection with a Local Coordinator

Description of measure:

This measure outlines the time taken from receiving an individual’s consent for an eligibility assessment to support being provided by a Local Coordinator.

Explanation of result:

Local Coordinators provide information, support and advocacy from the date of their first contact with an individual. This ensures that individuals receive timely support through both funded and unfunded services. Establishing the connection between an individual and a Local Coordinator in a timely manner ensures that individuals are provided with information, support and advocacy while the eligibility process is occurring.

|  |
| --- |
| **Average time from consent to connection with a Local Coordinator (days)** |
| 18 |

## Measure 102: Total number of plans developed

Description of measure:

This measure outlines the total number of plans developed. The number of plans is not relative to the number of individuals in the scheme as an individual may have had more than one plan developed during that period. The total number of plans developed refers to plans that have commenced since 1 July 2014 and plans that were active on 1 July 2014 as individuals began with the trial.

Explanation of result:

A total of 7,523 plans have been developed since trial commencement, of which 3,356 plans were current at the end of the quarter.

An approved (current) NDIS plan requires that supports and services have already been explored, sourced and costed. This includes the identification of service providers and a commencement date for the delivery of supports and services.

|  |  |
| --- | --- |
| **Total plans developed** | **Total current plans** |
| 7,523 | 3,356 |

## Flexible planning meets changing support needs

Graham was recently diagnosed with corticobasel syndrome, a degenerative neurological disorder that affects his motor system and cognition. Since then, Graham’s life has changed drastically and it will continue to do so as he increasingly needs day-to-day support from others.

Graham’s wife Debby explains that prior to the onset of Graham’s condition, the family knew little about disability support, services and care.

The family was referred to the WA NDIS in 2015 and, with the assistance of Local Coordinator Kieron Gilbert, developed a personalised plan with strategies specific to Graham’s support needs.

“Kieron is fantastic. He has guided us through the process, helped us with all paperwork and pointed us in the right direction time and time again,”

“With the NDIS, we are better placed to respond to changes in Graham’s support needs,” Graham’s Local Coordinator Kieron said. “It is hard to predict what he will need in six months’ time, so now we can always make changes to it to suit him and the various stages of his condition.”

Graham’s continually changing condition has meant that his support needs have changed with time, and will need periodic adjustments in the future.

“Without the flexibility and fluidity of the NDIS, this family wouldn’t be able to function and I wouldn’t be able to keep working,” Debby said.

Through the personalised planning process, people with disability, their families and carers have the flexibility to update service and support arrangements to ensure that they continue to meet people’s needs as their circumstances change.

Having this flexibility has provided peace of mind to Debby, who used to worry about Graham’s safety and future needs.

# Financial Sustainability

The NDIS model aims to deliver supports and services to people with disability within a financially sustainable framework. This includes using a ‘whole of community’ approach, including the use of natural support networks such as family, friends, community groups, mainstream agencies and generic supports.

## Measure 13 and 52: Delivery of agreed supports as planned

Description of measure:

This measure presents the acquittal of funds by individuals and service providers and the actual payments from the Commission within the financial year to date.

Explanation of result:

The data indicates that the largest proportion of funds is paid to, and acquitted by, service providers.

|  |  |  |
| --- | --- | --- |
| **Payment type** | **Acquitted payments[[25]](#footnote-26)** | **Total payments** |
| In kind[[26]](#footnote-27) | $3,585,417 | $3,585,417 |
| Service providers | $59,517,419 | $72,047,885 |
| Individuals | $6,471,630 | $7,191,717 |
| **Total** | **$69,574,466** | **$82,825,020** |

## Measure 30 and 82: Operating expense ratio

Description of measure:

This measure details the Commission’s administration expenses compared to the overall cost of the NDIS trial.

Explanation of result:

The actual operating expense ratio is marginally higher than the estimated ratio. This reflects that average package costs in the NDIS remain lower than the benchmark average package cost of $39,677[[27]](#footnote-28), from which the total scheme package costs are estimated. The average cost of packages provided to individuals in the NDIS trial is $34,498 as per Measure 97, Real, average and median costs of packages.

The average cost includes both funded and unfunded packages and includes the cost of providing information, linkages to community based supports, natural networks, and capacity building. These aspects of the Local Coordination role directly support the development of low-cost or no-cost options, elevating the operating expenses ratio.

|  |  |  |
| --- | --- | --- |
|  | **Actual %** | **Estimated %** |
| Operating expense ratio | 15 | 10 |

## Measure 31: Real, average and median costs of individual support packages for different individual subgroups

Description of measure:

This measure reports the total committed funding for approved plans by primary disability type.

