



Section 7

How do I measure outcomes and report?

Section 7 Introduction

This Section of the Provider Toolkit will help you understand:

- why it is important for you to measure and report outcomes for NDIS participants
- what is involved in the NDIA Provider Payment Assurance Program and how to make sure you comply
- what sort of documentation you should use and where to find example templates
- why it is important for you to read and act on NDIA updates
- how and why you should ensure that your details are kept up to date in the myplace Provider Portal.

Contents

7.1 Measuring outcomes	2
7.1.1 Report for Participant Plan Reviews	2
7.1.2 Progress reporting.....	2
7.2 Provider Payment Assurance Program	3
7.2.1 Documenting support delivery	3
7.2.2 Retaining documentation of support delivery	4
7.2.3 Documentation by support type.....	4
7.2.4 Non-compliance	6
7.3 Scheme Integrity	8
7.3.1 Impact of fraud and corruption.....	8
7.3.2 Responsibilities of providers within the NDIS relating to Scheme integrity	9
7.3.3 How can I report fraud, corruption or misuse?	10
7.3.4 Reviews	12
7.3.5 Consequences	13
7.4 Read and act on NDIA updates	14
7.5 Keep your details updated	15

7.1 Measuring outcomes

As a registered provider, it is important to measure and report on participant outcomes. The NDIA may request certain information and reports from you in the course of you delivering supports and services to an NDIS participant.

7.1.1 Report for Participant Plan Reviews

Generally, each participant will work with the NDIA and its partners to review their plan every 12 months.

A plan review is an opportunity for participants to look at their progress and set new goals to increase their skills and independence. Through this process, providers may be requested to supply a report to the participant, demonstrating the outcomes achieved as a result of the provision of that support. This request should be in line with the terms of the Service Agreement with the participant.

It is expected that plan funding amounts will change and in some circumstances reduce over time as the participant achieves increased social and economic participation.

7.1.2 Progress reporting

Providers may be requested to supply a report to the participant, demonstrating the outcomes achieved as a result of the provision of that support. This request should be in line with the terms of the service agreement with the participant.

Generally, progress reports should include:

- a summary of the supports provided to the participant
- how the support has assisted the participant to achieve or work towards their goals – for example, how their functional ability has changed over the plan period
- whether the participant has been linked to any additional information, community or mainstream supports to assist them to achieve their goals
- barriers encountered during the plan period and the strategies implemented to resolve these
- any risks identified to the participant or others
- any evidence or other information that may be relevant for the NDIA to consider when determining reasonable and necessary supports.
- if recommendations for additional supports are made, justification for the recommendations and details of the proposed outcomes (including the risk and impact on other supports)

7.2 Provider Payment Assurance Program

In this section:

[7.2.1 Documenting support delivery](#)

[7.2.2 Retaining documentation of support delivery](#)

[7.2.3 Documentation by support type](#)

[7.2.4 Non-compliance](#)

The Provider Payment Assurance Program confirms the accuracy of payment requests submitted by registered providers.

When registering as a support provider with the NDIA or NDIS Commission, your organisation agrees to be bound by the Agency's **Terms of Business** ([PDF](#))¹ ([DOC](#))². This includes the requirement that registered providers may be reviewed by the NDIA in relation to supports funded for an NDIS participant. As part of any review under the Provider Payment Assurance Program you must keep full and accurate records of supports delivered as outlined in [Section 7.2.1](#)³. Failure to do so may result in monies having to be repaid to the NDIA.

See [Section 7.2.4](#)⁴ for further information on consequences of non-compliance.

7.2.1 Documenting support delivery

Guidelines have been developed for registered providers about the basic documentation requirements needed to support the Provider Payment Assurance Program. Records, at a minimum, should be prepared and retained that include the:

- participant's name
- date(s) and total hours or quantity of the support delivered
- support type.

