

Chapter 3

Annual Reports of Commonwealth Entities and Companies

Health Portfolio

3.1 For the financial year 2015–16, the following annual reports from Commonwealth entities and companies of the Health Portfolio were referred to the committee for examination and report by 31 October 2016:

- Administrator of the National Health Funding Pool;
- Aged Care Complaints Commissioner;
- Aged Care Pricing Commissioner;
- Australian Commission on Safety and Quality in Health Care;
- Australian Institute of Health and Welfare;
- Australian Organ and Tissue Donation and Transplantation Authority;
- Australian Radiation Protection and Nuclear Safety Agency;
- Australian Sports Anti-Doping Authority;
- Australian Sports Commission;
- Australian Sports Foundation Limited;
- Cancer Australia;
- Food Standards Australia New Zealand;
- Independent Hospital Pricing Authority;
- National Blood Authority;
- National Health and Medical Research Council;
- National Health Funding Body;
- National Industrial Chemicals Notification and Assessment Scheme;
- National Mental Health Commission;
- Office of the Gene Technology Regulator;
- Pharmaceutical Benefits Advisory Committee; and
- Professional Services Review.

3.2 The committee also received the following reports for examination after 31 October 2016:

- Australian Aged Care Quality Agency (AACQA).

3.3 The Committee will examine the AACQA annual report for 2015–16 in its second report on annual reports.

3.4 The committee has chosen to examine the following Health Portfolio reports in more detail:

- Aged Care Complaints Commissioner;
- Australian Aged Care Pricing Commissioner;
- Australian Institute of Health and Welfare;
- Food Standards Australia New Zealand;
- National Blood Authority;
- Office of the Gene Technology Regulator;
- Professional Services Review;
- Australian Sports Commission;
- Australian Sports Foundation;
- National Mental Health Commission;

Aged Care Complaints Commissioner

3.5 The Aged Care Complaints Commissioner (ACCC) is an independent statutory office holder established under the *Aged Care Act 1997*. The key functions of the ACCC are to resolve complaints about Australian Government funded aged care services, and educate people and aged care providers about how to handle complaints.¹

3.6 This is the first annual report of the ACCC since it became an independent statutory officer holder on 1 January 2016. Prior to that date, responsibility for complaints about Australian Government funded aged care services sat with the Secretary of the Department of Health. The transfer of responsibility from the Department of Health to the ACCC has improved the independence of complaints handling and resulted in an increased number of contacts, complaints and enquiries.²

3.7 The ACCC exceeded both of its deliverables, with a commendable 91 per cent of complaints received finalised within 90 days.³ The ACCC is working toward developing new key performance indicators for the 2016–17 financial year, which the committee looks forward to reviewing in the ACCC's next annual report.

3.8 The annual report is well presented and concise, with helpful case studies and information. The report meets all of the requirements set out in section 95A-12 of the *Aged Care Act 1997*, and is apparently satisfactory. Part 2 of annual report includes reporting on the final six months of operation of the Aged Care Commissioner which investigated complaints made under the former Aged Care Complaints Scheme. The Aged Care Commissioner annual report appears to meet all of the mandatory reporting requirements and is apparently satisfactory.

1 Aged Care Complaints Commissioner, *Annual Report 2015–16*, p. 11.

2 Aged Care Complaints Commissioner, *Annual Report 2015–16*, p. 7.

3 Aged Care Complaints Commissioner, *Annual Report 2015–16*, p. 32.

Aged Care Pricing Commissioner

3.9 The Aged Care Pricing Commissioner (ACPC) is an independent statutory office holder appointed under section 95B of the *Aged Care Act 1997*. The key functions of the ACPC are to approve proposed increases to Extra Service fees, and approve proposed accommodation requirements that are higher than the maximum amount of accommodation payment that an approved provider can charge a person as determined by the Minister for Aged Care under section 52G-3 of the *Aged Care Act 1997*.

3.10 The ACPC produced a succinct annual report that satisfactorily meets the mandatory reporting requirements set out in section 95B-12 of the *Aged Care Act 1997*. The report is easy to read and navigate and includes useful trend information about the number of accommodation rooms approved by price, and by facility.⁴

3.11 The committee commends the ACPC on its performance against statutory timeframes and requirements. The committee notes that in 2015–16 the ACPC took an average of 24 days to assess an accommodation application and make a decision on proposed accommodation prices, compared to the statutory timeframe of 60 days.⁵ The ACPC also took an average of 3.5 days in 2015–16 to make a decision regarding an Extra Service fee application, compared to 5 days in 2014–15.⁶

3.12 The committee notes that limited information about the ACPC's budget, staffing, and organisational structure is included in the report.⁷ Although it is not a mandatory requirement for the ACPC, the committee considers that it is best practice for annual reports to include information about the salary ranges of employees, and the non-salary benefits, if any, provided. The committee also encourages the ACPC to include in future annual reports a discussion of the ACPCs revenue, expenditure and operating costs, and information about its financial management.

