# **ACCESS TO SUPPORTS - STANDARD AND SPIEL**

## STANDARD

Access to Supports (extract from NDIS Practice Standards: Core Module – 3 Provision of Supports Standard).

This is what you need to demonstrate to the auditor that you meet.

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| **Outcome:** Each participant accesses the most appropriate supports that meet their needs, goals and preferences. |
| **To achieve this outcome, the following indicators should be demonstrated:**   * The supports available, and any access/entry criteria (including costs) are clearly defined and documented. This information is communicated to each participant using the language, mode of communication and terms that the participant is most likely to understand. * Reasonable adjustments to the support delivery environment are made and monitored to ensure it is fit for purpose and each participant’s health, privacy, dignity, quality of life and independence is supported. * Each participant is supported to understand under what circumstances supports can be withdrawn. Access to supports required by the participant will not be withdrawn or denied solely on the basis of a dignity of risk choice that has been made by the participant. |

## SPIEL

Your explanation to the auditors of how you meet the above section of the Provision of Supports Standard.

For you to read, adapt and then insert into your NDIS Commission On-line Application.

Yellow highlights definitely need your attention – make sure you delete what is not pertinent to your organisation

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| Potential participants and their families / substitute decision makers are informed about the range of services XXX offers and applicable access criteria (e.g. age, where we provide services, fees) to initially determine if our service meets their needs. Information is provided during phone and face to face interviews following participants approaching XXX, and via our website and marketing materials.  If participant proceeds to use our services the AHP details the services the participant is to receive, the associated costs, conditions and why services may be withdrawn e.g. unacceptable risk to our workers / others (and included in Service Agreement).  The intake procedure includes determining the preferred language, mode of communication and preferred contact person if applicable. XXX’s website outlines languages other than English in which services are able to be delivered. Processes for person-centred communication are outlined in Rights and Responsibilities Standard..  At intake and initial assessment, participants are asked about preferred support delivery environment and, within the scope of XXX’s service delivery model and scope of practice, these are accommodated e.g. Home and community visits.  Changes to the support environment are also made in response to the initial, and any on-going risks identified on the participant’s Support Plan.  XXX’s Service Delivery Model and the Dignity of Risk Policy guide staff and assists participants to understand they have choices with regards to risk taking.  Quality Improvement Activities are undertaken e.g. Participant Survey, Service Agreement Audit. Together these provide good evidence that rights are being upheld and continuous improvement made as appropriate. A goal attainment audit and the Participant Transition-Discharge Checklist captures the reason for discharge, so if it was provider initiated it can be reviewed and changes made if / as required.  [Insert QI outcomes if you have them]  *Supporting documents*   * *Participant Transition-Discharge Checklist*   *Related Resource / Attachments Already Supplied:*   * *Service Agreement* * *New Participant Intake Checklist* * *HR Register* * *Service Delivery Model* * *Dignity of Risk Policy* * *Support Plan* * *Support Plan Audit* * *Participant Survey* * *Goal Attainment Audit* * *Participant Service Agreement Audit* |