Individualised Living Options

This form is the service proposal for your Individualised Living Option (ILO). An ILO is the package of supports designed to help you – where ‘you’ refers to the participant – develop a sense of home and belonging. You can read more about ILO’s in ‘[Our Guidelines – Individualised Living Options](https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/home-and-living-supports/individualised-living-options)’.

**How to use this form**

This form is designed for you to tell us about the ILO supports you want.

Complete this form once you have designed your ILO and finished the Exploration and Design stage.

The proposal will need to be aligned to the ILO Support Level reviewed and identified by the NDIA at the Home and Living approval stage.

We will use the information you give us to review your funded supports needs and include them into your plan.

[**Part 1:**](#_Part_A) to be completed by you. The person or organisation who supported you with the ILO exploration and design can help complete this section.

[**Part 2:**](#_Part_2) to be completed by you with help from the person or organisation providing the ILO.

[**Part 3:**](#_Part_C) to be completed by you.

**Please note:** You must confirm your consent and agreement to the ILO and this service proposal in [Part 3](#_6._Participant_consent) of this form.

# How to return this form

There are a few ways you can return this form to us:

* Email: [enquiries@ndis.gov.au](mailto:enquiries@ndis.gov.au)
* Mail: NDIA, GPO Box 700, Canberra ACT 2601
* In person: Visit a **Local Area Coordinator** or **NDIS office** in your area.

# Part 1

This section is to be completed by you. The person or organisation who supported you with the exploration and design stage can help complete this section.

## **1.1 Your details**

| **Details** | **Response** |
| --- | --- |
| Full name |  |
| Date of birth (DD/MM/YYYY) |  |
| NDIS number |  |

## **1.2 Is this ILO arrangement new or existing?**

**☐ New**.

**☐ Existing**.

## **1.3 Who was involved in developing this service proposal?**

Briefly describe who has been involved in developing this service proposal and over what period of time. What helped you decide your choice about your home/living option and the related supports you need? Why did you choose this Individualised Living Option?

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## 1.4 Who is important to you and how often do you connect with them?

This is about your family, friends and community connections. Describe how this service proposal will build and/or maintain your family, friendship, social or cultural connections, or work opportunities.

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## 1.5 Will you share any of your ILO supports with someone else in the home?

**☐ No**. Move on to the [next question](#_1.6_Are_there).

**☐ Yes**. Please provide details of how and when the supports will be shared below.

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## 1.6 Are there any risks which may affect your arrangement?

The risks may be to you, another person, the home or living arrangement, the community, etc. For example, your home could have lots of steps in it and you may have a high risk of falls. Please identify the risks and any ways you can reduce the risk(s).

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## 1.7 Do you have a current positive behavioural support plan (PBSP)? This should be less than 12 months old.

**☐ Yes**, I have a **current PBSP** and the **NDIA has a copy**.

**☐ Yes**, I have a **current PBSP** but the **NDIA does not have a copy**.I have **attached a copy** of the current PBSP to this proposal.

**☐ No**, because there are **no behaviours of concern**.

**☐** **No**, I **do not have a current PBSP**, but **there are behaviours of concern**. Please detail your current behaviours of concern and provide examples (including frequency, intensity and management strategies).

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## 1.8 Does your provider use any regulated restrictive practices?

**☐ Yes** and this is included in my PBSP. Please include any additional detail not provided at the previous question.

**☐ No,** I don’t have a PSBP.

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# Part 2

This section is to be completed by you with help from the person or organisation providing the Individualised Living Option (ILO) service.

**Please note:** ILOs are a support package and not individual supports combined into an overall figure.

Any payment received by a Host should be in the nature of a general reimbursement payment rather than an hourly wage. You can find a list of all related exclusions in [Section 2.7](#_2.7_ILO_exclusions).

## 2.1 What are your primary supports?

Describe the nature and duration of the primary supports to be provided in the ILO. There are a variety of supports that may form the main cost in your package. For example, a host arrangement, housemates – live in, paid professional - live in. This may also include mentors, rostered shifts for support workers, rostered daily or 48 hour supports using negotiated rates.

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## 2.2 What are your supplementary supports?

Describe the nature and duration of the extra supports you need to work towards your NDIS plan goals. This includes paid or unpaid supports. How will this support be provided, who will provide it and how often? For example, this may include having another host, or having some rostered support in your home.

This might also include supported informal support or volunteers, mentor support, drop-in or on call support of various types including ‘good neighbour’ support. Family members or other informal supports providing regular input may also be an unpaid, supplementary support. For example, one weekend per month spent with family.

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## 2.3 What are your social and/or community participation support needs?

The NDIS can fund support to help you with work, study or daytime activities, separate from your ILO. It’s important these are described in this Service Proposal so you can be sure all your supports will work together.

The ‘Our Guidelines’ website ([ourguidelines.ndis.gov.au](https://ourguidelines.ndis.gov.au/)) has more information. Select ‘Social and community participation’ to read more.

**Are social and/or community supports included in this service proposal?**

**☐ No**. Move on to the [next question](#_2.4_What_are).

**☐ Yes**. Please describe the complementary social and/community supports you will be accessing and when in the box below.

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## 2.4 What are the monitoring and/or adjustment service requirements?

This includes setting up, ongoing maintenance of the arrangement, making changes in the arrangement (e.g. need to find a new primary or secondary host or housemate), and regular participant meetings to monitor the arrangement.

