



Australian Government

Department of Health, Disability and Ageing



Disability Safeguards Consultation

Consultation Paper

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Acknowledgements

In the spirit of respect and reconciliation, Australian Healthcare Associates acknowledges the traditional custodians of Country, the Aboriginal and Torres Strait Islander peoples, and their continuing connection to land, waters, sea, and community.

Australian Healthcare Associates is located on the lands of the Kulin Nation. We pay respect to Elders past and present.

Australian Healthcare Associates acknowledges people with disability, particularly those individuals who have experienced or are continuing to experience violence, abuse, neglect or exploitation. We also acknowledge their families, supporters and representative organisations. We thank people with disability, supporters and representative organisations for their interest in and contributions to this work, noting that this consultation is one of many in recent years.

Preamble

The Department of Health, Disability and Ageing is launching the first round of public consultation for the development of a Disability Support Quality and Safeguarding Framework (the Framework) and Disability Support Ecosystem Safeguarding Strategy (the Strategy). We want to first acknowledge the generosity of people with disability who have already provided vast contributions across many consultations, including the Independent Review of the National Disability Insurance Scheme (NDIS Review) and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission).

The Australian Government committed to developing the Framework and the Strategy as part of the response to the Disability Royal Commission. The Framework will be developed first.

The success of this work depends on genuinely placing the needs and voices of people with disability at its centre. To ensure we do this, we are coming to you early in this process. This means that many details of what the Framework might look like are still being developed and will be informed by this process.

We know that the Framework must contribute to improving the safety and quality of supports and services for people with disability. This consultation paper explores ideas, components and definitions for this Framework. None of these have been agreed yet.

Prior to preparing this consultation paper, significant work was undertaken to capture and understand what people with disability, providers and other stakeholders have already told us across many different consultations, inquiries and engagements.

In taking a “first principles” approach to this consultation, we are not seeking to recapture or ask you to say again what you have already told us, the NDIS Review and the Disability Royal Commission. Rather, we want to ensure that everyone has an opportunity to provide feedback, ideas and share experiences to support the design and implementation of the Framework and the Strategy.

This consultation is part of a bigger process to help shape the Framework and the Strategy. So far, we have worked with:

- the Australian Federation of Disability Organisations, who helped guide the consultation approach and this consultation paper
- a disability lived experience team and a group of Disability Representative Organisations, who advised on how to evaluate the Framework
- the National Disability Insurance Agency (NDIA), who shared ideas to help guide the consultation approach.

In the coming months, we will use the insights you have already generously shared, the information provided in this consultation and the work of those above, in close collaboration with the NDIS Quality and Safeguards Commission, the NDIA and states and territories to begin drafting a Framework. This will coincide with further rounds of targeted consultations, including with First Nations people. All opportunities to engage with this process will be available on [our consultation website](#) and we encourage you to subscribe to [the NDIS Reforms mailing list](#) for updates to this and broader NDIS reforms.

If you have any questions or wish to discuss this work further, please feel free to contact the policy team directly at DisabilitySafeguardingPolicy@health.gov.au.

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1 Introduction

The Australian Government (the government) wants to improve safeguards for people with disability. The government is developing a:

- Disability Support Quality and Safeguarding Framework (the Framework), and
- Disability Support Ecosystem Safeguarding Strategy (the Strategy).

The Framework and the Strategy are intended to support *all* people with disability, within and outside the National Disability Insurance Scheme (NDIS).

1.1 Why do we need the Framework and the Strategy?

The Framework and the Strategy will aim to unify disability quality and safeguarding arrangements for all people with disability across Australia, whether they are NDIS participants or not. The government is doing this to better protect the rights of people with disability, so they are safe from harm, abuse, neglect or exploitation.

The [NDIS Quality and Safeguarding Framework](#) was introduced in 2016, while the NDIS was being rolled out to the states and territories. The framework was developed at a time of significant change and uncertainty. In 2023, the [Independent Review into the National Disability Insurance Scheme](#) (NDIS Review) determined that the framework is now outdated.

The [Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability](#) (Disability Royal Commission) released its final report in September 2023. One of the key findings was that, despite current safeguards, people with disability face safety concerns such as violence and abuse at much higher rates than people without disability. Importantly, the Disability Royal Commission identified that this is not limited to NDIS participants and supports:

“mistreatment of people with disability can occur outside of settings and support provided under the National Disability Insurance Scheme (NDIS). Independent and accessible pathways for reporting violence, abuse, neglect and exploitation experienced by people with disability beyond those offered by the NDIS Quality and Safeguards Commission (NDIS Commission) are essential”.