3.13 The committee also considers that it would be useful for the ACPC to include in future reports more detailed information about the nature of applications for higher accommodation payments and Extra Service fees, such as a discussion about why an applicant may propose a higher payment or Extra Service fee is required, and discussion about on what basis an application is not likely to succeed.

Australian Institute of Health and Welfare

3.14 The Australian Institute of Health and Welfare (AIHW) is a corporate Commonwealth entity whose key function is to develop, collect, analyse and report information from the national data collection in the areas of health and community

4 Aged Care Pricing Commissioner, *Annual Report 2015–16*, pp. 6–7.

5 Aged Care Pricing Commissioner, *Annual Report 2015–16*, p. 11.

6 Aged Care Pricing Commissioner, *Annual Report 2015–16*, p. 4.

7 Aged Care Pricing Commissioner, *Annual Report 2015–16*, p. 10.

services.⁸ The AIHW achieved most of its performance deliverables and met the majority of its indicator targets or specified reference points.⁹

3.15 The AIHW produced a quality annual report with highly informative graphs, data and trend information. The annual report satisfactorily meets all of the mandatory reporting requirements set out in section 46 of the *Public Governance, Performance and Accountability Act 2013* and division 3A of the *Public Governance, Performance and Accountability Rule 2014*.

3.16 Following a review of accessibility for stakeholders, the AIHW implemented the 'AGILE' framework to deliver concise snapshot information to a variety of audiences.¹⁰ The AIHW has also been developing its social media presence to help promote its work through web snapshots across multiple topic areas.¹¹ The committee commends the AIHW on its work to make the information and statistics it produces more accessible and user friendly for the Australian public, including people with vision impairment.¹²

3.17 A key change for 2016 will be the transfer of the Performance and Accountability Framework (PAF) reporting function from the National Health Performance Agency to AIHW.¹³ The change is expected to result in an increase of annual appropriation and staff to AIHW.¹⁴

Food Standards Australia New Zealand

3.18 Food Standards Australia New Zealand (FSANZ) produced a well presented annual report that highlights its regulatory and non-regulatory achievements for the 2015–16 financial year.¹⁵ FSANZ achieved a seamless introduction of the revised Australia New Zealand Food Standards Code, which commenced on 1 March 2016.¹⁶

3.19 Overall, the committee considers that the annual report is apparently satisfactory. The committee notes that a number of page references listed in the compliance index in the report are incorrect. It would assist the committee in its examination of the report if the page numbers referenced in the compliance index were consistent with the report.

8 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p. ix.

9 Australian Institute of Health and Welfare, *Annual Report 2015–16*, pp. xii; 5–15.

10 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p.46.

11 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p.46.

12 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p.46.

13 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p. xviii.

14 Australian Institute of Health and Welfare, *Annual Report 2015–16*, p. xviii.

15 Food Standards Australia New Zealand, *Annual Report 2015–16*, pp. xii–xiii.

16 Food Standards Australia New Zealand, *Annual Report 2015–16*, p. ix.

National Blood Authority

3.20 The National Blood Authority (NBA) is a non-corporate Commonwealth entity. The NBA appears to have met most of its deliverables and KPIs.¹⁷

3.21 The NBA had a number of notable achievements in 2015–16.¹⁸ The NBA achieved uninterrupted supply for blood and blood products at a saving in the supply of blood budget of \$90.6 million.¹⁹ The saving brings the amount of funding returned to governments over the last four years to \$446.5 million.²⁰ The NBA also executed a new nine year Deed of Agreement with the Australian Red Cross Society, securing the supply of fresh blood products by the Australian Red Cross Blood Service.²¹

3.22 The outlook for 2016–17 for the NBA includes ensuring the sustainability of immunoglobulin by improving the supply and demand arrangements, and enhancing data collection and reporting.²²

3.23 The NBA produced an exemplary report that met all mandatory requirements. The report was well presented, engaging and highly informative. It would assist the committee in its examination of future reports if more detail about the organisational structure of the NBA is included. For example, a short description about the roles and responsibilities of each main grouping under the organisational chart would assist the committee's understanding of the NBA's structure and operations.²³

