

Independent Advisory Council to the NDIS

Attachment B

Improper use of payments in self-management and balancing the fraud response

JULY 2017

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Executive Summary

The purpose of this paper is to strengthen Agency effort to prevent, detect and control improper payments in self-management, by proactive advice that explores the perception and reality of improper payments by participants who self manage or use an intermediary to manage their budget. The Agency practice of using risk-based analysis will facilitate the appropriate balance between the perception and reality of fraud and the appropriate response at the individual and Scheme levels.

There is a perception that participant directed services are vulnerable to fraud. This is seen in the UK, the US and in preliminary reports in the NDIS. The evidence of actual audits however does not validate these fears with audits undertaken by national audit agencies reporting very few cases of fraud and that most direct payment users are careful, cautious and judicious in the way they use their funding.

The approach to audits of self-management in the UK, US and Australian states and territories favours a focus on prevention. It is argued that ensuring informed decision making about whether to take on self-management requires the availability of alternate options that provide control and choice at a level similar to self-management.

Information, capacity building, active support and the use of intermediaries provide important risk mitigation strategies to prevent improper payments and support participants who choose to self-manage. Strategies for detection and control are also explored.

Introduction

The IAC has welcomed the Agency commitment to increase the rate of adoption of self-management to 30% of participants and has written extensively as to strategies that will promote its successful implementation. In the midst of the rapid roll-out to reach projected funding levels of \$22billion by 2020, the IAC recognises the importance of ensuring payment integrity in self-management as in all other areas of NDIS operation.

The purpose of this paper is to provide proactive advice that explores the perception and reality of improper payments by participants who self manage or use an intermediary to manage their budget.

The paper will:

- compare the perception and reality of improper payment in UK, US and Australian self-management type programs (i.e. where participants self-manage or who use intermediary services to manage their budget)
- identify possible sources of improper payments including a comparison between self-managed and traditional services

- review reports in the UK, US and Australia to describe risk mitigation strategies in relation to participants who self manage or use intermediary services
- identify key themes and immediate steps to inform NDIS practice.

Note about language: Each jurisdiction has its own language to describe what the NDIS describes as self-management. Programs with similar characteristics in the UK are known as personal budgets and direct payments, in the US as participant directed programs and Cash and Counselling and in Australian states and territories as direct payment and shared management.

Improper payments and the extent and perception of fraud

National audits of self-managed payments in the UK and US do not validate the perception of a high incidence of fraud in these options. Exploration of the nexus between the flexible use of support to meet agreed outcomes and improper payments may provide important insights.

Understanding the nature of improper payments is important to responding effectively. There is a continuum of improper use of funds among participants who self-manage with error at one end of the spectrum and deliberate deception or fraud at the other.

The vulnerability of self-direction programs to fraud was highlighted in the US in the 2012 audit report *Personal care services: trends, vulnerabilities and recommendations for improvement*¹. Although the audit is primarily about agency directed services and does not cite any identified incidents of fraud in the self-managed programs audited for the report, the report argues that participant directed programs are highly vulnerable to fraud.

The actual audit results of the US Cash and Counselling Demonstration and Evaluation (CCDE)² (a participant directed model) demonstrate that the perception is not borne out in reality. The evaluation included an examination of the incidence of fraud and found that program counsellors in Cash and Counselling reported very few cases of fraudulent use of the individual's allowance.

¹ US Dept. of Health and Human Services, Office of Inspector General (2012, November) *Personal care services: trends, vulnerabilities and recommendations for improvement*, Accessed at <https://oig.hhs.gov/reports-and-publications/portfolio/portfolio-12-12-01.pdf> 16 March 2017

² Brown, R., Carlson, B., Dale, S., Foster, L., Phillips, B., & Schore, J., (2007) *Cash and Counselling: Improving the lives of Medicaid beneficiaries who need personal care or home and community based services*, Final Princeton, NJ: Mathematica Policy Research Accessed at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1955332/> on 16 March 2017

Similarly in the UK, the Audit Commission³ viewed personal budgets and direct payments as a significant new fraud risk. The Commission reported on the growth of fraud in social care⁴ commenting however on the lack of certainty as to whether this growth reflected true growth in fraud or improved detection. Once again, the actual audit findings of the UK National Audit Office 2016 *Review of personalised commissioning in adult social care*⁵. The audit reported that authorities visited did not report an increase in fraud associated with personal budgets and direct payments although they heard of specific examples. The Audit Office Report indicated confidence in detection strategies implemented in 2014 whereby authorities must submit data on those receiving personal budgets to the National Fraud Initiative⁶ where data matches can indicate fraud.

