

In the Fair Work Commission

Matter No: AM2014196 & AM2014/197

Title: s156 - 4 yearly review of modern awards -

common issue - casual and part-time

employment

SUBMISSIONS

29 April 2016

Filed on behalf of:	Health Services Union				
Filed by:	Leigh Svendsen Senior National Industrial Mobile: 0418 538 989 Officer				
Address:	Suite 405, 454 Collins St, Melbourne 3000				
Phone:	03 9020 1870	Email:	leighs@hsu.net.au		



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Introduction

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- 1. These submissions are made in reply to applications by ABI/NSWBC and St Ives to vary the Aged Care Award, the Nurses Award and the Social, Community, Home Care and Disability Services Award [SCHCDS Award]. The HSU opposes these applications.
- 2. The Health Services Union [HSU] makes these submissions having read the submissions in reply of United Voice, the Australian Services Union [ASU], the Australian Council of Trade Unions [ACTU] and the Australian Nursing and Midwifery Federation [ANMF]. The HSU agrees with and adopts the submissions of the other union parties.
- 3. In particular, the HSU adopts the submissions of the other union parties concerning the modern awards objective, and their submissions as to the Fair Work Commission's approach to this review of modern awards as laid out by the Full Bench in their decision [2014] FWCFB 1788 of 17 March 2014.
- 4. The HSU also supports the ANMF comments in reference to the initial consideration of the engagement of part-time employees by the Australian Industrial Relations Commission [AIRC] who, noting the relevance of reasonably predicable hours of work and its importance to part-time employees, inserted the protections which are the subject of these applications.

Effect of the employer parties' applications

- 5. Australian Business Industrial / NSW Business Chamber [ABI/NSWBC] and St Ives Group make a number of applications to vary the following awards.
- 6. The ABI/NSWBC proposal removes the requirement for employers to reach agreement with part-time employees, prior to the commencement of employment, on their hours of work, times of day/s and days of the week on which those hours will be worked.
- 7. The only current provision to be retained is reaching agreement on the minimum hours of work.
- 8. These proposals would significantly vary the requirements for agreement between the employer and employee prior to the commencement of employment, reducing it to the minimum number of hours to be worked in a week. The provisions which provide a part-time

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- employee with some certainty over their hours of work, such as reaching an agreement about the days, hours (or shifts) to be worked, are varied to 'may' be agreed. Relegating them to a possible inclusion only, and in the HSU submission, effectively non-existent.
- 9. The ASU notes the loss of certainty around hours is significant. In fact, while the ASU use the example of a low minimum of 8 hours weekly, there is nothing in the words proposed that would preclude an employer from offering a part-time contract with a zero minimum hours per week. This does not just 'redefine the notion of part-time employment...' as submitted by the ABI/NSWBC on 30 November 2015, it would result in employees being engaged allegedly as part-timers but effectively as casuals, without a casual loading.
- 10. The St Ives Group variation seeks a similar outcomes, with additional changes to the roster provisions.
- 11. Whilst retaining the idea of 'reasonably predictable hours of work', the minimum hours are to be agreed over a fortnight, changed from a week, and hours/days of work are not agreed but identified as 'available'. Coupled with the changes in roster provisions, the hours when a part-time employee is to work may vary wildly week to week, and predictability would be significantly reduced.
- 12. The changes in roster practices reduce employees' entitlements to notice to a seven day time period prior to the commencement of the seven day roster. Such a variation would significantly reduce an employee's ability to plan both their work and home life.
- 13. The HSU opposes both the applications by ABI/NSWBC and by St Ives Group.

