



Australian Government
Department of Health and Aged Care



Disability Support for Older Australians (DSOA)

Program Manual

Information for DSOA service coordinators

Version 14 – June 2024

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About this document

This Program Manual provides information to clients and DSOA service coordinators about the Disability Support for Older Australians (DSOA) Program, including:

- information about the DSOA Program for clients
- the responsibilities of DSOA service coordinators
- information for DSOA service coordinator and client discussions regarding quality of care.

It is updated by the Department of Health and Aged Care (the department) as required. The table below outlines the revisions made since its release.

Date	Summary of changes
February 2021	Manual first issued
March 2021	Version 2
June 2021	Version 3
August 2021	Version 4 – Addition of COVID-19 vaccination report template
September 2021	Version 5 – Updated price guide, case management definition expanded
December 2021	Version 6 – Appendices: A, B, C, D, E, F, G, I, J, K, L, and addition of Appendix M - DSOA – NDIS Registration Exemption Form, updated 8.1 quality arrangements; NDIS registration and exemption requirements, 8.3 workforce screening; worker screening check
February 2022	Version 7
February 2022	Version 8 – Content updates to sections 6.3 and 11.1
July 2022	Version 9 – Content updates to Introduction 1.1, updated Section 4 services and pricing schedule, 6.3 Aged Care Assessments, 11.1 RAC, CHSP and HCP
January 2023	Version 10 – Content updates to Section 3.3, NDIS registration no longer required for DSOA subcontractors; Section 3.5, COVID-19 Vaccination reporting not required, remove Appendix L; Section 5; Section 6; Section 7.3, change in recovery of funds when a client

Date	Summary of changes
	exits the program; Section 8.1 NDIS registration requirements for subcontractors; Section 9, Reporting due dates
April 2023	Version 11 - Content update to Section 11.1, CHSP Specialised Support Services can be accessed by DSOA clients
June 2023	Version 12 – Content update to Section 4, Appendix A, Appendix D
January 2024	Version 13 – Redesign content structure, including consolidating into five sections. Removed three appendices that are no longer relevant: Comparison of the CoS Programme to the DSOA Program; the DSOA Client Consent Form, DSOA I-CAN Assessment – Sample Report. New appendix added: How to fill out the ISP template. Revised two appendices: the Change of Needs Application Form and the DSOA NDIS Registration Exemption Form. Added content regarding the quarterly reporting requirements that came into effect from 1 January 2024.
June 2024	Version 14 – Content update to Sections 1.3 – Eligibility, 1.5 – Management Fee, 2.1 – Specialist behavioural intervention support and Extended CoS Services, 3.1 – Individual Support Packages (ISP), 3.2 – Client annual reviews, 3.3 – Change of Needs, 3.4 - Independent Assessment (new subheading for clarity), 3.5 – Updating the Individual Support Package (ISP), 3.6 – Aged care assessment, 3.7 – Changing to a different DSOA service coordinator, 3.8 - Exiting DSOA DSOA, 4.1 – Quality standards and registration with the NDIS Commission, 5.1 – DSOA Pricing.

DSOA Manual appendices

Visit the [Disability Support for Older Australians Program manual and appendices](#) page on the department's website for more information, and to download the forms and materials that support the processes described in this manual.

[Appendix A – DSOA Service and Pricing Schedule](#)

[Appendix B – Useful resources](#)

[Appendix C – How to fill out the ISP template](#)

[Appendix D – Individual Support Package \(ISP\) template](#)

[Appendix E – Change of Needs Application Form](#)

[Appendix F – DSOA Change of Service Coordinator Form](#)

[Appendix G – Change Request - Client Exit Form](#)

[Appendix H – DSOA NDIS Registration Exemption Form](#)

Contact information - for clients

Clients should talk with their DSOA service coordinator for any questions about their DSOA services, including complaints. The DSOA service coordinator should support clients with any issues regarding their services.

Contact information - for DSOA service coordinators

The Department of Social Services Community Grants Hub (the Community Grants Hub) manages the funding arrangement with the DSOA service coordinator, for the department.

The Community Grants Hub is available to help DSOA service coordinators with any enquiries relating to their funding agreement. Each DSOA service coordinator has a Funding Arrangement Manager (FAM).

FAMs can be contacted on **1800 048 998** or through the following jurisdictional mailboxes:

Australian Capital Territory/New South Wales: nswact.DSOA@dss.gov.au

Northern Territory: nt.DSOA@dss.gov.au

Queensland: qld.DSOA@dss.gov.au

South Australia: sa.DSOA@dss.gov.au

Tasmania: tas.DSOA@dss.gov.au

Victoria: vic.DSOA@dss.gov.au

Western Australia: wa.DSOA@dss.gov.au

Acronyms

Acronym	Titles
CAPS	Continence Aids Payment Scheme
CDS	Centre for Disability Studies
CFB	Client Funding Breakdown
CGRG	Commonwealth Grant Rules and Guidelines
CHSP	Commonwealth Home Support Programme
DSOA	Disability Support for Older Australians
FAM	Funding Arrangement Manager
HCP	Home Care Package
ISP	Individual Support Package
MMM	Modified Monash Model (remoteness indicator)
NDIS	National Disability Insurance Scheme
RAC	Residential Aged Care
SIL	Supported Independent Living
STRC	Short-Term Restorative Care
TIS	Translating and Interpreting Service

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1. About Disability Support for Older Australians (DSOA)

This section covers:

- information for clients
- program objectives and outcomes
- eligibility
- diversity
- DSOA service coordinator responsibilities

1.1. Information for DSOA clients

DSOA clients have a dedicated service coordinator who provides the information they require regarding their support needs funded under the DSOA Program.

The DSOA service coordinator works with their client to develop, maintain, change, and monitor their disability support services. The client or their representative should speak with their DSOA service coordinator regarding all aspects of DSOA support.

The client should always talk to their DSOA service coordinator about questions they have, the aspects of care they enjoy or changes they wish to make.

1.2. The program

The DSOA Program interfaces with the broader aged care programs and is not intended to replace those that are available through other Australian Government aged care funded programs.

Program objectives

The objectives of the DSOA Program are:

- to deliver high quality care, support, and services to clients
- to support clients through the direct service delivery of planned respite services which allows families and other regular carers to take a break from their usual caring duties and support and maintain the care relationship, while providing a positive experience for the person with disability
- to support clients to be informed about aged care service options and support their transition into this care where appropriate
- to provide services that are socially and culturally appropriate and free from discrimination to all clients
- to facilitate client choice and enhance the independence and wellbeing of clients and ensure services are responsive to their needs
- to provide flexible, timely services that are responsive to local needs
- to take into account the protection and promotion of the human rights of the person.

