



**NDIS Quality
and Safeguards
Commission**

Regulator Performance Framework

Self-Assessment Report 2018–2019

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About the NDIS Commission

The NDIS Quality and Safeguards Commission (NDIS Commission) is a statutory agency established under an amendment to the *National Disability Insurance Scheme Act 2013* (the NDIS Act). The Commission commenced operations in New South Wales and South Australia from 1 July 2018 and in Victoria, Queensland, Tasmania, the Northern Territory and the Australian Capital Territory from 1 July 2019. We are scheduled to commence operations in Western Australia from 1 December 2020.

Our Commissioner has functions, as set out in the NDIS Act, with which the Commission assists. These include a variety of activities relating to quality and safeguarding, most notably our core functions of registration, reportable incidents, complaints, and behaviour support.

We have appropriate compliance and enforcement powers, allowing us to investigate complaints, reports of non-compliance, and other apparent breaches, and to impose appropriate sanctions.

More detailed information about the Commission can be found at www.ndiscommission.gov.au.

Regulator Performance Framework

All regulatory agencies are required to undertake an annual self-assessment against the Regulator Performance Framework (the Framework) as part of the Australian Government's commitment to reducing unnecessary and inefficient regulation.

The Framework measures the performance of Australian Government regulators, giving confidence to businesses and the community that regulators are managing risk with the minimum of impact necessary to achieve regulatory objectives.

Undertaking our self-assessment against the Framework

To support our self-assessment we have developed metrics that detail how we interpret and report against the Framework's KPIs and measures. Our self-assessment report describes how we performed against each KPI and individual performance measures based on our evidence metrics. The report also provides our self-assessment rating of the NDIS Commission's overall performance. We have adopted streamlined ratings of "achieved", "substantially achieved" or "achievement progressing" based on the strength and quality of our evidence.

In undertaking our self-assessment, we have gathered and used evidence from multiple sources including:

- feedback from providers and disability industry groups
- feedback from Joint Accreditation System Australia New Zealand (JAS-ANZ)
- survey responses from registered providers who have undergone the audit process
- market monitoring and oversight activities

- information and advice published on our website
- community consultation.

We provided our draft self-assessment to a stakeholder consultative mechanism (SCM) in the form of a committee composed of industry representatives, to provide their review and feedback on our performance during the reporting period. This feedback informs our continuous improvement strategy to improve as a regulator and enhance our responsiveness to the entities we regulate.

Our self-assessment results for 2018–2019

The criteria we used for our 2018–2019 self-assessment were:

- the Framework's six key performance indicators (KPIs) and 20 measures of good regulatory performance (performance measures)
- the NDIS Commission's agreed evidence metrics.

The self-assessment ratings we used are:

Achieved	Substantially Achieved	Achievement Progressing
We have demonstrated a strong performance against <u>all</u> performance measures under the KPI	We have demonstrated good performance against <u>the majority</u> of performance measures under the KPI	We have demonstrated improvable performance against some performance measures under the KPI





Summary of self-assessment results 2018–2019

Regulator Performance Framework KPI	Rating (2018–2019)
KPI 1 - Regulators do not unnecessarily impede the efficient operation of regulated entities	Rating: Substantially Achieved 
KPI 2 - Communication with regulated entities is clear, targeted and effective	Rating: Substantially Achieved 
KPI 3 - Actions undertaken by regulators are proportionate to the regulatory risk being managed	Rating: Substantially Achieved 
KPI 4 - Compliance and monitoring approaches are streamlined and coordinated	Rating: Achievement Progressing 
KPI 5 - Regulators are open and transparent in their dealings with regulated entities	Rating: Achieved 
KPI 6 - Regulators actively contribute to the continuous improvement of regulatory frameworks	Rating: Substantially Achieved 

Self-assessment results

KPI 1 - Regulators do not unnecessarily impede the efficient operation of regulated entities

Rating: Substantially Achieved

Measure 1.1: We demonstrate an understanding of the operating environment of our industry or organisation, or the circumstances of individuals and the current and emerging issues that affect the sector

- **1.1.1 Completeness and availability of the NDIS Quality and Safeguards Commission Communications and Engagement Framework**
The NDIS Quality and Safeguards Commission Communications and Engagement Framework is published on our website. This guides the approach taken to communicating with the sector in a structured and considered manner.
- **1.1.2 Evidence of regular consultations or engagement with stakeholders on policies and procedures**
2018–19 was the NDIS Commission’s first year of operations. As a new agency, we began planning options to create our consultative mechanisms, including consultative committees. These commenced in the following reporting period.