Employer parties claims in support of their applications

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- 14. Both St Ives and ABI/NSWBC claim that the coming changes to the aged care and disability services sector will be drastic and require a significant increase in the flexibility of employees' working conditions because clients/ participants will be able to choose their service provider. What is proposed constitutes a significant decreases in the employees' entitlements to any control or say over their work times.
- 15. All parties acknowledge that both the aged care sector and the disability services sector are undergoing or slated to undergo change. Funding in both sectors is being directed to enable clients more say and control over how their services are delivered and needs met.
- 16. However, the applicants' view of the purported unfolding world order is a Henny Penny approach to cry that the sky is falling without waiting to find out what happens when these schemes are in place and rolled out. The HSU submits that the applicant's own evidence shows that the changes are foreshadowed in the majority of Australia; remain under trial even in the trial locations; and are subject to change as the participants, local area coordinators, support coordinators, service providers and NDIA learn; and the concerns of the applicants are presumptive.
- 17. The HSU fundamentally disagrees that the changes will have the drastic impact foreshadowed by the applicants and other employer parties. Nor does the HSU believe that the brunt of what,

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if any, negative impact of the changes in these sectors might occur, should be borne by employees.

Evidence

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- 18. The witness statement of Mick Paddick describes the restrictions contained within the funding arrangements encapsulated in an NDIA plan and the service agreement between participants and service providers. Mr Paddick's evidence will show:
 - a. The types of information contained in an NDIA plan;
 - b. That there are limitations to the actual and available flexibilities within plans;
 - c. Service level agreements must be entered into between the service provider; and
 - d. How a plan may be reviewed.
- 19. The HSU adopts the submissions of the other union parties, and submits that the proposed changes are unnecessary and contrary to the modern awards objectives.

HSU Submissions

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Leigh Svendsen
Senior National Industrial Officer



In the Fair Work Commission

Matter No: AM2014/196 & AM2014/197

Title: Part-time & casual common matters

WITNESS STATEMENT OF MICK PADDICK

29 April 2016

Filed on behalf of:	Health Services Union				
Filed by:	Leigh Svendsen Senior National Industrial Officer Mobile: 0418 538 989				
Address:	Suite 408, 454 Collins St, Melbourne 3000				
Phone:	03 9020 1870	Email:	leighs@hsu.net.au		



I, Michael Paddick, of Victoria say:

Personal

- I am currently employed as a Team Leader, Case Management (IFS) Barwon Area at the Victorian Department of Health and Human Services (Geelong).
- 2. I have worked in this position for ten years.
- 3. I have 28 years of experience; including 12 years at the Colanda Centre, the remainder in Case Management roles with Disability Services. I hold a Certificate IV and Advanced Diploma in Disability.
- 4. My current role involves managing a case management team in the Colac and Geelong Area including direct supervision of two advanced practitioners.
- 5. I was Team Leader when the National Disability Insurance Agency [NDIA] trial was rolled out in 2013 in the Barwon Area. The Case Management Team was required to change work practices in line with the role out including adaptation to working with the NDIA as a funding provider, assisting clients to transition to the NDIA.
- 6. The Case Management team are required to track and record all time allocated to each participant, typically recorded in 15 minute blocks, and then claimed at the end of each week. Case Management staff, where required, support clients to review and develop their NDIA Plans, to varying degrees depending on the complexity of each case. Case Management staff provide the NDIA with a Support Coordination review document at regular and pre-determined intervals, outlining progress through the plan including goals reached and the clients participation in implementation of the Plan. In the interim, Case Management staff will provide feedback to the NDIA if required, i.e., typically if goals change or the client fails to adequately cooperate with the Support Coordinator.

Process

- 7. A plan can only be initiated after a person with a disability has completed an 'access request form' and met the requirements to be a participant under the National Disability Insurance Scheme [NDIS]. The requirements are set out on the National Disability Insurance Agency [NDIA] website^{1,2}; at this point in time there are also location and potentially differing age requirements for participants based on their residence [or not] in trial sites³.
- 8. If a person's diagnosis is included on the list of permanent impairment/ functional capacity⁴ [intellectual disability/ autism/ cerebral palsy/ listed genetic conditions/ spinal cord or brain injury/ permanent blindness/ deafblindness/ amputation or congenital absence] then no further

