Australian Government
Department of Health, Disability and Ageing



Disability Support for Older Australians (DSOA)

Program Manual

Information for DSOA Service Coordinators

Version 16 – November 2026

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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, Disability and Ageing (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 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

Date	Summary of changes
	Client Consent Form, DSOA Independent Assessment – Sample Report. New appendix added: How to fill out the ISP template. Revised two appendices: the Change of Needs application 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 – 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, 4.1 – Quality standards and registration with the NDIS Commission, 5.1 – DSOA Pricing.
July 2026	Version 15 – Content update to Sections 1.5 – DSOA Service Coordinator responsibilities, 2.1 – Funded Services, 2.2 Conditional In Scope-services, 3.1 – Individual Support Packages (ISP), 3.2 – Client Annual Reviews, 3.3 – Change of Needs, 3.4 Independent assessment, 3.6 – Aged Care assessment, 3.7 – Changing to a different DSOA Service Coordinator, 3.8 – Exiting DSOA, 4.1 – Quality services, 4.2 - Workforce requirements, 4.4 – Client behaviour risks, 4.5 – Emergency Situations, 5.1 – DSOA pricing, 5.2 – Client contributions and 5.3 – Reporting New sections added – 3.5 – Funding amendment requests and 4.6 – Child safety policy Appendices A, B, C, D, E, F, G and H have been amended
November 2026	Version 16 – Content update to Section 2.1 – Funded Services

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

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 with any questions about their DSOA services and supports, including complaints. The DSOA Service Coordinator must support clients with any issues regarding their funded services.

Contact information – for DSOA Service Coordinators

The Department of Social Services' Community Grants Hub manages the funding arrangement with the DSOA Service Coordinator, on behalf of the department.

The Community Grants Hub is available to help DSOA Service Coordinators with enquiries relating to their grant 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
CFB	Client Funding Breakdown
CGRP	Commonwealth Grant Rules and Principles
CHSP	Commonwealth Home Support Program
DSOA	Disability Support for Older Australians
FAM	Funding Arrangement Manager
FAR	Funding Amendment Request
HCP	Home Care Package
ISP	Individual Support Package
MMM	Modified Monash Model (remoteness indicator)
NDIA	National Disability Insurance Agency
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) Program

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 guardian 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 programs / services 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 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 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 consider the protection and promotion of a person's human rights.

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 (where program policy allows)

- 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 guardian.
- 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, Disability and Ageing (the department) in line with the Commonwealth Grants Rules and Principles (CGRPs) 2024.

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**
- Aboriginal or Torres Strait Islander person aged 50-64 years when the NDIS commenced in their region, **and**
- assessed as ineligible for the NDIS, **and**
- 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.

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, 7 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 can 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 with accessing the supports they need to continue living as independently as possible. This may include submitting a Change of Needs application for clients that are eligible, submitting a temporary or permanent funding amendment request, or assisting the client to access aged care supports.

Client services

DSOA Service Coordinators are responsible for responding to the client's disability support needs, including:

- the development and annual review of the client's Individual Support Package (ISP)
- completing a client Annual Review yearly
- 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, including:

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

Funding

DSOA Service Coordinators are responsible for managing the DSOA funding package of each client to achieve their disability support needs and agreed goals. This may include submitting a Change of Needs application for eligible clients or submitting a temporary or permanent funding amendment request.

DSOA Service Coordinators need to ensure all supports delivered are in scope under the DSOA Program, and they acquit the actual grant funding spent at the end of each funding period.

Administration

DSOA Service Coordinators are responsible for the administration that supports service delivery, including:

- engaging an appropriately qualified and trained workforce
- workforce performance, training, safety, assessment, and screening
- collaborating with staff and sharing best practice
- maintaining appropriate evidence that supports all service delivery to DSOA clients and the expenditure of their grant.

Compliance obligations

DSOA Service Coordinators are responsible for complying with all requirements in the DSOA Grant Agreement and associated documents, including:

- 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.
- Compliance with the NDIS Practice Standards and Rules

DSOA Service Coordinators must respond to and action all compliance related requests from the department within 14 calendar days of being notified.

DSOA Service Coordinators must complete a quarterly provider verification statement and submit this to the department. This will provide an opportunity to:

- review procedures and systems to ensure they are in-line with DSOA Program requirements
- identify any issues requiring action and that the department should be notified about.

The department conducts risk-based compliance audits of DSOA Service Coordinators as part of administration of the program. To support this, the department can request evidence of service delivery to DSOA clients as well as evidence that supports the expenditure of your grant. The request may include but is not limited to evidence:

- that all support staff are qualified
- that the organisation has met all NDIS requirements including registration, workforce screening, and auditing requirements of the NDIS
- of all services that have been delivered.

DSOA Service Coordinators must keep all records for a minimum of 5 years after the activity completion date in their grant agreement and provide these records to the department when requested.

The department can undertake an audit of a DSOA Service Coordinator at any time. Organisations will be notified about these audits and how to submit the required audit documentation.

DSOA Service Coordinators that are found to be in breach of DSOA requirements will be subject to further compliance actions. More serious compliance actions will be taken without notice if there is evidence showing:

- risks to client safety or program integrity
- incidents or evidence of fraud
- legal or ethical misconduct.

Where DSOA Service Coordinators deliver services to clients that are out of scope of the DSOA Program, the DSOA Service Coordinator may be required to repay these funds to the department.

Management fee

DSOA Service Coordinators receive a management fee equal to 2 per cent of the clients total funding. This fee is included in the DSOA Service Coordinator's Client Funding Breakdown (CFB) and can be used to cover the costs of administering the client's ISP, meeting program compliance requirements (including audits), and fulfilling program reporting obligations.



2 DSOA Program services

This section covers:

- funded services
- conditional in-scope services
- excluded services

2.1 Funded services

Clients can access a range of disability services under the DSOA Program. All clients receive funded services through an Individual Support Package (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.

The DSOA Program funds the supports outlined below. See Appendix A - DSOA Service and Pricing Schedule for more information.

DSOA Service Coordinators cannot charge a higher hourly rate than prescribed in Appendix A – DSOA Service and Pricing Schedule. The DSOA Program does not mandate hourly pricing for Extended CoS Services. DSOA Service Coordinators must ensure that hourly rates for services delivered under Extended CoS Services do not exceed the NDIS prescribed hourly rate for the equivalent NDIS service type.

Notice of suspended services

Where a client has not used DSOA services for a period of up to 3 months (for example, due to a stay in hospital), the DSOA Service Coordinator must review the client's disability support needs, and report this to the department through the Quarterly Provider Verification Statement. All variances must be reported in the annual performance report and financial acquittal.

Services available under DSOA

Assistance with Supported Independent Living (SIL)

This provides in-person assistance with, or supervision of, tasks of daily life in a shared living arrangement, with a focus on developing the skills of each client to live as autonomously as possible. It includes help or supervision with tasks such as personal care or cooking meals.