The US and UK experience is reflected in the 2010 report by the Social Policy Research Centre⁷ that reported West Australian evidence that in the 20 years in which direct payments had been available in that state, only a small number of cases were funds not used as intended. The report commented that most direct payment users are careful, cautious and judicious in the way they use their funding. The officials concluded that consumers have a vested interest in using the money wisely, as they need it daily to provide disability support for such basic requirements as assistance to get out of bed in the morning. This finding is also supported by the Victorian Audit Office report into Individualised funding for disability services that reported “comprehensive audits of all direct payment users during its trial found no instances of funds misuse”⁸.

Source of improper use of funds

Experience from NDIS trial sites indicate that key risks related to providers falsifying payment requests including drawing down the plan without participant knowledge, claiming for weekend and public holiday rate when service was delivered on a week day and offering

³ Audit Commission, (2014) *Protecting the public* 2014

⁴ Local authorities detected 438 cases of social care fraud in 2013-14 (across all forms of social care including direct payments), more than 3 times the number in 2009-10.

⁵ UK National Audit Office 2016 Review of personalised commissioning in adult social care, Access at <https://www.nao.org.uk/report/personalised-commissioning-in-adult-social-care/> 16 March 2017

⁶ The National Fraud Initiative (NFI) is an exercise that matches electronic data within and between public and private sector bodies to prevent and detect fraud. Accessed at <https://www.gov.uk/government/collections/national-fraud-initiative> 16 March 2017

⁷ Fisher, K., et al (2011) *Effectiveness of individual funding approaches for disability support occasional paper no. 29*, Social Policy Research Centre

⁸ Victorian Audit Office (2011) Individualised funding for disability, Accessed at <http://www.audit.vic.gov.au/publications/20110914-Disability-Funding/20110914-Disability-Funding.html> 16 March 2016

goods and services efficiently at a lower price but applying maximum price regardless. Fraud of this nature could not be via self-management.

Comparing abuse of participants in self-management type programs with participants in more traditional services, new English research⁹ found that people receiving a direct payment were no more likely to experience financial abuse than people using traditional services and were less likely to experience financial abuse than those whose budgets were managed by Local Councils¹⁰. The financial abuse experienced by direct payment users was most likely to have been perpetrated by home care workers in more deprived areas, potentially pointing to a link between poverty and financial abuse¹¹.

UK reports¹² identify fraud risks as including:

- doubtful disability: a person falsely claiming that they need care
- misappropriation of funds:
 - person gaining access to the direct payment account and misappropriating the money so that care costs could not be met
 - person controlling the direct payment account
 - continuing to make claims after use has died
 - not using the money to pay for the care of the vulnerable person
 - engaging in false accounting through forgery of accounts records or payslips to allow money to be misappropriated
- fictitious carer of carer hours exaggerated
- counterfeit documentation

Improper use of funds in self-management type programs

⁹ Ismail, M., Hussein, S., Stevens, M., Woolham, J., Manthorpe, J., Aspinal, F., Baxter, K. & Samsi, K., *Do personal budgets increase the risk of abuse? Evidence from English national data*, Journal Soc.Pol. (2017) 46, 2, 291-311 Cambridge University Press 2016

¹⁰ Ismail, *ibid*, table 2, p301

¹¹ Ismail, *ibid*, p306

¹² Tameside Metropolitan Borough (2016) Direct payment fraud Accessed at <https://www.cipfa.org/~media/.../20160617-nwargg-direct-payment-fraud-pptx?la> 16 March 2017
Audit Commission, 2014, *Protecting the public purse*, accessed at <http://webarchive.nationalarchives.gov.uk/20150421134146/http://www.audit-commission.gov.uk/> 16 March, 2017

All the sources identified above could be present in the NDIS including in self-managing participants especially while support for self-management is not well developed. Overseas experience and anecdotal local evidence however suggests that most improper use of funds is a result of lack of policy clarity or communications as to what can be and cannot be purchased with reasonable and necessary support. This is especially likely in an environment where that which is allowed in state and territory schemes is broader than that which is allowed in the NDIS. Participant education in the light of policy clarification as to the framework for determining what can appropriately be purchased in reasonable and necessary support, what are personal responsibilities and what are the responsibilities of other service systems will provide important strategies to mitigate the erroneous use of funds.

Within the NDIS there is tension as to whether, for example, participation costs that support inclusion and the development of informal support can appropriately be met from reasonable and necessary support or whether they are personal expenses that must be met by the participant. The IAC has argued elsewhere¹³ that the key criteria as to the proper use of funds relates to achieving participant outcomes.