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Evidence of Disability

Evidence of disability or developmental delay for children under 7 years of age

Access requirements

- assessment is required. If the person does not fit within the list then additional assessment of disability / functional impairment will be required.
- 9. Once the initial assessment is complete a person will be advised they are eligible to participate in the NDIS and the planning process can begin⁵.
- 10. The participant commences the development of their plan with discussions about their support needs and their goals and aspirations. Support needs differ from goals and aspirations and are treated and assessed differently. Goals and aspirations may not be accepted or included in a plan, or NDIA might negotiate about what part of the goal will be funded by the NDIS and what by the participant themselves.
- 11. The support need[s] must be assessed as 'reasonable and necessary'⁶. In brief is described as being: 'reasonable and necessary supports that help a participant to reach their goals, objectives and aspirations and to undertake activities to enable the participant's social and economic participation'. All interpretations /decisions are subject to the National Disability Insurance Scheme Act 2013 (NDIS Act)⁷ and the rules made under the NDIS Act.
- 12. Each of these support needs is then itemised separately in the plan, and the support provided by the NDIS identified and detailed. The support is not simply identified as 'daily care' or 'assistance with shopping', the days of the week, the times of day and the weekends or public holidays are identified as each is funded differently.
- 13. So for a person requiring care on a daily basis to get out of bed, get showered and dressed; the care would be identified in the yearly plan on the basis of the number of week days, public holidays, Saturdays and/or Sundays. These may further be broken down into day, evening or night components.
- 14. If a plan includes goals such as social events such as the Cinema, attending home matches of your team; these would be identified on specific dates for the home matches or a regularity for the cinema and may go as far as including the day of week and time of day. Again because the funded support level is dependent upon the time on which the support is delivered. While there is some flexibility in the use of these hours for support, the participant cannot spend above the allocated funds, therefore if the support is funded at a week day rate, using the service on the weekend will use the funds at a faster rate.
- 15. Further that funding may be provided at less than 1:1 support. Attendance at social events can be funded so that 2, 3 or 4 people are supported to attend the one function/event with a support worker. Funding is then identified as 1:3 or 1: 4. And the plans of all 3/4 participants will need to include support for the same event.

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⁶ Reasonable and necessary supports

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⁵ Planning information

National Disability Insurance Scheme Act 2013

- 16. On its own this does not mean that the support must be provided by the same worker or indeed the same provider, but it does mean a significant level of co-ordination and planning.
- 17. The plans do not envisage the type of flexibility that would see a participant deciding they wish to attend the cinema tonight on a whim. Nor primarily do they allow for the individual to decide that instead of receiving daily care in the morning, they wish to receive it at night, because this would have a negative impact on the amount of services the participant is able to fund.
- 18. Funding is also provided at rates defined as 'simple' or 'complex', depending on the perceived /assessed level of support needs. This is a somewhat subjective assessment made by the NDIA personnel and based on the perception that a participant requires a significant level of support.
- 19. Because part of the overall intent of the scheme relates to enabling participants towards self-fulfilment and greater community involvement requests for support are also assessed against the question 'I there an opportunity/ scope to reduce support in the next 12 months' and 'is it significantly affecting the participant's life'?
- 20. Attached to this statement and marked as Appendix A is de-identified example of the type of plan and funding provided by the NDIS for a participant. The separate elements of the funding are clearly identified.
- 21. Bob's statement of supports shows the criteria within which the supports can be varied. While there is intended flexibility within the 'flexible support' criteria [listed from page 9 onwards], even some of these flexibilities are more intentional than reality.
- 22. Bob has significant needs and requires support from staff that are known to him and have received training to provide the supports. Under fixed supports [page 14] is listed money to provide training for staff in positive behavioural strategies to assist Bob. 10 hours training is all that is available for a 12 month period. Bob cannot have constant or frequent change in support staff, even if it was his desire
- 23. Under flexible support there is also some provision for training [page 9]; 5 hours, for staff to develop a behaviour support management plan, conduct a review and train support staff and service providers.
- 24. Bob's transport fares [page 9-10] is available for him to share taxis with others to get to and his day program. Bob could technically use taxis alone, but this would leave him with insufficient money for the year.
- 25. All supports for community access, alternate activities outside day program, social and recreational support could be used on days not specifically identified. Variations that moved from Monday Friday to a weekend for example would incur unfunded costs.
- 26. Bob requires staff that are familiar with him and his needs, and that have received training to undertake his support. Even where he could notionally make changes to his plans, those changes will be confined by the availability of staff who know him and are trained and by the service agreement he signs with the service provider.