Program outcomes

The intended outcomes of the DSOA Program are that this cohort of older people with disability:

- continue to achieve similar outcomes as they were achieving prior to the introduction of the DSOA Program
- are supported to be as independent as possible
- have their human rights upheld in the provision and receipt of services

- have their wellbeing maintained through the delivery of consistent, timely, high-quality services and supported transition into appropriate programs such as aged care as their circumstances change, and following consultation with the older person and their carer/ advocate/ nominee
- that carers and care relationships are supported through the provision of respite services to older people with disability.

The DSOA Program is administered by the Department of Health and Aged Care in line with the [Commonwealth Grants Rules and Guidelines \(CGRGs\) 2017](#).

1.3. Eligibility

The DSOA Program is a closed program that does not accept new clients. Older people who are not current clients but are seeking disability support should contact [My Aged Care](#) to find out what programs or services may be available to them.

The DSOA Program supports clients who:

- were 65 years or over when the National Disability Insurance Scheme (NDIS) commenced in their region, **or**
- were an Aboriginal or Torres Strait Islander person aged 50-64 years when the NDIS commenced in their region, **and**
- were assessed as ineligible for the NDIS, **and**
- were an existing client of state or territory government specialist disability services at the time the NDIS commenced in their region.

1.4. Diversity

Clients with special needs

The DSOA Program recognises clients with cultural or other special needs by providing appropriate services which reflect the diversity of the Australian population. It recognises that there are many special needs groups, as identified under the [Aged Care Act 1997 \(S11.3\)](#).

DSOA recognises that each client is unique and has different beliefs, values, preferences and life experiences. In some cases, this can lead to barriers accessing or using services. DSOA service coordinators should be open and respectful, and work with clients to adapt services to their circumstances.

Clients who are non-English speaking

The Australian Government's [Multicultural Access and Equity Policy](#) requires government agencies to ensure that cultural and linguistic diversity is not a barrier for people accessing services to which they are entitled.

DSOA service coordinators can access limited free interpreting services through the **Translating and Interpreting Service** (TIS National) to support non-English speaking clients when discussing their care needs and support packages.

TIS National is available 24 hours a day and seven days a week. Bookings can be made through the [TIS National website](#) or by phoning **131 450**.

Carers

Carers make an important contribution to the lives of older people with disability, to the community and to the economy. The families and carers of older people with disability receiving services under the DSOA Program benefit from the services provided. This includes access to respite services that allow carers to take a break from their usual caring duties and support and maintain the care relationship. The DSOA Program embodies the principles incorporated in the *Statement for Australia's Carers* under the [Carer Recognition Act 2010](#).

1.5. DSOA service coordinator responsibilities

DSOA service coordinators are responsible for helping clients to access the supports they need to continue living as independently as possible.

Client services

DSOA service coordinators are responsible for responding to the client's support needs. This includes:

- the development, maintenance, and review of the client's Individual Support Package
- delivering services directly and/or through subcontracting arrangements
- making sure special needs groups have equitable access to services.

Quality and Safety

DSOA service coordinators are responsible for all quality and safety aspects of service regardless of how it is delivered, or who delivers it. This includes:

- application of high-level duty of care
- management of, and timely response to, emergency situations
- registration with the NDIS Commission and compliance with their standards
- developing and continuously improving service delivery.

Funding

DSOA service coordinators are responsible for managing their clients' DSOA funding package to achieve each person's agreed goals. This includes submitting [Change of Needs Application Form](#) and acquitting the grant funding at the end of each funding period.

Administration

DSOA service coordinators are responsible for the administration that supports service delivery. This includes:

- engaging an appropriately qualified and trained workforce
- workforce performance, training, safety, assessment, and screening
- collaborating with staff and sharing best practice.

Compliance obligations

DSOA service coordinators are responsible for complying with all requirements in the DSOA Grant Agreement and associated documents. This includes:

- the [DSOA Program Grant Opportunity Guidelines](#)
- the [DSOA Grant Agreement \(incorporating Schedule 1 – Standard Terms and Conditions and the Supplementary Terms and Conditions documents\)](#).
- this Program Manual
- documents incorporated by reference into the above documents
- compliance with all relevant state and territory and Commonwealth legislation and regulations.

DSOA service coordinators must respond to compliance related requests from the department within 14 days of being notified.

DSOA service coordinators must complete a quarterly verification statement and submit to the department. This will provide an opportunity to:

- review procedures and systems to ensure they are in-line with the DSOA Program requirements
- identify any issues that may not yet have been notified to the department or that need improvement.

Management fee

DSOA service coordinators are paid a management fee of one per cent of a client's total funding. It is included in the DSOA service coordinator's Client Funding Breakdown (CFB) and covers the costs associated with managing their Individual Support Package (ISP), program compliance, and meeting reporting requirements.



2. DSOA services

This section covers:

- funded services
- conditional in-scope services
- excluded services
- other aged care programs

2.1. Funded services

Clients can access a range of disability services under DSOA. All clients receive funded services through an ISP which details their agreed care and services and is overseen by a DSOA service coordinator. The ISP provides the client with:

- choice of their services and care
- control over the way those services will be delivered
- an outline of their DSOA service coordinator's responsibilities and management fee.

DSOA funds the supports outlined below. See [Appendix A - DSOA Service and Pricing Schedule](#) for more information.

Services available under DSOA

Assistance with supported independent living (SIL)

This provides assistance with, or supervision of, daily life tasks in a shared living arrangement. It includes help or supervision with tasks, such as personal care or cooking meals. It helps clients live as independently as possible, while building their skills.

SIL may include help with:

- personal care tasks
- building skills in meal preparation, cleaning, and developing a routine
- developing social skills
- support with supervision, personal safety, and security
- taking medication
- support for medical appointments.

SIL does not include:

- rent, board and lodging
- day-to-day usual living expenses such as food and activities
- gardening, landscaping
- hiring a house cleaner
- capital costs associated with a client's accommodation.

Assistance with self-care activities

This provides clients living at home assistance with, or supervision of, personal, daily life-tasks that develop their skills to live as autonomously as possible. It does not include rent, usual day to day living expenses such as food and activities, gardening, landscaping or cleaning services.

Short-term accommodation (STA) and assistance (inc. Respite)

This provides integrated support for self-care, accommodation, food and activities in a centre, or group residence, for short periods. At times clients may require different temporary comprehensive care and may include Short Term Accommodation (STA) in a group-based facility.

It may also include a period of respite, which supports ongoing caring arrangements between clients and their carers. It means the client's support continues while their carer takes a short break from their usual caring responsibilities.

This is for expenses made in a 24-hour period including assistance with self-care or community access activities, accommodation, food and negotiated activities.

Typically, this is used for short periods of up to 14 days at a time. Exceptions may be made. For example, for clients entering Voluntary Out of Home Care.

For longer-term arrangements, other options are likely to be more appropriate, for example Supported Independent Living or Medium-Term Accommodation.