Explanation of result:

Table 1 below demonstrates that, based on the median annualised funding cost, 50 per cent of current plans (including funded and unfunded plans) receive funding of less than $16,605. A median significantly less than the average demonstrates that a greater proportion of plans are within the lower cost bands.

Table 1: Average and median funding across primary disability type for total current plans.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Primary disability** | **Total current plans** | **Total annualised committed funding** | **Average annualised funding based on total plans** | **Median annualised funding based on total plans** |
| Acquired brain injury | 79 | $4,073,205 | $51,560 | $28,178 |
| Autism | 897 | $17,654,350 | $19,682 | $13,114 |
| Deaf/blind | 14 | $317,718 | $22,694 | $16,243 |
| Developmental delay | 225 | $3,795,702 | $16,870 | $13,720 |
| Hearing | 99 | $1,239,674 | $12,522 | $9,110 |
| Intellectual disability | 975 | $54,796,059 | $56,201 | $27,914 |
| Neurological | 308 | $12,447,372 | $40,414 | $18,060 |
| Physical | 374 | $14,755,849 | $39,454 | $17,094 |
| Psychiatric/psychosocial disorders[[28]](#footnote-29) | 309 | $5,486,196 | $17,755 | $14,875 |
| Specific learning/ADHD | \* | \* | $21,571 | $19,033 |
| Speech | \* | \* | $19,183 | $19,183 |
| Vision | 65 | $1,284,517 | $19,762 | $15,658 |
| Other | 6 | $95,020 | $15,837 | $14,644 |
| **Total** | **3,356** | **$116,051,130** | **$34,580** | **$16,605** |

Table 2 presents average and median funding across primary disability type for current funded plans, with funding allocated. Based on the median annualised funding cost, 50 per cent of current plans with funding allocated receive less than $17,374.

Table 2: Average and median funding across primary disability type for current funded plans with funding allocated.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Primary disability** | **Total current funded plans with funding allocated[[29]](#footnote-30)** | **Total annualised committed funding** | **Average annualised funding based on total plans** | **Median annualised funding based on total plans** |
| Acquired brain injury | 74 | $4,073,205 | $55,043 | $29,385 |
| Autism | 843 | $17,654,350 | $20,942 | $13,669 |
| Deaf/blind | 14 | $317,718 | $22,694 | $16,243 |
| Developmental delay | 222 | $3,795,702 | $17,098 | $13,901 |
| Hearing | 90 | $1,239,674 | $13,774 | $9,659 |
| Intellectual disability | 915 | $54,796,059 | $59,886 | $30,441 |
| Neurological | 303 | $12,447,372 | $41,080 | $18,151 |
| Physical | 368 | $14,755,849 | $40,097 | $17,585 |
| Psychiatric/psychosocial disorders[[30]](#footnote-31) | 281 | $5,486,196 | $19,524 | $15,706 |
| Specific learning/ADHD | \* | \* | $21,571 | $19,033 |
| Speech | \* | \* | $19,183 | $19,183 |
| Vision | 65 | $1,284,517 | $19,762 | $15,658 |
| Other | 6 | $95,020 | $15,837 | $14,644 |
| **Total** | **3,186** | **$116,051,130** | **$36,425** | **$17,374** |

## Measure 81: Total cash and in-kind payments

Description of measure:

This measure reports on the total cash and in-kind payments to service providers, and individuals who self-manage any funded strategies in their plan.

Explanation of result:

While the majority of payments for the NDIS trial are cash payments (96 per cent), there remains a proportion of in-kind support included within plans. It is intended that this in-kind payments will be progressively allocated to individual plans. Data sharing arrangements continue to be progressed to facilitate the capture of all in-kind information. This measure details financial year to date payments.

|  |  |  |
| --- | --- | --- |
| **Total cash payments** | **Total in-kind payments[[31]](#footnote-32)** | **Total** |
| $79,239,603 | $3,585,417 | $82,825,020 |

## Measure 83: Average support package growth rate

Description of measure:

This measure compares the current quarter’s average annualised committed funds for support packages against the previous quarter in order to report on the growth rate for current approved plans and includes plans with no funding requested.