Measure 1.2: We take actions to minimise the potential for unintended negative impacts of regulatory activities on regulated entities or affected supplier industry or supply chains

- **1.2.1 Documented use of the feedback received from regulated entities, including feedback from existing complaint mechanisms**
Feedback was actively sought on the impacts of the new regulatory arrangements. Registered providers and disability industry groups provided feedback about the registration process. This feedback informed changes to the audit scheme guidelines in 2018–19 and we commenced work in June 2019 to amend provider registration rules. Any negative feedback we receive from providers regarding our complaint handling or reportable incident functions is escalated for assessment and action as considered appropriate. Officers take a proportionate approach in dealing with complaints or reportable incidents. Most matters are addressed through phone calls and email exchanges. Detailed inquiries are made when significant concerns are identified or where informal processes fail to address concerns. Officers routinely educate providers about their regulatory obligations and the steps to take to better comply with them.
- **1.2.2 An accessible complaint mechanism is maintained (for clarity, this refers to complaints about the NDIS Commission to the NDIS Commission, not the exercise of the NDIS Commission’s complaints function)**
Our feedback and complaints mechanism is accessible on the NDIS Commission’s website. This information explains how people can contact and/or complain about us. Providers and participants are able to inform us of any concerns they may have about our decisions or processes. Any concerns raised with our complaints and reportable incident officers are appropriately escalated. In 2018–19, one

provider complaint about the handling of a reportable incident matter in a state office was escalated to the Complaints Commissioner's team and the Branch Manager Operations. This resulted in an apology to the provider and further training for relevant staff.

Measure 1.3: We implement continuous improvement strategies to reduce the costs of compliance for the entities we regulate

- 1.3.1 Feedback from regulated entities is used to identify improvement opportunities**

The NDIS Commission closely monitored the impact of the new registration arrangements on disability service providers during the year. We surveyed registered providers who had undergone the audit process and we listened to feedback about the impacts on the NDIS market. Observations made by the Joint Standing Committee on the NDIS also helped us identify improvement opportunities. In April 2019, we made changes to the audit scheme guidelines. These amendments provided greater clarity and a more proportionate approach to audits. The work we commenced in June 2019 to amend provider registration rules further reduced the regulatory impact on providers, particularly small businesses. Our Behaviour Support Branch consulted with Commission Operating System (COS) users to establish areas for systems improvement, and involved providers in user testing of system enhancements. Substantial enhancements were made to the COS behaviour support module to ease the process of lodging a behaviour support plan.

A weekly reporting process was introduced for the routine use of unauthorised restrictive practices (URP) to reduce the burden on providers imposed by the Reportable Incident Rules, which require every use of an URP to be reported. On 1 July 2019, the NDIS Commission also introduced the reportable incident portal for Registered NDIS Providers to lodge reportable incidents. This has allowed the phasing out of paper notifications, and gives Providers a centralised point of contact with the NDIS Commission through the NDIS Commission Portal.

- 1.3.2 Documented evidence of how the NDIS Commission responds to complaints made to the Ombudsman about the NDIS Commission**

Complaints received from the Commonwealth Ombudsman are managed by the NDIS Commission's Office of the General Counsel. They are also an agenda item at quarterly liaison meetings between the Commonwealth Ombudsman and the Complaints Commissioner. A complaint was made to the Ombudsman in late 2018 regarding the response time for an application for registration. In dealing with this complaint, it was found that no changes to registration processes were necessary as a result of this particular matter.

- 1.3.3 Policies and procedures include consideration of reducing compliance costs**

The Support for NDIS Providers Program, administered by the NDIS Commission, funds the development of tools and resources for the benefit of providers, including supporting businesses and individuals to meet quality assurance requirements. We awarded \$5.7 million in grants to 10 recipients in 2018–2019, to help with the development of practical tools that assist providers to meet regulatory requirements.