Specialist behavioural intervention support

Specialist behavioural intervention support is intensive support for a client that addresses significantly harmful or persistent behaviours of concern. Behaviour support requires a behaviour support plan to be developed that aims to limit the likelihood of behaviours of concern developing or increasing once identified.

This plan outlines the specifically designed positive behavioural support strategies for a client, their family and support persons that will achieve the intended outcome of eliminating or reducing behaviours of concern. **Note: Behaviour Support Plans need to be reviewed regularly and updated annually. The department is obligated to report to the NDIS Quality and Safeguards Commission where a client does not have a current Behaviour Support Plan in place.**

Counselling

Support that helps build self-knowledge, emotional acceptance and growth, and the optimal development of personal resources that help the client work towards their personal goals and gain greater insight into their lives.

Community nursing care for continence aid

This provides a client with a continence aids assessment, recommendation, and training support, and must be delivered by a registered nurse.

Psychosocial recovery coaching

This support is designed to be able to maintain engagement during episodes of increased support needs due to the episodic nature of mental illness. This

engagement preserves the relationships that help clients with psychosocial disability to build resilience and lead full and contributing lives.

Recovery coaches collaborate with clients, families, carers, and others to identify, plan, design and coordinate this care.

Therapy assistant

Provision to a client of a therapeutic support by an allied health assistant working under the delegation and direct supervision at all times of a therapist.

Assessment recommendation therapy and/or training

Providing the client with an assessment, recommendation, therapy, or training (including in assistive technology) by either a psychologist, occupational therapist, speech pathologist or physiotherapist.

Dietitian consultation and diet plan development

Advice to a client on managing their diet to mitigate the effect of their disability on their health and well-being.

Exercise Physiology

Advice to a client on the required exercise (exercise program) they need due to the impact of their disability.

Audiologist hearing services

These services provide qualified audiologist or audiometrist hearing services that are not covered under the Medicare Benefits Scheme (MBS).

Professional nursing health services

This is nursing care that is not usually the responsibility of the health system and responds to the disability-related health needs. It is delivered by differing levels of nursing, as required.

Case management

Case management includes collaborating with the client's existing carers, including family, to understand the client's needs, and provide care that links them to the community and to other government services.

Case management also supports their transition to other programs when needed. It could also include designing additional high or complex care that may require a qualified and experienced practitioner (for example, an occupational therapist).

Extended CoS Services

Where a client received funding for community access through the former Continuity of Support (CoS) Programme, they can continue to access this under the DSOA Program as a grandfathered support. This is categorised as 'Extended CoS Services'.

Extended CoS Services funding is preserved at the same level as when the client transitioned to the DSOA program.

Clients are not eligible for any new or additional Extended CoS Services through the DSOA Program, including through the Change of Needs Application process.

The DSOA Program does not mandate hourly pricing for Extended CoS Services. DSOA service coordinators must ensure that hourly rates for services delivered do not exceed the NDIS prescribed hourly rate for the equivalent NDIS service type. For more information, refer to [NDIS pricing arrangements](#).

DSOA service coordinators must report on Extended CoS Services expenditure in their annual performance report, including details on all services delivered to the client using this funding.

2.2. Conditional in-scope services

Aids and Equipment

The DSOA Program is not intended to fund supports that are already available through other government funded subsidised programs.

Where it is urgent and the existing state/territory or Commonwealth subsidy does not supply the required aid or equipment, the DSOA service coordinator can submit a [Change of Needs Application Form](#) to seek funding to lease or buy (or part buy) the aid or equipment, to the DSOA Program for consideration.

The application must confirm that funding has been applied for through the client's relevant state/territory government funded program and/or the [Commonwealth Home Support Programme \(CHSP\)](#) Goods Equipment and Assistive Technology (GEAT) programs before the department will consider the request for additional funds.

A variety of aids and equipment are available from state and territory government funded programs to help older people with disability.

For information about eligibility and provisions for aids and equipment schemes, please contact the relevant state and territory government programs.

ACT: [Equipment Loan and Supply](#)

NSW: [Enable NSW](#)

- NT: [Territory Equipment Program](#)
[Seating Equipment and Technical \(SEAT\) Service](#)
- QLD: [Medical Aids Subsidy Scheme](#)
- SA: [DHS Equipment Program](#)
- TAS: [Medical aids and equipment \(TasEquip\)](#)
- VIC: [Victorian Aids and Equipment Program](#)
[Statewide Equipment Program](#)
- WA: [Community Aids and Equipment Program](#)

Continence aids

Clients must test their access to support through all other programs such as the [Continence Aids Payment Scheme \(CAPS\)](#), CHSP, and the available programs in some states and territories, before applying through the DSOA Program for continence aids.

Transport

Clients should talk with their DSOA service coordinator about all available transport subsidy options before seeking support from DSOA. This includes state and territory government funded programs and funding available through the CHSP.

For information about eligibility and provisions for transport subsidy schemes, please contact the client's relevant state or territory government program:

- ACT: [ACT Taxi Subsidy Scheme](#)
- NSW: [NSW Taxi Transport Subsidy Scheme](#)
- NT: [Northern Territory Transport Subsidy Scheme](#)
- QLD: [QLD Taxi Subsidy Scheme and Lift Payment](#)
- SA: [SA Transport Subsidy Scheme](#)
- TAS: [TAS Taxi Subsidy Program](#)
- VIC: [Victorian Multi-Purpose Taxi Program](#)
- WA: [Taxi User Subsidy Scheme \(TUSS\)](#)

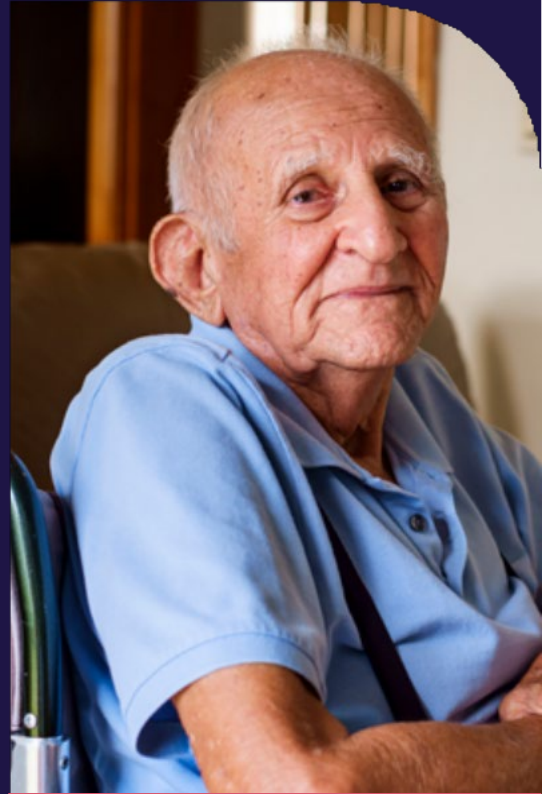
Case study:

Accessing Conditional In-Scope Services

Bill is a DSOA client who lives in a group home. His mobility has declined and he now mobilises with a wheelchair. He has developed a number of pressure wounds, which are continuing to worsen owing to the amount of time he is in his wheelchair each day. His DSOA service coordinator talks with him about his wellbeing. She suggests there may be equipment that will assist with the management of his pressure wounds and improve his quality of life. The DSOA service coordinator arranges an assessment for the client by an occupational therapist who prescribes a specialised cushion for the client's wheelchair that alternately inflates and deflates and would provide ongoing relief for the client's pressure wounds as well as assist them to heal.