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Support co-ordination

- 27. Following the development of a plan, participants may be referred for support co-ordination. Those referred to [and accepted by] DHHS are generally participants with more complex support needs including such things as forensic needs; full residential support; homelessness; violent and/or behaviours of concern; significant co-morbidity, especially mental health
- 28. These participants, especially our forensic clients, do not necessarily fit the profile of the majority who will receive assistance through NDIS, but their experiences can show the issues with seeking changes to Plans at short notice of the plans under NDIS.
- 29. Keeping in mind that this cohort of clients frequently are or have been long term recipients of care and support through either the disability or mental health sectors, sometimes both, their plan development was initially done without reference or discussion with staff who had worked with the clients for many years. While the premise behind this not being restricted by a worker's view of what a client can achieve may have been well-intended, the impact played out in major gaps in even daily support needs for individuals. This occurred initially in the scheme however has softened somewhat now.
- 30. Participants who don't, won't or can't make, keep or attend a medical appointment unless someone else assists in some fashion, had to have plans reviewed because no provision had been made for a support worker's assistance. Simple things like collecting scripts were not included even when a person was provided support to take their medication because non-compliance was a problem.

Flexibility

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- 31. Plans are ultimately quite prescriptive about what and when support can be provided to a participant. Despite the participant being technically capable of determining what, who and when support is provided; the plan will essentially determine the what and when before the participant is able to decide who provides the support.
- 32. A participant is able to negotiate with a provider for services/ supports to be delivered consistent with the terms of the individual's plan. They are not at liberty to vary that support from say 'daily living' for support to go shopping or rock climbing, or even from service provision on weekdays to weekends. The provider is only paid for the support delivered in accordance with the plan and once that support has been provided.
- 33. Providers [usually] require participants to enter into some form of contract about the service[s] to be provided. Contracts can include terms about when and who provides the support including provisions to allow providers to change the support worker if required notice periods for cancellations and /or cessation of the contract between the provider and participant [should they wish to change provider].
- 34. Under NDIS the providers are able to charge for a certain number of cancellations, even though this means the service/s is not delivered to the participant the usual precursor to receiving payment from the NDIA.



- 35. While it is true that health changes will mean that participants will/may cancel services for a period of time and even at short notice, this often causes disruption to consistency of staffing once the client reengages with a serive provider.
- 36. If a client needs change, for example due to poor health, moving location, or a change of mind, the Support Coordinator would typically work on trying to accommodate those changes within the current Plan. If however, the level of support or funding required a Plan review, the Support Coordinator, if appointed, would assist the client to call for a Plan review prior to the scheduled review date.
- 37. Changes to Plan goals/ needs, must be supported by evidence, such as an OT assessment or recorded documentation and case notes, to back up why the changes are required. A formal review typically occurs on the 12 month anniversary for each plan however informal planning can occur in the interim, as outlined above, and the Case Management will contact the Planner and requires amendments to the plan if required.