KPI 2 - Communication with regulated entities is clear, targeted and effective

Rating: Substantially Achieved

Measure 2.1: We provide guidance and information that is up to date, clear accessible and concise through media appropriate to the target audience

- **2.1.1 Percentage of published / produced guidance materials that complies with government accessibility standards**

We have procedures in place to support the production of content into an accessible format, as part of both the development and desktop publishing stages of document production. The NDIS Commission aims to achieve 100% accessibility where possible, noting that due to the urgency of certain circumstances, on occasion an accessible version of resources follows shortly after publishing rather than being published alongside the published document.

- **2.1.2 Education materials, engagement activities are provided to inform the sector of changes via a variety of channels**

A range of accessible information was made available for providers, people with disability, advocates and peak bodies to support their knowledge and understanding of the role of the NDIS Commission and the protection of the rights of people with disability under the NDIS Code of Conduct and NDIS Practice Standards. Material included a participant welcome pack, a provider information pack (available online and in hard copy), social media presence, webinars, stakeholder roadshows and an advocacy forum. Provider information packs were sent to providers in June 2019. Participant welcome packs were made available on our website in standard, Easy Read, Auslan and Braille formats. All information is available to order online.

Measure 2.2: We consider the impact on regulated entities and engage with industry groups and representatives of the affected stakeholders before changing policies, practices or service standards

- **2.2.1 Sector stakeholders are consulted on proposed regulatory policy changes through formal and informal mechanisms**

The NDIS Commission consults with stakeholders through formal mechanisms such as:

- Inter-jurisdictional governance groups:
 - Council of Australian Governments (COAG) Disability Reform Council (DRC)
 - DRC Senior Officials Working Group (DRC SOWG)
- Inter-jurisdictional sub-committees and working groups:
 - Sub-SOWG Quality and Safeguarding Working Group (Sub-SOWG)
 - Market Oversight Working Group (MOWG)
 - SOWG NDIS School Education Working Group
- Portfolio governance committees:
 - NDIS Quality and Safeguards Committee (NDIS Q&S Committee)
 - NDIA Protocol Working Groups

In 2018–19, we also consulted with transitioning state and territory governments through transition working groups established with representatives from the Department of Social Services (DSS), the National Disability Insurance Agency (NDIA) and the NDIS Commission. In addition, forums, meetings and

roadshows were held in states and territories that transitioned on 1 July 2019. Informally, state and territory staff in NSW and SA worked with stakeholders in their states.

A small group of providers were invited to take part in a pilot of the reportable incidents portal prior to its finalisation and public release. Shortly after its release, the providers were invited to give their further feedback for potential future enhancements.

Measure 2.3: Our decisions and advice are provided in a timely manner, clearly articulating expectations and the underlying reasons for our decisions

- 2.3.1 Percentage of registration decisions and suitability assessments of practitioners processed within benchmarked timeframes**

As 2018–19 was the NDIS Commission’s first year of operation, there was no established benchmarking for timeliness. We will use the operational data generated in the 2018–2019 year to inform benchmarks for future years. During 2018–19, we received 765 completed registration applications for both new registrations and renewals. We also received 914 applications to vary registration. 74% of all registration applications were determined within four weeks of receiving the complete application. Additionally, all practitioner notifications were processed within 10 working days.

- 2.3.2 All regulatory decisions are supported with reasons for decision and where applicable information on review or appeal mechanisms**

We are transparent with all of our regulatory decisions. All correspondence regarding outcomes of provider registration applications, and notifications for the commencement of compliance and enforcement activity, include reasons for the decision or the compliance activity, and provide information about applicable review mechanisms. Decisions made by complaints and reportable incident officers are documented in COS and linked to the relevant rule(s) and made under appropriate delegated authority. Reasons for decisions are provided to providers and complainants at the closure of a complaint.

Measure 2.4: Our advice is consistent and supports predictable outcomes

- 2.4.1 Standard operating procedures for decision making are used by staff**

During 2018–19 the NDIS Commission began work on the development of the Commission Operating Model (COM). The COM will support us to deliver our purpose and vision and achieve our objectives. The COM will include a staff handbook, a staff guidance manual, operational guides and blueprints to be used by staff. Over the 2019–20 reporting period, our focus will be on designing and enhancing processes and procedures to improve the way we work. This will include enhancements to COS, our data and analytics platform and our communications and internal information exchange processes. We have commenced work on the development of our Standard Operating Procedures (SOPs) and a repository for them. SOPs for key processes exist and are accessible, and are used to guide decision making by complaints, reportable incidents and contact centre staff. Templates, forms and guidance material are also available to assist staff in their decision-making. Documents explaining our processes are available on the NDIS Commission website.