The Disability Royal Commission’s final report provided recommendations for improving safeguards for people with disability, which included measures to ensure:

- nationally consistent safeguards
- independent oversight
- improving provider safeguarding practices.

As part of its response to the Disability Royal Commission, the government has committed to establishing the Framework and the Strategy.

1.2 What will the Framework and the Strategy do?

The Framework and the Strategy are intended to support all people with disability, within and outside the NDIS. The Framework and the Strategy will:

- set the standard and culture of the systems, services, supports, people and organisations that together meet the needs of people with disability
- empower people with disability to access quality supports and use safeguards
- unify and strengthen safeguards for people with disability.

1.3 About this project

The Framework and the Strategy will be shaped by what people with disability have said in past consultations and inquiries, and by what they tell us in this consultation.

The government has engaged Australian Healthcare Associates (AHA) to consult on its behalf. AHA is a health and human services consulting firm with expertise in disability and consultation.

AHA is working with the Australian Federation of Disability Organisations (AFDO) to ensure people with disability can contribute to the design and delivery of this project. AFDO is a national voice for disability advocacy, dedicated to advancing the rights, inclusion, and full participation of people with disability across Australia. AFDO has the capacity to seek input from representatives of specific disability groups as required, including First Nations and culturally and linguistically diverse people with disability.

The consultation will be delivered in 4 steps, each aligned with the government's planned development of the Framework and Strategy:

- Step 1: Discover
- Step 2: Follow-up
- Step 3: Test
- Step 4: Refine

Steps 1 and 2 will help shape the first version of the Framework, while steps 3 and 4 will test and improve the draft Framework and support development of the Strategy.

This process ensures that the voices of the disability community and sector are meaningfully incorporated throughout the process, helping to shape a Framework and Strategy that reflect their needs and priorities.

The final findings of this project are expected to be provided to the Department of Health, Disability and Ageing (DHDA) in mid-June 2026.

Alongside this consultation, DHDA has asked ARTD Consultants (ARTD) to work with the disability community to create tools to:

- explain how and why the changes we want are expected to happen
- explain how quality and safety will be managed in the disability support system
- measure how well the Framework and the Strategy are working.

The work to do this is underway. A number of workshops have been held to hear ideas and understand different perspectives on these tools. The drafts of these tools will also be tested with people with disability.

The information gained from this and future planned consultations will be provided to ARTD to inform the creation of their tools.

There is also a dedicated team at DHDA working to understand and document what is already happening in the quality and safeguarding space, including the ways people with disability use the current safeguarding in place.

As the work continues, our understanding of the disability support system – and the Framework and the Strategy – will grow and change.

1.4 Purpose of this consultation

Past consultations have highlighted a range of views about quality and the essential components of effective safeguarding. We will use this consultation to get a more detailed picture of what the disability community and support sector think about:

- what “safeguards” means
- what effective safeguards look like
- what “quality” means.

These topics form the basis of this consultation paper. What we learn will inform the development of the Framework and the Strategy.

1.5 Who we want to hear from

We want to hear from:

- all people with disability (whether you are an NDIS participant or not), including First Nations people, people from culturally and linguistically diverse backgrounds, LGBTIQ+ people, older people and people from regional, rural and remote locations
- families of people with disability
- communication partners of people with disability (those who provide alternative or augmented communication)
- representative organisations, advocates and supporters of people with disability
- the disability support sector, including providers and workers (in Australian Government or state and territory government services that provide disability support)
- people working in relevant mainstream services (education, health, etc.)
- academics, researchers and specialists in quality and safeguarding, disability and disability service provision.

By understanding your perspectives, we can work together to strengthen safeguards, promote inclusion, and ensure people with disability have the support they need to lead independent lives.

There are multiple ways to contribute – see below for details.

1.6 How to get involved

AHA wants to know what you think. You can respond to this paper until **5 pm (AEDT) on 22 December 2025**. If you need more time, please contact us.