Explanation of result:

Average current approved plan costs increased by around one per cent this quarter and remain lower than the benchmark average of $39,677[[32]](#footnote-33).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Average current plan cost** | **Average current plan cost (previous quarter)** | **Growth in average current plan cost (%)** | **Total current plan cost** | **Total current plan cost (previous quarter)** | **Growth of total current plan cost (%)** | **Total current plans** |
| $34,580 | $34,249 | <1 | $116,051,130 | $98,878,039 | 17 | 3,356 |

## Measure 86: Value of payments to service providers by support type

Description of measure:

This measure details total financial year to date payments to service providers.

Explanation of result:

The majority of cash payments to service providers are for assistance with daily life tasks in a group or shared living arrangement (31 per cent), followed by participation in community, social and civic activities (20 per cent) and therapeutic supports (15 per cent).

| **Support types** | **Total cash payments** | **Total in-kind payments** | **Total payments** |
| --- | --- | --- | --- |
| Accommodation/tenancy assistance | $48,717 | $322 | $49,039 |
| Assistance in coordinating or managing life stages, transitions and supports | $128,742 | $2,461 | $131,203 |
| Assistance to access and maintain employment | $1,698,465 | $970,220 | $2,668,685 |
| Assistance with daily life tasks in a group or shared living arrangement | $22,361,293 | $27,454 | $22,388,747 |
| Assistance with daily personal activities | $6,148,115 | $224,192 | $6,372,307 |
| Assistance with personal care and transitions in educational settings | $182,498 | $81,240 | $263,738 |
| Assistance with travel/transport arrangements | $188,037 | $475,575 | $663,612 |
| Assistive equipment for recreation and leisure | $21,330 | $9,483 | $30,813 |
| Assistive products for household tasks | $28,063 | $29,871 | $57,934 |
| Assistive products for personal care and safety | $131,498 | $1,009,038 | $1,140,536 |
| Assistive technology specialist assessment, set up and training | $166,593 | $13,345 | $179,938 |
| Behaviour support | $295,634 | $24,125 | $319,759 |
| Communication and information equipment | $35,505 | $40,387 | $75,892 |
| Development of daily living and life skills | $3,693,230 | $35,507 | $3,728,737 |
| Early intervention supports for early childhood | $186,488 | $153 | $186,641 |
| Home modification design and construction | $32,743 | $15,183 | $47,926 |
| Household Tasks | $8,670,170 | $182,877 | $8,853,046 |
| Interpreting and translation | $29,797 | $187 | $29,985 |
| Management of funding for supports under an individual's plan | $0 | $0 | $0 |
| Other | $1,095 | $0 | $1,095 |
| Participation in community, social and civic activities | $14,515,339 | $67,078 | $14,582,417 |
| Personal mobility equipment | $134,144 | $91,176 | $225,321 |
| Physical wellbeing activities | $1,931,859 | $42,650 | $1,974,508 |
| Specialist care for individuals with high care needs | $578,910 | $48,065 | $626,975 |
| Therapeutic supports | $10,715,891 | $79,734 | $10,795,625 |
| Training for independence in travel and transport | $75,006 | $16,029 | $91,035 |
| Training for the provision of specialist care for individuals with high care needs | $32,523 | $0 | $32,523 |
| Vehicle modifications | $16,201 | $10,255 | $26,456 |
| **Total[[33]](#footnote-34)** | **$72,047,885** | **$3,496,608** | **$75,544,493** |

## Measure 87: Value of payments to individuals by support type

Description of measure:

This measure details total year to date payments to all individuals with self-managed aspects of their funding.

Explanation of result:

The majority of cash payments for self-managed plans are for participation in community, social and civic activities (27 per cent), followed by therapeutic supports (18 per cent) and household tasks (13 per cent).