Office of the Gene Technology Regulator

3.24 The Office of the Gene Technology Regulator (OGTR) is a statutory office holder whose key role is to identify and manage risks posed by, or as a result of, gene technology.²⁴ The OGTR met, or substantially, met its deliverables and key performance indicators.²⁵

3.25 Overall, the report is well-structured and easy to navigate and read. The OGTR has satisfactorily met most of the mandatory requirements set out in division 3A of the *Public Governance, Performance and Accountability Rule 2014* and section 136 of the *Gene Technology Act 2000*.

3.26 The Gene Technology Act Amendment Bill 2015 was passed in September 2015, giving effect to minor and technical amendments that came out of the 2011

17 National Blood Authority, *Annual Report 2015–16*, pp. 20–23.

18 National Blood Authority, *Annual Report 2015–16*, pp. 6–7.

19 National Blood Authority, *Annual Report 2015–16*, p. 6.

20 National Blood Authority, *Annual Report 2015–16*, p. 9.

21 National Blood Authority, *Annual Report 2015–16*, p. 34.

22 National Blood Authority, *Annual Report 2015–16*, p. 14.

23 National Blood Authority, *Annual Report 2015–16*, p. 76.

24 Office of the Gene Technology Regulator, *Annual Report 2015–16*, p. 2.

25 Office of the Gene Technology Regulator, *Annual Report 2015–16*, pp. 64–66.

review of the *Gene Technology Act 2000*.²⁶ The changes are expected to reduce regulatory burden.²⁷

3.27 Key challenges for the OGTR for 2016–17 include maintaining efficient and effective regulation of new gene technologies to ensure the national regulatory scheme remains robust.²⁸

Professional Services Review

3.28 The Professional Services Review Agency (PSR) is a non-corporate Commonwealth entity under the PGPA Act. The PSR is established by the *Health Insurance Act 1973* to ensure the integrity of the Commonwealth Medicare benefits, dental benefits and pharmaceutical benefits scheme through protecting the Commonwealth, patients and the community from risks associated with inappropriate practice.²⁹

3.29 PSR has continued to experience an increase in new referrals of potential compliance breaches in 2015–16, having receiving 80 referrals from Medicare. This figure represents a referral increase of 29 per cent from 2014–15 and a substantial increase of 81.8 per cent from 2013–14.³⁰

3.30 In 2015–16 PSR met its 100 per cent target for two of its key performance indicators including: the percentage of cases referred to regulatory bodies where a potential threat to life or health of patient was referred to a regulator body; and, the number of PSR actions upheld by court after appeal.³¹

3.31 Two PSR quantitative performance indicators were not met and the committee considers that greater articulation of the context in which the KPIs were not met, and the forward actions taken to support the targets being met in future years, would positively contribute to the rigour of the PSR report. Further to this point, the committee considers that it would be beneficial for the PSR, in its analysis of qualitative indicators, to clearly note whether PSR considers these indicators have been met.

3.32 Overall, the committee considers the PSR 2015–16 annual report to meet the requirements of the PGPA Act and is 'apparently satisfactory'.

3.33 The committee observes that a key forward challenge of the PSR is to adapt to the increasing complexity of the Medical Benefits Schedule (MBS) and the range of health professionals whose services are covered by the MBS.³²

26 Office of the Gene Technology Regulator, *Annual Report 2015–16*, p. 11.

27 Office of the Gene Technology Regulator, *Annual Report 2015–16*, p. 11.

28 Office of the Gene Technology Regulator, *Annual Report 2015–16*, p. 12.

29 Professional Services Review, *Annual Report 2015–16*, p. 4.

30 Professional Services Review, *Annual Report 2015–16*, p. 9.

31 Professional Services Review, *Annual Report 2015–16*, p. 11.

32 Professional Services Review, *Annual Report 2015–16*, p. 7.

Australian Sports Commission

3.34 The Australian Sports Commission (ASC) is a corporate Commonwealth entity and the leading sport agency aimed at developing, supporting and investing in Australian sport.³³ The ASC produced a sound annual report, which is well presented and satisfactorily meets the mandatory reporting requirements.

3.35 The ASC achieved or exceeded most of its key performance indicators, with five KPIs not achieved but reported as making significant progress, and another five KPIs reported as commenced.³⁴ The ASC exceeded its planned performance targets for the Sporting Schools program, providing funding to 4 393 schools and achieving over 1.29 million program attendances.³⁵ The committee commends the ASC on its commitment to increasing school children participation rates in sporting activities through the Sporting Schools Program.

