

# ASPIRE SUPPORT SERVICES LTD

## SERVICE AGREEMENT

### (EASY READ)

PERSONAL INFORMATION	
Client Name:	

**ASPIRE SUPPORT SERVICES LTD.**

220 Borella Road, Albury NSW 2640  
P.O. Box 7374, East Albury NSW 2640  
Tel: 02 6058 4000 Fax: 02 6058 4050  
ABN: 26 154 156 215

[www.aspiress.com.au](http://www.aspiress.com.au)



## Service Agreement

### 1. WHO IS MAKING THIS AGREEMENT?



Name of the customer or of their trusted person (e.g. guardian)



Aspire Support Services

### 2. HOW DOES THIS AGREEMENT FIT IN WITH THE NDIS?



This Agreement is made according to the rules and the goals of the National Disability Insurance Scheme (NDIS).



A copy of your NDIS Plan is attached to this Agreement.

Note: you don't have to include your NDIS Plan if you don't want to but Aspire needs know at goals you want to achieve.



You and Aspire agree that this Agreement is in line with the main ideas of the NDIS. These ideas include things like having more choices achieving your goals and taking part in the community.

### 3. WHAT SUPPORTS WILL BE PROVIDED?

This is in a table at the end of the service agreement.

### 4. WHAT IS EXPECTED OF ASPIRE?



Checking that the Agreement is working well. You and Aspire will agree about how often the Agreement will be reviewed.



Providing the services that you have asked for.



Being open and honest about the work we do.



Explaining things clearly.



Treat you with courtesy and respect.



Including you in all decisions about your supports.



Letting you know what to do if you have a problem or want to complain.



Listening to your feedback and fixing any problems quickly.



Telling you if they want to end the Agreement.



Making sure your information is correct and up to date.



Storing your information carefully and making sure it is kept private.



Obeying all the rules and laws that apply. This includes the National Disability Insurance Scheme Act 2013 and the National Disability Insurance Scheme Rules.



Providing invoices and statements for your supports, depending on how Aspire charge you for supports.

## 5. WHAT IS EXPECTED OF YOU?

When you sign the Service Agreement, it means that you agree to do the things that are expected of you. These are called your responsibilities.

Our responsibilities include:



Telling Aspire about the supports that you want, and how you want to receive them.



Being polite and respectful to the staff who work with you.



Telling Aspire if you've got any problems.



Telling Aspire if you can't make it to an appointment or support service. If you don't attend a scheduled appointment or service you will be charged a fee.

One of our Customer Service staff can explain how this works for you.



Telling Aspire straight away if you want to end the Agreement



Letting Aspire know if your NDIS Plan changes or if you stop using the NDIS.

## 6. PAYMENTS

*[One or more of the below paragraphs may apply. Delete those that do not apply.]*



There are different ways to pay for your supports.



(Option 1)

You are managing your NDIS funding yourself. This is called Self Managing.



In this case, you pay the invoices from Aspire directly. An invoice is like a bill.



(Option 2)

You have a Plan Nominee to help you. This is a person you trust, like a family member or friend.

Your Plan Nominee is: \_\_\_\_\_



The Plan Nominee pays the invoices from Aspire.

NDIA



(Option 3)

The National Disability Insurance Agency (NDIA) is managing your funding your for. The NDIA pays the invoices from Aspire.

(Option 4)



A Plan Management Provider is managing your funding. This is a person or organisation that helps to manage their funding.

Your Plan Management Provider is:

\_\_\_\_\_

They will pay the invoices from Aspire.



In all of these cases, the way the invoice is to be paid – such as via electronic transfer, cash or cheque – will be written in the Agreement.





And the time allowed to pay the invoice will be included as well. This might be 7 days, 14 days or more.

## 7. HOW TO CHANGE A SERVICE AGREEMENT



You and Aspire will need to agree about how changes can be made to the Service Agreement.



The changes need to be in writing.



You may need to sign a new document saying that you agree with the changes.