It does **not** include internal team meetings, as this is a normal cost of business for any organisation.

Please detail the services to be provided below.

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## 2.5 What are the average weekly hours of support?

Complete the average number of hours per week of coverage for each support listed below.

**Please note:** reaching the average number of hours per week should take into account the whole year. The average number is **not** intended as a specific allocation for a typical week.

| **Description** | **Number of average hours per week** |
| --- | --- |
| ILO primary supports |  |
| ILO supplementary supports |  |
| Time spent at your employment or study (not included in ILO supports)  Note: If this is not applicable, leave this row blank. |  |
| Community participation |  |
| Time spent on your own  Note: If you need direct support or personal assistance to be available at all times, leave this row blank. |  |
| Total |  |

## 2.6 What is the estimated total cost of ILO supports?

Complete the total estimated weekly cost in dollars of the ILO supports listed below.

| **Description** | **Estimated cost per week** |
| --- | --- |
| ILO primary supports |  |
| ILO supplementary supports |  |
| ILO monitoring and adjustment |  |
| Total estimated weekly cost |  |

## 2.7 ILO exclusions

Please make sure you remove the below items from the estimated costs of the ILO support package:

* Cost of groceries.
* Board and lodging.
* Your rental costs.
* Utilities – gas, electricity, water, telephone, internet.
* Household budgeting/bill paying activities.
* Expenses related to holidays, including travel costs associated.
* Personal care and emotional supports while you are hospitalised.
* Supports provided in another way in your NDIS plan (such as transport costs, assistive technology, personal care while in the workplace, plan management, financial intermediary supports, clinical or allied health services, etc.).
* Supported Disability Accommodation related costs (property maintenance costs, repairs, vacancy costs, etc.).

## 2.8 Does this service proposal include more support than you currently receive?

**☐ No**. Move on to the [next question](#_2.9_Have_you).

**☐ Yes**. Please describe below why you are requesting more support.

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## 2.9 ILO Provider declaration

I confirm the information provided in this form is complete and correct and aligned to the participants approved funding band.

The estimated cost in [Part 2](#_Part_2) of this form is valid from dates <insert date> to <insert date>.

I understand that:

* Giving false or misleading information is a serious offence.
* This information is protected by law and can only be given to someone else where Commonwealth law allows, or requires it, or where I give permission.

| **Details** | **Response** |
| --- | --- |
| Name |  |
| Name of Provider (if applicable) |  |
| Position held at Provider (if applicable) |  |
| Contact phone number |  |
| Email address |  |
| Signature |  |
| Date (DD/MM/YYYY) |  |

# Part 3

This section is to be completed by the participant. It is about the consent you give the Individualised Living Option (ILO) Provider listed in [Section 2.9](#_2.9_ILO_Provider) of this form.

## **3.1 Participant’s consent**

As a participant who requires ILO supports, the National Disability Insurance Agency (NDIA) may need to contact your provider to discuss information within your service proposal.

This will assist the NDIA with determining whether your request for ILO support(s) can be provided to you under the NDIS.

Do you consent to the NDIA collecting and disclosing your information including from the third parties mentioned above, in relation to your service proposal?

**Yes, I do consent**

**No, I do not consent**

|  |  |
| --- | --- |
| I understand that I am giving consent to the NDIA to do the things with my information set out in this section. I understand that I can withdraw my consent for the NDIS to do things with my information at any time by letting the NDIA know. |  |
| I understand that I can access the NDIA’s Privacy Notice and Privacy Policy on the NDIA website or by contacting the NDIA. |  |

|  |  |
| --- | --- |
| Participant’s signature |  |
| Date |  |
| Full Name |  |

## If you are signing this form on behalf of the NDIS participant

Please complete the details below. It is an offence to provide false or misleading information. We may require you to provide evidence of your authority to sign on behalf of the person.

|  |  |
| --- | --- |
| Signature |  |
| Date |  |
| Full Name of person completing this form (please print) |  |
| Relationship to participant or person wishing to become an NDIS participant |  |

# Privacy and your personal information

## Collection of your personal information

The National Disability Insurance Agency (NDIA) would like some personal information from you to simplify your engagement with the NDIS. Any personal information you provide to the NDIA is safe under the National Disability Insurance Scheme Act 2013 and the Privacy Act 1988. You can also ask to see what personal information (if any) we hold about you at any time and can seek correction if the information is wrong.

## Personal information use and disclosure

The NDIA will use your information to support your involvement in the NDIS.

The NDIA will NOT use any of your personal information for any other purpose, or disclose your personal information to any other organisations or individuals (including any overseas recipients), unless authorised by law or you provide your consent for us to do so.

## The NDIA’s privacy policy describes

* how we use your personal information
* why some personal information may be given to other organisations from time to time
* how you can access the personal information we have about you on our system
* how you can complain about a privacy breach, and how the NDIA deals with the complaint
* how you can get your personal information corrected if it is wrong.

You can find the policy at [www.ndis.gov.au/privacy](http://www.ndis.gov.au/privacy).

## Personal information storage

The NDIA uses an Australian Government computer system to store personal information. System users, other than NDIA staff, may at times be able to see your name when they perform program duties, however they can’t record, use or disclose information, and they will not know if you become an NDIS participant. State or territory government officials may also have personal information access as part of the agreement between governments to assist the states and territories in their NDIS evaluation.