3.36 A significant highlight for the ASC in 2015–16 was the Rio de Janeiro 2016 Olympic and Paralympic games, in which Australia secured a top 10 place in the Olympics and a top five place in the Paralympics.³⁶ 422 athletes across 26 sports participated in the Olympic Games, and 177 athletes across 16 sports participated in the Paralympic Games.³⁷ In the four years prior to the Rio 2016 Games the Australian Government invested more than \$340 million in the Olympic Games, and more than \$64 million in the Paralympic Games.³⁸

3.37 Another notable achievement for the ASC this year was its launch of a new national population tracking survey called AUSPlay in November 2015. The AUSPlay survey will produce annual data on sport participation which will be used to inform investment, policy and sport delivery.³⁹

3.38 The ASC had an operating loss of \$15.2 million for 2015–16.⁴⁰ The ASC attributed the loss to, amongst other things, depreciation expenses as a result of revaluations to land, buildings, property, plants and equipment, and carry-over of funding provided by the Department of Health in 2014–15.⁴¹

3.39 A highlight looking forward for the ASC will be hosting the 2018 Commonwealth Games on the Gold Coast, Australia.⁴²

33 Australian Sports Commission, *Annual Report 2015–16*, p. 4.

34 Australian Sports Commission, *Annual Report 2015–16*, pp. 46, 50, 54, 59.

35 Australian Sports Commission, *Annual Report 2015–16*, p. 51.

36 Australian Sports Commission, *Annual Report 2015–16*, p. 12.

37 Australian Sports Commission, *Annual Report 2015–16*, pp. 16–17.

38 Australian Sports Commission, *Annual Report 2015–16*, p. 16–17.

39 Australian Sports Commission, *Annual Report 2015–16*, p. 24.

40 Australian Sports Commission, *Annual Report 2015–16*, p. 92.

41 Australian Sports Commission, *Annual Report 2015–16*, p. 92.

42 Australian Sports Commission, *Annual Report 2015–16*, p. 18.

Australian Sports Foundation

3.40 The Australian Sports Foundation (ASF) is a Commonwealth company under the PGPA Act and established under the *Australian Sports Commission Act 1989* for the purpose of raising money for the development of sport in Australia.⁴³ This is the first year that the ASF has produced an independent annual report following its separation from the Australian Sports Commission in 2014.

3.41 The CEO's report highlighted 2015–16 as a year of significant achievement for the ASF.⁴⁴ The ASF increased donations to \$32 million, which represented a 31 per cent growth on donations from 2014–15 and took the cumulative total of donations to over \$300 million.⁴⁵ The Fundraising4Sport program includes 1 494 active projects and the ASF annual report provides a number of insightful examples of the use of program funds.

3.42 The ASF states on page 61 of its report that the report complies with the mandatory requirements of section 17BE of the *Public Performance and Accountability Rule 2014* for corporate Commonwealth entities.⁴⁶ The committee notes that ASF is considered a Commonwealth company under the PGPA Act.⁴⁷ As such, the committee suggests that the reference to section 17BE of the *Public Performance and Accountability Rule 2014* be updated in future annual reports of the ASF to section 28, the relevant section for Commonwealth companies.

3.43 The ASF also states 'The Foundation's operations are not regulated by any significant environmental regulation under the law of the Commonwealth...'. The committee considers that subsection 516A(4) of the *Environment Protection and Biodiversity Conservation Act 1999* (EPBC Act) may be applicable to the ASF and encourages the ASF to report against EPBC Act requirements.

3.44 The *Work Health and Safety Act 2011* (WHS Act) is noted as applicable in the ASF report.⁴⁸ The committee is concerned that despite this reference to WHS Act, no work health and safety reporting is included in the report. The Committee considers that part 4 of schedule 2 of the WHS Act may be applicable to the ASF and encourages the ASF to report against WHS Act requirements.

3.45 Looking forward, the ASF five-year plan has set a commendable target of raising \$100 million in donations per annum for sport by 2020.⁴⁹ The committee recognises the need to invest in sport and acknowledges the ASF's important role in

43 Australian Sports Foundation, *Annual Report 2015–16*, p. 6.

44 Australian Sports Foundation, *Annual Report 2015–16*, p. 5.

45 Australian Sports Foundation, *Annual Report 2015–16*, p. 8.

46 Australian Sports Foundation, *Annual Report 2015–16*, p. 61.

47 Department of Finance, *List of General Government Sector, Public Non-financial Corporation and Public Financial Corporation entities under the Public Governance, Performance and Accountability Act 2013 (PGPA Act) – 1 February 2017*, p. 14.