Depending on the nature of the support being delivered, additional documentation guidelines may apply. For guidance, the following templates are included for providers to use or adapt:

- **Documentation by Support Type** ([PDF](#))⁵ ([DOC](#))⁶
- **Support Log example** ([PDF](#))⁷ ([DOC](#))⁸

¹ https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/ndis_terms_of_business.pdf

² https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/ndis_terms_of_business.docx

³ <https://providertoolkit.ndis.gov.au/71-provider-payment-assurance-program#7-1-1-Documenting-support-delivery>

⁴ <https://providertoolkit.ndis.gov.au/71-provider-payment-assurance-program#7-1-4-non-compliance>

⁵ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/documentationbysupporttypev2.0.pdf>

⁶ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/documentationbysupporttypev2.0.docx>

⁷ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/supportlogexamplev2.0.pdf>

⁸ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/supportlogexamplev2.0.docx>

- **Group Roster example** ([PDF](#))⁹ ([DOC](#))¹⁰

Further explanation of their use is identified in the sections below.

7.2.2 Retaining documentation of support delivery

The following documentation should be kept on file (either electronically or paper based) and easily accessible as evidence of support delivery:

- Service Agreement containing the schedule, cost, type and quality of supports to be delivered; as well as the expected outcomes for the participant
- approved quotes as appropriate
- evidence of support quantity
- evidence of support type

Logs for 1:1 support (see **Support Log example** ([PDF](#))¹¹ ([DOC](#))¹²) and rosters for group supports (see **Group Roster example** ([PDF](#))¹³ ([DOC](#))¹⁴) are the best method of documenting the quantity of supports delivered. Wherever possible, these logs should be signed by the participant, a parent/guardian, nominee or carer as confirmation the support was delivered as claimed. Rosters should also capture the ratio/intensity of group supports.

A log or roster may be sufficient evidence of both quantity and support type for some simple supports. More complex supports will require additional information as, and a case note should be completed. Effective case notes document the activities engaged in, and how they relate to the support type claimed. Depending on the support type, a case note may also document progress and plans for future sessions.

7.2.3 Documentation by support type

A chart of individual support items organised by Support Category (plan budgets) is available at [Section 2.3](#)¹⁵ of this Provider Toolkit. The chart is not intended to be a comprehensive list of support types or documentation requirements. Providers should use their judgement to make sure they have suitable evidence for all claims and are maintaining documentation that is fit for audit.

⁹ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/grouprosterexamplev2.0.pdf>

¹⁰ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/grouprosterexamplev2.0.docx>

¹¹ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/supportlogexamplev2.0.pdf>

¹² <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/supportlogexamplev2.0.docx>

¹³ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/grouprosterexamplev2.0.pdf>

¹⁴ <https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/grouprosterexamplev2.0.docx>

¹⁵ <https://www.providertoolkit.ndis.gov.au/23-what-services-or-supports-can-be-delivered-under-ndis>

7.2.3.1 Core supports

Core supports include the following support categories:

- assistance with daily life
- transport
- consumables (which should be documented in line with Capital supports – [section 7.2.3.2](#))¹⁶
- assistance with social and community participation (which should be documented in line with capacity building supports – see [section 7.2.3.3](#))¹⁷

Core supports are episodic, with the exception of Supported Independent Living. Episodic supports have a distinct daily start and end time. While most episodic core supports are adequately evidenced through a service agreement and roster or log, some complex core supports may also require a case note.

Supported Independent Living supports extend 24 hours or more at a time such as:

- assistance in a shared or independent living arrangement
- short term accommodation and assistance
- assistance from a live-in carer

These types of supports will be primarily documented through a formal Service Agreement detailing the duration, ratios and cost of the accommodation or carer, as well as specifying any daily supports to be provided as part of the supported living.

Additional documentation of staff to participant ratios, time sheets, group rosters and case notes detailing activities and skill building should be maintained as appropriate.

7.2.3.2 Capital supports

Capital supports include the following support categories:

- continence products
- home enteral nutrition (HEN)
- selection and/or manufacture of customisable or wearable technology
- all assistive technology
- vehicle and home modifications

These supports (as well as consumables) should be invoiced to the participant. Invoices with the participant's name, NDIS number and the date of delivery may not require additional evidence of quantity or support type.