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APPENDIX A WITNESS STATEMENT OF MICK PADDICK

29 April 2016

Filed on behalf of:	Health Services Union		
Filed by:	Leigh Svendsen Senior National Industrial Officer	Mobile:	0418 538 989
Address:	Suite 408, 454 Collins St, Melbourne 3000		
Phone:	03 9020 1870	Email:	leighs@hsu.net.au



My NDIS Plan

My name: Bob

My NDIS Number: 1234567

If I have any questions or my circumstances change, I need to contact:

<NDIA Rep>, my National Disability Insurance Agency contact officer

The contact details for my local NDIS office are:

Address: 168-170 Little Malop Street, Geelong, VIC, 3220

Phone: 1800 800 110

Email: Geelong@ndis.gov.au

The name of my planner is:

<Planner>

Other people who helped me to develop my plan:

<Name> - xxx Support Coordinator

<Name> - xxx Support Worker

Plan review date

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My plan starts on 28/03/2015 and will be reviewed by 23/03/2016 to see if anything needs to change. Someone from the NDIA will contact me before then to make an appointment.

I will tell the NDIA if an event or change of circumstances happens (or is likely to happen) that might affect my status as a participant in the NDIS, or my NDIS plan.



Part 1: My participant statement

This is about how I live my life, who helps me and what I want to do (my personal circumstances, aspirations, goals and objectives)

Daily life

Bob attends day programs at XYService from Tuesday to Friday each week where he goes bowling, participates in the ZZ program and a range of other activities. On Mondays Bob is assisted by his support worker to go shopping, go out for lunch and go for walks around the YY River or down at YY Beach. He also enjoys watching movies and physical activities. Bob has community access on Saturdays as well. Bob would like to go watch some Geelong football matches. Bob would like to move out of XX St and live independently.

Living arrangements

Bob is currently living in an SRS in XX St, XXX. He would like to live independently.

Relationships and supports

Bob does not have informal supports. He has family who he does not see often.

My life

The things that are most important to me are?

Bob would like to live independently and be able to go out into the community when he chooses.

The things in my life that are really working for me are?

Bob stated that he really enjoys going out with Cheryl on Mondays and Saturdays and enjoys his daily activities.

Things that I like are?

Bob likes going to the football to watch Geelong Cats but hasn't been able to do this for some time. Bob also likes to feel like he is being helpful, and enjoys doing volunteer work.

The things that I would most like to change are?

Bob would like to live in his own place.

Personal Information – In Confidence



The things I would really like to try are?

Bob stated that he would like to try to go back to watch the Geelong Cats play a live game of football. Bob would also like to go to see more movies.

The social activities that I participate in at home or familiar places with family and friends are?

Bob attends XYService day activities from Tuesday to Friday each week where he goes bowling, participates in the ZZ program and a range of other activities.

The community activities that I participate in are?

On Mondays Bob is assisted by his support worker to go shopping, go out for lunch and go for walks around the YY River or down at YY Beach. This also occurs on a Saturday.

My current employment status (main activity) is?

Bob is currently being supported by XYService day programs to participate in the delivery of meals on wheels and picking up recycling from businesses.

My aspirations, goals and objectives

My Living arrangements goal is: To plan towards eventually moving to independent living with appropriate supports

What I want to achieve (my objective): To move towards independent living.

How I will know that I have achieved it (measure): Bob has found accommodation that he is happy with.

Strategies:

- My support coordinator to support me to access an advocate.
- My support coordinator to support me to coordinate the funding in my plan which will help me move closer to my goal of independent living.
- My support coordinator to liaise with service providers so that everyone is working together to achieve my goal.
- My support coordinator to support me to undertake a skills assessment to ascertain the level of support I will require to live independently.

My Health and wellbeing goal is: To support Bob to control his anger and develop a consistent approach.

What I want to achieve (my objective): To address frustrations and develop consistent strategies with all service providers.

Personal Information - In Confidence



How I will know that I have achieved it (measure): Establishment of a behaviour management plan and positive behaviour strategies. Training provided to staff resulting in a consistent approach by all support providers.

Strategies:

- My case coordinator will support me to undertake a behaviour support/management plan.
- My case coordinator to coordinate training for the identified strategies across all service providers and support workers.
- My case coordinator will visit me on a fortnightly basis to reinforce strategies.