| **Support types** | **Total cash payments** | **Total in-kind payments** | **Total payments** |
| --- | --- | --- | --- |
| Accommodation/tenancy assistance | $6,035 | $0 | $6,035 |
| Assistance in coordinating or managing life stages, transitions and supports | $66,908 | $819 | $67,726 |
| Assistance to access and maintain employment | $132,800 | $95,368 | $228,168 |
| Assistance with daily life tasks in a group or shared living arrangement | $738,427 | $0 | $738,427 |
| Assistance with daily personal activities | $900,456 | $3,377 | $903,833 |
| Assistance with personal care and transitions in educational settings | $40,833 | $1,639 | $42,473 |
| Assistance with travel/transport arrangements | $40,975 | $20,059 | $61,033 |
| Assistive equipment for recreation and leisure | $13,888 | $151 | $14,039 |
| Assistive products for household tasks | $1,706 | $4 | $1,710 |
| Assistive products for personal care and safety | $73,162 | $47,278 | $120,440 |
| Assistive technology specialist assessment, set up and training | $11,547 | $268 | $11,814 |
| Behaviour support | $31,709 | $0 | $31,709 |
| Communication and information equipment | $17,275 | $3,483 | $20,758 |
| Development of daily living and life skills | $527,976 | $0 | $527,976 |
| Early intervention supports for early childhood | $29,060 | $0 | $29,060 |
| Home modification design and construction | $5,081 | $571 | $5,652 |
| Household Tasks | $947,086 | $104 | $947,190 |
| Interpreting and translation | $53,982 | $0 | $53,982 |
| Management of funding for supports under an individual's plan | $8,388 | $0 | $8,388 |
| Other | $232,100 | $0 | $232,100 |
| Participation in community, social and civic activities | $1,909,298 | $2,600 | $1,911,898 |
| Personal mobility equipment | $44,051 | $3,200 | $47,250 |
| Physical wellbeing activities | $143,122 | $0 | $143,122 |
| Specialist care for individuals with high care needs | $85,965 | $0 | $85,965 |
| Therapeutic supports | $1,277,085 | $9,410 | $1,286,495 |
| Training for independence in travel and transport | $23,527 | $545 | $24,073 |
| Training for the provision of specialist care for individuals with high care needs | $16,315 | $0 | $16,315 |
| Vehicle modifications | $7,262 | $0 | $7,262 |
| **Total[[34]](#footnote-35)** | **$7,191,717** | **$188,876[[35]](#footnote-36)** | **$7,380,593** |

## Measure 88: Value and number of approved packages by disability type

Description of measure:

This measure details the value of approved packages for individuals with a current approved funded plan, by disability type.

Explanation of result:

While individuals with an intellectual disability represent 29 per cent of all persons receiving funded support, 47 per cent of all funding is allocated to individuals with an intellectual disability. This reflects the support needs of people with an intellectual disability. Average cost comparisons show that plans for individuals with an intellectual disability are allocated the highest average annualised package funding.

|  |  |  |  |
| --- | --- | --- | --- |
| **Primary disability** | **Total funded plans[[36]](#footnote-37)** | **Annual committed costs** | **Average annualised costs** |
| Acquired brain injury | 74 | $4,073,205 | $55,043 |
| Autism | 845 | $17,654,350 | $20,893 |
| Deaf/blind | 14 | $317,718 | $22,694 |
| Developmental delay | 222 | $3,795,702 | $17,098 |
| Hearing | 98 | $1,239,674 | $12,650 |
| Intellectual disability | 920 | $54,796,059 | $59,561 |
| Neurological | 303 | $12,447,372 | $41,080 |
| Physical | 368 | $14,755,849 | $40,097 |
| Psychiatric/psychosocial disorders[[37]](#footnote-38) | 282 | $5,486,196 | $19,455 |
| Specific learning/ADHD | \* | \* | $21,571 |
| Speech | \* | \* | $19,183 |
| Vision | 65 | $1,284,517 | $19,762 |
| Other | 6 | $95,020 | $15,837 |
| **Total** | **3,202** | **$116,051,130** | **$36,021** |

## Measure 92: Number of plans with single supports

Description of measure:

This measure outlines the number of current plans (includes funded and unfunded plans) with single supports. Single support plans have only one unique support item.

Explanation of result:

One per cent of individual plans contain a single support, which is consistent with previous quarters.

|  |  |  |
| --- | --- | --- |
| **Total current plans** | **Number of current plans with single support** | **%** |
| 3,356 | 34 | 1 |

## Measure 97(i) and 97(ii) Real, average and median costs of packages

Description of measure:

This measure outlines the real, average and median cost of packages for all individuals with a current approved plan.

Explanation of result:

The average annualised committed cost is marginally reduced when both funded and unfunded plans are included in the calculation. This is because there are relatively few unfunded plans in comparison with the total number of all funded and unfunded plans.