¹⁶ <https://providertoolkit.ndis.gov.au/73-scheme-integrity#7-3-2-Responsibilities-of-providers>

¹⁷ <https://providertoolkit.ndis.gov.au/73-scheme-integrity#7-3-2-Responsibilities-of-providers>

7.2.3.3 Capacity supports

Capacity supports include the following support categories:

- coordination of supports
- improved living arrangements
- increased social and community participation
- finding and keeping a job
- improved health and wellbeing
- improved learning
- improved life choices
- improved daily living

These types of supports (as well as assistance with social and community participation) will typically require both a log or roster and a case note as evidence of quantity and type.

Where delivery of these supports results in the delivery of a final report or assessment to the participant, additional documentation may not be required if the participant's name and NDIS number, date(s), times and quantity of the support type are documented.

If a provider is delivering coordination of supports to a participant in conjunction with any other support delivery, the provider must retain documentation of the following:

- organisational arrangements in place to keep information separate between teams
- a participant's options for their coordination of supports
- documentation that there is no remuneration provided to staff for participant volume
- documentation confirming that there are no trailing commissions or percentages on funds managed
- confirmation that the conflict of interest and above information was disclosed to the participant

7.2.4 Non-compliance

Failure to adhere to the **Terms of Business** ([PDF](#))¹⁸ ([DOC](#))¹⁹ and Provider Payment Assurance Program could result in review of your status as a registered provider.

Claims which are found to be unsupported by the documentation retained by providers may need to be repaid to the NDIA.

¹⁸ https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/terms_of_busines_30032017.pdf

¹⁹ https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/ndis_terms_of_business.docx

Providers concerned that they may be in breach of, or at risk of breaching, their responsibilities under the Provider Payment Assurance Program should contact their local NDIS office.

7.3 Scheme Integrity

7.3.1 Impact of fraud and corruption

When people think about the impact of fraud, they typically think about the financial cost. Fraud does have a large financial cost, but also has impacts in other areas, including the Government, your business, the community and yourself. All of these can impact you as a provider and can jeopardise the sustainability of the NDIS.

It is in everyone's best interest – participants, providers and the broader Australian community - that fraud and misuse are prevented within the NDIS.

7.3.1.1 Cost of fraud

Fraud costs Australians \$6 billion a year, making it the most costly crime to the community. Over \$1 billion of this is against the Australian Government.

Fraud now accounts for \$1 in every \$8 of crime-related costs in Australia.

Reported cases of fraud have increased. In the six months to September 2016 there were 2.5 times more cases of fraud compared to the same period in 2015.

7.3.1.2 Impact on your business

Impacts on your business can include:

- damage to reputation and credibility (e.g. Participants no longer want to use your services)
- loss of resources (e.g. loss of money due to payment of large fines)
- loss of sensitive information (e.g. losing confidential data due to an employee disclosing it to someone)

7.3.1.3 Impact on the NDIA

Impacts on the NDIA can include:

- loss of public confidence
- undermines the integrity of NDIA information and services (e.g. people may not feel safe with the NDIA having their confidential information)
- hinders the implementation and damages the effectiveness of the NDIS
- loss of resources (e.g. less money available in the NDIS)
- decrease in staff morale

7.3.1.4 Impact on the community

Impacts on the community can include:

- reduction in funds available for delivering public goods and services, such as the NDIS
- the facilitation of other criminal activity, including organised crime
- risks to public health and safety (e.g. if providers are not adequately qualified to be providing the services they are)

7.3.1.5 Impact on you personally

Personal impacts may include:

- criminal prosecution
- being sued through civil action
- loss of job, loss of income, demotion and/or loss of official entitlements such as superannuation

7.3.2 Responsibilities of providers within the NDIS relating to Scheme integrity

Ensuring Scheme integrity is the responsibility of everyone engaged with the NDIS to protect against misuse and fraud. Your responsibilities to ensure Scheme integrity within the NDIS include:

- acting in accordance with Australian Consumer Law and NDIS Terms of Business (detailed further below)
- establishing a Service Agreement with the participant that includes information on type of service, when, where and how it will be provided, who will provide it, the price and cancellation arrangements
- creating Service Bookings in accordance with the Service Agreement
- charging in-line with amounts specified in the NDIA Price Guide
- declaring prices to participants before delivering a service
- providing a receipt to participants to acquit against their plan
- making a payment request only after that support has been delivered or provided
- submitting Payment Requests for Agency-managed participants within a reasonable time (and no later than 60 days from the end of the Service Booking)
- keeping full and accurate records of supports delivered

- proactively managing perceived and actual conflicts of interest

7.3.3 How can I report fraud, corruption or misuse?

You should report your suspicions as soon as you reasonably believe a suspicious activity is occurring.

Do not conduct an investigation yourself!

Waiting for more information or making further inquiries yourself may put confidentiality at risk or impair the investigation that follows.

Having a suspicion about a dishonest or unlawful act is sufficient justification to report the matter for investigation as long as your suspicion is reasonable and impartial.

There are many channels you can use to report fraud or misuse. Your choice of channel may depend on the type of incident you wish to report.

7.3.3.1 If you wish to report fraud or misuse to the NDIA

The NDIA has a special fraud reporting hotline and email address that you can use to report fraud to the NDIA.

You can report suspected fraudulent or unethical behaviour impacting the NDIS by email to fraudreporting@ndis.gov.au or by calling 1800 650 717. Information can be provided anonymously.

If you are a TTY user -
phone 1800 555 677 then ask for 1800 650 717.

If you are a Speak and Listen (speech-to-speech relay) user -
phone 1800 555 727 then ask for 1800 650 717.

If you are an internet relay user -
visit the [National Relay Service website](#)²⁰ and ask for: 1800 650 717.

If you require more information then visit the [National Relay Service website](#).²¹

7.3.3.2 If you are not happy with the NDIA (not related to fraud or misuse)

The Commonwealth Ombudsman investigates complaints from people who believe they have been treated unfairly or unreasonably by an Australian Government Agency or an organisation contracted to deliver services on behalf of the government.

²⁰ <https://relayservice.gov.au/>

²¹ <https://relayservice.gov.au/>

The Commonwealth Ombudsman can be contacted at:

1300 362 072 (Calls from mobile phones at mobile phone rates)

If you are a non-English speaking person, we can help through the Translating and Interpreter Service (TIS) on 131 450.

If you are deaf, or have a hearing impairment or speech impairment, contact us through the National Relay Service:

TTY users phone 133 677 then ask for 1300 362 072

Speak and Listen users phone 1300 555 727 then ask for 1300 362 072

Internet Relay users connect to the [National Relay Service](#)²² then ask for 1300 362 072

7.3.3.3 If a participant is not happy with a product you have provided

The Australian Competition & Consumer Commission (ACCC) provides information about consumer rights, and accepts complaints about businesses that may have breached the Competition & Consumer Act 2010.

The ACCC can be contacted at:

1300 302 502, Monday to Friday from 8.30am to 5.30pm AEST

The consumer protection agencies relevant to your state or territory can provide information about consumer rights, accept complaints about businesses and can assist in identifying the issues in dispute and exploring options to resolve the situation

Consumer protection agencies by State are:

- Access Canberra
- NSW Fair Trading
- NT Consumer Affairs
- Office of Fair Trading Queensland
- SA Office of Consumer and Business Services (CBS)
- Tasmanian Consumer Affairs & Fair Trading
- Consumer Affairs Victoria (CAV)
- WA Department of Commerce

²² <https://relayservice.gov.au/>

7.3.3.4 If you or a participant is not happy with a disability service

There are a number of national, state and territory agencies that can provide you information about your rights, and assist with enquiries or complaints about disability services.

NSW - NSW Ombudsman

Provides advice and assistance in the resolution of complaints about disability services

NSW – NSW Health Care Complaints Commission

Handles complaints about health service providers and offers advice on how to resolve any concerns directly with a health service provider without the need to make a formal complaint.