My Social Participation goal is: To support Bob to access the community more often on weekends so that he is not confined to being at home and he can expend energy.

What I want to achieve (my objective): To support Bob to go out into the community regularly, including on weekends.

How I will know that I have achieved it (measure): Bob is participating in a range of activities that he is choosing such as the movies and going to the Geelong Cats football games. Bob is eventually able to go to the milk bar on his own.

Strategies:

- Bob's support coordinator will support him to continue being assisted weekly on a Monday to access the community and flexibly on weekends to access the community.
- Bob's support coordinator to develop strategies to work toward Bob accessing the community independently.
- Bob's support worker to assist with developing a visual routine board so he knows what is happening each day.
- Bob's support coordinator to support him to implement the strategies identified within the behaviour management plan for when he is going out into the community.

My Social Participation goal is: To go watch the Geelong Cats play football

What I want to achieve (my objective): To attend regular Geelong Football matches.

How I will know that I have achieved it (measure): Bob is able to attend some of the Geelong Football matches this year.

Strategies:

 Bob's support coordinator will support Bob to identify games he wishes to attend and liaise with service providers to ensure adequate staffing is put in

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place.

My Independence goal is: Bob to be able to ride his bike again.

What I want to achieve (my objective): Bob used to ride his bike a lot and he would like to commence riding again.

How I will know that I have achieved it (measure): Bob is able to ride his bike to venues within a safe distance from home.

Strategies:

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• Bob's support coordinator will arrange appropriate training so that Bob is able to ride his bike safely and with confidence, aware of the road rules for cyclists.



Part 2: My statement of supports

This tells me about the informal, mainstream and community supports I can get and who will provide them. It also tells me the reasonable and necessary supports the NDIA will fund for me and how my supports will be managed.

Mainstream and community supports

Mainstream and community supports are supports that are provided by the government and other organisations. They might be for everyone to use or just for people with disability.

These mainstream and community supports could help me to achieve my goals and objectives.

Type of support	Where it is from?	How will this be arranged?
Bob is currently living at the XX SRS in XX Street, XX.	XX SRS	Bob's case coordinator to support with identifying alternative accommodation options as per Bob's request.
Financial administration	State Trustees	



NDIS reasonable and necessary supports

This section is about the supports the NDIS will fund for me. After discussing my goals and support needs with me, my planner has determined these supports are reasonable and necessary for me under *the National Disability Insurance Scheme Act 2013*.

Management of my NDIS supports

The tables in this section of my plan show how the funding for each of my supports will be managed.

If the funding for any of my supports is NDIA managed, I understand this
means I must comply with the guidelines for NDIA managed supports. If
the funding for any of my support items are being NDIA managed, the
NDIA will pay my support provider directly for the support.

I can choose how and when my supports are delivered to me. I should agree how my supports will be delivered with my chosen providers using a written agreement. My planner will explain how this works. I can get more information about this from the *Making an agreement with your provider factsheet*.

My NDIS supports

The information in this section tells me what funded supports I can get and how I can spend my funding. This table gives me a summary of my funding.

Flexible supports	\$64,364.12
Fixed supports	\$6,057.36
The total funding for my NDIS plan is	\$70,421.48

Note that all the funding amounts shown in this plan are based on the pricing in place at the time my plan was approved. Any increase in my funding as a result of price indexation by the NDIA will be shown in the monthly My Plan Statement.

Flexible supports

These are the flexible supports the NDIS will fund for me. Flexible supports are supports to help me with activities of daily living. I can get more information about using my flexible supports from the *Flexible supports factsheet*.

• The Flexible supports table below shows the flexible support items I can buy.