Table 1 identifies the implication of three policy settings for judgements in relation to participation costs

Policy setting	Payment for participation costs: Proper or improper use of funds?	Implication
No policy	Payment considered proper by those who take an outcomes approach and an error by others	Inconsistency across Scheme Participants feel weary
Policy clarification via a list of allowable and disallowable expenses	Payment considered an error or improper	Consistency across Scheme No flexibility Creative options may be lost Value of self-management to participant may be reduced

¹³ IAC (2016) *Enhancing self-direction and self-management in the NDIS*

Policy clarification in relation to participant outcomes	Payment considered proper if related to outcomes	Consistency across Scheme Flexibility and value for money promoted Encouragement of self-management
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Other concerns in relation to improper payments to self-managing participants include the risk of unlawful employment practices (including the unapproved employment of family members) and the lack of key protections offered by the Quality and Safeguards Framework through the use of unregistered providers. A planned approach to risk mitigation based on an assessment of perceived and actual risks will be an important element of both preventing and detecting improper payments and providing a safeguard to vulnerable participants.

The question of what is an appropriate use of support resources was also a tension in the US, UK and in the development of self-directed options in states and territories as systems sought to extend options for choice and control.

In the UK, the Chartered Institute of Public Finance and Accountancy (CIPFA)¹⁴ advises local authorities to encourage people to find alternative ways of meeting their needs and achieving the outcomes they are seeking. Local authorities are encouraged to describe 'flexibility' to social care users in relation to outcomes rather than inputs and to local authorities as alternate ways to meet agreed outcomes. As a result people would normally only be required to ask permission for using their direct payment or personal budget differently if they wanted to pursue different outcomes.

Direct payment and shared management programs in Australian states and territories allowed support resources to be used to meet participation costs, small pieces of technology or equipment that aided independence and costs faced by informal supporters in the process of providing unpaid support.

Policy clarification and participant education are important preventive strategies. Detection and control strategies are also critical to maintain the integrity of self-managed payments. The requirement of a separate bank account to which the Agency has access together with risk assessment matrices and data analytics to identify perceived and actual risk will strengthen detection processes to enable the Agency to take corrective action early. The

¹⁴ Chartered Institute of Public Finance and Accountancy (CIPFA), *Self directed support: a Guide for Local Authority Finance Managers* at 4.10 & 4.11

curtailment of self-management for participants found to be deliberately¹⁵ defrauding the NDIS will send a strong message about the responsibility of self-management.

¹⁵ Subsequent to policy clarification and education in a format clearly understood by the participant

Observations from the NDIS co-design self-management workshop

Issues of prevention, detection and control of improper payments were part of the discussion at the NDIS co-design self-management workshop in November 2016. In seeking to extend self-management, the workshop recommended the implementation of:

- an assurance framework based on periodic self reporting against plan and budget (quarterly, 6 monthly or annually), audited random samples over time e.g. every 3 to 5 years, participants opening a separate bank account and simple self reporting of less than one page.
- training, education and support
- encouragement of the role for intermediaries
- further work on issues of flexibility and value for money to inform policy clarification.

Further insights recommend that an assurance framework is based on sampling that is risk based and uses data analytics to target reviews.

Approaches to audit

Auditing participants who self-manage needs to balance *“the need to ensure public money is spent appropriately and the need to promote creative and individual solutions to meet people’s needs.”*¹⁶ Consistent with insurance principles, a bias in the audit process toward prevention builds the capacity of participants and NDIS systems to assure effective practice.

Prevention is favoured in the Scottish system in relation to self-directed support. The framework for financial monitoring and record keeping¹⁷ uses a proportionate risk based approach to provide guidance on the level of record keeping required to maintain accountability in the use of public funds whilst at the same time promoting creative and innovative solutions.

The Scottish guidance to local authority finance managers advises local Councils to consider a phased support package in the early stages of the provision of direct payments with early support including additional input from the financial monitoring officer to introduce the recipient, at an early stage, to the level of financial record keeping necessary. This early investment may enable the local authority to more clearly set out the standards required within an environment of support¹⁸.

¹⁶ CIPFA, Op cit p3

¹⁷ CIPFA, Op cit p3

¹⁸ CIPFA, Op cit p9

Prevention is also a focus of the 'light touch' auditing framework developed by Think Personal Act Local (TLAP)¹⁹. The TLAP framework assist Councils to encourage and support people to use direct payments effectively by clarifying the responsibilities of all parties, developing simple easy to use resources and providing specialist direct payment support so that participants are appropriately skilled to undertake their responsibilities.