- 2.4.2 Third parties engaged in the regulatory model are provided with consistent direction on activities**

The NDIS Commission provides all third parties engaged in the regulatory model with consistent and clear direction on their activities. The NDIS Act and Rules require a provider, who is applying for registration as a provider, to be assessed by a third-party approved quality auditor as meeting

established quality standards. Providers must meet the cost of engaging an auditor to undertake an audit. The NDIS Commission provides guidance for auditors through the NDIS (Approved Quality Auditors Scheme) Guidelines 2018 and provides training for individual auditors to drive consistency in the market. In 2018–19 we worked closely with Joint Accreditation Systems Australia and New Zealand (JAS–ANZ) to develop the auditor market, including conducting regular forums with approved and prospective quality auditors. We also initiated a project involving relevant bodies to establish nationally consistent principles and procedures for the authorisation of regulated restrictive practices.

- **2.4.3 Best practice guides and training available publicly**

Guidance and training material is available on the NDIS Commission website, including Reportable Incidents and Incident Management Systems and the Worker Orientation Module. To support best practice in behaviour support, in June 2019 we released both The Positive Behaviour Support Capability Framework and the Compendium of Resources for Positive Behaviour Support. We also published videos on behaviour support for both behaviour support practitioners and implementing providers. We have continued to publish practice guides and practice alerts in the intervening months.

KPI 3 - Actions undertaken by regulators are proportionate to the regulatory risk being managed

Rating: Substantially Achieved

Measure 3.1: We apply a risk-based, proportionate approach to compliance obligations, engagement and regulatory enforcement actions

- **3.1.1 A range of response actions are used that are proportionate to the level of risk identified, including graduated compliance actions depending on the severity of an issue.**

We use a range of compliance tools to prevent and address breaches of the NDIS Act including education, and working closely with other complaints and regulatory bodies. The NDIS Act also provides us with a range of compliance and enforcement powers, including banning orders, compliance notices and court-based outcomes. Our response actions are proportionate to the level of risk identified. Audits required as part of the registration process are based on the level of risk associated with the supports or services being provided and tailored to the size and scope of the provider's activities. The verification assessment method (a desk audit of the provider's documents) generally applies to lower-risk, less complex supports and services while the certification assessment method (a desk audit plus inspections and interviews) generally applies to higher-risk, more complex supports and services. In 2018–19, the NDIS Commission developed a Compliance and Enforcement Policy setting out our approach to maximise compliance with the Act, and outlining our compliance and enforcement functions, strategies and tools.

Measure 3.2: We regularly re-assess our preferred approach to regulatory risk

- **3.2.1 Strategies, activities and enforcement actions are amended to reflect changing priorities that result from new and evolving regulatory threats, without diminishing regulatory certainty or impact**

The NDIS Commission monitors both the provider market and systemic risk in the NDIS system by leveraging our ongoing monitoring, market oversight and data analytics functions. A whole-of-Commission view of our data and information allows us to identify systemic trends and risks. We use

this intelligence to inform a range of our activities including targeted compliance activity, ongoing conduct monitoring and provider suitability assessment.

The Compliance and Enforcement Committee (CEC) has an integral role in determining and setting the NDIS Commission's compliance and enforcement policy, strategy and associated operating procedures. Additionally the CEC monitors the progress of compliance and enforcement activity and the progress of regulatory functions and provides advice to the NDIS Commissioner (or their delegate) on compliance and enforcement trends and their alignment to the COM. The Committee also provides recommendations for the commencement of proceedings for any breach of a civil penalty provision.