Bill's DSOA service coordinator initially contacts the state aids and equipment program, for eligibility. She is advised that they do not provide this particular item, as it is quite specialised. As there are no other avenues to fund this piece of equipment for Bill, his DSOA service coordinator submits a [Change of Needs Application Form](#) for the client to fund the cost of this equipment.

The application is successful, and Bill's DSOA service coordinator is able to purchase the cushion for use in his wheelchair. This assists in healing Bill's pressure wounds and reduces his chances of developing new pressure wounds in future, improving his quality of life.



2.3. Excluded services

DSOA funding cannot be used towards the cost of these services.

- commonplace expenses (e.g. daily living expenses, ingredients/food)
- garden maintenance, landscaping, domestic cleaning, house maintenance
- costs of preparing a grant application or related documents
- payment to family members for client care or support
- retrospective costs
- home modification costs
- major or new construction/capital works
- purchase of assets, unless prior written consent from the department has been given, and the conditions of the DSOA Grant Agreement have been met
- purchase of land
- activities that are the responsibility of other Commonwealth, state, territory, or local government bodies
- services that were previously funded by state and territory governments that are not direct care services for older people (state advocacy, or research and evaluation services)
- specialist disability services aimed at supporting people to gain employment or access early childhood services
- supported independent living accommodation vacancies
- domestic travel and/or accommodation for clients or their support workers while on holidays (DSOA support services received can still be funded)
- overseas travel or accommodation
- activities that are not identified as supports and services provided by the DSOA Program.

Other aged care programs available for DSOA clients

Transition Care Programme

For information on the [Transition Care Programme](#), visit the My Aged Care website.

Dementia support

For further information on the types of [programs available to support people with dementia](#), visit the department's website.



3. Supporting client needs

This section covers:

- individual support packages (ISP)
- client annual reviews
- change of needs
- aged care assessment
- changing DSOA service coordinators
- exiting the DSOA Program

3.1. Individual Support Packages (ISP)

An **ISP** is a record of the agreement between a client and their DSOA service coordinator. It lists the services that the client receives through the DSOA Program, the funds that will be used for those services, client information and review dates.

The ISP must include:

- the next review date (annually, at a minimum)
- funding amount for the package
- the planned, regular services (either temporary or ongoing)
- changes to services and/or funding
- client information.

Please use the [Appendix D – Individual Support Package template](#). Refer to [Appendix C – How to fill out the ISP template](#) for detailed information on the aspects included in the ISP.

A copy of the client's ISP must be emailed to the department via DSOAcpliance@health.gov.au within 10 days of being completed and signed.

Using subcontractors

DSOA service coordinators can provide ISP services directly, subcontract for delivery through other service providers, or combine these options.

Subcontracting arrangements should only be made for the length of the DSOA Grant Agreement.

DSOA service coordinators are responsible for all services funded and delivered under their DSOA Grant Agreement. This includes services that are delivered through a subcontractor. This means they are responsible for subcontractor compliance with the DSOA Grant Agreement.

DSOA service coordinators should involve their clients in decisions about their care and check that they have ongoing quality service experiences.

Notice of suspended services

Where a client has not used DSOA services for a period of up to three months (for example, due to a stay in hospital), their support needs should be reviewed, the ISP updated, and any variance reported in the annual performance report and financial acquittal.

If a client does not use DSOA services for more than three months for any reason, the DSOA service coordinator must tell their FAM, who will advise if any action is required.

3.2. Client annual reviews

Annual reviews

DSOA service coordinators must conduct an annual review of services with each client, their carer, advocate or nominee.

The annual review must:

- be detailed and comprehensive
- provide a thorough review of the services provided to the client
- provide information about the client's function, personal care, mobility and cognition
- address if the client has:
 - had a health crisis or episode
 - had any changes in their care needs
 - changes to their living or carer arrangements since the last annual review or ISP review was completed.

A client annual review is different to the client's ISP and must be recorded separately.

The annual review document should also address if the client's current DSOA funding is meeting their disability support needs. Annual review findings may be supplemented by evidence, such as assessment reports, letters from a GP, specialist, allied health practitioner or hospital.

After the review

DSOA coordinators must discuss the outcome of the annual review with their clients, and whether additional support is required to meet their disability support needs.

The annual review must be provided as evidence if a Change of Needs Application is submitted to the department.

For more information on eligibility for additional support through the Change of Needs process, refer to section 3.3.

A copy of the client's annual review must be emailed to the department via DSOAcpliance@health.gov.au within 10 days of being completed.

3.3. Change of Needs

If a DSOA client's disability support needs change, their DSOA service coordinator can submit an application to the department requesting additional support through the Change of Needs process.

Change of Needs Application

The DSOA service coordinator must conduct an annual review of the services their client receives, as well as information about the client's function, personal care, mobility, and cognition.

If a client's annual review indicates that they require additional support through the DSOA Program, their DSOA service coordinator can submit a Change of Needs Application to DSOACHangeofneed@health.gov.au.

DSOA service coordinators must use the latest version of the [Change of Needs Application Form](#) and complete all sections accurately. Missing or incomplete information, or a lack of supporting evidence, will delay the assessment process.

Please Note, the department will only consider funding from the date the completed Change of Needs Application is submitted.

When completing an application, refer to the [How to Complete a Change of Needs Application](#) fact sheet.

Supporting evidence

The level of evidence provided with a Change of Needs Application depends on what supports are requested and the amount of additional funding the client requires to meet their change in need. The more funding requested, the greater the amount of supporting evidence required to justify the request.

The application submission **must include**:

- a copy of the client's most recent annual review
- the client's current and complete ISP
- sufficient evidence on how the client's needs have changed and why they require additional support:
 - this evidence could include, for example, recent letters, assessments or reports (within the last 12 months) from an allied health professional, specialist or general practitioner
 - the evidence provided must relate to the client's change in disability needs.