Table 1: Total number of individuals with a current plan (includes funded and unfunded plans)

|  |  |  |  |
| --- | --- | --- | --- |
| **Total current plans** | **Actual expenditure for the quarter[[38]](#footnote-39)** | **Average annualised committed cost** | **Median annualised committed cost** |
| 3,356 | $43,582,581 | $34,580 | $16,605 |

Table 2: Total number of individuals with a current funded plan with funding allocated

|  |  |  |  |
| --- | --- | --- | --- |
| **Total current funded plans with funding allocated****[[39]](#footnote-40)** | **Actual expenditure for the quarter[[40]](#footnote-41)** | **Average annualised committed cost** | **Median annualised committed cost** |
| 3,186 | $43,582,581 | $36,425 | $17,374 |

## Measure 100: Total cost of supports funded

Description of measure:

This measure provides the total annualised committed cost of supports for individuals with a current approved plan. This includes plans for individuals with no funding requested.

Explanation of result:

The 3,356 current approved plans have a total annualised committed cost of $116.1 million. As noted in measure 83, this has grown by 17 per cent with the inclusion of additional plans in new areas.

|  |  |
| --- | --- |
| **Total current plans** | **Total committed plan cost** |
| 3,356 | $116,051,130 |

## Mathew finds friendship in community groups

Mathew from Barragup is working towards his goal to live independently. For years Mathew, now 21, attended social groups for people with disability. His mother Sue questioned whether this was the best support option for Mathew and felt there was a limited choice of services available to meet his individual needs. She was keen to see him participate in activities where he would really build on his social network and engage with people in an ordinary, everyday setting – experience Mathew would need to become more independent.

When the WA NDIS expanded into the Shire of Murray, Mathew and Sue began working with their Local Coordinator to plan Mathew’s goals and support needs.

“As a mother who self-manages Mathew’s funding, I found the Local Coordinator very supportive. The planning process has given me confidence to find the supports and services that will really be most beneficial for Mathew,” Sue said.

“There are a lot more services to choose from now and this has opened up more places for Mathew to access,” she added.

“Mathew is at the Rotaract Club today and it’s a good environment for him. By following the example of how other members behave, it helps reinforce what’s appropriate. Mathew fits in very well and looks forward to going every week.”

The Rotaract Club is a group for people aged between 18–35 years to be a part of community-based projects and events. In doing so, they take advantage of personal development opportunities and enjoy social activities. With each local community club part of a global movement, there is no limit to Mathew’s social network potential or capacity to contribute to other community initiatives.

Mathew’s NDIS plan also includes occupational and speech therapy from a local service provider, as well as karate lessons for fitness and personal development.

For Mathew, being part of the WA NDIS means he is able to work towards his long-term hope of moving out of home and living independently. While this is a big step, the goals of his current plan will build important foundations to help him get there. Through his plan Mathew will work on developing independent living skills, communication skills through quality therapy services, and establish varied social networks and form solid friendships.

“The best thing about the NDIS is not the dollars! It is about making goals and feeling reassured there are services out there that will support Mathew towards achieving them,” Sue said.

# Participant Satisfaction

The Disability Services Commission contracted an independent evaluator, Patterson Research Group, to conduct the 2017 WA NDIS Consumer Satisfaction Survey using a questionnaire developed in collaboration between the Commission and Patterson Research Group. The questionnaire used in the 2017 Consumer Satisfaction Survey was similar to the questionnaires used in 2015 and 2016.

The results of the survey are used to support a process of continuous improvement of satisfaction levels.

The 2017 survey had a sample size of 629 respondents.

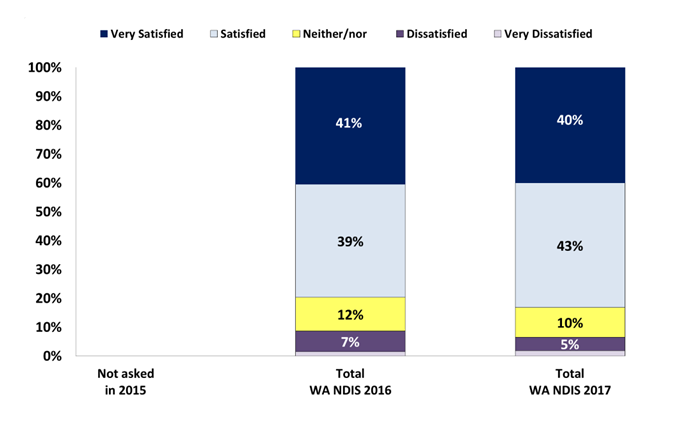
Overall, the survey result provides data that is accurate to within ± 3.4 per cent of the population figures at the 95 per cent level of confidence based on 2,678 being the total number of WA NDIS participants who have completed a WA NDIS plan in the sample file.