SIL activities include assistance 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 activities do not include assistance with:

- rent, board and lodging
- day-to-day usual living expenses such as food, transport and activities
- gardening or landscaping

- hiring a house cleaner
- capital costs associated with a client's accommodation.

Assistance with Self-care Activities

Assistance with self-care activities provides clients living at home with in-person assistance 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, transport, activities, gardening, landscaping, or domestic activities (cleaning).

Assistance with self-care activities include support with:

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

Assistance with self-care activities does not include support with:

- rent, board and lodging
- day-to-day usual living expenses such as food, transport and activities
- gardening or landscaping
- Domestic duties (cleaning)
- Recreational community access activities

For DSOA clients who live in their own home and are independent in most daily living tasks, meal preparation support must help the client maintain or develop their skills and independence. The client must have direct, physical involvement in meal preparation tasks undertaken with their support worker. Observing the support worker prepare meals does not meet this requirement.

A support worker may prepare meals on the client's behalf without the client participating when all the following conditions are met:

- the client is not independent in most daily living tasks;
- the client does not live with an informal support person who can prepare meals for them; and
- disability-related impairments prevent the client from preparing meals safely and independently.

The Department may request evidence from DSOA Service Coordinators confirming that the client meets all three conditions, including evidence of the disability-related impairments affecting their ability to prepare meals safely and independently.

Short-term Accommodation (STA) and Assistance (inc. respite)

This support provides accommodation and daily living assistance when a client temporarily stays away from their usual residence.

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Support must be delivered in a group-based respite facility and is intended to support ongoing caring arrangements between clients and their carers.

STA (including respite) allows a client to receive support from another person while providing their carer with a short-term break from their usual caring responsibilities. Funding includes assistance with self-care activities and accommodation costs.

The Department will fund up to 28 days of short-term accommodation per financial year. Funding may be used in a single block of up to 14 days or over multiple shorter stays, such as weekends.

STA funding does not cover incidental expenses, including community access activities, food, or transport. Consistent with Assistance with Self-Care Activities funding, these costs must be met privately by the client.

DSOA Service Coordinators must not charge a higher hourly rate for STA services than the applicable DSOA prescribed hourly rate for the day and time the support is delivered.

A client's STA intensity level will be the same as the intensity level funded under their existing daily living supports.

Hourly STA rates apply to weekday daytime, weekday night-time, Saturday, Sunday and public holiday supports. A separate nightly rate applies to sleepover support. These rates fund daily living supports, including disability support worker costs, while the client is staying in a group-based respite facility.

The STA and Assistance (including respite) – Participant Accommodation and Support Worker Accommodation item covers standard accommodation costs for each overnight stay. Additional supports, including personal care, must be claimed separately through the relevant STA hourly support items.

Specialist Behavioural Intervention Support

Specialist behavioural intervention support provides intensive assistance to address significant or persistent behaviours of concern.

Behaviour support funding requires a Behaviour Support Plan to be developed that aims to limit the likelihood of identified behaviours of concern developing or increasing.

A Behaviour Support Plan must outline specifically designed positive behavioural support strategies for a client, their family and carers 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 by a qualified practitioner.

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 where required by NDIS.

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 Aids

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

This funding must not be used for any nursing care that falls outside of a continence assessment, recommendation, or training.

Psychosocial Recovery Coaching

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

Recovery coaches must have tertiary qualifications in peer work or mental health or equivalent training; and/or a minimum 2 years of experience in mental health-related work.

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 fully qualified therapist.

Assessment Recommendation Therapy and/or Training - Physiotherapy

This support is to respond to the disability-related health needs of a client where that care is not the usual responsibility of the health system. It provides the client with an assessment, recommendation, therapy, or training (including assistive technology) delivered by a qualified physiotherapist.

Assessment Recommendation Therapy and/or Training – Other Therapy

This support is to respond to the disability-related health needs of a client where that care is not the usual responsibility of the health system. It provides the client with an assessment, recommendation, therapy, or training (including assistive technology) by a fully qualified allied health professional such as an occupational therapist, speech pathologist, or podiatrist.

Assessment Recommendation Therapy and/or Training – Psychology

This support is to respond to the disability-related health needs of a client where that care is not the usual responsibility of the health system. It provides the client with an assessment, recommendation, therapy, or training (including assistive technology) by a fully qualified psychologist.

Requests for psychologist supports related to mental health that are clinical in nature, including acute, ambulatory, or continuing care or rehabilitation, may be considered on a case-by-case basis through a Change of Needs application.

Dietitian Consultation and Diet Plan Development

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

This support must be delivered by a qualified dietitian.

Exercise Physiology

Advice to a client on the required exercises (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). This support type can only be requested if evidence is provided that a DSOA client is not eligible for the Hearing Services Program or all available funding from the Hearing Services Program has been exhausted.

Professional Nursing Health Services

This is nursing care that is not usually the responsibility of the health system and responds to a client's disability-related health needs. It is delivered by differing levels of nursing, as required and as listed in your organisations CFB.

Nursing supports for a health episode are out of scope of the DSOA Program. This support type can only be requested if evidence is provided that demonstrates how it relates to the functional impact of a client's disability.

Case Management

Case management includes collaborating with the client's carers and family, to understand the client's needs, and provide assistance that connects them with community-based services as well as 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 such as an occupational therapist.

Extended CoS Services – Community Access

Where a client received funding for community access under the former Continuity of Support (CoS) Programme, the client can continue to access this funding under the DSOA Program as a grandfathered arrangement. This funding 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 to receive any new or additional Extended CoS Services funding under the DSOA Program, including through the Change of Needs application process or through temporary and permanent funding amendment requests.

Extended CoS Services funding supports a client to participate in community-based group programs that build skills, independence, and social interactions across a range of areas.

Extended CoS Services funding must only be used for clients to attend regular group day programs, or group programs and activities delivered on a scheduled recurring basis such as regular art classes, or regular craft programs. This funding cannot be used for activities that are completed through a SIL facility.

All supports delivered under Extended CoS Services funding must occur off-site to the client's place of residence, as the purpose of this funding is to enable the client access to the community.

Extended CoS Services cannot be used to fund one-to-one (1:1) supports that are not delivered in a group setting (except for client's that live in a residential aged care facility or a hostel).

The DSOA Program does not prescribe 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 are required to report Extended CoS Services expenditure in their annual financial acquittal, and report details of all services delivered to the client using this funding in their annual performance report.

Extended CoS Services is a grandfathered service type and any over-delivery under this activity cannot be offset by under-delivery from another service type.

Extended CoS Services funding cannot be used to fund any supports that relate to Capital costs, non-face to face community access supports or any other administrative supports that may be applicable under the NDIS.