Clients living in supported accommodation

If the client lives in supported accommodation and the DSOA service coordinator is applying for additional Assistance in Supported Independent Living (SIL), the DSOA coordinator is required to use NDIS SIL tools for:

- the client's current care, **and**
- the proposed additional services requested.

The DSOA coordinator must submit both SIL tools in excel. The submission must include all residents in the accommodation setting, including any vacancies. DSOA coordinators must de-identify any NDIS clients in the SIL tool.

Visit the [NDIS website](#) for guidance with the SIL tool.

Clients living at home

If a client lives in their own home and their DSOA service coordinator is applying for Assistance with Self-Care Activities, weekly care rosters are required for:

- staff services the client currently receives, **and**
- staff services the client will receive if funding is approved.

Timeframe

The time it takes for the department to finalise a Change of Needs Application depends on several factors, including the complexity of the application, whether an Independent Assessment is required, and the priority of other assessments in line for review.

Outcome

Once finalised, the department will inform the DSOA service coordinator of the outcome of the Change of Needs Application. The department may, at its sole discretion, approve some, all, or none of the services requested in the application.

If approved, the funding is calculated from the date the department received the complete application submission.

If approved, the DSOA service coordinator must:

- update the client's ISP to reflect the approved funding
- get the ISP signed by the client or their carer, advocate or representative
- provide a copy to the department within 10 calendar days of it being signed (DSOAcpliance@health.gov.au).

3.4. Independent Assessment

The department may refer a client for an Independent Assessment when:

- the Change of Needs Application request is above \$20,000 (within a 12-month period) **or**
- at its sole discretion.

Independent Assessments are used to understand a client's disability support needs. They assess the best combination of available services for each client. The department pays for the cost of an Independent Assessment.

Assessment process

Assessor

The Centre for Disability Studies (CDS) is the independent assessor for clients Australia-wide. Experienced health professionals and disability needs assessors conduct the assessments. CDS must conduct the Independent Assessment if it is supporting a Change of Needs Application for a client.

CDS use a DSOA-specific tool¹ to assess an individual's circumstances, including their strengths and weaknesses. The assessment is explained in more detail on the [CDS website](#).

Participating in the Independent Assessment

Clients will have their needs assessed by email or telephone and/or video interviews. Discussions may be held with the client and/or their family members, carer, advocate, or representative.

The client's preferences (and those of their carer, advocate or representative) should guide who attends the assessment. If possible, the client should be present for at least part of the Independent Assessment. People who know the client and their support needs well (such as unpaid support, family members and core support workers) are encouraged to attend the Independent Assessment.

¹ Instrument for the Classification and Assessment of Support Needs (I-CAN Assessment) which has been customised specifically for the DSOA Program. The I-CAN is based on the World Health Organisation's International Classification of Functioning, Disability and Health (ICF).

Duration

The Independent Assessment is usually carried out over two sessions, each taking approximately 1.5 hours. The amount of time may vary depending on the client's disability and the quantity of information provided in advance.

The DSOA service coordinator must provide client information in advance to allow the assessor to familiarise themselves with the client and their needs. This reduces the length of the assessment and ensures that any information pertinent to the assessment is provided.

Outcome

The department will notify the DSOA service coordinator about the outcome of the Independent Assessment (without DSOA support calculations).

The DSOA service coordinator must discuss the outcome of the assessment with their client. This is particularly important if the assessment differs from the client's current ISP and the outcome of their annual review.

If the Independent Assessment identifies specific care goals or referrals to other services, the DSOA service coordinator must make these referrals and include them in the client's ISP. If this does not happen, it could affect future Change of Needs Applications and/or the client's level of funding.

If the Independent Assessment identifies that the level of care required is much lower than the client is currently receiving, the client's ISP must be reduced to reflect the recommended outcome of the Independent Assessment.

3.5. Updating the ISP

DSOA service coordinators are responsible for keeping each client's ISP updated with changes. When reviewing and updating a client's ISP, the DSOA service coordinator must:

- review the ISP with the client and/or the client's representative at least once per year, or sooner if the client has had a change in their disability support needs or a change to their funding levels
- use the [ISP template](#) available on the department's website
- have the ISP signed by the DSOA service coordinator, the client, and/or the relevant carer, advocate or representative before service delivery starts
- provide a copy of the client's updated ISP to all parties who signed it
 - if the client has a public guardian appointed, then a letter/email must be attached to the ISP from the public guardian in place of a signature, stating they have received a copy of the ISP and agree to the document.

DSOA service coordinators must provide a copy of the client's updated ISP to the department within 10 calendar days of being updated and signed.

For more information on how to complete an ISP, see [Appendix C – How to fill out the ISP Template](#).

3.6. Aged care assessment

Reasons for an aged care assessment

An aged care assessment determines the client's eligibility to access aged care services, such as a [Home Care Package \(HCP\)](#) or [residential aged care](#).

Aged care assessments consider the client's physical, medical, mental, cultural, social, and wellness needs.

Assessment support

If an aged care assessment is being considered, DSOA service coordinators must support their client to contact My Aged Care on **1800 200 422** or to use [the referral form](#) on the My Age Care website.

If the client is at immediate risk, the department may consider interim funding until the outcome of the aged care assessment is known.

When contacting My Aged Care, it is important to let them know that the assessment is for a DSOA client and which services the client would like to access.

To assess eligibility for aged care services, My Aged Care assessors must be informed of:

- the services the client is receiving under DSOA
- the client's unmet care needs
- the sustainability of the services provided.

The DSOA service coordinator must tell aged care assessors if:

- the client is being referred for access to services that are **not available** under DSOA, **or**
- the referral is because the client wants to access aged care services **instead of** DSOA.

Outcomes of an aged care assessment

If a DSOA client is found eligible and/or accesses aged care services, it may impact their DSOA funding. Depending on the aged care service, a client's funding may be capped, or they may be required to exit the DSOA Program.

The Department of Health and Aged Care cannot contact DSOA clients directly. It is the DSOA service coordinator's responsibility to communicate with clients regarding their aged care eligibility, and the ways in which it may impact their DSOA funding.

If a client is found eligible for aged care services and they wish to access these services, the DSOA service coordinator should assist with this process.

Aged care services that **WILL** impact DSOA funding

If a client is found eligible for a Home Care Package or residential aged care, their DSOA funding will be capped.

DSOA clients with capped funding are not eligible for any new or additional support or services through the DSOA Program, including through the Change of Needs process. However, annual price increases corresponding with NDIS pricing changes will still be applied.

If a client is assigned a Home Care Package and commences services, or if they enter permanent residential aged care, they will be required to exit the DSOA Program from the date aged care services commenced. These dates will be verified through My Aged Care.

If a client commenced their Home Care Package or entered permanent residential aged care prior to 1 July 2021, they can continue in the DSOA Program. However, their DSOA funding will remain capped.