- **3.2.2 Demonstrated avenues for stakeholders to provide feedback, and processes or policies to incorporate/consider feedback when tailoring approaches to risk including collaboration with other agencies**

The NDIS Commission collaborates regularly with other agencies and provides multiple avenues for stakeholders to provide feedback on policies and procedures and we tailor our risk approach based on this feedback. During 2018–19, the NDIS Commission closely monitored feedback concerning the impacts of the new registration arrangements. This included surveying providers, and led to changes to the audit scheme guidelines in order to provide greater clarity for a proportionate approach to audits. The Registrar and Deputy Registrar met with a range of industry groups in 2018–19 to discuss the new regulatory arrangements and the NDIS Commission's risk-based approach to provider registration. The Registration branch also met regularly with JAS–ANZ and approved quality auditors to seek feedback.

Measure 3.3: We recognise the compliance record of regulated entities, including using earned autonomy where this is appropriate. All available and relevant data on compliance, including evidence of relevant external verification is considered

- **3.3.1 Available data is used across functions to inform an integrated response to compliance**
Units/branches within the NDIS Commission collaborate closely with each other and external stakeholders to share information and data on activities. The COM outlines the key collaboration points with other Commission units, and provides a description of the purpose of the collaboration and its process. The purpose of these collaborations are varied and include:
 - ensuring engagement and communications campaigns are aligned with Commission priorities and other units
 - supporting consistent, targeted and effective messages to participants, providers, practitioners and other stakeholders
 - ensuring the registrations team benefits from the expertise in our behaviour support team to support decisions
 - ensuring registration approvals are consistent with other Commission actions
 - ensuring registration decisions are consistent with compliance actions
 - ensuring data and analytics personnel can identify trends in provider, practitioner and participant behaviour and identify providers of systematic importance to the NDIS Commission
 - ensuring our registrations team is informed of cases requiring ongoing monitoring
 - ensuring responses to provider and practitioner behaviour are consistent and taken by the appropriate unit
 - ensuring the NDIS Commission can exercise statutory tools to compel compliance with conditions of registration and the regulatory framework.

See the responses in 3.2.1, 4.2.1 and 4.2.2 for more information on how information is used across the NDIS Commission.

KPI 4 - Compliance and monitoring approaches are streamlined and coordinated

Rating: Achievement Progressing

Measure 4.1: Our information requests are tailored and only made when necessary to secure regulatory objectives, and only then in a way that minimises impact

- **4.1.1 Evidence of collected information being acted upon, stored and re-used where appropriate**

The NDIS Commission stores and re-uses information where appropriate. Our registration guidance materials include information that applicants need to provide with their application. When collecting information from applicants as part of the registration process, we clearly articulate the information needed to complete a registration application. A due date is given and the information is uploaded to COS where it can be accessed for other operational needs.

Information requests have been restricted to only the core data set for behaviour support: person details, provider details, behaviours of concern, use of restrictive practices. This data has been used internally for risk flagging.

- **4.1.2 Information requests are limited to legislated requirements, compliance and enforcement activities and/or registration decisions**

Our requests for information are limited to legislated requirements, compliance and enforcement activities and/or registrations decisions. Information is only requested from providers by the registration team for registration purposes as required under the NDIS Act and Rules, such as for assessing compliance with practice standards and assessing suitability of providers and their key personnel.

Measure 4.2: Our frequency of information collection is minimised and coordinated with similar processes including those of other regulators so that, as far as possible, information is only requested once

- **4.2.1 Information provided to the NDIS Commission and other sources is systematically recorded and used where practicable before independent information collection is undertaken**

We design our practices and systems to minimise repeat information requests. For example, all information included in a provider's application is recorded in COS. This allows other areas to identify and access information regarding key workers and staff, and any provider policies and procedures that have been collected during the audit or registration process. Information held in COS is reviewed by registration staff prior to contacting a provider for any additional information for registration purposes. Intelligence and other information received from the NDIA is recorded centrally and used in the monitoring of provider compliance with registration requirements.

- **4.2.2 Number of repeat information requests made to providers annually**

The NDIS Commission also continuously works to remove repeat information requests. For example, during the year we identified duplicate reporting requirements in relation to unauthorised use of restrictive practices for providers (to both Reportable Incidents and Behaviour Support). We have developed a legal review paper detailing the extent of duplicate reporting, to allow us to work towards streamlining processes.

Measure 4.3: We utilise existing information to limit the reliance on requests from regulated entities and share information among other regulators where possible

- 4.3.1 Percentage of monitoring and investigative activities coordinated with similar agencies**

The NDIS Commission coordinates monitoring and investigative activities with other agencies, including police and the NDIA, as appropriate. Relevant agencies and authorities are appropriately notified of matters under investigation and we create a two-way exchange of information and regulatory intelligence to allow a targeted and coordinated response. As this was the NDIS Commission's first year of operation, data is to be gathered for future self-assessment reports.

