# Region / Support Category Summary Dashboard – as at 31 December 2019 (with exposure period: 1 April 2019 to 30 September 2019)

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## Page 1, Table 1: Bilateral region summary

For each of the 76 bilateral regions with more than 12 months experience in Scheme, 7 indicators have been calculated. These are:

* Participants per provider;
* Provider concentration;
* Provider growth;
* Provider shrinkage;
* Utilisation;
* Outcomes indicator on choice and control; and
* “Has NDIS helped with choice and control?” indicator

The number of active participants with approved plans, the number of registered active providers, total plan budgets and total payments are also shown. The 7 indicators have a ‘traffic light system’ where the top 10% and bottom 10% of regions – by gap to benchmark – are highlighted.

For **participants per provider**, the top 10% regions are as follows.

* Far West (New South Wales) has 4.7 participants per provider.
* Far North (South Australia) has 4.2.
* Fleurieu and Kangaroo Island (South Australia) has 5.3.
* Barkly (Northern Territory) has 4.1.
* Central Australia (Northern Territory) has 3.9.
* Darwin Remote (Northern Territory) has 4.9.
* Katherine (Northern Territory) has 2.4.
* Wheat Belt (Western Australia) has 4.4.

The bottom 10% regions are as follows.

* Hunter New England (New South Wales) has 14.1 participants per provider.
* Bayside Peninsula (Victoria) has 11.6.
* Northern Adelaide (South Australia) has 16.2.
* Southern Adelaide (South Australia) has 13.0.
* Australian Capital Territory has 14.9.
* North East Metro (Western Australia) has 12.7.
* South Metro (Western Australia) has 13.3.
* South West (Western Australia) has 15.5.

For **provider concentration**, the top 10% regions are as follows.

* Hunter New England (New South Wales) has provider concentration level of 32%.
* South Western Sydney (New South Wales) has 35%.
* Sydney (New South Wales) has 38%.
* Hume Moreland (Victoria) has 34%.
* North East Melbourne (Victoria) has 36%.
* Brisbane (Queensland) has 36%.
* Caboolture / Strathpine (Queensland) has 37%.
* Ipswich (Queensland) has 35%.

The bottom 10% regions are as follows.

* Far West (New South Wales) has provider concentration level of 85%.
* Barkly (Northern Territory) has 94%.
* Central Australia (Northern Territory) has 92%.
* East Arnhem (Northern Territory) has 91%.
* Katherine (Northern Territory) has 92%.
* Goldfields – Esperance (Western Australia) has 95%.
* Kimberley – Pilbara (Western Australia) has 94%.
* South West (Western Australia) has 85%.

For **provider growth**, the top 10% regions are as follows.

* Mallee (Victoria) has provider growth of 81% since the previous exposure period.
* Caboolture / Strathpine (Queensland) has 94%.
* Maroochydore (Queensland) has 83%.
* Central South Metro (Western Australia) has 76%.
* Goldfields – Esperance (Western Australia) has 100%.
* Kimberley – Pilbara (Western Australia) has 88%.
* North Metro (Western Australia) has 79%.
* South West (Western Australia) has 100%.

The bottom 10% regions are as follows.

* Southern NSW (New South Wales) has provider growth of 5% since the previous exposure period.
* Barwon (Victoria) has 8%.
* Ovens Murray (Victoria) has 9%.
* Western District (Victoria) has 7%.
* Bundaberg (Queensland) has 6%.
* Australian Capital Territory has 10%.
* East Arnhem (Northern Territory) has 8%.
* Katherine (Northern Territory) has 10%.

For **provider shrinkage**, the top 10% regions are as follows.

* Mallee (Victoria) has provider shrinkage of 0% since the previous exposure period.
* Caboolture / Strathpine (Queensland) has 1%.
* Maryborough (Queensland) has 2%.
* Central South Metro (Western Australia) has 1%.
* Goldfields – Esperance (Western Australia) has 0%.
* Kimberley – Pilbara (Western Australia) has 0%.
* North Metro (Western Australia) has 2%.
* South West (Western Australia) has 0%.