Aged care services that MAY impact DSOA funding

If a client accesses services through the Commonwealth Home Support Programme (CHSP) that are also available through DSOA, they must relinquish these CHSP services or exit the DSOA Program.

CHSP services DSOA clients can access:	CHSP services DSOA clients cannot access:
Assistance with care and housing Domestic assistance Goods, equipment, and assistive technology Home maintenance Home modifications Meals and other food services Social Support Group Social Support Individual Transport Specialised Support Services	Centre-based respite Cottage respite Flexible respite Nursing Personal care Allied therapy

If the relinquished services are still required to meet the client's disability support needs and the client's DSOA funding is not capped, the DSOA service coordinator should consider submitting a [Change of Needs Application](#).

If a client is not eligible to apply for a Change of Need, they will need to consider if they want to remain in the DSOA Program or receive support through My Aged Care.

In some instances, an Aged Care Assessment may recommend Residential Respite, Restorative Care or Transition Care. DSOA clients can access these services without impacting their DSOA funding.

Case study:

Accessing aged care support in addition to DSOA services

Edwina is a DSOA client who lives with her husband in their own home.

Edwina's mobility has been declining over a period of time and her husband mentions this to Edwina's DSOA service coordinator. The DSOA service coordinator suggests they investigate services that may make Edwina's life easier.

Edwina contacts My Aged Care and advises them that she is a DSOA client and that she would like to test her eligibility to receive some services from CHSP. The services Edwina would find helpful include installation of handrails in her home and some home assistance with cleaning.

Edwina is assessed as eligible for these services and because they are not already available from DSOA, Edwina can receive these in addition to her DSOA funded package.

This is an example of how a client can access CHSP-funded services in addition to their DSOA funded services.



3.7. Changing to a different DSOA service coordinator

Client-initiated request

A client transfer is required when a DSOA client wishes to change their DSOA service coordinator, or their service coordinator is unable to continue delivering services to the client.

DSOA service coordinators must:

- have a transfer process in place and provide information about a client's rights to change service providers
- advise their FAM of the client's new DSOA service coordinator so the FAM can make sure the new DSOA service coordinator can accept them as a client
- tell the department in writing at least 6 weeks in advance of a client transfer, transfers are arranged to coincide with the quarterly payments.

The transfer must be agreed between all parties, including the department, who has the final approval.

To support a transfer request, DSOA service coordinators must provide the following information to their FAM:

- the transfer date, which should be at least 6 weeks from the submission date of the client transfer form, and must be agreed between all parties
- the reason/s for the transfer
- details of the client's preferred DSOA service coordinator, including full legal name and contact details
- confirmation of acceptance by the client's preferred DSOA service coordinator
- confirmation of the client's consent to the transfer
- confirmation from existing DSOA service coordinator's organisation that they will relinquish or transfer client funding to the new service provider.

The DSOA service coordinator must gain permission from each client to share their information with any other DSOA service coordinator.

The DSOA service coordinator must complete [Appendix F - Change of Service Coordinator Form](#) and submit it to their FAM at the Community Grants Hub.

When a service coordinator cannot continue support

If a DSOA service coordinator's organisation is ceasing to provide DSOA services, they must arrange for client services to continue while a transfer to a new DSOA service coordinator takes place.

This situation usually involves many clients and is called a **bulk transfer**. The DSOA service coordinator must submit a change request telling the department of the bulk transfer of all clients to the alternative DSOA service coordinator.

The process for a bulk transfer is the same as for a single client request except that it also needs a **Transition-Out Plan** (this template is available from the FAM upon request) to describe the transfer arrangements for all their clients.

The client's DSOA service coordinator must transfer relevant client information to the client's newly selected DSOA service coordinator unless the client does not provide permission to do so.

3.8. Exiting DSOA

Clients can exit the DSOA Program at any time. A client must exit DSOA because they:

- choose aged care services instead
- have a change in their needs and the additional support options are not available
- no longer need DSOA services
- have not used DSOA services for over 12 months
- are an Aboriginal and Torres Strait Islander person and have become eligible for the NDIS
- have passed away.

DSOA service coordinators must advise the department of the date and reason for a client's exit using the [Change Request: Client Exit Form](#) within 14 days of a client exiting the DSOA Program.

The department will initiate a client exit if it is deemed that the client has not been receiving services for a period of 12 months or more.

All client exits are permanent and clients cannot re-enter the DSOA Program.

Client becomes eligible for the NDIS

If an Aboriginal and Torres Strait Islander client aged 50-64 years meets the NDIS access requirements due to a change in their circumstances, they may exit DSOA. The person may forward an access request to the NDIS at any time.

After an [Appendix G – Change Request: Client Exit Form](#) has been received, the future grant payments will be reduced starting 14 days after the client's exit date. The department may recover over payments from future grant payments.

DSOA service coordinators must include these changes in the financial acquittal report submitted for that financial year.



4. Quality and Safety

This section covers:

- quality services
- workforce requirements
- complaints
- client behaviour risks
- emergency situations

4.1. Quality services

The NDIS Quality and Safeguards Commission (the NDIS Commission) is responsible for improving the quality and safety of disability support and services, including services delivered under DSOA. The NDIS Commission defines quality and safety standards that must be met for all DSOA services.

Quality standards

DSOA service coordinators are responsible for meeting the NDIS Commission standards and quality requirements for all clients. This means DSOA service coordinators must provide services that:

- comply with the requirements of the DSOA Grant Agreement
- meet the Quality Standards of the [NDIS Commission \(Code of Conduct\) Rules 2018](#) and [NDIS Rules](#)
- support and recognise users rights mentioned in the [National Standards for Disability Services](#) or state/territory requirements
- consider a client's diversity including disability, age, gender, cultural heritage, language, faith, sexual identity, relationship status and other relevant factors outlined in the National Standards.

DSOA service coordinators are also responsible for reporting and responding to incidents relating to the quality or safety of DSOA services, in line with the National Standards. This includes dealing with critical/serious incidents (emergencies, deaths, assaults or abuse, serious unexplained injuries and incidents that impact the safety of clients).

Registration with the NDIS Commission

DSOA service coordinators are responsible for registering with the NDIS Commission. Registration is only required for the types of services the DSOA service coordinator delivers.

Further information on [Becoming a NDIS provider](#) is available on the NDIS website.

Seeking exemption

A DSOA service coordinator may apply for an exemption to NDIS Commission registration due to exceptional circumstances. For example, if the organisation is already registered as an aged care funded provider and only supports a very small number of DSOA funded clients, the department will consider the quality standards they are already required to abide by.

To request an exemption, [Appendix H - DSOA NDIS Registration Exemption Form](#) can be submitted to CommonwealthDSOA@health.gov.au.

The department will consider applications on their individual issues and reasons.