DSOA Gap Funding

DSOA gap funding is applied where a client's overall funding is reduced following either:

- an independent assessment, where the recommendation results in a reduction in overall funding
- an approved permanent funding amendment request, where the approval results in a reduction in overall funding.

A client's DSOA gap funding can only be used to deliver in-scope activities under the DSOA Program listed in Appendix A – DSOA service and pricing schedule. This excludes Extended CoS Services, which is a grandfathered service type and is not eligible for increases above existing funding levels.

Where a client has a DSOA gap funding allocation, this will be used first by the department to offset funding increases such as indexation or the outcome of a Change of Need Application, until the gap funding allocation is exhausted.

DSOA Service Coordinators can submit a request to their FAM at the Community Grants Hub seeking approval to use a client's DSOA gap funding allocation for one-off Conditional In-Scope Services. The request must be supported by sufficient evidence demonstrating that all other funding avenues have been exhausted. Requests will be considered by the department on a case-by-case basis.

DSOA Service Coordinators are required to report use of DSOA gap funding and related expenditure in their annual financial acquittal and annual performance report.

2.2 Conditional in-scope services

The DSOA Program does not fund supports that are already available through other government-funded programs.

Requests for Conditional In-Scope Services will only be considered by the department as one-off funding through a Change of Needs application. Clients must first explore and exhaust all other available state/territory and Commonwealth funding options prior to requesting support under the DSOA Program.

Aids and Equipment

The Change of Needs application and supporting evidence must confirm that funding is not available or has been exhausted through the client's relevant state or territory government funded program and/or the Commonwealth Home Support Program (CHSP) before the department will consider a request for additional funding. Supporting evidence must substantiate both the level of funding requested in the application and the client's disability related need for the proposed one-off support.

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 Products

Before the department will consider the request for additional funds, the Change of Needs application and supporting evidence must confirm that:

- funding is not available or has been fully exhausted through:
  - the client's relevant state/territory government funded program
  - the Continence Aids Payment Scheme (CAPS) and
  - CHSP

Supporting evidence must substantiate both the level of funding requested in the application and the client's disability-related need for the proposed one-off support.

Dietary consumables

The Change of Needs application and supporting evidence must confirm that funding is not available through the health care system and all alternate funding options have been exhausted. Supporting evidence must substantiate both the level of funding requested in the application and the client's disability-related need for the proposed one-off support.

Transport

DSOA Service Coordinators must explore all available transport subsidy options before seeking support through the Change of Needs application process. The application must confirm that funding is not available through the client's relevant state or territory government funded program and/or 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

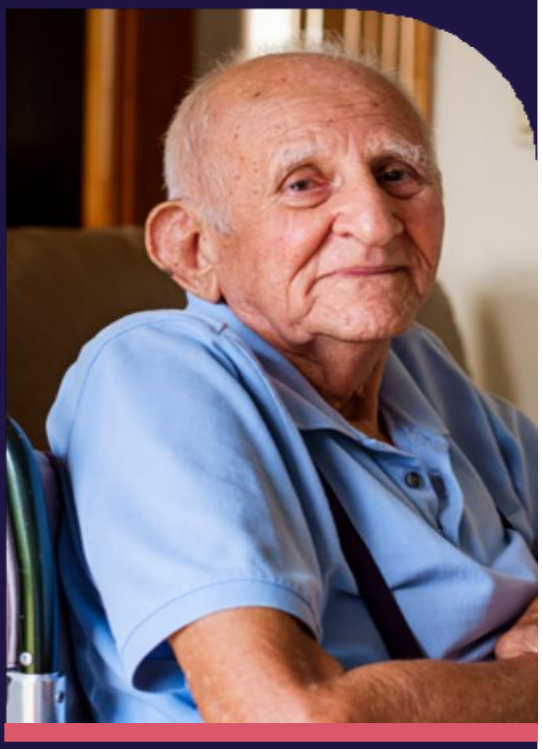
SA: SA Transport Subsidy Scheme

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 residing in a Supported Independent Living home in New South Wales. Due to a decline in mobility, he now requires a wheelchair for all indoor and community mobility. Prolonged wheelchair use has resulted in the development of multiple pressure injuries.

Following discussion with Bill regarding his health and wellbeing, his DSOA Service Coordinator identified the need for specialised equipment and arranged an occupational therapy assessment. The assessment recommended a specialised wheelchair cushion with alternating inflation and deflation to provide ongoing pressure relief and support the healing of existing pressure injuries.

The DSOA Service Coordinator sought funding for the recommended equipment through Enable NSW and the Commonwealth Home Support Program. However, both programs advised that funding was unavailable for this item.

In the absence of alternative funding options, a Change of Needs application was submitted on Bill's behalf, requesting one-off funding under Conditional In-Scope Services. The application was approved, enabling the purchase of the wheelchair cushion. The provision of this equipment has supported the healing of Bill's pressure injuries, reduced the risk of further injury, and improved his overall health outcomes and quality of life.

2.3 Excluded services

DSOA funding cannot be used towards the cost of the following 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)
- specialised 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 personal care support services received can still be funded)
- any overseas travel or accommodation
- activities that are not identified as supports and services provided by the DSOA Program.



3 Supporting client needs

This section covers

- Individual Support Package (ISP)
- client Annual Reviews
- Change of Needs
- Independent assessments
- funding amendment requests
- aged care assessment
- changing DSOA Service Coordinators
- exiting the DSOA Program

3.1 Individual Support Package (ISP)

An Individual Support Package (ISP) must be developed alongside the client and/or the client's guardian to support the client's choice and control of how funded supports are delivered.

DSOA Service Coordinators are responsible for keeping each client's ISP current and updated as circumstances change.

When reviewing and updating a client's ISP, the DSOA Service Coordinator must:

- review and update the ISP with the client and/or the clients guardian at least once each year (within 12 months of the previous ISP start date), or earlier if the client's disability support needs change, or DSOA funding levels change
- ensure an ISP has been completed with the client or the client's guardian before service delivery starts for that period, including where a client has transferred to the organisation
- provide a copy of the updated ISP to all parties who have signed the ISP
- where a public guardian is appointed, attach a letter or email from the public guardian (in place of a signature) confirming they have received a copy of the ISP.

DSOA Service Coordinators must use Appendix D – Individual Support Package template for all ISPs. For detailed guidance on completing the template and the level of information required, refer to Appendix C – How to fill out the ISP template.

Where a DSOA client does not have the capacity to physically sign the ISP and does not have a guardian to sign on their behalf, the department will accept a detailed file note from the DSOA Service Coordinator attached to the ISP. Refer to ISP template for more information on the details that should be recorded. This arrangement applies to ISPs only and does not apply to other program forms.

A copy of the client's signed ISP must be emailed to the department at DSOAcompliance@health.gov.au within 10 business days of the ISP start date each year and within 10 business days after each ISP update that occurs.

