



NDIS Quality  
and Safeguards  
Commission

# NDIS Quality and Safeguards Commission

Quality and Consumer  
Consultation Insights Report:  
Safety and the Complaints  
Process

December 2023



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## Knowing how to navigate the system makes me feel safer

‘Safeguards’ can be defined as actions designed to protect the rights of people with disability to be safe from the risk of harm, abuse and neglect, while maximising the choice and control they have over their lives. Essentially, safeguards are ways of keeping people with disability safe when they are receiving services.

The purpose of the NDIS Commission Complaints Team is to uphold the rights of NDIS participants, to elevate quality and safety and enable consumer independence. The team works closely with complainants, the person with disability and, where relevant, their formal and informal supports, as well as providers, to progress and resolve complaints and build participant and provider capability.

### Key Insights

#### Knowing how to navigate the system makes me feel safer

- Participants felt complaints processes needed to be more personable, with clearer information on the process and expectations. Participants also wanted greater consultation and feedback on complaints.
- Participants spoke to us about needing the necessary supports to engage effectively. Whether this was advocacy services, family supports, or a trusted individuals who was able to help them navigate the complaints process.

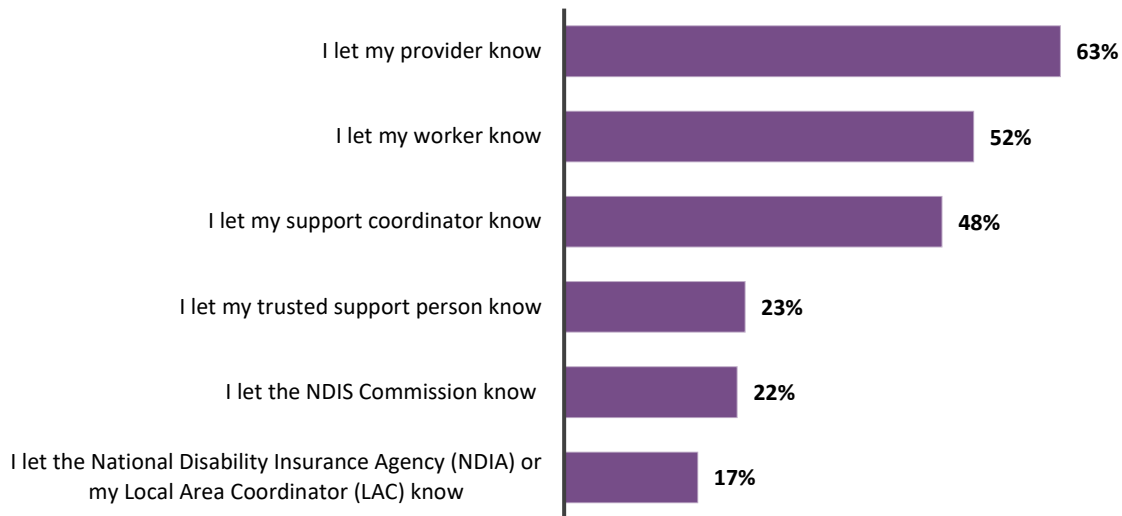
#### Provider definition

In this report, we have used the word ‘provider’ as a general description of any person or entity delivering NDIS services and supports to participants. We encountered a variety of service relationships and observed them to be varied (and sometimes complex). When participants told us about a ‘provider’ of services, this included workers considered as an employee; contractors; sub-contractors; casual employees; organisations; or sole proprietors.

More definitions and terms used in this report can be found [here](#).

Most participants who completed our survey do not approach the NDIA or NDIS Commission, instead referring to their provider or worker directly. Which may indicate participants and providers can resolve issues or may indicate participants are only engaging with NDIS Commission for specific matters or not at all.

## What do you do when you have a problem with your provider or worker?



## Making complaints is not always an easy processes

Participants noted the importance of effective complaint processes in leading to resolution, improvement and better service delivery. Many participants shared that they had not had positive experiences with complaint processes with providers or with the NDIS Commission, finding them to be difficult to navigate and unsuccessful in effecting change:

*“At the moment, there is no one I can tell because nothing happens, things get worse, and we are made to be the problem. So the terrible things continue and it is a devastating way to exist.”*

Participants told us that it is important to recognise that not everyone can articulate their needs and speak up when they do not feel safe. Complaint processes must be accessible, transparent and responsive to be effective. There was a strong desire from participants for the NDIS Commission to make the experience more personable and provide various avenues to raise concerns:

*“Feels there is a lack of respect, we can fill in the form but I am blind. People in the blind community don't make complaints.”*

Transparency of complaints was a key concern raised by participants, with many detailing experiences of feeling kept in the dark about the process. Participants noted that clear guidelines on how to make a complaint, their rights, the steps involved and the expected timeframes for resolution was needed. Participants also told us they expected open communication, allowing participants to provide feedback and engage actively in the process:

*“More openness, when they are speaking to the participant, they share what they have written and will distribute to the participant before doing so to make sure it is accurate.”*

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## There can be obstacles when making complaints

Participants shared with us significant fears of retribution or negative consequences if they make a complaint. Experiences included participants receiving reduced or substandard services, strained relationships with their support workers, and even being excluded from certain services. As one participant noted:

***“Providers and workers take it personally and provide backlash so you cannot tell them. I would love to report some providers and workers for fraud and stealing at least but we do not need the backlash.”***

Fear of retribution was raised as being particularly significant where participants depend on their support workers or service providers for essential care and support or in thin markets. For some participants, the act of complaining can be perceived as divisive, potentially straining relationships within support networks or community groups. Participants shared they may be hesitant to file complaints out of fear that it could lead to isolation or strained relationships with their support workers, peers, or families:

***“Living in a regional area, there are very few alternatives, so this fear is real. It also means that I have no leverage to suggest changes.”***

Many participants shared not being aware of their rights or the existence of the NDIS Commission’s complaints process. Participants often relied on supports to assist when things went wrong. The lack of awareness in the community and from providers about available resources resulted in participants feeling unsupported and unheard:

***“I do not know what to do. I feel very unsafe.”***

Some participants were familiar with the NDIS Commission and knew the complaints process existed, but found it too complex and intimidating. Participants described complaint processes with providers and the NDIS Commission as not being participant friendly, often quite legalised and requiring a level of specific knowledge, which discouraged them from utilising it. As one participant shared, they:

***“Felt like I had to know the whole process, part of the Act and had to escalate a complaint to the Human Rights Commission but to do so had to find similar cases.”***

Some participants shared not engaging in the complaints process due to a sense of apathy. They felt that their concerns would not be addressed or that nothing would change, leading to a lack of motivation to initiate a complaint. Participants shared struggling to engage in the process if they could not see positive outcomes or if they were not kept informed about the progress of their complaints. Participants shared encountering barriers in their previous experiences with complaints or had formed a belief that raising concerns will not lead to meaningful change:

***“Most people do not inform when they face unsafe situations because they do not think they can, or the knowing something will actually be done about the issue not brushed under the carpet or just lost in a large government organisation do not think anything will come from it.”***



For participants with communication difficulties or those who do not speak English as their first language, expressing their concerns can be a challenge. For participants with specific disabilities, such as cognitive disability or mental health conditions, they told us there are additional factors that limit their ability to engage with complaints processes. Participants shared the inadequate provision for alternative communication methods or interpretation services led to feelings of isolation and a reluctance to engage in the complaints process. One participant described their experience:

*“When a Government Agency rings you, you get a call from an unknown number. If I am out, I am using my phone for navigation so cannot take the call. Treat me with respect, make an appointment and stick to it.”*

Participants spoke to us about needing the necessary supports to engage effectively. Whether this was advocacy services, family supports, or a trusted individuals who was able to help them navigate the complaints process. Without support, engaging in complaint processes takes a significant amount of time and energy to understand the process, gather evidence, and effectively communicate their concerns. One participant shared that for them:

*“It is hard to find the space in to raise a problem when we as a family we are barely coping with multiple disabilities and multiple medical appointments. We are drowning, and when issues occur, we are too exhausted to address them.”*

Participants from Culturally and Linguistically Diverse (CALD) and First Nations communities shared how cultural differences can create barriers to making complaints. In some cultures, openly expressing dissatisfaction can be viewed as disrespectful or uncomfortable, leading participants to avoid complaints processes. Participants from these backgrounds spoke of avoiding complaining, even when they have legitimate concerns, due to concerns about appearing disrespectful or confrontational. Due to language barriers and distrust of agencies and systems, participants viewed some of the questions as being inappropriate or possible traps. They often did not know how to safely respond. They also told us that they would not engage, as they could not determine if the process would be culturally safe. This was due to no information being available on an organisation's cultural competency and what provisions were in place to support cultural safety. One participant stated:

*“Aboriginal people are unlikely to say they are unhappy with a service or to make formal complaints, and just stop using a service if it's not right for them – this is partly a cultural issue and partly about knowledge”*

## Finding support to complain is dependent on circumstances

Participants shared that making a complaint is an individual process. The decision is based on an individual's personal circumstances, the nature and complexity of the issue, and the informal and formal supports that are available to a participant. Some participants shared that they preferred to deal with issues and concerns directly:

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***“I will change workers. I will not say anything and just change workers as it is too stressful to deal with the process of putting a complaint in.”***

However, other participants felt this was too confrontational and sought the assistance from a support person, such as a support worker or coordinator who could provide valuable guidance. Many participants spoke of positive experiences with their support coordinators offering insight into the complaints process, helping with documentation, and serving as an advocate. This often led to more efficient and effective resolutions. One participant expressed they:

***“Have a senior worker who is the go between with other support workers - people know and everyone is aware if anything happens they go to the senior worker and it is accepted and if anyone else has issues to speak to the senior worker. It acts as a buffer, both parties have a go to person.”***

Some participants felt support workers might not have their best interests at heart. In these instances, relying on them for support with a complaint may strain the relationship. Participants, particularly in remote and regional locations, highly valued engaging an external advocate. Participants felt advocates offered a level of expertise and ensured the participants’ rights were upheld:

***“My advocate assists in identifying and recognising quality and shortfalls and advocates on my behalf.”***

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## Terms and Definitions

**Agency-managed participant:** A participant whose NDIS funding is managed by the NDIA. Participants who choose to be Agency-Managed can only access supports and services from registered NDIS providers.