You can respond in the following ways:



Fill out the online survey

The online survey is based on this consultation paper. The survey questions are the same as the questions in this paper. The survey is available in 3 formats:

- [English](#)
- [Auslan](#)
- [Easy Read \(English\)](#)



Talk to us

You can tell us what you think over the phone or online (for example, Zoom or Teams).

To arrange a time, please:

Phone: 03 8632 9505 (between 9 am and 5 pm AEDT, Monday to Friday)

Email: disabilitysafeguards@ahaconsulting.com.au

You can use an interpreter to speak to us in a language other than English. See "[Free interpreters](#)" on the next page for details.



Write to us

Write a response (in any language) and submit it via:

Email: disabilitysafeguards@ahaconsulting.com.au

Post: Disability safeguards consultation
Australian Healthcare Associates
Reply Paid 86905
Locked Bag 32005
Collins Street East Vic 8003



Record a message

Record a video or voice message (in any language) and [submit it online](#).

If none of these work for you, please contact us and we will do our best to find another way you can contribute. You can also contact us if you have questions about the consultation.

Contact AHA

Email: disabilitysafeguards@ahaconsulting.com.au

Phone: 03 8632 9505
(between 9 am and 5 pm AEDT, Monday to Friday)

Post: Disability safeguards consultation
Australian Healthcare Associates
Reply Paid 86905
Locked Bag 32005
Collins Street East Vic 8003

Free interpreters

You can use an interpreter to speak to us in a language other than English. To access a free interpreter through TIS National, follow these steps:

1. Call 13 14 50 (between 9 am and 5 pm AEDT, Monday to Friday).
Calls are charged at the cost of a local call (except calls from mobiles).
There is no cost for the interpreter service.
2. Say the language you need.
3. Wait on the line for an interpreter (may take up to 3 minutes).
4. Ask the interpreter to contact Australian Healthcare Associates on 03 8632 9505.
5. Talk to us with the help of an interpreter.

1.7 Key terms

A note on language

We recognise that people have individual preferences for the language used to discuss disability. Some people prefer person-first language (for example, “person with disability”) whereas others prefer identity-first language (for example, “disabled person”, “Autistic”, “Deaf person”). In this paper, we mainly use person-first language, except where our research has shown a community preference for identity-first language.

When we refer to “people with disability”, we mean anyone who is d/Deaf (including people who identify as culturally Deaf), or who has a learning disability, or a sensory, physical, hidden, or mental health condition.

The following definitions will help you to understand what we mean when using key terms throughout this paper. Additional definitions are provided in relevant sections.

Safeguards

Safeguards are actions designed to protect the rights of people to be safe from the risk of harm, abuse and neglect, while maximising the choice and control they have over their lives. When we refer to “safeguarding”, we are referring to these actions. We provide examples of safeguards throughout this paper.

Note: This definition was developed for the [2016 NDIS Quality and Safeguarding Framework](#). In this consultation, we are seeking feedback on the definition of safeguards.

Formal safeguards

Formal safeguards are rules and actions that are taken by organisations and governments with formal responsibility for the safety of people with disability. They may be specific to disability services or include broader services and contexts, such as health care, education and workplaces. Some examples of formal safeguards are given in chapter 3.

Informal safeguards

Informal safeguards are everyday actions and support systems that contribute to someone’s safety and wellbeing. They involve family, friends and community connections.

Being connected to other people and services can be an informal safeguard. It can create opportunities for people to notice if someone needs more support or if something goes wrong.

Safeguarding

Safeguarding means taking steps to protect people with disability from harm, like violence, abuse, neglect, or exploitation. It includes both preventing problems before they happen and responding when something goes wrong.

Co-design

A collaborative approach to designing policy, products, services, or processes where subject matter experts and people with lived experience (for example, people with disability, their family and carers and representative organisations) work together.

Disability community

People with disability, their families and carers, their representative organisations and Disabled People's Organisations.

Disability support sector

Organisations and businesses involved in supporting or providing goods and services to people with disability, including service providers (including managers and workers), sector peak bodies, responsible government departments and agencies.

Mainstream services and supports

Mainstream services are services provided to the Australian public whether or not they have a disability. Mainstream services and supports are funded or provided by the government and can be used by the broader Australian community, including health, mental health, early childhood development, education, justice, housing, child protection, family support and employment services.

Rights

People with disability have the same rights as all other people (including rights under all relevant international human rights treaties to which Australia is a signatory). They also have the specific rights enshrined in the [Convention on the Rights of Persons with Disabilities](#) (CRPD). An [Easy Read version of the CRPD](#) is also available.