VIC – Disability Services Commissioner

Provides advice and assistance in the resolution of complaints about disability services.

QLD - Office of the Health Ombudsman

Handles complaints about health services and health service providers, and helps resolve complaints between customers and providers.

SA - Disability Advocacy & Complaints Service of South Australia

Provides support, information and advocacy for people with disability, their families, friends and carers.

NT - Health & Community Services Complaints Commission

Helps resolve complaints about disability and health services.

ACT - ACT Disability & Community Services Commissioner

Helps resolve complaints about disability services.

WA - Health and Disability Services Complaints Office

Offers a free impartial resolution service for complaints relating to health, disability or mental health services in Western Australia and the Indian Ocean Territories.

TAS - Health Complaints Commissioner

Helps resolve complaints about health services and health service providers, including some disability services and disability service providers.

7.3.4 Reviews

The NDIS has a range of mechanisms for detecting fraud, corruption and misuse. These include:

- audits
- data mining/matching and analysis
- receiving referrals from other entities and sharing information with them
- payment monitoring and reviews (regular, random, targeted)
- internal and external reporting mechanisms (tip offs to fraud reporting hotline and email)

The NDIA conducts random periodic reviews on NDIS compliance with providers and participants. This involves conducting audits and risk assessments for fraud, misuse and conflict of interests.

Support providers may be assessed on their invoicing activities with NDIS participants to validate the existence, quantity and rate of claims.

All incidents of suspected or potential fraud or corruption committed by staff, participants and providers are assessed by the NDIA Scheme Integrity team.

7.3.5 Consequences

Suspected fraud or misuse will be investigated by the NDIA and further action may be taken against providers, participants or NDIS staff found to be non-compliant with their obligations.

If someone is found committing fraud, corruption, misuse or fails to declare a conflict of interest, there can be serious consequences. Consequences can range from loss of job, conviction in a criminal or civil court, attainment of a criminal record, or jail.

Failure of providers to adhere to the NDIS Terms of Business could result in evaluation and revocation of their status as a registered provider.

Claims that are found to be unsupported by the documentation retained by providers may need to be repaid to the NDIA.

7.4 Read and act on NDIA updates

The NDIA provides regular updates to providers about the NDIS and any changes to the myplace provider portal via:

- the NDIS website (Provider page)
- the Provider Toolkit
- notifications from the myplace provider portal
- email.

All registered providers should ensure that they regularly check the [NDIS Provider page²³](#) and act on the updated information.

Providers must take responsibility for making the internal changes required to remain compliant with their requirements as a registered provider with the NDIS.

²³ <https://www.ndis.gov.au/providers.html>

7.5 Keep your details updated

All registered providers are required to keep their details up to date via the myplace provider portal.

If there are any changes to your operations that may affect your service delivery or registration status as outlined in the NDIA's **Terms of Business** ([PDF](#))²⁴ ([DOC](#))²⁵ you must notify the NDIA. For providers operating in NSW and/or SA, you must contact the [NDIS Commission](#)²⁶ for any registration issues.

As outlined in the Terms of Business, registered providers must notify the NDIA if they are in breach of any Commonwealth, state or territory law, including any Commonwealth, state or territory disability service standards, or if they become subject to any investigation for breach of a Commonwealth, state or territory law and/or quality and safeguard arrangements.

The NDIA can be contacted by:

- Submitting an online [contact form](#)²⁷
- Calling 1800 800 110 (8am to 11pm local times, Monday to Friday)
- Speaking to an NDIS staff member at one of our [NDIS offices](#)²⁸

²⁴ https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/ndis_terms_of_business.pdf

²⁵ https://providertoolkit.ndis.gov.au/sites/g/files/net3066/f/ndis_terms_of_business.docx

²⁶ <https://www.ndiscommission.gov.au>

²⁷ <https://www.ndis.gov.au/form/contact-form.html>

²⁸ <https://www.ndis.gov.au/about-us/locations.html>