### SERVICE AGREEMENT

### SUPPORT COORDINATION

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### The Service Agreement Parties

This **Service Agreement** is for a participant in the National Disability Insurance Scheme and is made between:

| ***[Participant / participant’s representative*** | representing  [NDIS #43 ] |
| --- | --- |
| and |  |
| **Service Provider** | *CAREON SERVICES*  *REGISTRATION NO.:* 4-G0RY1SM |

This Service Agreement will commence on / /2022

|  |
| --- |
| *[NDIS plan start date]* to *[NDIS plan end date]*. |

### The NDIS and this Service Agreement

This Service Agreement is made for the purpose of providing supports under the participant’s NDIS plan.

The parties agree that this Service Agreement is made in the context of the NDIS, which is a scheme that aims to:

* support the independence and social and economic participation of people with disability, and
* enable people with a disability to exercise choice and control in the pursuit of their goals and the planning and delivery of their supports.

A copy of the participant’s NDIS plan is attached to this Service Agreement.

The participant should inform NDIS Management about details of all other service providers have been used by the participant in order to anable the provider to liaise with them when reguired.

### Schedule of supports

The provider agrees to provide the participant *with the services included in the table illustrated below*

|  |  |  |  |
| --- | --- | --- | --- |
| SUPPORT ITEM | LINE ITEM | DESCRIPTION | Unit Price |
| Support Coordination:  Level 2 Coordination of Supports | 07\_002\_0106\_8\_3 | Qualifications/experience required strengthening a participant’s ability to design and the build their supports with an emphasis on linking the broader systems of support across a complex service delivery environment. Coordination of Supports is to focus on supporting participants to direct their lives, not just their services. This may include resolving points of crisis, and developing resilience in the participant's network. | hours of  @ $100.14 per hour (Price is changing in line with the NDIS Price Guide) |

### Prices and Payments

The provider will seek payment for their provision of supports after delivery of the contracted services.

The supports and their prices are set out in the attached Schedule of Supports.

All prices are subject to change in accordance to the NDIS Priceguide.

### NDIS Plan MANAGEMENT

If the funding for any support into your NDIS Plan is ***SELF MANAGED,*** the participant or their representative will claim the payment for the service and pay CAREON’s due invoices*.*

If the funding for any support into your NDIS Plan is ***NDIS MANAGED (which is case)***, the Provider (CAREON) will claim the payment for that service*.*

If the funding for any support into your NDIS Plan is ***PLAN MANAGED,*** *the Plan Manager will process payments for that supports****.***

### Responsibilities of the provider

The provider agrees to:

* review the provision of supports at least *on monthly basis* with the participant
* once agreed, provide supports that meet the participant’s needs at the participant’s preferred times
* communicate openly and honestly in a timely manner
* treat the participant with courtesy and respect
* consult the participant on decisions about how supports are provided
* give the participant information about managing any complaints or disagreements and details of the provider’s cancellation policy (if relevant)
* listen to the participant’s feedback and resolve problems quickly
* give the participant a minimum of 24 hours notice if the provider has to change a scheduled appointment to provide supports
* give the participant the required notice if the provider needs to end the Service Agreement (see ‘[Ending this Service Agreement](file:///\\Au\eydata\SYDNEY\SYDNFPM\Restricted\DET%20PMO\Working%20Files\6.0%20Engagement%20Management\Other\My%20Place%20Communications\Toolkit%20Draft\21.06.2016%20Final\Provider%20Toolkit_section%201.6_Service%20Agreements_accessible_vs%200%202.docx#_Ending_this_Service)’ below for more information)
* protect the participant’s privacy and confidential information
* provide supports in a manner consistent with all relevant laws, including the [*National Disability Insurance Scheme Act 2013*](http://www.comlaw.gov.au/Current/C2013C00388) and [rules](http://www.comlaw.gov.au/Current/C2013A00020/Enables), and the Australian Consumer Law; keep accurate records on the supports provided to the participant
* issue regular invoices and statements of the supports delivered to the participant.

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### Responsibilities of the participant/participant’s representative

The participant/participant’s representative agrees to:

* inform the provider about how they wish the supports to be delivered to meet the participant’s needs
* treat the provider with courtesy and respect
* talk to the provider if the participant has any concerns about the supports being provided
* give the parovider a minimum of 24 hours notice if the participant has to cancel a scheduled appointment with the provider (CAREON CANCELLATION POLICY).
* give the provider six (6) week notice if the participant needs to end the Service Agreement (see ‘[Ending this Service Agreement](file:///\\Au\eydata\SYDNEY\SYDNFPM\Restricted\DET%20PMO\Working%20Files\6.0%20Engagement%20Management\Other\My%20Place%20Communications\Toolkit%20Draft\21.06.2016%20Final\Provider%20Toolkit_section%201.6_Service%20Agreements_accessible_vs%200%202.docx#_Ending_this_Service)’ below for more information), and
* let the provider know immediately if the participant’s NDIS plan is suspended or replaced by a new NDIS plan or the participant stops being a participant in the NDIS.

