

# **NDIS SERVICE AGREEMENT**

### What is a Service Agreement?

When you agree to use your NDIS budget to pay for supports, you are entering into a contract with your provider. A service agreement is an agreement between you and your provider that makes it clear to what you have both agreed to. It is covered by Australian Consumer Law.

The NDIA recommends having a written service agreement, so participants and providers are clear about what each party has agreed to. For example, what supports will be delivered and how they will be delivered.

Please make sure you have read and understood our *Terms of Service* before completing this document. This Service Agreement must be signed for us to start delivering services.

## **NDIS PARTICIPANT DETAILS**

	DETAILS			
Participant's Full Name				
Participant Number				
Date of Birth				
Plan Duration	Start Date:		End Date:	
PLAN MANAGEMEN	NT			
□ NDIS/Agangy Managa	 d □ Dlan Managov	d		
☐ NDIS/Agency Manage	d   Plan Managed	d □ Self-Managed		
NB: Only complete this se		nanaging your plan or	have a Plan Mo	anager
Contact details for payme	ent of your invoices			
Name/Company				
Phone				
Email Address				
TLCU CONTACT DET	TAILC			
Address:	Unit 4, 147-151 Belr	nont Avenue Belmont,	WA, 6104	
Phone:	08 9277 2988			
Email:	lesleigh@tlcu.com.a	ıu		
My clinician is				
Name				

Email

## **CONSENTS**

	ngs on the participant's behalf (for NDIS/Agency managed plans only)
	e products and services from students supervised by TLCU clinicians tographed/recorded for training purposes
·	tographed/recorded for social media purposes
☐ for TLCU to send appointment	
	d information about service development opportunities
igive consent for TLCU to liaise with th	of tollowing protessionals/agencies involved in the care of the participant.
	ne following professionals/agencies involved in the care of the participant:  Contact Details (name of gaency, contact person, their email/phone)
Professionals/Agencies	Contact Details (name of agency, contact person, their email/phone)
Professionals/Agencies  ☐ Education provider	
Professionals/Agencies  □ Education provider  □ NDIS Planner	
Professionals/Agencies  □ Education provider □ NDIS Planner □ Support Coordinator/LAC	
Professionals/Agencies  □ Education provider  □ NDIS Planner  □ Support Coordinator/LAC  □ Specialist Service Provider	

This permission remains valid while the participant is receiving services from TLCU.

### **SCHEDULE OF SUPPORTS**

Support Category	Support Item	Rate	Budget \$	Qty	Budget Management
Choose an item.	Choose an item.	Choose an item.			Choose an item.
Choose an item.	Choose an item.	Choose an item.			Choose an item.
Choose an item.	Choose an item.	Choose an item.			Choose an item.
Choose an item.	Choose an item.	Choose an item.			Choose an item.

<sup>\*\*</sup>All prices are GST inclusive (if applicable) and include the cost of providing the supports.

#### **HOW WILL SUPPORTS BE PROVIDED**

#### Consumables

Consumables will be distributed by the Prosthetist during appointments or as requested

#### **Prosthetic Hours**

Non face to face supports (such as plan review reports & AT reports/quotes), reviews, component inspections & maintenance will be provided by your Prosthetist.

## **Physiotherapy Hours**

Non face to face supports (such as plan review reports), consults, manual physio sessions & outcome measures will be provided by your Physiotherapist

### **Assistive Technology**

Minor repairs will be provided by your Prosthetist.

Major repairs & prosthetic devices require an AT (Assistive Technology) Report and quote to be submitted to the NDIS team for approval. Once NDIS has approved the request, NDIS will arrange a Service Booking and then a Prosthetist will be able to deliver the support/device to you. TLCU are unable to supply supports/devices prior to NDIS approval.

## **PARTIES AND SIGNATURES**

between the listed parties	:				TLCU
Participant or Rep (i.e. parent/care		and		Serv	vice Provider
TLCU will provide services	to:				
Participant Name					
Participant Number					
☐ I have read, understood ☐ I agree to notify TLCU of  Participant/Representation  Signed:	of any changes that m	<u>=</u>	e Agreer	nent	
Name:				Date:	
Storage, Access, and Correct All Disability Professional Se Privacy Principles, which rega access, and correct personal For more information about I or via email contact@tlcu.co	rvice Providers are boo ulates how we collect, information held by th how privacy and persor	use, disclose and store em.	e persona	l informati	ion, and how individuals may
Champas to this Comiss Asse					

### Changes to this Service Agreement

If you would like to make changes to the services and/or products you are receiving, please speak with our Administration Staff on 08 9277 2988 or via email <a href="mailto:lesleigh@tlcu.com.au">lesleigh@tlcu.com.au</a>. Requests to change this Service Agreement must be made in writing by email or letter and may result in us having to make changes to any relevant service bookings.

## **Ending this Service Agreement**

Requests to end this Service Agreement must be made in writing with 1 months' notice. Any services provided used during this notice period will be charged. If agreed, the notice will be waived.