Using subcontractors

DSOA Service Coordinators can deliver funded services directly to clients or subcontract delivery to other service providers or use a combination of both.

Any subcontracting arrangement must be limited to the term of the current DSOA Grant Agreement.

DSOA Service Coordinators remain accountable for all services funded and delivered under their DSOA Grant Agreement, including any services delivered through a subcontractor. DSOA Service Coordinators must ensure that subcontractors comply with:

- the DSOA Grant Agreement (incorporating Schedule 1 – Standard Terms and Conditions and the Supplementary Terms and Conditions documents)

- this Program Manual
- any documents incorporated by reference into the documents above
- all relevant Commonwealth, state and territory legislation and regulations
- the NDIS Commission Quality Standards, including the Code of Conduct and Rules.

DSOA Service Coordinators must involve clients in decisions about their care and ensure clients continue to receive high-quality services.

3.2 Client Annual Reviews

A client Annual Review is undertaken by the client's DSOA Service Coordinator. It is an assessment of a client's disability support needs. The review ensures that services currently being delivered to the client remain appropriate to meet the client's disability support needs. It can be used to support a Change of Needs application or identify a need to change the way in which supports are delivered.

A client Annual Review must be completed at least once per year (within 12 months of the previous Annual Review date), or sooner if the client has had a change in their disability support needs.

A client Annual Review is different to the client's ISP and must be recorded separately.

An Annual Review template is available for DSOA Service Coordinators to use. If a DSOA Service Coordinator would like to develop their own Annual Review template, they must ensure it addresses all the key criteria and questions outlined in the department's Annual Review template at a minimum.

The Annual Review must:

- be detailed and comprehensive
- provide a thorough review of all services provided to the client
- provide information about the client's function, personal care, mobility and cognition
- address whether the client's current DSOA funding is meeting their disability support needs
- address whether 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 was completed.

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 Service Coordinators must discuss the outcome of the Annual Review with the client or the client's guardian and advise if additional support is required to meet their disability support needs.

The Annual Review must be attached as evidence when a Change of Needs application is submitted to the department.

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

A copy of the client's Annual Review must be emailed to the department via DSOAcompliance@health.gov.au within 10 business days of being completed.

3.3 Change of Needs

When a DSOA client's disability related support needs or circumstances change, or if their Annual Review identifies a need for additional support, their DSOA Service Coordinator may submit a Change of Needs application to the department.

Change of Needs application

DSOA Service Coordinators must use the current version of the Change of Needs application form when submitting a request. Outdated forms will be returned with instructions to resubmit using the current application form. All sections of the Change of Needs application form must be fully and accurately completed. Applications must be accompanied by sufficient supporting evidence and submitted via email to dsoachangeofneed@health.gov.au.

The department will only consider funding from the date a **complete** Change of Needs application is received. Incomplete applications will be returned to the DSOA Service Coordinator for amendment and resubmission. This will result in delays to the assessment process, including delays to the date from which funding commencement is considered.

When completing an application, DSOA Service Coordinators can refer to the How to Complete a Change of Needs application fact sheet.

Supporting evidence

The level of evidence required to support a Change of Needs application will vary depending on the type and amount of additional assistance requested. Requests for higher levels of funding must be supported by proportionately more comprehensive evidence.

The application submission **must include**:

- the client's up-to-date DSOA Individual Support Package (ISP) and client Annual Review

- supporting evidence dated within the last 12 months, such as assessment reports, a letter from an allied health professional or general practitioner, or a hospital discharge summary.

If applicable, the following documentation **must** also be included with your submission.

- If the client lives in Supported Independent Living (SIL) accommodation and you are applying for additional **Assistance in Supported Independent Living** funding, you must submit 2 separate NDIS SIL Rosters of Care (ROC). The first must reflect the client's current care arrangements, with the second outlining the proposed care arrangements if additional funding is approved. Both ROCs must be submitted in Microsoft Excel format and include all residents in the accommodation setting, including any vacancies, with all non-DSOA client information de-identified.
- If the client lives in their own home and you are applying for additional **Assistance with Self-Care Activities** funding, you must submit 2 weekly care rosters. The first must reflect the client's current in-home care arrangements, with the second outlining the proposed care arrangements if additional funding is approved. The rosters can be submitted in any format, provided they clearly list all 7 days of the week and specify the times of the day a support worker is assisting the client.

Timeframe

The timeframe for finalising a Change of Needs application may vary depending on a range of factors, including the complexity of the application and the priority of other applications awaiting assessment. Applications assessed as urgent will be prioritised accordingly.

Outcome

Once finalised, the department will inform the DSOA Service Coordinator of the outcome of the Change of Needs application.

If approved, the DSOA Service Coordinator must:

- update the client's ISP to reflect the approved funding
- obtain the client's signature on the ISP, or the signature of their guardian
- Update the ISP to reflect the new funding levels and support and provide a copy of the signed ISP to the department within 10 business days of the date of signature by emailing DSOAcompliance@health.gov.au.

3.4 Independent assessment

The department will refer a client for an independent assessment where a Change of Needs application exceeds $20,000 annually outside the Change of Needs process, or as a result of compliance actions. The Department may also refer a client for an Independent Assessment at its sole discretion.

Independent assessments provide impartial evidence of a client's disability-related support needs to ensure that appropriate supports are provided under the DSOA Program. Independent assessments are funded by the department and do not incur a cost to the client.

Assessment process

Assessor

Independent assessments are conducted by experienced health professionals and disability needs assessors external to the department.

A client's needs are assessed via email, telephone, and/or video interview. Discussions may involve the client and, where appropriate, their family members, guardian, carer, advocate or representative.

The client's preferences, and those of their carer, advocate, or representative, should guide decisions regarding attendance at the assessment. Where possible, the client should participate in at least part of the independent assessment. Individuals who have a strong understanding of the client and their support needs, such as informal carers, family members, and core support workers are encouraged to attend.

Duration

The duration of an independent assessment will vary depending on the client's disability-related needs and the extent and quality of information and supporting evidence available.

The DSOA Service Coordinator must provide relevant client information to the assessor in advance of the assessment to enable the assessor to become familiar with the client and their support needs. Providing information prior to the assessment helps to streamline the assessment process and ensures that all relevant information is available for consideration.

Outcome

The department will notify the DSOA Service Coordinator of the outcome of the independent assessment; however, this notification will not include DSOA support calculations, as these are for internal departmental use only. The department will only consider funding commencement for independent assessment recommendations 7 days after the DSOA Service Coordinator has received a final copy of the report. This timeframe is intended to support short-term cancellations and facilitate any necessary adjustments to rostering and service arrangements.

The DSOA Service Coordinator must discuss the outcome of the independent assessment with the client and the client's guardian (if applicable). This is particularly important where the outcome differs from the client's current ISP or the findings of the client's most recent Annual Review.