For the purposes of NDIS legislation, the Parties confirm that:

* a supply of supports under this Service Agreement is a supply of one or more of the reasonable and necessary supports specified in the statement included, under subsection 33(2) of the [*National Disability Insurance Scheme Act 2013*](http://www.comlaw.gov.au/Current/C2014C00149) (NDIS Act), in the participant’s NDIS plan currently in effect under section 37 of the NDIS Act;
* the participant’s NDIS plan is expected to remain in effect during the period the supports are provided; and
* the *participant/participant’s representative* will immediately notify the provider if the participant’s NDIS Plan is replaced by a new plan or the participant stops being a participant in the NDIS.

### Changes to this Service Agreement

If changes to the supports or their delivery are required, the parties agree to discuss and review this Service Agreement. The parties agree that any changes to this Service Agreement will be in writing, signed, and dated by the parties.

### Ending this Service Agreement

Should either party wish to end this Service Agreement they must give *eight (8) week* notice.

If either party seriously breaches this Service Agreement the requirement of notice will be waived.

### Feedback, complaints and disputes

If the participant wishes to give the provider feedback, the participant can *contact CAREON SERVICESas detailed further down.*

If the participant is not happy with the provision of supports and wishes to make a complaint, the participant can *contact CAREON SERVICES as detailed further down.*

If the participant is not satisfied or does not want to talk to the provider, the participant can contact the National Disability Insurance Agency by calling 1800 800 110, visiting one of their offices in person, or visiting [ndis.gov.au](http://www.ndis.gov.au/) for further information.

### Contact details

The *[participant/the participant’s representative]* can be contacted on:

|  |  |
| --- | --- |
| **Full Name** |  |
| **Date of Birth of** |  |
| **NDIS Number** |  |
| **Preferred Contact**  **Details:** | Mobile: |
| **Work Phone:** |
| **Email:** |
| **Residential Address:** |

The provider can be contacted on:

| **Contact name** | **Gamal Mohamed Ali – Support Coordinator** |
| --- | --- |
| **Phone** |  |
| **Mobile** | **+61413 616 432** |
| **Email** | **admin@coreon.com.au** |
| **Address** | **P.O BOX 2026 TAYLORS LAKES VIC 3038** |
| OTHHER CONTACTS  Support Coordinator | [**admin@coreon.com.au**](mailto:admin@coreon.com.au) |
| Feedback & Complaint Officer | [**support@coreon.com.au**](mailto:support@coreon.com.au) |

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**If you have a feedback and/or complaint, please contact the following offices and bodies**

|  |  |
| --- | --- |
| **Name** | **Contact** |
| **NDIA** | 1800 800110 |
| **Disability Services Commissioner** | 1800 677 342 |
| **Police** | 000 |
| For more information, please contact your support coordinator | |

### Checklist for Service Agreements

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| --- | --- |
| ❑ | I know who is making the Agreement.  This might be me and my service provider, or it might be my trusted person and my service provider. |
| ❑ | I know what supports to include. |
| ❑ | I know what is expected of me. |
| ❑ | I know what is expected of my service provider. |
| ❑ | I know how the supports will be paid for. |
| ❑ | I know what to do if I want to make changes. |
| ❑ | I know what to do if I want to end the Agreement. |
| ❑ | I know what to do if I have a problem and I know who to contact. |
| ❑ | I have written my Service Agreement, or I have worked with my provider to write the Agreement. |
| ❑ | I have signed the Agreement. |
| ❑ | I have attached my NDIS Plan to the Agreement if I want to. |
| ❑ | I have kept a copy of the Agreement for my records. |

### Agreement signatures

The parties agree to the terms and conditions of this Service Agreement.

|  |  |  |
| --- | --- | --- |
| Signature of *[participant/participant’s representative]* |  | Name of [participant/participant’s representative] |

| / /2022 |
| --- |
| Date |

|  |  | GAMAL MOHAMED ALI |
| --- | --- | --- |
| Signature of authorised person from provider |  | Name of authorised person from provider |

| / /2022 |
| --- |
| Date |