# Recovery Coach - progress report

This form can be used to help the NDIA understand how the participant’s plan is going. Itis to be completed with the participant.

**How to complete this form**

Complete this form if you are:

* a psychosocial recovery coach (recovery coach)
* supporting the participant to implement their plan.

You should:

* Discuss with the participant and the people who support them, about what they would like this form to say about their progress.
* Support the participant to talk about their experiences and make sure they know what you are going to tell us in this form.

You must provide a completed progress report to us as outlined in the request for service (RFS). When you complete this form, you give us information about:

* The participant’s support needs and situation.
* The participant’s progress in implementing their plan to pursue their goals.
* The supports the participant is receiving.

## How do I return this form to the NDIA?

You can return this form to us by:

* Uploading through your my NDIS provider portal. For help to do this go to [provider portal and resources.](https://www.ndis.gov.au/providers/working-provider/myplace-provider-portal-and-resources)
* If you are unable to upload via the portal, then you may send an email with the report attached to enquiries@ndis.gov.au .

**Date:** Click here to enter a date.

## Participant details:

|  |  |
| --- | --- |
| Name: | Click or tap here to enter text. |
| NDIS number: | Click or tap here to enter text. |
| Plan start date: | Click here to enter a date. |
| Plan end date: | Click here to enter a date. |

## Provider details:

|  |  |
| --- | --- |
| Provider: | Click or tap here to enter text. |
| Person supporting to complete this report: | Click or tap here to enter text. |
| Phone number: | Click or tap here to enter text. |
| Email address: | Click or tap here to enter text. |

## **How are you engaging with the participant?**

|  |  |
| --- | --- |
| Agreed frequency of contact with the participant: | Click or tap here to enter text. |
| Nominated contact (e.g. nominee, child representative or N/A): | Click or tap here to enter text. |
| Primary contact method: | Click or tap here to enter text. |
| Primary contact details: | Click or tap here to enter text. |
| Secondary contact method: | Click or tap here to enter text. |
| Secondary contact details: | Click or tap here to enter text. |
| Other key contact: | Click or tap here to enter text. |
| Other key contact details: | Click or tap here to enter text. |

## Participant statement

### I acknowledge that I have completed this form with my recovery coach or supported my recovery coach to complete this form.

|  |  |  |
| --- | --- | --- |
|  | What is working well?*What are the things you are enjoying or progressing with?* | What has changed?*What are some of the things which have changed for you in the last 12 weeks or since your last report?* |
| When thinking about what is working well or what has changed, some helpful areas of your life to consider could be:* Education, finance and employment
* Living arrangements
* Physical health and community Connections
* Mental health and wellbeing
* Life skills (e.g., *shopping, managing finances, transport, cooking etc*)
* Cultural and personal Identity (e.g., *Hobbies, interests, creative community programs, e.g., music, spiritual, sport, exercise, writing, drama, etc.*
 |  |  |

**Participant goals**

Use this table to tell us how you are going with pursuing your goals.

How far you pursue your goals is up to you. You can tell us if you have not made as much progress towards your goal as you hoped.

| **Participant goals** | **How do you feel you are progressing with your goals?** 1. No real progress for me
2. Not as much progress as I’d like
3. Some progress
4. Mostly progressing well
5. Progressing well
 | **Recovery coach comments***What are the next steps for you to assist the participant pursue their goal?**Were there any obstacles impacting you in supporting the participant pursue their goal?*  |
| --- | --- | --- |
| **1.** Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| **2.** Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| **3.** Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| **4.** Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |

### Celebrations – achievements or progress

Use this section to talk about any achievements or milestones you would like to share in this plan period, or any progress you have made that should be celebrated. No achievement or progress is too small to mention. You could attach (e.g.) a photo or a screenshot or a piece of writing or art if you choose to, to celebrate a milestone you have achieved or progress you made towards your recovery or personal goals in this plan period.

 **Recovery coach additional comments**

### Community and mainstream supports

Mainstream and community supports are the supports you get outside the NDIS.

You can get mainstream supports from government funded services. Sometimes they are essential supports like health care. Or they are supports that help us get the most out of life, so you can work and study.

Community supports are the supports you can get from community services. For example, you can get supports from community groups, non-government organisations, sporting clubs, local councils, church groups and charities.

### New community and mainstream supports

| **Are there community or mainstream supports you are wanting to connect to?** | **Recovery coach comments***What steps have been, or will be, to support the participant connect to the support?* |
| --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

**Your current community and mainstream supports**

| **Current community and mainstream supports** | **Is the community and mainstream support meeting your needs?**1. Not at all
2. Not as much as I would like
3. Somewhat
4. Most of the time
5. Yes, it is meeting my needs
 | **Recovery Coach comments***Were there any obstacles impacting you in supporting the participant maintain or improve their community or mainstream support?* |
| --- | --- | --- |
| Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |

### NDIS funded supports

Tell us about the current NDIS funded supports in your plan.

| **Support Budget** | **Are the service/supports currently meeting your needs?**1. Not at all
2. Not as much as I would like
3. Somewhat
4. Most of the time
5. Yes, it is meeting my needs
 | **Recovery coach comments***Have there been any interruptions or barriers to the participant’s supports during this period?**Are there other supports or options you are helping the participant consider? If so, list below.*  |
| --- | --- | --- |
| **Core** | Choose an item. | Click or tap here to enter text. |
| **Capacity building** | Choose an item. | Click or tap here to enter text. |
| **Capital** | Choose an item. | Click or tap here to enter text. |

### Referrals, assessments and reports

Use this table to tell us about any referrals, assessments or reports your Recovery Coach is supporting you to gather during the current plan.

For example, a recent OT assessment report that has new recommendations to assist you.

If you have referrals, assessments or reports, attach them to this form.

**Note**: If you have a support coordinator who is also assisting you to gather referrals, assessments or reports which are referenced in the support coordination report, you do not need to list them again here.

| **Are there assessments or reports your recovery coach is supporting you to gather?** | **What is the status in obtaining the referral/assessment/report?** | **If the referral/assessment/report is not submitted- what are the expected timeframes to having it finalised?** | **Have any barriers been identified in gathering the referral/assessment/reports?** |
| --- | --- | --- | --- |
| Click or tap here to enter text. | Choose an item. | Choose an item. | Click or tap here to enter text. |
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## **Privacy and your personal information**

### Collection of your personal information

The National Disability Insurance Agency (NDIA) would like some personal information from you to simplify your engagement with the NDIS. Any personal information you provide to the NDIA is safe under the National Disability Insurance Scheme Act 2013 and the Privacy Act 1988. You can also ask to see what personal information (if any) we hold about you at any time and can seek correction if the information is wrong.

### Personal information use and disclosure

The NDIA will use your information to support your involvement in the NDIS.

The NDIA will NOT use any of your personal information for any other purpose, or disclose your personal information to any other organisations or individuals (including any overseas recipients), unless authorised by law or you provide your consent for us to do so.

### The NDIA’s privacy policy describes

* How we use your personal information.
* Why some personal information may be given to other organisations from time to time.
* How you can access the personal information we have about you on our system.