

## Life Skills Better Connections NDIS Service Agreement

This document details the Service Agreement between Life Skills Better Connections (ABN 26667690600) and the individual Participant of NDIS funding to provide a Training and Informative Course support service, the objective being to provide the skills needed to work towards the goals outlined in the Participant's NDIS Plan.

| <b>Provider Details</b>                             |                                |                                       |                        |
|---|--------------------------------|---------------------------------------|------------------------|
| Business Name                                       | Life Skills Better Connections | ABN                                   | 26667690600            |
| Phone   |                                | Email                                 | admin@lifeskillsbc.com |
| <b>Participant Details</b>                          |                                |                                       |                        |
| Name  |                                |                                       |                        |
| Date of Birth                                       |                                |                                       |                        |
| Address   |                                |                                       |                        |
| Telephone Number                                    |                                |                                       |                        |
| E-mail Address                                      |                                |                                       |                        |
| NDIS Number   |                                |                                       |                        |
| NDIS Plan Dates                                     | Start                          |                                       |                        |
|   | End                            |                                       |                        |
| Alternate Contact / Nominee                         | Name                           |                                       |                        |
|   | Relationship                   |                                       |                        |
|   | Telephone                      |                                       |                        |
|   | Email                          |                                       |                        |
| <b>Plan Management Type</b>                         |                                |                                       |                        |
| <input type="checkbox"/> Plan Managed               |                                | <input type="checkbox"/> Self-Managed |                        |
| <b>Plan Manager Details (if applicable)</b>         |                                |                                       |                        |
| Name  |                                |                                       |                        |
| ABN   |                                |                                       |                        |
| Phone   |                                |                                       |                        |
| Email for invoices                                  |                                |                                       |                        |
| Alternate email address                             |                                |                                       |                        |
| <b>Self-Managed Billing Details (if applicable)</b> |                                |                                       |                        |
| Name  |                                |                                       |                        |
| Phone   |                                |                                       |                        |
| Email for invoices                                  |                                |                                       |                        |
| Alternate email address                             |                                |                                       |                        |

## Services Provided

**Life Skills Better Connections** agrees to deliver the following support services dependent on the participant's enrolment:

- **Life Skills Course: Introductory**
- **Life Skills Course: Level 2**
- **Life Skills Course: Level 3**

### Course Details:

- **Each course is designed to run for 3 hours. The provider will confirm the timing before the course to ensure a seamless experience for all participants. Any schedule changes will be promptly communicated to keep everyone informed.**
- **The venues are subject to availability, and participants will be informed immediately once a venue is secured.**
- **Each course will delve into different topics or offer more advanced information than the previous level.**
- **Refreshments will be provided during the course**
- **Participants will require a Support Workers/Representatives/Nominees to join us and make the most out of these sessions.**
- **All necessary materials for the course will be provided and are included in the cost of the course.**

## Payments

**Life Skills Better Connections** require **prepayment before the commencement** of the enrolled Life Skills Course. **Life Skills Better Connections** have the right to request prepayment to cover the expenses to source, build and tailor the support to meet participants' needs. In the unfortunate event that a participant chooses not to proceed, **Life Skills Better Connections** reserves the right to retain funds prepayment to cover the unrecoverable costs incurred.

**Life Skills Better Connections** will seek payment for the provision of service from the appropriate funding delegates as per the current NDIS Price Guide and Support Catalogue.

All invoice totals are due within 7 days from the invoice date.

It is the responsibility of the NDIS Participant/Representative to approach **Life Skills Better Connections** with any concerns they have surrounding invoicing.

### Non-Payment Policy:

If payment is not received by the due date, **Life Skills Better Connections** reserves the right to revoke services and release the participant's spot in the course. The Participant will be notified and given 3 days to settle the outstanding invoice.