48 Australian Sports Foundation, *Annual Report 2015–16*, p. 61.

49 Australian Sports Foundation, *Annual Report 2015–16*, p. 7.

this regard. The committee looks forward to examining the future achievements of the ASF in its 2016–17 annual report.

National Mental Health Commission

3.46 The National Mental Health Commission (NMHC) is a non-corporate Commonwealth entity under the PGPA Act. The NMHC supports the Australia Government to improve mental health outcomes for Australians and assist in preventing suicide.⁵⁰

3.47 As noted in the committee's previous Report on Annual Reports (No. 1 of 2016), the committee considers that a number of mandatory requirements of the *Public Performance and Accountability Rule 2014* are not met in the NMHC 2015–16 annual report. The committee encourages NMHC to include the following information to meet requirements of the *Public Performance and Accountability Rule 2014*: fraud prevention systems applied within the NMHC, in accordance with section 10; and, salary ranges and non-salary benefits of NMHC employees, in accordance with subsection 17AG(4)(c).

3.48 It would assist the committee in its examination of future reports if the NMHC could clearly indicate whether the results of performance criteria are considered to be met. It would also aid the committee if the NMHC could complete the 'Part of report' column of the compliance index, to improve the transparency of where the *Public Performance and Accountability Rule 2014* requirements have been met in the report. The committee looks forward to examining future NMHC annual reports inclusive of these improvements.

Social Services Portfolio (including Human Services)

3.49 For the financial year 2015–16, the following annual reports from Commonwealth entities and companies of the Social Services Portfolio (including Human Services) were referred to the committee for examination and report by 31 October 2016:

- Australian Hearing;
- Australian Institute of Family Studies; and
- National Disability Insurance Agency.

3.50 The committee chose to examine all the annual reports from entities within the Social Services Portfolio (including Human Services) in further detail.

Australian Hearing

3.51 Australian Hearing is a corporate Commonwealth entity whose purpose is to deliver a positive impact on the hearing impaired through effective and accessible hearing services, quality clinical care and excellence in client service.⁵¹

50 National Mental Health Commission, *Annual Report 2015–16*, p. 6.

51 Australian Hearing, *Annual Report 2015–16*, p. 6.

3.52 In 2015–16 Australian Hearing increased its total number of permanent and visiting by 34 sites – eight of which were permanent sites.⁵² As at 30 June 2016, Australian Hearing clients could access services at 145 permanent hearing centres, 426 visiting centres, via 10 hearing buses and 235 Aboriginal outreach sites.⁵³ Over 516 000 services were provided to individuals with hearing impairments and client surveys subsequently demonstrated that 89 per cent of responders were satisfied, or felt that the overall, services from Australian Hearing were better.⁵⁴

3.53 Australian Hearing continued to build on the previous year's solid results in 2015–16 to achieve total revenue of \$243.5, which was an increase of 6.2 per cent from the previous year. The total before tax profit was \$29.7 million, which was an increase of 19.9 per cent from 2014–15.

3.54 The 2015–16 annual performance statement indicates that Australian Hearing performed strongly against its performance criteria for the period. The committee commends Australian Hearing for its straightforward presentation of its performance statement. However, the committee encourages Australian Hearing to clearly indicate whether it considers performance criteria to be met, substantially met, exceeded, or not met to add further transparency and substance to its report.

3.55 Overall, the committee considers the 2015–16 annual report of Australian Hearing to meet the largely meet the standard of 'apparently satisfactory' under Senate Standing Order 25(20)(a). For future annual reports, the committee encourages Australian Hearing to present information on staffing arrangements and statistics. The committee congratulates Australian Hearing on presenting a succinct report which highlights their strong achievements across 2015–16.

Australian Institute of Family Studies

3.56 The Australian Institute of Family Studies (AIFS) is a non-corporate Commonwealth entity. In 2015–16, AIFS continued to focus on conducting high-quality research related to policy and practice on a wide-range of issues regarding families in Australia. The AIFS conducted research across 52 projects, including two longitudinal studies, Growing Up in Australia and Building a New Life in Australia. AIFS also reported on the reforms of the *Family Law Legislation Amendment (Family Violence and Other Measures) Act 2011* and initiated a new major study on Gambling in Suburban Australia.