Prevention is a critical underpinning to the approach of the National Resource Centre for Participant Directed Services (NRCPDS) in the US with education aimed at participants, providers and financial management staff and a focus on clarification of program parameters.

Similarly, the Australian review of effective approaches to individualised funding by the SPRC reported that good approaches to individualised funding offer administrative support to people with disability if they need to manage the technical, financial and accountability requirements, in particular when the funding is provided directly to the person. The review identified a wide range of mechanisms that were effective in supporting participants to fulfil their responsibilities including facilitators, brokers, network builder, financial intermediaries, advocacy and consumer organisations, micro boards, independent living centres or networks of family members, guardians or friends²⁰.

Mitigation strategies for people who self-manage

The UK has a mature system for prevention, detection and responding to the improper use of funds with multiple resources readily available.

The first mitigation strategy is making sure that people who take a direct payment know what it involves and have the skills or support to undertake their responsibilities. UK documentation on direct payments for social care for older people²¹ advise local authorities to use a supportive developmental approach to ensure participants make an informed decision about whether to take on a direct payment. Local authorities are encouraged to:

- not put pressure on people to accept or directly manage direct payments. Instead, clarify the full range of options for managing personal budgets and ensure other options available give people as much choice and control as they want

¹⁹ TLAP is a national partnership of more than 50 organisations committed to transforming health and care through personalisation and community-based support. The partnership spans central and local government, the NHS, the provider sector, people with care and support needs, carers and family members. TLAP is hosted by partner organisation Social Care Institute for Excellence (SCIE) in London.

²⁰ SPRC 2011, p34

²¹ Poldervaart, H., &Malenczuk, L., 2013, *Direct payment for social care: options for managing the cash*, Age UK, London

- review the options available to users (e.g. bank accounts, pre paid cards) providing the advantages, disadvantages and common pitfalls
- encourage users to think not just about their current needs but also of contingencies
- when providing tips, make sure they are practical.

For those using direct payments, risk based financial monitoring arrangements have been put in place with guiding principles that:

- it is reasonable to ask people to account for how they have spent their funds in achieving their support plan outcomes. This balances independence and choice with personal responsibility
- financial monitoring arrangements should be 'light touch' and proportionate to the level of risk involved
- local authorities can set a local minimum level of expenditure below which receipts are not required
- flexibility within clear boundaries, to spend the resources allocated creatively in ways that reflect the agreed outcomes. The key test of flexibility is the ability to use direct payments in ways other than those identified in the original support plan but which meet the agreed outcomes. Flexibility is described in relation to outcomes, not inputs.

Mitigation strategies discussed in the UK literature include:

- the use of data analytics to identify patterns of fraud and risk factors in large data sets
- the use of risk assessment matrices to assess perceived and actual risks and to determine the support needed to use a direct payment
- monitoring and providing support at a frequency and depth responsive to need and risk
- requiring a separate bank account for social care funds
- providing policy clarity as to what is permissible and what is not
- ensuring participants understand their responsibilities and obligations including educating participants to identify improper payments
- the use of payment cards that offer participants and local authorities more effective and responsive systems for payment.

Payment cards have many advantages for participants and for government. Advantages for participants include averting unintentional debt and overspend by preventing participants accessing more than the pre-loaded limit. Payment cards enable participants to manage their account on line or by telephone and to include an additional card holder to assist with management of the account.

For local authorities, payment cards are a valuable risk mitigation tool enabling Councils to monitor account activity, identify account management issues, manage payment adjustments

and facilitate data analytics that can identify risk factors and fraud. Payment cards have been shown to improve records by consolidating client's care needs and direct payment expenditure in one place and can reduce the administrative burden and improve budgetary control providing ready evidence available for internal audit.

Evidence from the SPRC review of effective mechanisms identified risk management strategies employed by states and territories for participants with a direct payment including:

- funds paid quarterly to the person
- clear policy, funding guidelines and parameters for how the funds can and cannot be spent
- annual individual plans including a funding plan
- Local Area Coordinators providing ongoing monitoring for consumers in receipt of direct payments
- complex financial issues and cases of improper use of funds transferred to a management agency for resolution
- Regular monitoring and auditing processes in place

Information and capacity building for persons and their families in receipt of a direct payment were considered highly desirable.