- 4.3.2 Information sharing arrangements with other government agencies, law enforcement agencies, industry complaint bodies and child protection agencies are documented**

We have a range of protocols, information-sharing schedules and guidance documentation that supports our interagency arrangements. When assessing registration applications the NDIS Commission identifies and consults other regulators who have previously made adverse findings or taken regulatory action against the provider. This is essential to ensure material information is not lost in the transfer of responsibilities from other state and territory regulators of disability services to the NDIS Commission. Outcomes of regulatory decisions (i.e. decisions to suspend, revoke or not renew registration) are shared with the NDIA to inform its role in the continuity of support for participants. Our Behaviour Support branch is exploring legal and technical options for information sharing, in particular with authorising bodies.

Measure 4.4: We base monitoring and inspection approaches on risk and, where possible, take into account the circumstances and operational needs of the regulated entity

- 4.4.1 Operational needs and circumstances of providers are considered when determining when and how to conduct investigative and compliance activities which are comprehensively documented and based on all available information**

We base our monitoring and investigative approaches on risk and where possible take into account the operational needs of the regulated entity. Our procedures are documented in the NDIS Commission Investigations Operation Guide. When monitoring compliance with registration conditions, the Registrations branch coordinates its approach with other functions including compliance and investigation operational teams. Information gathered is included in regular internal email notifications. Alerts are placed on COS to allow other NDIS Commission teams to coordinate and prevent providers being approached unnecessarily.

- 4.4.2 A risk-based approach is applied to the timing and scope of investigations and compliance monitoring activities**

The NDIS Commission takes a risk-based approach to compliance and investigation activities. We use a variety of measures to manage non-compliance issues including making enquiries and conducting investigations. Investigations are generally initiated where a complaint indicates serious or deliberate non-compliance or an emerging issue. The degree and severity of the non-compliance is a major factor in determining the use of our information gathering or enforcement powers. We have a comprehensive range of compliance and enforcement powers, tools and methods. These include the following administrative and court-based actions:

- educating providers to understand their obligations and achieve ongoing compliance

- monitoring and investigating complaints or reports of non-compliance with the NDIS Code of Conduct, the NDIS Practice Standards and other quality and safeguarding requirements where they apply
- issuing compliance notices directing a provider to do, or refrain from doing, certain things
- entering into enforceable undertakings that commit a provider to specific action
- seeking injunctions from a court to compel a person to take, or refrain from taking, certain action
- issuing infringement notices
- seeking civil penalties through a court
- varying, suspending or revoking a provider's registration
- making banning orders that prohibit or restrict specified activities by a provider, or a person employed or otherwise engaged by a provider.

KPI 5 - Regulators are open and transparent in their dealings with regulated entities

Rating: Achieved

Measure 5.1: Our risk-based frameworks are publicly available in a format which is clear, understandable and accessible

- **5.1.1 Regulatory model framework is publicly available**

The NDIS Quality and Safeguarding Framework is publicly available and is operationalised by the work of the NDIS Commission.

- **5.1.2 Compliance and enforcement strategy consistent with risk management policy is publicly available**

The NDIS Commission Compliance and Enforcement Policy is published on our website. A Compliance and Enforcement Committee was established to set policies and operational procedures around compliance and enforcement activities, and to determine compliance priorities. Those priorities include educating providers on their obligations and acting in response to serious matters affecting the safety of people with disability.

Measure 5.2: We are open and responsive to requests from regulated entities regarding the operation of the regulatory framework, and approaches implemented by us

- **5.2.1 Information and education sessions about provider registration and obligations are available**

Information was developed and made available to all providers registered with the NDIS Commission during the period, and to providers expected to transition into the NDIS Commission's jurisdiction on 1 July 2019. We updated our website and developed fact sheets, guides and other resources for providers. Local information forums were held in all jurisdictions. We partnered with industry stakeholders and the NDIA to participate in a range of events promoting the role of the NDIS Commission and supporting providers by providing information on their obligations in the NDIS.