## 8. HOW TO END A SERVICE AGREEMENT



If you want to end the Service Agreement, you must tell Aspire.



You must let Aspire know before you want the Agreement to end.



Usually, in the Agreement, it will say how much time you must give them before the Agreement can end. This is called a notice period.

With your agreement with Aspire, you will need to give **6 weeks notice**.



If Aspire wants to end the Agreement, we will tell you – and give you 6 weeks notice too.

Sometimes, an Agreement can end without a notice period. This could only happen if you or Aspire broke the Agreement in some way.

Let's look at an example.



Angus was upset because his support workers never turned up on time.



He made several complaints to his service provider. But the service provider didn't do anything to fix the problem for more than 3 months.



Angus decided to end the Agreement and find another service provider.

NDIA

You can contact the NDIA for more information.

## 9. WHAT TO DO IF YOU HAVE A PROBLEM?

If you have a problem, you can talk to someone in the Customer Service Team at Aspire by email or phone.



[customerservice@aspire.com.au](mailto:customerservice@aspire.com.au)



02 60584000

# NDIA

If you don't have any success getting your problem fixed, you can contact the National Disability Insurance Agency by calling or going on the website.

1800 800 110

[ndis.gov.au](http://ndis.gov.au)

## 10. GST

Most services provided under the NDIS will not include GST. However, GST will apply to some services.

It is Aspires responsibility to check whether GST does or does not apply.

By signing this Agreement, Aspire says that they have checked whether GST applies.

## 11. CONTACT DETAILS

You can be contacted on:



Your Name:

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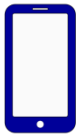
Your daytime  
phone number:

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Your evening  
phone number:

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Your mobile  
number:

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Your email  
address:

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Your home  
address:

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The name and  
phone number of  
someone if we can't  
get in touch with  
you:

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Aspire can be contacted on:



Contact Name: Customer Service Team



Phone: 02 6058 4000



Email: [customerservice@aspiress.com.au](mailto:customerservice@aspiress.com.au)



Address: 220 Borella Road, Albury, NSW, 2640

## 12. AGREEMENT SIGNATURES

By signing this Agreement, you agree to all of the information included.



Your Name:

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Signature:

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Date:

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Aspire Support  
Services

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Signature:

---



Date:

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### 13. ADDITIONAL DOCUMENTATION

- Schedule of supports (see Appendix 1. Schedule of Supports)
- Copy of customer's NDIS plan is attached: Yes  No
- Schedule of regular additional expenses to be paid for by the customer (see Appendix 2. Regular Additional Expenses)

## APPENDIX 1.

### Schedule of Supports

Note: Prices may vary in accordance with the NDIS Price Guide.

<b>Support</b> Name of Support type	<b>Description of Support</b> Details of the support	<b>Price &amp; Payment Information</b> Price of the support(e.g. per hour/per session/per unit)	<b>How the support will be provided?</b> How, when, where the support will be provided	<b>How the support will be charged?</b> Who Aspire will charge for this service. NDIS, Customer or Third Party	<b>Consent for Aspire to complete Service Booking details on behalf of customer or invoice directly to customer.</b> Customer or customer nominee/guardian's name, date & signature who is providing consent



## APPENDIX 2.

### REGULAR ADDITIONAL EXPENSES

<b>Activity Fees:</b>	
<b>Transport Fees:</b>	
<b>Other Expenses:</b>	
<b>Total Additional Expenses:</b>	\$ - Per Week

I, [Enter name of customer], agree to be invoiced directly by Aspire Support Services Ltd. for all of the above listed additional expenses, as these expenses are not recoverable from the NDIA.

<b>Customer Signature:</b>	
<b>Date:</b>	/ /

<b>Parent/ Caregiver Name:</b>	
<b>Parent/ Caregiver Signature:</b>	
<b>Date:</b>	/ /

### BILLING ADDRESS FOR REGULAR ADDITIONAL EXPENSES

<b>Name:</b>		<b>Contact Number:</b>	
<b>Address:</b>			
<b>Email:</b>			