An exemption will not be granted if the services (delivered directly or by others) use [regulated restrictive practices or develop behaviour support plans](#).

If granted an exemption, the DSOA service coordinator is called an **unregistered service provider**. Unregistered service providers must adhere to the [NDIS \(Code of Conduct\) 2018](#).

Exemptions have an end date. The DSOA service coordinator must submit a new exemption application 1 month before their exemption end date. If they fail to do so, the department will declare them as non-compliant with their DSOA Grant Agreement obligations and action may be taken.

4.2. Workforce requirements

DSOA service coordinators are responsible for all people involved in the delivery of DSOA services including subcontractors, volunteers, and executive decision makers.

Workforce screening

DSOA service coordinators are responsible for the compliance of their service delivery people, including subcontractors and volunteers, with the NDIS Commission's workforce screening requirements.

The NDIS Commission Worker Screening Check (Worker Screening Check) is a risk assessment of a person who works, or seeks to work, with people with disability. These checks are made by the relevant state or territory authority, and a fee is payable. Worker Screening Checks last for five years. Workers may be able to commence while waiting for the screening check.

Visit the [How do I apply for the NDIS Worker Screening Check?](#) page on the NDIS website for more information.

Unregistered service providers do not need to complete a Worker Screening Check. However, staff of an unregistered service provider must have, at a minimum, a Police Check certificate.

Qualifications and training

DSOA service coordinators are responsible for engaging people that are trained and qualified in the services they may deliver. They must meet the service delivery standard of the DSOA Grant Agreement and comply with all relevant legislation.

Work health and safety

DSOA service coordinators must provide a safe and healthy workplace for all people involved in the delivery of DSOA services. The requirements for a safe and health

workplace are described in the [Work Health and Safety Act 2011](#) and relevant state and territory legislation.

DSOA service coordinators and the people delivering services are encouraged to be vaccinated against COVID-19 where they have physical exposure to a client.

4.3. Complaints

Complaints about service providers

DSOA service coordinators must have an internal complaint process that complies with the NDIS Commission's requirements for handling complaints, and they must tell their clients about this process.

DSOA service coordinator's must make sure that DSOA clients and their carer/advocate/representative are actively encouraged to give feedback about their service experience. A client has the right to call an advocate of their choice to present any complaints and to help them through the complaints management process.

The client should first address their complaint with their DSOA service coordinator via their internal complaints process. Complaints may be about the quality of the services provided, the timing of the service delivered or the refusal by the provider to deliver the required service.

Complaints should be managed through a conversation between the DSOA service coordinator and the client (and their family, carer or representative, if relevant). Having this process in place and letting the client know will save a lot of time and stress over service quality issues and misunderstandings.

Escalating to the NDIS Commission

If complaints can't be resolved with the DSOA service coordinator, they should be escalated to the NDIS Commission.

Clients can submit a complaint to the NDIS Commission if:

- the services were not provided in a safe and respectful way
- the services were not delivered to standard
- the service provider didn't manage a complaint properly
- they have an issue with the services being delivered.

If a complaint is about a subcontractor, the DSOA service coordinator must liaise with the NDIS Commission, and require the subcontractor to follow the directions, meet reasonable requests, and monitor the requirements, of the NDIS Commission.

Complaints about program administration

Complaints about the administration of the DSOA Program could relate to program access, conduct of Commonwealth Government staff, or a rejected application for additional funding considered through the Change of Needs Application process.

These complaints should first be raised by the DSOA service coordinator with the FAM. If it is not solved at this level, the DSOA service coordinator can refer their complaint directly to the department.

The person complaining may choose to go to the Commonwealth Ombudsman. DSOA service coordinators or clients can contact the [Commonwealth Ombudsman](#) via their website or call 1300 362 072.

4.4. Client behaviour risk

If a client exhibits behaviours with the potential to harm themselves or others, DSOA service coordinators should submit a [Change of Needs Application Form](#) for the development of a behaviour support plan and/or training service delivery staff in behaviour support strategies.

Restrictive practices

DSOA service coordinators should employ positive behaviour supports to safeguard clients and to reduce or eliminate the need for restrictive practices when a client exhibits risk behaviour. However, to prevent a client from harming themselves or others, restrictive practices may be necessary.

Restrictive practices include chemical and mechanical restraint, physical restraint, containment, and seclusion, and removal of objects. These practices must only be used by qualified and trained staff. They must comply with an approved behaviour support plan and be reported monthly to the NDIS Commission, including nil reports. The behaviour support plan is to be reviewed every 12 months.

More information about Restrictive Practices and Behaviour Support Plans is available on the [NDIS Commission website's regulated restrictive practices page](#).

4.5. Emergency situations

DSOA service coordinators must have business processes that coordinate and manage emergency situations at any time. Examples of emergencies may be:

- the DSOA service coordinator is unable to continue care delivery to a client
- the client exhibits risk behaviours requiring behaviour management support

- the client's main carer or guardian is temporarily ill or involved in a medical emergency and unable to care for the client
- a service is cancelled, or a support worker does not attend an appointment
- extreme weather events.

DSOA service coordinators must:

- contact emergency services (ambulance, police and/or fire) on 000 if there is a critical incident involving the abuse, neglect, or harm of a client
- advise the NDIS Commission of reportable incidents (including allegations) within 24 hours of the event(s)
- do what is reasonable to provide continuity of DSOA services in all circumstances and include emergency support arrangements in the client's ISP
- maintain a business continuity plan that describes the management of a pandemic, crisis, or disaster situation
- work with their FAM if the DSOA service coordinator is at risk of not being able to provide services.

The department does not need a copy of the continuity plan but may wish to review it when assessing the DSOA service coordinators' risk management plans.

Unplanned short-term and emergency respite services provided through [Carer Gateway](#) may be helpful at these times.



5. Administration

This section covers:

- DSOA pricing client
- contributions
- reporting
- acknowledging funding

5.1. DSOA Pricing

The DSOA service prices are aligned to the services and rates determined by the National Disability Insurance Agency (NDIA). DSOA prices allow for overheads, including administrative costs.

DSOA prices allow for overheads, including administrative costs. Pricing information for DSOA services is outlined in [Appendix A - DSOA Service and Pricing Schedule](#).

The department may review the Schedule at its sole discretion and will [update the departmental website](#) and inform DSOA service coordinators if this happens.

The rates for the delivery of DSOA support types vary depending on factors such as where they are delivered (metropolitan or regional areas) and the day or time of delivery. In some cases, higher rates may be payable. The DSOA Time of Day/Week categories will adopt the highest rate of the NDIS Time of Day/Week categories that are consolidated by them.

Regional Loading

There is a higher rate for DSOA services that are delivered in remote and very remote areas. The Modified Monash Model (MMM 2019) defines the meaning of remoteness. DSOA's regional loading adopts the equivalent NDIS 'very remote' rate.