The following section presents key outcomes of the survey. The Planning Process

To achieve the best outcomes for people with disability, the WA NDIS seeks to ensure that the planning process delivers a plan targeted to achieve the goals identified by the person with disability, their families and carers. When asked how individuals perceived their Local Coordinator’s ability to listen to them during the planning process, 90 per cent of respondents advised that they were satisfied. Approximately 88 per cent were satisfied that the right people were involved with the planning process.

**Figure 1** shows that 83 per cent of respondents are satisfied or very satisfied that the strategies in their plan help them to achieve their plan goals. The current results (n= 624) are compared to the results found in 2016 (n= 530) in the graph (this question was not asked in 2015). Plan strategies are a key feature of the NDIS. It is of note that the level of satisfaction is marginally higher than the previous period, in which 80 per cent of respondents were satisfied or very satisfied in this area.

**80%**

****Services

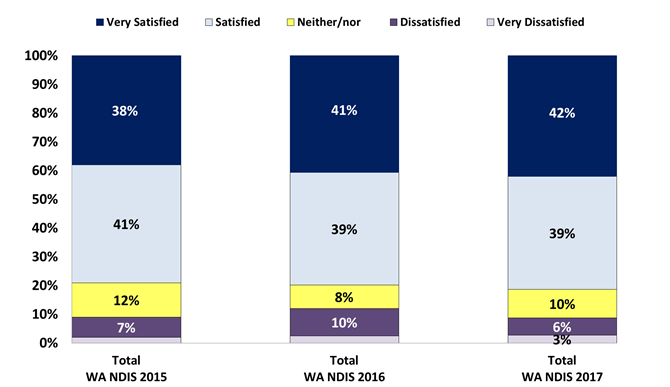
**Figure 1 Satisfaction with the expectation that the strategies in the plan will help the client to achieve their plan goals**

**83%**

**80%**

Participants were asked about services received and the ease of contacting their Local Coordinator. Nearly 85 per cent were satisfied with the ease at which they could contact their Local Coordinator.

**Figure 2** shows the 2017 results of how satisfied respondents are with the services that they received as part of their current (or previous) WA NDIS Plan. Eighty-one per cent of respondents are satisfied or very satisfied with the services they received. This result is consistent with previous periods.



Community Participation/Sense of Inclusion

**79%**

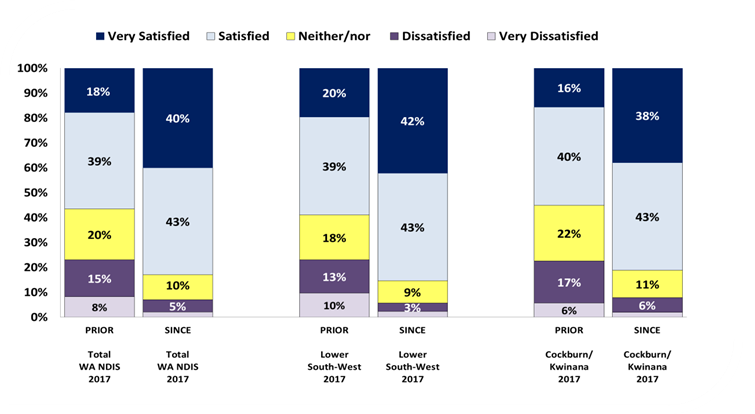
**80%**

**81%**

**Figure 2: General satisfaction with the services that the client received as part of their WA NDIS plan**

Participants were asked about how some aspects of their lives had changed since before their plan was developed. This included access to the community and participation in local services and activities.

**Figure 3** compares responses to the questions, “how satisfied were you with your participation in local services prior to developing your WA NDIS plan?” and “how satisfied have you been with your participation in local services since developing your WA NDIS plan? Across all respondents satisfaction levels increased since plan development. Eighty three per cent were satisfied or very satisfied since developing their plan, with a 16 per cent increase in satisfaction and a 15 per cent reduction in dissatisfaction.



**57%**

**Prior**

**83%**

**Since**

**59%**

**Prior**

**85%**

**Since**

**56%**

**Prior**

**81%**

**Since**

**Figure 3 Satisfaction with the participation in local services and activities prior to and since developing a WA NDIS Plan**

# Conclusion

The trial of the NDIS in Western Australia concluded on 30 June 2017. The trial clearly demonstrated that the WA NDIS delivers positive outcomes for people with disability in Western Australia. The WA NDIS commenced in the Lower South West region on 1 July 2014, later expanding into Cockburn-Kwinana, Armadale, Murray and Serpentine-Jarrahdale.