## Schedule of Supports/Courses

| Course                   | Line Item  | Fixed Cost | Date | Venue | Total Cost |
|--------------------------|--|------------|------|-------|------------|
| <b>Introductory</b>      | 04_210_0125_6_1 Community Social And Recreational Activities | \$399      |      |       |            |
| <b>Level 2</b>           | 04_210_0125_6_1 Community Social And Recreational Activities | \$399      |      |       |            |
| <b>Level 3</b>           | 04_210_0125_6_1 Community Social And Recreational Activities | \$399      |      |       |            |
| <b>Package 2 Courses</b> | 04_210_0125_6_1 Community Social And Recreational Activities | \$699      |      |       |            |
| <b>Package 3 Courses</b> | 04_210_0125_6_1 Community Social And Recreational Activities | \$999      |      |       |            |
| <b>Introductory</b>      | 09_011_0125_6_3 Community Participation Activities           | \$399      |      |       |            |
| <b>Level 2</b>           | 09_011_0125_6_3 Community Participation Activities           | \$399      |      |       |            |
| <b>Level 3</b>           | 09_011_0125_6_3 Community Participation Activities           | \$399      |      |       |            |
| <b>Package 2 Courses</b> | 09_011_0125_6_3 Community Participation Activities           | \$699      |      |       |            |
| <b>Package 3 Courses</b> | 09_011_0125_6_3 Community Participation Activities           | \$999      |      |       |            |

### Responsibilities of the Participant and/or Representative (Nominee)

The Participant/Representative agrees to:

- Be involved and inform the Provider if you require any additional assistance or resources prior to attending the course;
- Provide accurate information and keep your provider informed of changes to your personal information;
- Ensure there are appropriate funds available for claiming services that have been booked. If **Life Skills Better Connections** is unable to claim the provision of a service due to insufficient funds you are responsible for payment or your spot in the course will be forfeited;
- Treat the **Life Skills Better Connections** staff and all other Course Enrollees with courtesy, respect, and dignity.
- Treat the establishments where the Life Skills Courses are hosted respectfully, do not engage in dangerous or reckless behaviour;
- Participants are required to have a Support Worker/Representative/Nominee present for the duration of the course;
- Talk to the Provider if you have any concerns about the courses/information being provided;
- Give the Provider a minimum of If the Participant needs to reschedule a session, they must notify the Provider at least 3 days' notice prior to the course. While no refunds will be issued (refer to payments section), **Life Skills Better Connections** will endeavour to accommodate rescheduling requests based on availability. If the notice is not provided, the Provider's Cancellation Policy will apply (see cancellation policy section);
- Give the Provider the required notice if you need to end the Service Agreement (see Ending this Service Agreement section);
- Let the Provider know immediately if your NDIS Plan is suspended or replaced by a new NDIS Plan or if you stop being a Participant in the NDIS;
- Give the Provider feedback or lodge a complaint if you are dissatisfied with the service or the way it is delivered (See Complaint Policy section);
- Discuss your concerns and any possible risks associated with attending Life Skills Better Connections Course;
- Request a copy of any of our Policies if further information is required.

### Responsibilities of the Provider (Life Skills Better Connections)

**Life Skills Better Connections** agrees to:

- The provider will supply all necessary materials for the course, including books and pens. These materials are included in the cost of the course and will be distributed to the Participant at the beginning of the class.
- Declare and manage any conflicts of interests;
- Ensure workers have the necessary training, competence, and qualifications to deliver the services provided;
- Work with the Participant's nominee, representative support worker to assist the Participant to exercise choice and control and to have their voice heard in matters that affect the participant. This can occur at any time while the Participant is using **Life Skills Better Connections** services;
- Check in with the Participant and their nominee, representative support worker to ensure their understanding and competency in matters of the Life Skills Courses and the participant's ability to satisfactorily complete the required coursework;
- Provide safe, competent and high-quality service in a safe environment that meets the participant's needs;
- Respect and respond to the cultural values and beliefs of the participant;
- Communicate openly and honestly in a way the participant can best understand including using an interpreter if required;
- Treat the participant with courtesy and respect;
- Inform the participant of all costs associated with the provision of services including the cost associated with cancellations (see cancellation policy section);
- **Life Skills Better Connections** will protect the Participant's privacy and confidential information as per the Privacy Act 1988; Life Skills Better Connection's Privacy and Information Management Policy will be provided in initial email engagement);
- **Life Skills Better Connections** will store participant information in a secure electronic file, that is password-word protected and has an appropriate firewall;
- Inform the participant how to make a complaint and treat them fairly and impartially if they make a complaint;
- Listen to the Participant's feedback and resolve problems as per the **Life Skills Better Connections** complaints policy;
- Give the participant a minimum of 2 days notice (where possible) if the Provider has to change a scheduled course date;
- Provide services in a manner consistent with all relevant laws, including the National Disability Insurance Scheme Act and Rules, and the Australian Consumer Law;
- Keep accurate records on the services/courses provided to the participant and any notes taken relating to the participants competency and understanding of course topics and work, and willing to share relevant information at Participants/Nominee/Representatives request;
- Issue accurate invoices for the provision of services delivered to the Participant and follow up if issues are found;
- Give the Participant the required notice if the Provider needs to end the Service Agreement (see Ending this Service Agreement below);
- Continually inform the Participant of possible risks and benefits associated with attending any Life Skills Course.