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- 'Total funding for my flexible supports' tells me how much I can spend on all my flexible supports. I have a maximum of \$64,364.12 to spend on all my flexible supports.
- I can buy more of some flexible supports and less of others if I choose to, as long as I do not spend any more than the \$64,364.12 of funding for my flexible supports.
- 'Estimated usage' tells me how much of each support my planner has determined I need and 'Total funding' shows how much funding I have been given for each of my flexible supports.
- I can only use my flexible support funding to buy the flexible supports that are shown in the Flexible supports table below or those that are listed in Interchangeable Flexible Supports Attachment.
- I understand that if I choose to buy any of the supports listed in
 Interchangeable Flexible Supports Attachment I will need to spend
 less on some of my other flexible supports so that I do not spend more
 than my total flexible support funding.

Flexible supports

Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
11 002 behaviour support/ management plan - travel time	28/03/15 to 23/03/16	\$841.30	5 Hour Per year	NDIA will pay my support provider directly	Provision for travel to develop the behaviour support management plan, conduct a review and train staff and service providers - 5 hours.
10 001 other transport fares	28/03/15 to 23/03/16	\$2,377.00	1 Each Per year	NDIA will pay my support provider directly	Provision for Bob to share taxis to and from XYService day programs with a view to moving back to using public transport. Any additional taxi fares to be paid by Bob.



Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
					Provision for Bob to be supported by individual support staff to access the community, kilometre usage. Maximum of 15 kilometres per shift.
08 002 coordination of supports	28/03/15 to 23/03/16	\$11,284.00	208 Hour Per year	NDIA will pay my support provider directly	Provision for Bob to have a Support Coordinator to support managing and coordinating support services, and assisting Bob to achieve his goals and the objectives of the plan.
28 002 public transport training and support	28/03/15 to 23/03/16	\$395.20	10 Hour Per year	NDIA will pay my support provider directly	Provision for Bob to undergo travel training to support him to get to XYService day programs from XX SRS.
01 001 assistance with accommodatio n and tenancy obligations	28/03/15 to 23/03/16	\$2,821.00	52 Hour Per year	NDIA will pay my support provider directly	Support is provided to guide, prompt, or undertake activities to ensure Bob obtains/retains appropriate accommodation. May include assisting to apply for a rental tenancy or to

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Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
					undertake tenancy obligations. Working in conjunction with Support Coordinator.
23 023 community, social and recreational activity costs	28/03/15 to 23/03/16	\$500.00	1 Each Per year	NDIA will pay my support provider directly	Provision to support Bob to participate in a range of activities associated with his day programs.
23 006 assistance to access community, social and	28/03/15 to 23/03/16	\$1,196.58	14 Hour Per year	NDIA will pay my support provider directly	Provision for Bob to be supported on public holidays when not at day programs.
recreational activities - individual -per public holiday					Easter Saturday - 3 hours
					Easter Monday and Labour Day - 4 hours per day x 2 = 8 hours
					New Years Day - 3 hours
23 008 assistance to access community, social and recreational activities - individual -per	28/03/15 to 23/03/16	\$11,697.92	296 Hour Per year	NDIA will pay my support provider directly	Provision to support Bob on a Monday with shopping, exercise and general community access - 4 hours per week. Four hours x 50

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Personal Information - In Confidence



	Agei				
Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
weekdays					weeks = 200 hours.
					Provision to support Bob on a Tuesday to Friday during term breaks from day program activities for general access to the community and to get out of the house, for up to 6 weeks at 4 hours per day.
					Four days x four hours x six weeks = 96 hours.
					Total of 200 + 96 = 296 hours.
23 010 assistance to access community, social and recreational activities - individual -	28/03/15 to 23/03/16	\$11,436.08	163 Hour Per year	NDIA will pay my support provider directly	Provision to assist Bob to have supported access to the community on a weekend for going out to the movies, out for lunch or to the AFL Geelong football.
Sundays					Three hours per Sunday
					3 hours x 51 weeks = 153 hours
					Additional 10 hours to support longer shifts for taking Bob to the



Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
					football.
					Total of 163 hours
23 016 group based community, social and recreational activities	28/03/15 to 23/03/16	\$21,815.04	1104 Hour Per year	NDIA will pay my support provider directly	Provision to support Bob to continue attending day activity programs for four days per week, from Tuesday to Friday. Four days per week x six hours per day x 46 weeks.