Where the independent assessment identifies specific care goals or recommends referrals to other services, the DSOA Service Coordinator must implement the required referrals and ensure that these are reflected in the client's ISP.

If the independent assessment determines that the client's required level of care differs to the level of support currently being provided, the client's ISP must be amended to align with the recommended outcome of the assessment.

DSOA gap funding will be applied where a client's overall funding is reduced following an independent assessment. Where a client has DSOA gap funding, this is used to offset future funding increases by the department such as indexation or the outcome of an additional independent assessment, until the gap funding allocation is exhausted.

3.5 Funding amendment requests

A funding amendment request (FAR) allows DSOA Service Coordinators to request the reallocation of funding between existing DSOA service types within a client's current funding package. The reallocation of funding must be equal to or less than the client's current funding levels.

If the client requires additional funding overall, or if funding relates to a new support type that the client is not currently funded for, the DSOA Service Coordinator will need to consider submitting a Change of Needs application for eligible clients.

DSOA Service Coordinators must use the funding amendment request template for all amendment requests. A copy of the FAR template can be requested through your Funding Arrangement Manager (FAM).

DSOA Service Coordinators must obtain written consent from the client or the client's guardian as evidence that they have agreed to the proposed changes to their funded support service types and levels.

The department will not consider retrospective funding changes. Temporary and permanent FAR requests will only be considered from the date a fully completed FAR form is submitted. This means that DSOA Service Coordinators must receive approval from their FAM or the department for the FAR, prior to any changes occurring to the client's delivered supports.

Two types of FARs can be applied to a client's DSOA funding package:

- a temporary FAR (for a maximum period of up to 3 months within the current financial year)
- a permanent FAR (ongoing reallocation of supports).

DSOA Service Coordinators cannot reallocate outputs to increase Extended CoS Services funding, as this is a grandfathered support type and is capped at its current funding level.

Unspent funds from one client cannot be used to reallocate to another client for supports.

If the FAR is requesting changes to Case Management or Specialist Behavioural Intervention Supports, the DSOA Service Coordinator must provide additional evidence to:

- explain how the changes will meet the client's disability support needs, and
- show why these services need to be funded or why they are no longer required.

Temporary funding amendment requests

Temporary amendments can only be considered for a maximum period of 3 months in the current financial year. Any changes to a client's funding that exceeds 3 months must be considered as a permanent amendment.

All approved temporary FARs will need to be reported in the DSOA Service Coordinator's performance report for the relevant reporting period, including details of the approval and details of the support types that had funding altered during this approval period.

Temporary FAR changes will not be reflected in your Client Funding Breakdown (CFB). It is the DSOA Service Coordinator's responsibility to track these approvals and to ensure that the correct details are reported in the annual performance report submission.

Approved temporary FARs will have a commencement date and a cessation date. The DSOA Service Coordinator must ensure that any changes to the client's delivery of supports only occurs during the approved period.

The DSOA Service Coordinator is not required to update the client's ISP with temporary changes. However, the client must be informed on what approved changes are occurring, including the length of time that these changes will occur.

Permanent funding amendment requests

All permanent FARs must be approved by the department.

All approved permanent FARs will have a commencement date that aligns with the next quarterly milestone payment date.

DSOA Service Coordinators may be able to request approval from your FAM for a temporary FAR, whilst the permanent FAR is being considered by the department or until the approved commencement date of a FAR occurs.

Permanent FARs once approved by the department, will be reflected in the DSOA Service Coordinators CFB. This will occur from the approved commencement date through to the funding end date of this service type.

The DSOA Service Coordinator must update the client's ISP to reflect any approved permanent funding changes within 10 business days of approval. The updated signed ISP must be submitted to DSOAcompliance@health.gov.au.

For any questions relating to funding amendment requests, including access to the FAR template, DSOA Service Coordinators must contact their FAM via the state jurisdictional mailbox addresses listed in this manual.

3.6 Aged care assessment

Reasons for an aged care assessment

An aged care assessment determines whether a client is eligible to access government-funded aged care services, such as Support at Home services or residential aged care. Aged care assessments consider the client's physical, medical, mental, cultural, social, and wellness needs.

Assessment support

It is the DSOA Service Coordinator's responsibility to inform all their DSOA client's that an aged care assessment may impact their DSOA funding and provide each client with a copy of the department's Disability Support for Older Australians Program and aged care services factsheet. This is to ensure that DSOA clients are aware of the implications surrounding eligibility for aged care services and how this affects their DSOA funding package.

DSOA clients should only undertake an aged care assessment after considering the potential impact on their DSOA funding, or where they are considering a transition to aged care services instead of DSOA supports.

Once a DSOA client has been informed about the impact an aged care assessment may have on their DSOA funding package, and the client has consented to proceed with an aged care assessment, the DSOA Service Coordinator must assist the client to contact My Aged Care on **1800 200 422** to request an assessment, or complete the referral form available on the My Aged Care website.

When contacting My Aged Care, the client or their DSOA Service Coordinator must clearly advise My Aged Care that the request relates to a DSOA client and advise the aged care assessor which services the client would like to access.

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 DSOA services provided.

Aged care assessors must also be informed of whether:

- 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.

Where a client is assessed as being at immediate risk, the department may consider the provision of interim funding while the outcome of the aged care assessment is pending.

Outcomes of an aged care assessment that WILL impact DSOA funding

Where a client is assessed as eligible for Support at Home services or residential aged care, the client's DSOA funding will be capped. This means they will not be eligible to receive any new or additional supports or services through the DSOA Program, including through the Change of Needs application process. Annual price increases aligned to NDIS pricing changes will continue to be applied.

When a client commences Support at Home services or enters permanent residential aged care, they will be exited from the DSOA Program from the date these aged care services commenced. The commencement date will be verified through My Aged Care.

Accessing Aged Care services that commenced prior to 1 July 2021

If a client commenced a Home Care Package or entered permanent residential aged care prior to 1 July 2021, the client can continue to receive supports through the DSOA Program as a grandfathered service. However, the client's DSOA funding will remain capped.

If at any time a client commences Support at Home services that are at a higher classification level to their Home Care Package (that commenced prior to 1 July 2021), they will be exited from the DSOA Program.

If a DSOA client commenced accessing Commonwealth Home Support Program (CHSP) services prior to **1 July 2021**, the client can continue to receive these CHSP services through a grandfathered arrangement, with no impact to their DSOA funding.

CHSP services DSOA clients CAN access

If a DSOA client is found eligible for and accesses any of the below CHSP services, they can access them without it impacting their DSOA funding package:

- domestic assistance
- equipment and products
- hoarding and squalor assistance
- home adjustments
- home maintenance and repairs (including gardening)
- meals
- social support and community engagement
- therapeutic services for independent living
- transport
- Specialised Support Services (SSS).

CHSP services DSOA clients CANNOT access

DSOA clients cannot access any of the below CHSP services if they commenced on or after 1 July 2021:

- allied health and therapy
- community cottage respite
- home or community general respite
- nursing care
- personal care.