The evaluation of the Victorian Direct Payments Project²² outlines the range of financial, administrative and accountability requirements of the direct payment user:

- Direct payment user signs a deed of agreement with DHS
- Consumer opens a bank account for the sole purpose of the payments
- DHS transfers funds each month according to the funding schedule
- Consumer has responsibility for arranging the purchase an payments of their chosen service and supports
- Consumer has responsibility for complying with the accountability requirements of their chosen services and supports
- Consumer has responsibility for complying with the accountability requirements as specified in the deed and direct payments users manual.

²² LDC Group 2007, ppix-x, Evaluation of direct payments project, report prepared for the Dept. of Human Services Victoria , reported in Fisher, K. et al (2010)

Intermediaries as a mitigation strategy

The IAC notes the renewed Agency work in relation to intermediaries as a strategy for increased participant self-direction and self-management.

The US experience suggests that financial intermediaries ensure the integrity and regulatory compliance of self-directed programs.

The National Resource Centre for Participant Directed Services (NRCPDS)²³ is a national resource that assists states, agencies and organizations in offering participant-directed services to people with disabilities. Their knowledge of practice on the ground enabled the NRCPD to respond to the generalist concerns about the vulnerability to fraud of self-directed programs in the 2012 Office of Inspector General Report²⁴ by outlining the many audit recommendations in relation to the prevention and detection of fraud that were already in place.

NRCPD argue that the financial management service provider is an important check and balance to ensure that even with ample participant control and some level of decentralisation, the publically-funded programs operate as intended and in accordance with waiver or Medicaid authority and federal state and local regulations.

The role of financial management services extends beyond payment and taxes of participants directing their own funds. Their actual role is more robust and includes fraud detection and prevention roles in pre-payment controls, post-payment reporting and participant and service education (see Appendix B) giving the funder the assurance of an independent third party that payments are in accordance with program rules and federal, state and local regulations.

Many Australian states and territories (ACT, NSW, Q'ld, Victoria, WA) used shared management as valued strategy to provide the participant with choice and control with the support of an organisation that undertook the financial and legal responsibilities. This was a strategy much favoured by participants and gave state and territory governments assurance that risks were being appropriately managed. The use of intermediary services as a risk mitigation strategy is demonstrated in the SPRC 2010 report²⁵.

²³ The NRCPDS originally served as the National Program Office for the Cash & Counseling Demonstration and Evaluation from 1998-2009.

²⁴ US Dept. of Health and Human Services, Office of Inspector General (2012, November) *Personal care services: trends, vulnerabilities and recommendations for improvement*, Accessed at <https://oig.hhs.gov/reports-and-publications/portfolio/portfolio-12-12-01.pdf> 16 March 2017

²⁵ Fisher, K., et al 2010 at 5.4

Key themes

Perception borne out by evidence

There is a perception that participant directed services are vulnerable to fraud. This is seen in the UK, the US and in preliminary reports in the NDIS. The evidence of actual audits however does not validate these fears with audits undertaken by national audit agencies reporting very few cases of fraud and that most direct payment users are careful, cautious and judicious in the way they use their funding.

Preventative approaches favoured

The approach to audits of self-management in the UK, US and Australian states and territories favours a focus on prevention. It is argued that ensuring informed decision making about whether to take on self-management requires the availability of options alternate to self-management that provide control and choice at a level similar to self-management.

Information, capacity building, active support and the use of intermediaries provide important risk mitigation strategies to prevent improper payments and support participants who choose to self-manage.

Detection and control contribute to system integrity

Detection and control strategies are also critical to maintain the integrity of self-managed payments. The requirement of a separate bank account to which the Agency has access together with risk assessment matrices and data analytics to identify perceived and actual risk will strengthen detection processes to enable the Agency to take corrective action early. The curtailment of self-management for participants found to be deliberately defrauding the NDIS will send a strong message about the responsibility of self-management.

Strategies to prevent, detect and control improper payments

Prevention

- The use of risk assessment matrices to assess perceived and actual risks and to determine the support needed to use a direct payment
- Policy clarification as to what is permissible and what is not
- Ensuring participants understand their responsibilities and obligations including educating participants to identify improper payments
- Funds paid quarterly to the person
- Promotion of the use of intermediaries including financial management services

Prevention and detection

- Requirement for a separate bank account for social care funds
- The use of payment cards that offer participants and local authorities more effective and responsive systems for payment.
- Monitoring and support at a frequency and depth responsive to need and risk

Detection

- Use of data analytics to identify patterns of fraud and risk factors in large data sets

Control

- Transfer to a management agency for resolution

Intermediaries as a preventative strategy

Intermediaries have been successfully used by Australian states and territories and in the US to enable participants to have significant choice and control backed up by an agency charged with the financial and legal obligations.

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