The bottom 10% regions are as follows.

* Mid North Coast (New South Wales) has provider shrinkage of 22% since the previous exposure period.
* Northern NSW (New South Wales) has 32%.
* Southern NSW (New South Wales) has 23%.
* Ovens Murray (Victoria) has 24%.
* Western District (Victoria) has 20%.
* Barkly (Northern Territory) has 33%.
* Darwin Remote (Northern Territory) has 24%.
* East Arnhem (Northern Territory) has 31%.

For **utilisation**, the top 10% regions are as follows.

* South Eastern Sydney (New South Wales) has utilisation of 74%.
* South Western Sydney (New South Wales) has 77%
* Hume Moreland (Victoria) has 68%.
* Robina (Queensland) has 70%.
* Central South Metro (Western Australia) has 67%.
* North Metro (Western Australia) has 63%
* South Metro (Western Australia) has 70%.
* South West (Western Australia) has 67%.

The bottom 10% regions are as follows.

* Outer Gippsland (Victoria) has utilisation of 47%.
* Eyre and Western (South Australia) has 53%.
* Far North (South Australia) has 45%.
* Barkly (Northern Territory) has 38%.
* Darwin Remote (Northern Territory) has 34%.
* East Arnhem (Northern Territory) has 27%.
* Goldfields – Esperance (Western Australia) has 42%.
* Kimberley – Pilbara (Western Australia) has 45%.

For **outcomes indicator on choice and control**, the top 10% regions are as follows.

* Outer Gippsland (Victoria) has an outcomes indicator on choice and control of 60%.
* Eyre and Western (South Australia) has 60%.
* Limestone Coast (South Australia) has 59%.
* TAS South West (Tasmania) has 56%
* Australian Capital Territory has 65%.
* Barkly (Northern Territory) has 65%.
* South Metro (Western Australia) has 58%.
* South West (Western Australia) has 62%.

The bottom 10% regions are as follows.

* South Eastern Sydney (New South Wales) has an outcomes indicator of 41%.
* South Western Sydney (New South Wales) has 42%.
* Sydney (New South Wales) has 42%.
* TAS South East (Tasmania) has 41%.
* Central Australia (Northern Territory) has 32%.
* Darwin Remote (Northern Territory) has 45%.
* East Arnhem (Northern Territory) has 42%.
* Katherine in (Northern Territory) has 24%.

For **“Has NDIS helped with choice and control?” indicator**, the top 10% regions are as follows.

* Southern NSW (New South Wales) has an indicator of 77%.
* Beenleigh (Queensland) has 79%.
* Bundaberg (Queensland) has 78%.
* Maryborough (Queensland) has 79%.
* Toowoomba (Queensland) has 77%.
* Fleurieu and Kangaroo Island (South Australia) has 76%.
* Central South Metro (Western Australia) has 81%.
* South Metro (Western Australia) has 80%.

The bottom 10% regions are as follows.

* Goulburn (Victoria) has 54%.
* Mallee (Victoria) has 47%.
* Outer Gippsland (Victoria) has 54%.
* Far North (South Australia) has 49%.
* Limestone Coast (South Australia) has 45%.
* Darwin Remote (Northern Territory) has 27%.
* East Arnhem (Northern Territory) has 28%.
* Goldfields-Esperance has 20%.

## Page 2, Table 1: Support category summary, for all bilateral regions

For each of the 15 support categories, the same 7 indicators have been calculated. The number of active participants with approved plans, the number of registered active providers, total plan budgets and total payments are also shown. The 7 indicators have a ‘traffic light system’ where the top 10% and bottom 10% of support categories – by gap to benchmark – are highlighted.

For **participants per provider**, the top 10% support categories are as follows.

* Capacity Building – Home Living has 12.9 participants per provider.
* Capacity Building – Lifelong Learning has 7.5.