If a client accesses any of the above CHSP services that commenced on or after 1 July 2021, they must relinquish these CHSP services through My Aged Care or exit the DSOA Program.

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 without these supports or receive all support through My Aged Care only.

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

Other aged care programs available for DSOA clients

Dementia support

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

Case study: Accessing aged care support in place of DSOA services



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

Edwina's personal care needs have increased over time, and her husband mentions this to Edwina's DSOA Service Coordinator. The coordinator informs Edwina that she is not eligible for any additional DSOA funding and that aged care supports may make her life easier and provides the client with the DSOA Aged Care factsheet.

Edwina and her husband talk to the DSOA Service Coordinator about implications to her DSOA funding and they decide to contact My Aged Care to request an aged care assessment.

Edwina is assessed as eligible for Support at Home services. Edwina continues as a DSOA client on her current level of funding, until she commences her Support at Home services, at which time she will exit the DSOA Program and receive all supports through Support at Home.

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.

In both instances, the existing DSOA Service Coordinator must:

- have a transfer process in place and provide information to the client about their rights to change service providers
- advise their FAM of the client's new DSOA Service Coordinator so the FAM can make sure the new coordinator can accept them as a client
- tell the department in writing at least 6 weeks in advance of a client transfer as 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 entity 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 the existing DSOA Service Coordinator's organisation that they will relinquish or transfer client funding to the new service provider (where applicable).

The existing DSOA Service Coordinator must gain permission from the client to share their information with the new DSOA Service Coordinator.

The existing 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 requires a **Transition-Out Plan.** This template is available from the FAM upon request and describes 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.

Business changes, such as mergers, acquisitions, or restructure

Some business changes such as a merger, acquisition or restructure may result in the need for a bulk transfer or novation of your funding agreement. However, services and supports to your client/s will be ongoing and remain unchanged. This situation is considered an **administrative variation**.

In the event your organisation is subject to a change in business structure, it is best to contact your FAM to check if an administrative variation is required to your DSOA funding agreement, or alternatively if your organisation's information held by the department requires updating. To support the request, the DSOA Service Coordinator should provide the following information to their FAM:

- the date the business change will occur
- the type of business change such as merger, acquisition or restructure
- the reason/s for the business change
- details of the DSOA clients who will be affected by the change
- changes to your organisation's contact information or key personnel.

Your FAM will confirm whether an administrative variation is required or not. In this event, further information may be requested, such as:

- a letter outlining the business change and any material changes to the DSOA funding agreement, such as business name
- copies of any re-issued registration documents such as business registration certificate, NDIS registration, etc
- evidence that your DSOA clients are aware of the business change and any changes to service delivery, staffing, routine, or regular contact person/s, if applicable.
- evidence that the new or updated organisation is compliant with the DSOA Program eligibility criteria as outlined in the Grant Opportunity Guidelines.

3.8 Exiting the DSOA Program

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

- choose to access aged care services such as Support at Home or residential aged care instead of DSOA funded services
- have a change in their support needs and additional support options are not available under DSOA

- no longer require DSOA services
- have not used any DSOA services for more than 12 months
- 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.

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, unless the client exit date aligns with the funding end date listed in the Client Funding Breakdown (CFB). The department will recover over payments from future grant payments in the first instance, or through a debtor's tax invoice. The recovery method is at the department's discretion.

DSOA Service Coordinators must include these changes in the financial acquittal report submitted for that financial year.

The department will initiate a client exit if it is deemed that the client has not been receiving DSOA 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 a DSOA client meets the NDIS eligibility requirements due to a change in their circumstances, they must exit DSOA. The person may forward an access request to the NDIS at any time.



4 Quality and safety

This section covers:

- quality services
- workforce requirements
- complaints
- client behaviour risks
- emergency situations
- Child Safety Policy

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 those services delivered under DSOA. The NDIS Commission sets the quality and safety standards that apply to all DSOA services.

Quality standards

DSOA Service Coordinators must meet the NDIS Commission's standards and quality requirements for all clients. Accordingly, services must:

- comply with the requirements of the DSOA Grant Agreement (incorporating Schedule 1 – Standard Terms and Conditions and the Supplementary Terms and Conditions documents)
- meet the Quality Standards set out in the NDIS Commission (Code of Conduct) Rules 2018 and *NDIS Rules*
- support and recognise users' rights under the National Standards for Disability Services and any applicable state or territory requirements
- recognise and respond to client 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 must report and respond to incidents relating to the quality or safety of DSOA services, in accordance with the National Standards. This includes managing and reporting critical or serious incidents such as emergencies, deaths, assaults or abuse, serious unexplained injuries, and any incidents that impacts client safety.

Registration with the NDIS Commission

DSOA Service Coordinators are responsible for registering with the NDIS Commission. Registration is required only for the service types delivered by the DSOA Service Coordinator.

Further information on Becoming a NDIS provider is available on the NDIS website.

Seeking exemption

A DSOA Service Coordinator may apply for an exemption from NDIS Commission registration in exceptional circumstances. For example, where an organisation is already registered as an aged care funded provider and supports only a very small number of DSOA funded clients. The department will consider the quality standards the organisation is already required to meet.

To request an exemption, DSOA Service Coordinators must submit Appendix H - DSOA NDIS Registration Exemption Form to CommonwealthDSOA@health.gov.au.

The department will consider each application on its merits, having regard to the circumstances outlined in the application.

An exemption will not be granted where services (whether delivered directly or through subcontracting arrangements) involve regulated restrictive practices or development of behaviour support plans.

Where an exemption is granted, the DSOA Service Coordinator is considered an **unregistered service provider**. Unregistered service providers must comply with the *NDIS (Code of Conduct) 2018*, and they must notify their DSOA clients that they are an unregistered provider.

Exemptions are time-limited and include an end date. The DSOA Service Coordinator must submit a new exemption application at least one month before the exemption end date. If an application is not submitted within this timeframe, the department will determine that the organisation is not meeting its DSOA grant agreement obligations and may take compliance action.

4.2 Workforce requirements

DSOA Service Coordinators are responsible for all personnel involved in the delivery of DSOA services, including subcontractors, volunteers, and executive decision makers.

Workforce screening

DSOA Service Coordinators must ensure that all personnel involved in service delivery (including subcontractors and volunteers) comply with the NDIS Commission's workforce screening requirements.

A 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. It determines whether the person is 'cleared' or 'excluded' from working in specified roles with people with disability.

A Worker Screening Check is conducted by the relevant state or territory authority, and fees apply. A Worker Screening Check is valid for 5 years.

In some states or territories, a person may be permitted to work for a registered provider while their Worker Screening Check application is being assessed.

Visit the How do I apply for the NDIS Worker Screening Check? page on the NDIS website for more information.