A rights-based approach involves considering human rights principles and actively promoting and protecting those rights. It recognises that:

- disability is a natural part of human diversity that must be respected and supported in all its forms
- people with disability have the same rights as everyone else in society
- impairment must not be used as an excuse to deny or restrict people's rights.

You can find out more about the rights of people with disability from the [Australian Human Rights Commission](#). Some states and territories have developed legislation to protect rights (such as the Australian Capital Territory's *Human Rights Act 2004*, Queensland's *Human Rights Act 2019* and Victoria's *Charter of Human Rights and Responsibilities Act 2006*).

Quality

The extent to which a service meets or exceeds an individual's needs and expectations, and the extent to which the service provider meets or exceeds the relevant service requirements.

2 What do we mean by safeguards and quality?

The [2016 NDIS Quality and Safeguarding Framework](#) defines “safeguards” as:

Actions designed to protect the rights of people to be safe from the risk of harm, abuse and neglect, while maximising the choice and control they have over their lives.

Examples of safeguards include worker registration, complaint systems and advocacy services.

The [2016 NDIS Quality and Safeguarding Framework](#) defines “quality” as:

The extent to which a support being delivered by a provider is able to meet or exceed a participant’s needs and expectations; and the extent to which that provider is meeting or exceeding the relevant NDIS requirements as implemented under the scheme’s quality and safeguarding arrangements.

Examples of quality include personalised care plans, treating people with dignity and empowering people to provide feedback.

We want to know what you think of these definitions.

Questions

Both the NDIS Review and the Disability Royal Commission have highlighted the need for stronger safeguards to better protect the rights, safety, and wellbeing of people with disability – while still supporting choice and control.

1. When you hear the words “safeguards” and “quality” in this context, what does it mean to you?
2. What do you like or dislike about the definition of safeguards? Is anything missing or confusing?
3. What do you like or dislike about the definition of quality? Is anything missing or confusing?
4. Do you have anything to add?

3 What are the components of effective safeguarding?

Effective safeguarding involves a range of actions by people, organisations, services and systems to ensure the safety, rights and wellbeing of people with disability.

In this consultation paper, we have summarised 5 common components of effective safeguarding that have emerged from more than 40 consultations conducted in Australia in the past decade. This consultation seeks to explore whether you agree with these components.

We invite you to reflect on these components and share your thoughts. You can respond to all 5 components, or just the ones you want to. You are also welcome to tell us about any other components of effective safeguarding that you think are important.

3. What are the components of effective safeguarding?

3.1 Effective safeguarding builds people's capability to understand and exercise their rights

When people know their rights and have support from friends, family or others they trust, they can feel more empowered to say what they need from services and speak up when something isn't right. People with disability are often not given enough information about their rights, options and safety. Sometimes the information that is available is not accessible to people with certain disabilities or other needs (for example, people who are blind or have low vision may need documents that are compatible with screen readers).

Definitions

Capability: A person's ability to access, understand and use information to make decisions, and to communicate their decisions (for example, the ability to choose the right service provider for their needs).

Services: Disability and mainstream services and supports.

Examples of ways to increase people's capability to understand and exercise their rights

- People get information in a way that works for them, like Easy Read, Auslan or other languages.
- People with disability are supported to build their decision-making and self-advocacy skills.
- Events and information help people to learn about their rights and where to get support.
- Peer support groups create opportunities for people with disability to connect, share experiences and strengthen their informal networks.
- People can talk to an advocate as soon as they need one.

Questions

5. Who would you tell if you did not feel safe?
6. How could it be made easier for you to tell someone you don't feel safe?
7. What makes it difficult for people to access, understand and use information to make decisions?
8. Do you have anything to add?

3. What are the components of effective safeguarding?

3.2 Effective safeguarding includes people with disability in planning, co-designing, implementing and improving their support systems

Services work best when they are shaped by the voices of the people they serve. Including people with disability in decision-making ensures their needs, experiences and perspectives directly influence how support systems are designed and delivered.

Examples of ways to include people with disability in planning, co-designing, implementing and improving their support systems

- People with disability co-design services to meet their needs.
- People with disability co-design and deliver training.
- People with disability co-design complaints and monitoring systems.
- Service providers ask people with disability for regular feedback about service quality and risks to safety.
- Service providers employ people with disability to help design and deliver programs, policies and services that meet the disability community's diverse needs.