The success of the WA NDIS is multifaceted. Throughout the trial period, the average annualised committed cost remained below the original budget, processes improved to provide participants with shorter timeframes for plan approval, and participant satisfaction levels remained consistently high year on year. The personal stories included in this report provide insight into the varied ways that the WA NDIS has positively influenced the lives of people with disability, their families and carers in Western Australia.

Disability Services is committed to the ongoing development of the WA NDIS in partnership with people with disability, their families, carers and community members. The lessons learned over the three year trial and the process of working in partnership with people with disability will be central to the implementation of the NDIS across Western Australia.

# Glossary of terms

| **Term** | **Description** |
| --- | --- |
| Actuary | An actuary is a business professional who deals with the financial impact of risk and uncertainty. Actuaries provide assessments of financial security systems, with a focus on their complexity, their mathematics, and their mechanisms”  Trowbridge, Charles L. (1989). ["Fundamental Concepts of Actuarial Science"](http://www.actuarialfoundation.org/research_edu/fundamental.pdf). |
| **Approved plans (current plans)** | Refers to individual plans (both funded and un-funded) approved by a delegated officer. To reach this stage of approval entails the prior exploration, sourcing and costing of supports and services, identification of service providers and a specified commencement date for the delivery of supports and services. |
| **ATSI (Aboriginal and/or Torres Strait Islander)** | Refers to persons who self-identify as being of Aboriginal and/or Torres Strait Islander descent. |
| **CaLD (Culturally and Linguistically Diverse)** | Refers to persons who self-identify as being born in countries other than the following, which have been categorised by the Australian Bureau of Statistics as mainly English speaking countries: Australia, Canada, England, Ireland, New Zealand, Northern Ireland, Scotland, South Africa, United States of America, Wales. |
| **Endorsed service provider** | A service provider found suitable to provide supports and services in the NDIS trial sites and has been awarded a service agreement to be on the Disability Services Commission’s Panel Contract for Individually Funded Services. |
| **Individuals eligible for supports and services** | Individuals eligible for supports and services are those who meet the NDIS eligibility criteria. |
| **Long term goal** | A long-term goal is something the person with disability wants to achieve into the future. Long-term goals are usually several years away. |
| **Mean (average)** | The sum of all the values in a data set divided by the number of values in the data set. |
| **Median** | The middle value of a funded package in a data set arranged from lowest to highest. |
| **Support areas** | Support areas are broad classifications used in the NDIS to define outcomes for individuals. |
| **Support cluster** | Encompasses the range of strategies offered by service providers within the individualised funding environment. |
| **Support domain** | A core area of life activity (e.g. economic or social participation, health and wellbeing). |
| **Unfunded plans (current plans with no funding requested)** | Plans for eligible people providing for coordinated community based service and natural supports which, at this time, do not include funded disability-specific services. |

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1. Includes 16 plans with in-kind funded strategies yet to have funding allocated; the average cost without these plans is $36,425. [↑](#footnote-ref-2)
2. A service provider-managed approach is where an individual chooses a service provider to manage all funded strategies identified in their plan. [↑](#footnote-ref-3)
3. A self-managed approach is where an individual or their representative manages all funded strategies in their plan. [↑](#footnote-ref-4)
4. A combination-managed approach is where an individual’s plan includes both self-managed and service provider-managed strategies. [↑](#footnote-ref-5)
5. Includes 16 plans with in-kind funded strategies yet to have funding allocated. [↑](#footnote-ref-6)
6. A service provider-managed approach is where an individual chooses a service provider to manage all funded strategies identified in their plan. [↑](#footnote-ref-7)
7. A self-managed approach is where an individual or their representative manages all funded strategies in their plan. [↑](#footnote-ref-8)
8. A combination-managed approach is where an individual’s plan includes both self-managed and service provider-managed strategies. [↑](#footnote-ref-9)
9. Includes 44 plans that are only in-kind or State Government managed. [↑](#footnote-ref-10)
10. The State recognises psychosocial disability under the NDIS psychiatric primary disability category. [↑](#footnote-ref-11)
11. This table includes all individuals who became eligible to participate in the NDIS following an eligibility assessment during the quarter. This includes people who may have already been in receipt of Commission supports prior to the NDIS but who did not yet have an NDIS eligibility record.\* Categories with 0-4 individuals have been masked to retain anonymity. [↑](#footnote-ref-12)
12. CALD (culturally and linguistically diverse) is used in this report to refer to persons who self-identified as being born in countries other than the following, which have been categorised by the ABS as mainly English speaking countries: Australia, Canada, England, Ireland, New Zealand, Northern Ireland, Scotland, South Africa, United States of America, Wales. [↑](#footnote-ref-13)
13. ATSI (Aboriginal or Torres Strait Islander) is used in this report to refer to persons who self-identify as being of Aboriginal and/or Torres Strait Islander descent. [↑](#footnote-ref-14)
14. The State recognises psychosocial disability under the NDIS psychiatric primary disability category.