Unregistered service providers must determine whether their workers are required to hold a Worker Screening Check. As a minimum, all staff of an unregistered service provider must hold a current National Police Check certificate.

Qualifications and training

DSOA Service Coordinators are responsible for engaging people who are appropriately trained and suitably qualified to deliver services they provide. DSOA Service Coordinators must meet the service delivery standards set out in the DSOA Grant Agreement and comply with all relevant legislation.

The DSOA Service Coordinator must keep evidence of all staff qualifications and training and provide this to the department if requested.

Work health and safety

DSOA Service Coordinators must provide a safe and healthy workplace for all people involved in delivering DSOA services. Work health and safety requirements are set out in the *Work Health and Safety Act 2011* and relevant state and territory legislation.

DSOA Service Coordinators and personnel delivering services are encouraged to be vaccinated against COVID-19 where they have direct physical contact with clients.

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 guardian 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 on their behalf 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 DSOA Service Coordinator to deliver the required service.

Complaints should be managed in the first instance through a conversation between the DSOA Service Coordinator and the client (and their family or guardian) where possible.

Escalating to the NDIS Commission

If complaints cannot 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 did not 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 their FAM. If it is not solved at this level, the DSOA Service Coordinator can refer their complaint directly to the department via CommonwealthDSOA@health.gov.au.

The client or the client's guardian may choose to share their concerns with the Commonwealth Ombudsman. DSOA Service Coordinators or clients and guardians can contact the Commonwealth Ombudsman via their website or call 1300 362 072.

4.4 Client behaviour risks

When a client exhibits behaviours with the potential to harm themselves or others, the DSOA Service Coordinator must arrange for a Behaviour Support Plan (BSP) to be developed, including training service delivery staff in these behaviour support strategies. If a DSOA client does not have funding in place for the development of a BSP, the DSOA Service Coordinator should consider submitting a Change of Needs application for clients that are eligible.

If a DSOA client with capped funding lives in a Supported Independent Living (SIL) setting, and their behaviours of concern are putting other residents at risk, the department will consider a Change of Needs application for Specialist Behavioural Intervention Support funding, to fund the development of a BSP to assist with managing these behaviours of concern.

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 behaviours.

The use of restrictive practices for people with disability can present serious human rights breaches. The decision to use a restrictive practice needs careful clinical and ethical consideration, considering a person's human rights and the right to self-determination.

Restrictive practices should be used within a positive behaviour support framework that includes proactive, person-centred, and evidence-informed interventions. There are some circumstances when restrictive practices are necessary as a last resort to protect a person with disability and/or others from harm.

Restrictive practices include chemical and mechanical restraint, physical restraint, containment, seclusion, and removal of objects. These practices must only be used by qualified and trained staff. They must comply with an approved BSP and be reported monthly to the NDIS Commission, including nil reports.

All BSPs must be reviewed and updated as needed by a qualified practitioner at least every 12 months.

More information about restrictive practices and BSPs is available on the NDIS Commission website's regulated restrictive practices page.

The department is obligated to report the DSOA Service Coordinator to the NDIS Quality and Safeguards Commission where a client does not have a current BSP in place when restrictive practices are being used.

4.5 Emergency situations

DSOA Service Coordinators must have business processes that coordinate and manage emergency situations. Examples of emergencies include:

- 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 advise the client of available emergency support arrangements
- maintain a business continuity plan that details 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 Coordinator's risk management plan.

Unplanned short-term and emergency respite services provided through Carer Gateway may be helpful at these times.

4.6 Child Safety Policy

To support the Australian Government's commitment to child safety, the department is applying child safety requirements from 1 July 2026 consistent with the Commonwealth Child Safe Framework (the Framework). These requirements also

apply to organisations that deliver services and activities on behalf of the Commonwealth (Grantees), referred to in the Framework as Commonwealth-funded third parties (funded third parties). This requirement is part of the Grant Agreement Standard Terms and Conditions

DSOA Service Coordinators must ensure that when employing or engaging any person (including as an officer, employee, contractor, or volunteer), appropriate child safety arrangements are in place for services delivered where contact with children is a usual (and more than incidental) part of the funded activity.

DSOA Service Coordinators must comply with all relevant state or territory and Commonwealth laws relating to employing or engaging people who work with, or volunteer with, children. This includes mandatory reporting obligations and Working with Children Checks (where required). In addition, DSOA Service Coordinators must ensure that any subcontractors also comply with the child safety requirements.

The National Standards for Working with Children Checks (the National Standards) establish nationally consistent parameters for screening people who intend to undertake child-related work, adoption of the National Standards helps ensure that children, wherever they are in Australia, receive an appropriate level of protection.

DSOA Service Coordinators should refer to the National Standards for Working with Children Checks and consult their relevant state or territory government for advice on whether personnel require a Working with Children Check.

DSOA Service Coordinators are obligated under their new grant agreement to submit a Statement of Compliance to the department by 31 March each year.

The statement requires DSOA Service Coordinators to confirm that your organisation has:

- implemented the National Principles for Child Safe Organisations
- ensured that all child-related personnel implement the National Principles for Child Safe Organisations
- completed a risk assessment to identify the level of responsibility for children and the risk of harm or abuse to children
- implemented an appropriate risk management strategy to address risks identified
- imposed equivalent child safety obligations on all subcontractors
- provided training and established a compliance regime to ensure that all child-related personnel who interact with children while delivering services are aware of, and comply with:
    - the National Principles for Child Safe Organisations
    - the organisation's risk management strategy
    - all relevant legislation relating to working with children, including Working with Children Checks
    - all relevant legislation relating to mandatory reporting of suspected abuse or neglect.



5 Administration

This section covers:

- DSOA client pricing
- client contributions
- reporting
- acknowledging funding

5.1 DSOA pricing

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

Unlike the NDIS, the DSOA Program does not fund any services that relate to capital costs, transport (unless approved through a Change of Needs application) or non-face to face administration supports.

Pricing information for DSOA services is outlined in Appendix A - DSOA Service and Pricing Schedule.

The department may review the schedule at its discretion and update the department's website and inform DSOA Service Coordinators when this occurs.

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 and time of delivery. In some cases, higher rates may be payable.

DSOA Service Coordinators cannot charge a higher hourly rate than prescribed in Appendix A – DSOA Service and Pricing Schedule.

The DSOA Program does not mandate hourly pricing for Extended CoS Services. DSOA Service Coordinators must ensure that hourly rates for services delivered under Extended CoS Services do not exceed the NDIS prescribed hourly rate for the equivalent NDIS service type.

Regional loading

There is a higher rate for DSOA services that are delivered in MM6 remote and MM7 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

This support provides a client with assistance or supervision of, personal tasks of daily life where overnight support is needed.

A Night-time Sleepover Support is support to a participant 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.