### Social Media

Occasionally, **Life Skills Better Connections** may utilize social media to promote services.

If you, the Participant/Representative agree to the disclosure of personal information such as photographs, videos and information pertaining to the Life Skills Course the Participant is enrolled in, please sign and date the below:

**Sign:**

**Date:**

### Cancellation Policy

**No Refunds:** Payments made for the service are non-refundable. This applies even in cases of no-shows or cancellations by the Participant.

**Rescheduling:** If the Participant needs to reschedule a session, they must notify the Provider at least 3 days' notice prior to the course. While no refunds will be issued (refer to payments section), Life Skills Better Connections will endeavour to accommodate rescheduling requests based on availability.

**Provider Cancellations:** In the unlikely event that we need to cancel a session, rest assured that we will offer you an alternative session date.

### Goods and Services Tax (GST)

For the purposes of GST 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 (NDIS Act), in your NDIS Plan currently in effect under section 37 of the NDIS Act;
- Your NDIS Plan is expected to remain in effect during the period the supports are provided; and
- You or your Representative will immediately notify **Life Skills Better Connections** if your NDIS Plan is replaced by a new Plan or if you stop being a Participant in the NDIS.

### Feedback, Complaints and Disputes

If the Participant and/or Nominee wishes to give the provider feedback, the Participant can e-mail [admin@lifeskillsbc.com](mailto:admin@lifeskillsbc.com)

If the Participant wishes to escalate the complaint, the Participant can make a complaint to the NDIS Commission by:

- Telephoning 1800 035 544 (free from landlines);
- Using the National Relay Service and ask for 1800 035 544;
- Completing a complaint contact form on the NDIS Commission website via <https://forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF>.
- The NDIS Commission can take complaints about:
  - Services or supports that were not provided in a safe and respectful way; and
  - Services and supports that were not delivered to an appropriate standard.

### Ending the Service Agreement

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.

Should either Parties wish to end this Service Agreement they must give 14 days' notice in writing;

(As per the minimum timeframe prescribed by the NDIS Terms of Business). If either party seriously breaches this Service Agreement the requirement of notice will be waived.

Agreement Signatures

By signing this Service Agreement, I declare that:

- I am authorized to sign this Service Agreement in the capacity noted above;
- I consent to the terms and conditions outlined in our Privacy Policy including all legitimate uses and disclosures of Personal Information between Life Skills Better Connections and relevant individuals;
- I acknowledge that this Service Agreement applies to my/the Participant's current and future NDIS Plans unless Life Skills Better Connections is otherwise notified in writing, and that the annually indexed price limit will be automatically applied to align with the NDIS Price Guide applicable at the time future NDIS Plans are prepared, reviewed, or replaced without requiring a new Service Agreement.
- The following Parties agree to all the terms and conditions of this Service Agreement.

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Name of Participant/Representative

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*Signature of Participant/Representative*

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Date Signed

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Name of the authorised person from  
Life Skills Better Connections

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*Signature of the authorised person from  
Life Skills Better Connections*

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Date Signed