Night-Time Sleepover

Support to an individual client delivered on a weekday, a Saturday, a Sunday or a Public Holiday that:

- commences before midnight on a given day and finishes after midnight on that day **and**
- is for a continuous period of 8 hours or more **and**
- the worker is allowed to sleep when they are not providing support.

This activity is only available at the DSOA Standard Support Level.

Public holiday

Support to an individual client that starts at or after midnight prior to a public holiday and ends before or at midnight of that public holiday (unless that support is a Night-time Sleepover).

Saturday

Support to an individual client that starts at or after midnight on the night prior to a Saturday and ends before or at midnight of that Saturday (unless that support is a Public Holiday Support or a Night-Time Sleepover).

Sunday

Support to an individual client that starts at or after midnight on the night prior to a Sunday and ends before or at midnight of that Sunday (unless that support is a Public Holiday Support or a Night-Time Sleepover).

Weekday Daytime

Support to an individual client that starts at or after 6:00 am and ends before or at 8:00 pm on a single weekday (unless that support is on a public holiday or part of a Night-Time Sleepover).

Weekday Night

Support to an individual client that starts after 8:00 pm and finishes after midnight on that weekday or commences before 6:00 am on a weekday and finishes on that weekday (unless that support is on a public holiday, weekend or part of a Night-Time Sleepover).

Travel costs

DSOA service coordinators can claim travel costs (labour – time) if all the following conditions are met:

- the [Schedule](#) indicates travel costs are claimable for the service
- the activities are part of delivering a specific disability support item to a client
- the support is delivered face-to-face
- ISP includes a breakdown of the related travel costs you intend on charging
- the DSOA service coordinator engaged the worker with an agreement they would be supported for travel costs or
- the DSOA service coordinator is a sole trader and is travelling from their usual place of work to or from the client, or between clients.

DSOA service coordinators can claim 30 minutes in MM1-3 areas and 60 minutes in MMM4-5 areas for travel to each client.

Short-Notice Cancellations

In line with the NDIS, where a DSOA service coordinator has a short notice cancellation (or no show), they can claim 100% of the service type price from the client's ISP.

A cancellation is a short notice cancellation if the client:

- does not show up for a scheduled support within a reasonable time, or is not present at the agreed place and within a reasonable time when the DSOA service coordinator is travelling to deliver the support **or**
- has given less than 7 clear days' notice for a support.

Output units

Each service type in the DSOA Service and Pricing Schedule has an output unit which specifies the unit of measure for the service. For example, hours or days.

If services are not listed in the Schedule their output is “each” and the cost is the cost of the service/item. These outputs must be shown in the client’s ISP and the activity reported as per the DSOA service coordinator’s Grant Agreement.

5.2. Client contributions

Client contributions are payments from a client for their services. The DSOA Program does not provide a specific client contribution framework, however arrangements that may have been in place prior to the commencement of DSOA can remain in place. Previous financial hardship provisions should be available to clients.

Client contributions must:

- be outlined in the client’s ISP
- be included in the performance report
- be checked regularly for client financial hardship
- not use grant funds.

Client contribution principles

- continuity – policies in place before moving to DSOA should continue
- transparency – policies should be available and accessible to the public and should be given and explained to clients
- hardship – policies should give options to clients who cannot pay.

DSOA service coordinators can use client contributions as they choose.

5.3. Reporting

Financial acquittals — financial year report due by 31 August

DSOA service coordinators must submit a financial acquittal report by 31 August each year to show they complied with DSOA Grant Agreement requirements. DSOA service coordinators need to review their Grant Agreements for their reporting periods and requirements.

DSOA service coordinators must provide financial acquittal reports in the form of, and at the times set out in, their DSOA Grant Agreement, or as otherwise notified in writing.

Financial reports should identify:

- the details of additional funding provided to the DSOA service coordinator resulting from a Change of Needs Application
- if clients are no longer accessing services
- if clients have exited DSOA and the FAM has adjusted the DSOA service coordinator's funding accordingly
- if the department has recovered any funds from the provider during the reportable financial year
- unspent funds.

Unspent Funds

Unspent funds are the total amount of funding the DSOA Program has paid for a client in that financial year that was not spent during the reporting period in question. This also includes any additional funding approved through a Change of Needs Application or a variation from an I-CAN assessment that has not been spent.

DSOA service coordinators are responsible for making sure that all funding received for each client is only used for in-scope DSOA services relating to each service type category funded. DSOA service coordinators must keep track of all unspent funds they hold for every client during each reportable period.

DSOA service coordinators cannot carry forward, or 'bank' unspent funds from a previous reportable period. Unspent funds must always be returned to the department, which may include:

- repayment to the department via debtor tax invoice (DTI)
- a deduction to a future milestone payment of the DSOA grant.

Performance report — financial year report due by 31 August

DSOA service coordinators must give an annual performance report using the departmental template by 31 August each year, as per the DSOA Grant Agreement.

This report includes details of Change of Needs Application funding provided to the DSOA service coordinator, including additional outputs that were funded for delivery in the reporting period.

Quarterly provider verification statement — due every quarter

DSOA service coordinators are required to submit a verification statement to the department each quarter. The verification statement must verify all their client's living circumstances and confirmation of any client changes, including significant under-deliveries.

Provider verification statements must be submitted by close of business on the due date for each quarter as per Item B.5.1.10 of the DSOA funding agreement and

considered satisfactory by the department before the next quarterly milestone payment will be made.

5.4. Acknowledging DSOA funding in publications

If DSOA service coordinators make information materials that talk about their DSOA Program responsibilities, they must include acknowledgement of the department's financial and other support, using one of the following:

"Funded by the Australian Government Department of Health and Aged Care. Visit the www.health.gov.au website for more information".

OR

"Supported by the Australian Government Department of Health and Aged Care. Visit the www.health.gov.au website for more information".

Promotional disclaimer

Publications and published advertising and promotional materials that acknowledge DSOA Program funding must also include the following disclaimer:

"Although funding for this [insert service/activity] has been provided by the Australian Government, the material contained herein does not necessarily represent the views or policies of the Australian Government."

Alternative acknowledgement

If DSOA service coordinators wish to acknowledge the funding in a different way to those mentioned above, or have questions about acknowledgement, they should contact their FAM.

Transitioning existing material

Existing promotional materials with previous acknowledgements can be used but new materials should include the prescribed wording above.

Monitoring acknowledgements

DSOA service coordinators are responsible for their subcontractors' compliance with the acknowledgment requirements mentioned above. Acknowledgments are monitored, with a focus on the use of the prescribed wording. The department may contact DSOA service coordinators who are non-compliant with the DSOA Grant Agreement, and may by notice in writing, revoke permission to use this wording.

DSOA service coordinators should inform the department if they find materials without an acknowledgement.