**CALD:** Refers to any person or group of people that are culturally and linguistically diverse.

**Choice and control:** A participant has the right to make their own decisions about what is important to them and to decide how they would like to receive their supports and who from.

**Complaint:** telling the NDIS Commission if you are unhappy with or have a concern about your current NDIS supports or services.

**Confidence:** a high level of trust. For example, you are confident your provider gives you correct information.

**Consumer:** see “participant”

**Demographic information:** Data about the features or characteristics that define an individual or group. For the purpose of the Own Motion Inquiry, this includes data such as location, age and disability type.

**Dignity of Risk:** is the right to make decisions about yourself and your supports including choosing to take risks.

**Empowered:** people having power and control over their own lives and confidence to make a decision.

**Information:** Knowledge provided to you or that you look for in relation to NDIS Supports.

**Informed decision-making:** have all the information and facts available related to the decision topic

**Knowledge:** Facts, truths, information provided to you or that you look for.

**LGBTQIA+:** Refers to a person’s sexual orientation and/or gender identity and is an abbreviation for lesbian, gay, bisexual, transgender, queer (or questioning), intersex, and asexual (or allies), and more.

**Market:** A collection of providers offering products and services to NDIS participants. Also known as NDIS Market.

**Misinformation:** False or wrong information about the NDIS or NDIS services that is spread by accident or on purpose.

**NDIS Market:** The NDIS Market is the collective term for all Providers and Services available to NDIS Participants to purchase using their NDIS Plan funding.

**NDIS participants:** People with disability who receive NDIS funding to access services and supports from registered and unregistered NDIS providers.

**Participant:** A person who meets the NDIS access requirements.



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**Peak body:** An organisation which represents organisations and members of the community in the disability sector.

**Plan-managed participant:** A participant whose NDIS Plan is managed by a provider who is registered with the NDIS Commission to deliver Plan Management. Participants who choose a plan management provider can access supports and services from both registered and non-registered providers for most supports.

**Registered NDIS provider:** A registered NDIS provider is a person or organisation that is registered with the NDIS Commission in accordance with section 73E of the National Disability Insurance Scheme Act 2013. NDIS providers must be registered to deliver some kinds of supports (e.g. implementing regulated restrictive practices in a behaviour support plan). NDIS Providers must be registered to deliver NDIS funded supports and services to participants in the NDIS whose NDIS plan is managed by the National Disability Insurance Agency (NDIA), See “Agency-Managed Participants”.

**Registration Process:** Registration of NDIS providers is a process that aims to ensure the provision of safe and quality services by requiring providers meet quality and competency standards and engage in additional safeguarding practices such as reportable incidents. These standards are proportionate to the risk associated with the type of service delivery and the scale of the provider.

**Registration status:** Indicates if an NDIS provider is registered or unregistered. See also: ‘Registered NDIS provider’ and ‘Unregistered NDIS provider’.

**Safeguards:** An appropriate measure or measures taken to protect participants from unnecessary risks or harm.

**Self-managed participant:** A participant that manages their own NDIS funding either fully or in part. Participants who choose self-management can access supports and services from both registered and non-registered providers for most supports.

**Service types:** Refers to groupings by type of services and supports delivered to participants. These are:

- Support at home: such as personal care, meal preparation assistance, medication and/or skill development to increase independence with daily life activities
- Household tasks: such as lawn/yard maintenance, gardening and/or cleaning
- Community access activities: such as travel/transport, appointments, shopping, social activities
- Therapeutic support: such as Occupational Therapy, Speech Therapy, Psychology etc.
- Behaviour Support: such as implementing behaviour support strategies"

**Sharp practices:** a range of practices involving unfair treatment or taking advantage of people.

**Unregistered NDIS provider:** A provider of NDIS supports and services that has not been registered with the NDIS Quality and Safeguards Commission.

**Worker screening:** The NDIS Worker Screening Check is an assessment of whether a person who works, or seeks to work, with people with disability poses a risk to them.

**Worker/Support Worker:** An individual who deliver’s NDIS funded supports or services to an NDIS participant. A worker may be a NDIS Provider or employed or engaged by a NDIS Provider (registered or unregistered). ‘Workers’ includes but is not limited to employees, sub-contractors, independent contractors and sole traders.