Night-time sleepover allows for up to 2 hours of active supports for a client within the eight-hour sleepover shift. This is where a support worker is woken up during the sleepover to provide personal care support to the client.

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 defined as 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 defined as 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

Active support to an individual client that starts after 8:00 pm and finishes before 6:00 am on a weekday (unless that support is on a public holiday, weekend or part of a night-time sleepover).

Weekday night supports are where a support worker remains awake to provide supports to a client/s due to their disability.

Travel costs

DSOA Service Coordinators can claim travel costs (labour time only) if all the following conditions are met:

- the activities are part of delivering a specific disability support item to a client
- the support is delivered face-to-face
- the client's ISP includes a breakdown of the related travel costs you intend on charging
- the DSOA Service Coordinator engaged the support 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 up to 30 minutes labour in MM1-3 areas and up to 60 minutes labour in MMM4-7 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 up to 100% of the service type price from the client's ISP.

A short-notice cancellation is defined as the client provides less than 7 business days' notice of cancellation for a support, or if a client does not show up for a scheduled support within a reasonable time when the DSOA Service Coordinator is travelling to deliver the 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 such as 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 a client makes towards the cost of their services, such as but not limited to, transport, community access supports or additional supports delivered above what the client's DSOA funding provides.

The DSOA Program does not provide a specific client contribution framework. However, financial hardship provisions should be made available to clients if required.

Client contributions must:

- be agreed in writing by the client or the client's guardian
- be documented annually in the client's ISP (excluding contributions related to rent, board, food, or utilities)
- be reviewed regularly to identify and respond to any client financial hardship
- not be subsidised using grant funds.

Client contribution principles

- transparency – policies should be publicly available, accessible, and provided to clients with a clear explanation
- hardship – policies should give options to clients who are unable to 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 the DSOA Grant Agreement requirements. DSOA Service Coordinators need to review their grant agreement for their reporting periods and requirements.

Future quarterly milestone payments will not be released to organisations that have an outstanding financial acquittal that has not yet submitted.

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 acquittal reports must 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.

Grant expenditure listed in the acquittal must align with the overall service delivery and actual funding expended in the performance report.

Under section 137.1 of the *Criminal Code Act 1995 (Cth)*, giving false or misleading information to the Commonwealth is a serious offence.

DSOA Service Coordinators must keep evidence to support the expenditure of their grant for a minimum of 5 years after the activity completion date listed in their grant agreement and provide these records to the department if requested.

It is the DSOA Service Coordinator's responsibility to ensure that all information included in financial declarations is true and correct. DSOA Service Coordinators must retain appropriate evidence to support grant expenditure before signing and submitting declarations for assessment, including evidence to support the declared expenditure of the DSOA Service Coordinator's management fee for the reporting period.

Unspent funds

Unspent funds are the total amount of funding the DSOA Program has paid for a client that financial year, that remains unspent at the end of the relevant reporting period. It includes any additional funding approved through a Change of Needs application or a variation from an independent 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 reporting period.

DSOA funding is individualised. Overspends or over-delivery for one client cannot be offset by underspends from another client.

All DSOA supports delivered must meet the support definition listed for each service type in Appendix A – Service and Pricing Schedule. DSOA funding cannot be moved to other support types without prior approval through the FAR process.

DSOA Service Coordinators cannot carry forward, or 'bank' unspent funds from a previous reportable period except when approved in writing in a prior DSOA financial acquittal outcome. Unspent funds must always be returned to the department, which can occur through:

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

DSOA Service Coordinators must quarantine all declared underspends for repayment back to the department. The method to recover unspent funds is at the department's discretion.

Performance report — financial year report due by 31 August

DSOA Service Coordinators must complete 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.

The performance report must include:

- details of all services delivered during the reporting period in question
- an explanation for any services that were not delivered 100% during the reporting period
- details of any approved temporary funding amendment request changes that occurred during the reporting period.

Outputs and funding expenditure listed in the performance report must align and reflect the total expenditure declared in the financial acquittal for each reporting period.

Future quarterly milestone payments will not be released to organisations that have an outstanding Performance report that has not yet been submitted.

All DSOA supports delivered must meet the support definition listed for each service type in Appendix A – Service and Pricing Schedule. DSOA funding cannot be moved to other support types without prior approval through the FAR process.

If a DSOA client does not access a specific funded support through DSOA for 12 months or more, the department will remove this funding from the client's funding package permanently, unless the support type is for therapy and evidence can be provided that the client is on a waitlist for the therapy supports to commence.

As client funding is individualised, an underspend from one client cannot be used to compensate an overspend from another DSOA client.

DSOA funding is allocated to specific service types for each client. Funding spent on each support type must align with the definition of that support type in this manual. DSOA funding cannot be used to provide services under a different support type without prior approval through the FAR process.

DSOA Service Coordinators are not allowed to charge a higher hourly rate than the advertised prescribed hourly rate listed in Appendix A - Service and pricing schedule against each output for that service type. There is an exception for Extended CoS Services, where the hourly rate must not exceed the NDIS prescribed hourly rate for the equivalent NDIS service type.

When reporting the expenditure of Extended CoS Services in the annual performance report, DSOA Service Coordinators must include details on the type of community access activity the client participated in, and the hourly rate charged for each of these activities funded.

Quarterly provider verification statement — due every quarter

DSOA Service Coordinators must submit a verification statement to the department each quarter (January, April, July, and October). The statement must confirm all client changes and client exits, and details of all under-deliveries for the previous quarter. It must also confirm that program requirements such as ISPs and annual reviews have been completed.

The primary contact person for each organisation will be emailed a link to access the online platform for the quarterly provider verification statement submission. The email will be sent by the department at the beginning of the month the submissions are due.

Provider verification statements must be submitted by the quarterly due date in accordance with Item B5.1.10 of the DSOA grant agreement. The submission must be considered satisfactory before the department will release the next quarterly milestone payment.

If a DSOA client does not access a specific funded support through DSOA for 12 months or more, the department will permanently remove that funding from the clients funding package. An exemption applies to therapy supports where evidence has been provided that the client is on a waitlist for services to commence.

Child Safety Statement of Compliance – due 31 March

DSOA Service Coordinators are required to submit a child safety statement of compliance to the department by 31 March each year, in accordance with section CB9 of the DSOA Grant Agreement Supplementary Terms and Conditions.

The Child Safety Statement of Compliance must confirm the organisation complies with all state, territory and Commonwealth laws relating to employing or engaging people who work with, or volunteer with, children, which may include incidental contact.

The Statement of Compliance must be completed by the head of the organisation, CEO, or an authorised person in an equivalent executive position.

Child safety compliance statements must be submitted using the template provided by the department.

5.4 Acknowledging DSOA funding in publications

All DSOA Program related resources developed by a DSOA Service Coordinator must include acknowledgement of the department's financial and other support, using the following:

"Funded by the Australian Government Department of Health, Disability and Ageing. 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 must 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.