- **5.2.2 Feedback and complaints mechanisms are in place**

The NDIS Commission has published various resources, including reportable incidents and complaint handling guidance for providers and workers. The ‘Speak-up’ campaign provided information on complaint and feedback mechanisms to providers and the public. The NDIS Commission contact centre routinely provides information and explanations to NDIS providers about our processes and operations. When they cannot assist, they will direct calls and emails through to the relevant area or executive level officer for their action and response. The contact centre regularly receives compliments on their prompt and detailed assistance. The website also explains how people can complain about the NDIS Commission or seek a review of a decision on a complaint about a provider. In addition, the Registrations branch has operational arrangements in place to respond by telephone and email to NDIS provider enquiries, requests for assistance and complaints about registration processes.

Measure 5.3: Our performance measurement results are published in a timely manner to ensure accountability to the public

- **5.3.1 Our regulatory outputs are publicly available**

Regulatory outputs are reported in the NDIS Commission's Annual Performance Statements / Annual Report and published on our website. Our regulatory activity (including registration complaints, reportable incidents, compliance and enforcement activity) is also published on our website. We publish an NDIS Provider Register in two parts. Part 1 contains information about the registration status of the provider and its registration renewal date, the supports and services it is registered to deliver and its conditions of registration. Part 2 contains information on compliance activities we have undertaken, including banning orders, compliance notices, suspensions of registration, revocations of registration and refusals to re-register previously registered NDIS providers. In 2018–2019, we released an interactive, searchable version of Part 2 of the Provider Register. The NDIS Provider Register (Part 1 and Part 2) is regularly updated by the NDIS Commission.

The NDIS Commission's reporting capacity continues to be developed as refinements are made to COS. The six-monthly activity report available on the NDIS Commission website gives breakdowns of complaints and reportable incidents. This information is also incorporated into the annual report.

KPI 6 - Regulators actively contribute to the continuous improvement of regulatory frameworks

Rating: Substantially Achieved

Measure 6.1: We establish cooperative and collaborative relationships with stakeholders to promote trust and improve the efficiency and effectiveness of the regulatory framework

- **6.1.1 Consultation and engagement mechanisms are in place to promote activities with stakeholders**

The NDIS Commission has developed an engagement framework that helps guide engagement and related communication activities for stakeholders including advisory groups, expert panels, time-limited focus groups, and people who have experience with different disability sub-types. In addition, practice alerts are issued to providers to ensure they are kept informed of events that can impact the regulatory regime. In 2018–19 the Registrar and Deputy Registrar met with a wide range of industry groups to

discuss regulatory matters. The registrations branch also met regularly with JAS-ANZ and approved quality auditors to discuss trends and issues in the auditor market.

Measure 6.2: We engage stakeholders in the development of options to reduce compliance costs. This could include industry self-regulation, changes to the overarching regulatory framework, or other strategies to streamline monitoring and compliance approaches

- 6.2.1 Feedback mechanisms are available and made known to all stakeholders**

Feedback mechanisms are promoted and available on the NDIS Commission's website and included in all published materials, including information on how to make a complaint and how to contact us to provide feedback.

- 6.2.2 Sector stakeholders are consulted on proposed regulatory policy, procedural and system changes through formal and informal mechanisms**

During 2018–19 the NDIS Commission consulted both informally and formally on proposed regulatory changes. This includes through industry groups, participant groups, auditors and inter-government committees such as the:

- Senior Officials Working Group
- Quality and Safeguards Working Group
- NDIS Quality and Safety Committee
- Market Oversight Working Group
- Disability Heads Agency Forum

Measure 6.3: We regularly share feedback from stakeholders and performance information (including from inspections) with policy departments to improve the operation of the regulatory framework and administrative processes.

- 6.3.1 Information about performance of services is provided to the Department of Social Services (DSS)**

The NDIS Commission has engaged in the NDIS Quality and Safeguards Committee (NDIS Q&S Committee) jointly with DSS to monitor emerging issues and report on key milestones and initiatives. In 2018–19 we shared regulatory information with DSS to inform and improve the regulatory framework for providers who will come under NDIS Commission jurisdiction in 2019–20 through various project working groups, including:

- the Young People in Residential Aged Care Regulatory Arrangements Working Group
- the Hearing Services Steering Committee.