The bottom 10% support categories are as follows.

* Core – Consumables has 134.4 participants per provider.
* Core – Transport has 162.7.

For **provider concentration**, the top 10% support categories are as follows.

* Core - Community has a provider concentration level of 15%.
* Capacity Building – Support Coordination has 13%.

The bottom 10% support categories are as follows.

* Capacity Building – Home Living has a provider concentration level of 45%.
* Capacity Building – Lifelong Learning has 88%.

For **provider growth**, the top 10% support categories are as follows.

* Core - Consumables has provider growth of 27% since the previous exposure period.
* Capital – Assistive Technology has 38%.

The bottom 10% support categories are as follows.

* Capacity Building – Home Living has provider growth of 0% since the previous exposure period.
* Capacity Building – Lifelong Learning has 0%.

For **provider shrinkage**, the top 10% support categories are as follows.

* Capacity Building – Home Living has provider shrinkage of 0% since the previous exposure period.
* Capacity Building – Lifelong Learning has 0%.

The bottom 10% support categories are as follows.

* Capacity Building – Social and Civic has provider shrinkage of 15% since the previous exposure period.
* Capital – Home Modifications has 26%.

For **utilisation**, the top 10% support categories are as follows.

* Core – Transport has a utilisation rate of 99%.
* Capacity Building – Choice and Control has 91%.

The bottom 10% support categories are as follows.

* Capacity Building – Home Living has a utilisation rate of 19%.
* Capacity Building – Lifelong Learning has 25%.

For **outcomes indicator on choice and control**, the top 10% support categories are as follows.

* Capital – Assistive Technology has an outcomes indicator of 59%.
* Capital – Home Modifications has 37%.

The bottom 10% support categories are as follows.

* Capacity Building – Lifelong Learning has an outcomes indicator of 36%.
* Capacity Building – Relationships has 18%.

For **“Has NDIS helped with choice and control?” indicator**, the top 10% support categories are as follows.

* Capacity Building – Health and Wellbeing has an indicator of 76%.
* Capital – Assistive Technology has 71%.

The bottom 10% support categories are as follows.

* Capacity Building – Home Living has an indicator of 62%.
* Capacity Building – Relationships has 62%.

## Page 2, Table 2: Definitions for the indicators

* **Active participants with approved plans** is defined as the number of active participants who have an approved plan and reside in the region / have supports relating to the support category in their plan.
* **Registered active providers** is defined as the number of registered service providers that have provided a support to a participant within the region / support category, over the exposure period.
* **Participants per provider** is defined as the ratio between the number of active participants and the number of registered service providers.
* **Provider concentration** is defined as the proportion of provider payments over the exposure period that were paid to the top 10 providers.
* **Provider growth** is defined as the proportion of providers for which payments have grown by more than 100% compared to the previous exposure period. Only providers that received more than $10,000 in payments in both exposure periods have been considered.
* **Provider shrinkage** is defined as the proportion of providers for which payments have shrunk by more than 25% compared to the previous exposure period. Only providers that received more than $10,000 in payments in both exposure periods have been considered.
* **Total plan budgets** is defined as the value of supports committed in participant plans for the exposure period.
* **Payments** is defined as the value of all payments over the exposure period, including payments to providers, payments to participants, and off-system payments (in-kind and Younger People In Residential Aged Care).
* **Utilisation** is defined as the ratio between payments and total plan budgets.
* **Outcomes indicator on choice and control** is defined as the proportion of participants who reported in their most recent outcomes survey that they choose who supports them.
* **“Has NDIS helped with choice and control?”** indicator is defined as the proportion of participants who reported in their most recent outcomes survey that the NDIS has helped with choice and control.
* Note: For some metrics – ‘good’ performance is considered a higher score under the metric. For example, high utilisation rates are considered a sign of a functioning market where participants have access to the supports they need. For other metrics, a ‘good’ performance is considered a lower score under the metric. For example, a low provider concentration is considered a sign of a competitive market.