    \* Categories with 0-4 individuals have been masked to retain anonymity. [↑](#footnote-ref-15)
15. Due to rounding, sum of percentage values may not equal to 100%. [↑](#footnote-ref-16)
16. There were 2,127 plans where individuals had decided not to identify a long term goal. [↑](#footnote-ref-17)
17. Service providers may deliver multiple services; therefore, service types will generally be greater than the total number of service providers. [↑](#footnote-ref-18)
18. Public and government agencies include other government departments or agencies and Local Government Authorities that provide disability support services. [↑](#footnote-ref-19)
19. Includes 120 people who withdrew their application for consideration. [↑](#footnote-ref-20)
20. “Not eligible” includes those individuals for whom an eligibility assessment has been completed. It does not include all individuals ineligible to participate in the NDIS under the requirements of Section 24 or Section 25 of the *National Disability Insurance Scheme Act 2013.*  [↑](#footnote-ref-21)
21. More than one category can apply to each decision. [↑](#footnote-ref-22)
22. Decisions may relate to requests raised in previous quarters. Ongoing review processes are not captured in results above. [↑](#footnote-ref-23)
23. More than one standard can apply to each complaint [↑](#footnote-ref-24)
24. More than one category can apply to each complaint [↑](#footnote-ref-25)
25. Acquitted payments may include payments from previous periods. [↑](#footnote-ref-26)
26. In-kind payments have been calculated on a pro-rata basis. [↑](#footnote-ref-27)
27. The benchmark average is calculated by applying inflation to the package value of $36,750 as referenced in the National Disability Insurance Agency’s ‘Report on the Sustainability of the Scheme - July 2015.’ [↑](#footnote-ref-28)
28. The State recognises psychosocial disability under the NDIS psychiatric primary disability category.

    \* Categories with 0-4 individuals have been masked to retain anonymity and thus current plans may not equal total. [↑](#footnote-ref-29)
29. Excludes 16 plans with in-kind funded strategies yet to have funding allocated. [↑](#footnote-ref-30)
30. The State recognises psychosocial disability under the NDIS psychiatric primary disability category.

    \* Categories with 0-4 individuals have been masked to retain anonymity and thus current plans may not equal total. [↑](#footnote-ref-31)
31. In-kind payments have been calculated on a pro-rata basis. [↑](#footnote-ref-32)
32. The benchmark average is calculated by applying inflation to the package value of $36,750 as referenced in the National Disability Insurance Agency’s ‘Report on the Sustainability of the Scheme - July 2015.’ [↑](#footnote-ref-33)
33. The addition of the payments for support types may not reconcile to the total due to rounding. [↑](#footnote-ref-34)
34. The addition of the payments for support types may not reconcile to the total due to rounding. There were also $194,300 in returned cash payments, which are deducted from the total cash payments. Therefore, the sum of values in cash payments will differ from the displayed total by that same amount. [↑](#footnote-ref-35)
35. In-kind payments in Measures 13, 52 & 81 are calculated on a pro-rata basis and will differ from the in-kind and grand totals of Measures 86 & 87. [↑](#footnote-ref-36)
36. Includes 16 plans with in-kind funded strategies yet to have funding allocated. [↑](#footnote-ref-37)
37. The State recognises psychosocial disability under the NDIS psychiatric primary disability category.

    \* Categories with 0-4 individuals have been masked to retain anonymity. [↑](#footnote-ref-38)
38. The table includes plans that were active at the end of the quarter only. [↑](#footnote-ref-39)
39. The table excludes 16funded plans with in-kind strategies yet to have funding allocated. Refer to measure 88 (Value and number of approved packages by disability type) where these plans have been included to calculate the average cost. [↑](#footnote-ref-40)
40. The table only includes plans that were active at the end of the quarter. [↑](#footnote-ref-41)