The total funding for my	\$64,364.12	I can use some of
Flexible supports is		this funding on the
		flexible supports in
		the
		Interchangeable
		Flexible Supports
		Attachment

Fixed supports

These are the fixed supports the NDIS will fund for me. Fixed supports are capacity building and investment support items which will help to build my capacity and increase my independence.

 The tables below show the fixed support items I can get and how much funding I have for each of these.



- 'Estimated usage' tells me how much of each fixed support item my planner has budgeted for me in my plan.
- Each fixed support item in the Fixed supports table below has an amount in the 'total funding' column and that is the maximum I can spend on that support item.
- I cannot use the funding for a support in the Fixed supports table to buy any other supports. I can only use this funding to buy the fixed supports listed there.

Fixed supports

Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
11 006 training for carers and others in behaviour management strategies	28/03/15 to 23/03/16	\$1,682.60	10 Hour Per year	NDIA will pay my support provider directly	Provision to provide training to service providers working with Bob, on the implementation of positive behaviour strategies to develop a consistent approach.
					To be coordinated and conducted within usual hours of operation and when Bob is on site.
					Provision of 10 hours to be shared across service providers as coordinated and planned by Support Coordinator.
11 001 behaviour support/ management plan	28/03/15 to 23/03/16	\$3,365.20	20 Hour Per year	NDIA will pay my support provider directly	Provision for Bob to participate in an assessment to address his current behaviours of concern including: Suspected

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Personal Information - In Confidence



Support item and reference number	Effective dates	Total funding	Estimated usage	How this support will be managed	Information to note about this support
					sexualised behaviours,
					Threats to assault,
					Stealing
					Plan to be developed with positive behaviour management strategies and to be coordinated across all service providers.
					Initial assessment, plan and strategy development - 15 hours
					6 month review of plan - 5 hours
02 004 specialist assessment of skills, abilities and needs	28/03/15 to 23/03/16	\$1,009.56	6 Hour Per year	NDIA will pay my support provider directly	Assessment of skills to identify areas requiring development and/or support with a view of living independently. Report and recommendations to Support Coordinator.

The total funding for my	\$6,057.36	
Fixed supports is		



The total funding for my \$70,421.48
Plan is



Interchangeable Flexible Supports Attachment

If I choose to, I can use some of my **flexible** funding to purchase any of the supports below. This may mean I will have to buy fewer of the other flexible supports in my plan so that I don't spend more than my total flexible funding of \$64,364.12.

Community Access support items which I can buy with my NDIS flexible funding if I choose

- · 23 018 group based community, social and recreational activities Sunday
- 23 019 group based community, social and recreational activities weekday evening
- 23 024 group based community, social and recreational activities higher staff ratio
- 23 025 group based community, social and recreational activities higher staff ratio - Saturday
- 23 026 group based community, social and recreational activities higher staff ratio - Sunday
- 23 001 assistance to access community, social/recreational acts-individual higher intensity-public holiday
- 23 002 assistance to access community, social/recreational acts-individual higher intensity-weekday evening
- 23 003 assistance to access community, social/recreational acts individual higher intensity -Saturday
- 23 004 assistance to access community, social/recreational acts individual higher intensity -Sundays
- 23 005 assistance to access community, social/recreational acts individual higher intensity -weekdays
- 23 007 assistance to access community, social and recreational activities individual -per weekday evening
- 23 009 assistance to access community, social and recreational activities individual -Saturday
- · 23 011 group based activities in a centre core
- · 23 012 group based activities in a centre higher staff ratio
- · 23 013 group based activities in a centre Saturday
- · 23 014 group based activities in a centre Sunday
- · 23 015 group based activities in a centre weekday evening
- · 23 017 group based community, social and recreational activities Saturday

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