3.57 AIFS administered \$4.56 million of government appropriations and \$7.64 million of own-source revenue. Adjusting for unfunded depreciation, AIFS achieved a small surplus of \$5 511.⁵⁵ The committee notes the importance of financial reporting in annual reports as a mechanism for transparency and accountability. As such, the committee encourages AIFS to develop its discussion and analysis of the financial

52 Australian Hearing, *Annual Report 2015–16*, p. 7.

53 Australian Institute of Family Studies, *Annual Report 2015–16*, p. 66.

54 Australian Institute of Family Studies, *Annual Report 2015–16*, p. 7.

55 Australian Institute of Family Studies, *Annual Report 2015–16*, p. 7.

performance section of the annual report, in line with subsection 17AF(1)(a) of the *Public Performance and Accountability Rule 2014*.

3.58 The committee notes that the majority of AIFS' deliverables and KPIs were not met. This was largely attributed to a fiscally constrained operating environment. The committee suggests that greater analysis of factors leading to deliverables and KPIs not being met—particularly if it is expected these factors will impact on AIFS future deliverables and KPIs—would add further substance to the report. Further to the committee's first report in 2016, the committee reminds AIFS that more discussion of the enterprise agreement, particularly a description of the non-salary benefits offered to employees, if any, would add to the report's comprehensiveness.

3.59 The committee considers the annual report of AIFS to largely meet the requirement of 'apparently satisfactory' under Senate Standing Order 25(20). The report is well presented and provides clearly articulated information.

National Disability Insurance Agency

3.60 The National Disability Insurance Agency (NDIA) is a corporate Commonwealth entity responsible for implementing the National Disability Insurance Scheme (NDIS). The NDIA reported that following a three-year trial of the Scheme, the full rollout commenced on 1 July 2016. NDIS will be fully implemented by 2019, and it is expected that approximately 460, 000 Australians with a disability will participate.⁵⁶

3.61 As at the 30 June 2016, the NDIA reported on a number of commendable achievements in its performance report including:

- support for 35 695 people, of which 30 281 had approval plans that documented the participants goals and mechanisms for achieving those goals;
- \$2404.3 million provided to support participants with approved plans;
- a 95 per cent satisfaction from participants, rating their planning experience as either 'good' or 'very good';
- an operating surplus of \$15.8 million, up from \$0.4 million in 2014–15.⁵⁷

3.62 The NDIA highlighted that in 2016–17, total expenses are forecasted to exceed \$4.2 billion, with \$3.5 billion required for support payments to NDIS participants.⁵⁸

3.63 The committee notes that during the reporting period the following reports, related to the work of the NDIA, were tabled in Parliament, including:

- a report on the ongoing progress of the rollout and administration of the NDIS by the Joint Standing Committee on the National Disability Insurance Scheme;⁵⁹

56 National Disability Insurance Agency, *Annual Report 2015–16*, p. iii.

57 National Disability Insurance Agency, *Annual Report 2015–16*, pp. 95–123.

58 National Disability Insurance Agency, *Annual Report 2015–16*, p. 122.

- a report on the appropriateness of affordable housing arrangements under the NDIS by the Joint Standing Committee on the National Disability Insurance Scheme;⁶⁰ and
- a report into the early intervention of services for children with disability by the ANAO.⁶¹

3.64 Given that these reports make recommendations relevant to the NDIS, the committee suggests that reports of equivalent relevance to the work of the NDIA – as the organisation responsible for implementing the NDIS – be noted in the annual reports of the NDIA, in accordance with the intent of paragraph 17BE(r) of the *Public Governance, Performance and Accountability Rule 2014*.

3.65 The committee considers the NDIA 2015–16 report to be 'apparently satisfactory'. The report contains important information regarding the NDIS rollout which is clearly articulated and presented through a diversity of formats to engage with a wide-ranging audience. The committee looks forward to examining future NDIA annual reports documenting the continued rollout of the nationally significant NDIS.

Senator Jonathon Duniam

Chair

59 Joint Standing Committee on the National Disability Insurance Scheme, *Second progress report on the implementation and administration of the National Disability Insurance Scheme*, p. 1.

60 Joint Standing Committee on the National Disability Insurance Scheme, *Accommodation for people with disabilities and the NDIS*, p. 2.

61 Australian National Audit Office, *Early Intervention Services for Children with Disability- Report No.24 2015–16*, p.7