Questions

9. What are ways we can support people with disability to shape their own support system?
10. Do you have anything to add?

3. What are the components of effective safeguarding?

3.3 Effective safeguarding builds services' capacity to deliver person-centred support

When services are person centred, staff think about everything that makes a person unique, including their culture, gender and preferences. Staff also notice if someone is not being cared for properly or might be being hurt or abused. If staff feel comfortable speaking up when they see something wrong, it can help keep everyone safe and can make everyone feel included.

Definitions

Person-centred support: The person is at the heart of everything. This includes what they want, what they care about and what helps them lead their best life. Everyone is unique, with their own likes, needs and strengths.

Examples of ways to build services' capacity to deliver person-centred support

- Services are supported to engage in co-design processes.
- Through training, service provider staff learn how to understand and include people with disability so they can give them the right support.
- Training recognises how disability can connect with other aspects of a person's identity.
- All staff are trained to recognise and prevent abuse, in accordance with initiatives such as [Zero Tolerance](#) by National Disability Services.
- Workers from diverse backgrounds, such as First Nations backgrounds, are supported to join the disability workforce.
- Staff who work with people with high support needs get additional training to make sure they can provide safe and skilled support.

Questions

11. What does person-centred support look like to you?
12. How can services get better at putting the person first?
13. Do you have anything to add?

3. What are the components of effective safeguarding?

3.4 Effective safeguarding ensures services are accountable for actively preventing and addressing harm

Monitoring and oversight help make sure that services are accountable and responsive. Good oversight also helps make sure people are getting the support they need and that their rights are respected. Providers who do not observe the rights of people with disability may be penalised.

People with disability should be able to speak up without fear of consequences. It can be hard for people with disability to raise concerns if something goes wrong or if they are being treated badly. Regular checks by independent visitors or government bodies help uncover problems like abuse, neglect, or the misuse of restraints. Unannounced visits make it harder for services to hide poor treatment.

Some people with disability live in places such as group homes or aged care facilities. In these settings, people with disability may rely on others for daily support. This can make it even harder to speak up.

Definitions

Monitoring: Watching services to ensure they are doing the right thing.

Oversight: Making sure that the rules are followed.

Examples of ways to prevent and address harm

- Independent inspectors visit disability services regularly to make sure people are safe and treated well.
- Inspections or audits of mainstream services (such as prisons and aged care homes) consider the rights of people with disability.
- Services create a safe environment for children and young people by adopting the [National Principles for Child Safe Organisations](#).
- People with disability and their supporters are given easy-to-understand information about what to do if things go wrong, including how and where to make a complaint.
- Complaints are addressed quickly and effectively.
- There is coordination between complaints bodies.
- Providers who do not observe the rights of people with disability are investigated and potentially prosecuted.
- People feel safe to report abuse and neglect without the fear of consequences.

3. What are the components of effective safeguarding?

Questions

- 14. Do you think the services you receive are held accountable to deliver quality and safe services?
- 15. Are there other forms of accountability you think would increase quality and safety?
- 16. What could be changed to keep services accountable?
- 17. Do you have anything to add?

3. What are the components of effective safeguarding?

3.5 Effective safeguarding requires systems to work together in a coordinated way

When services work together, it helps prevent people from falling through the cracks or being left without help. For example, someone may need both NDIS and hospital supports. If these services don't communicate or plan together, the person might miss out on support. Working together helps keep people safe, supported and included in their community.

Definitions

Systems: All the people, services, and rules that work together to support people with disability in their everyday lives. The systems may include NDIS, legal and justice systems, consumer protection agencies, social assistance, education and healthcare providers.

Examples of how to improve coordination

- Disability and other support services work together and make plans as a team to help people in a way that meets all their needs.
- NDIS staff work in places like hospitals to help people get the right support and connect services more easily.
- Jobs are created to help people with disability move between different services and understand what help is available.
- There are clear rules about safely sharing important information (like support history or safety concerns) between services, so people get help quickly while keeping their private information safe.

Questions

18. Do you have any examples of when services have worked well together?
19. Are there things that stop services working well together in your experience?
20. Do you have anything to add?

3. What are the components of effective safeguarding?

3.6 Additional information

Question

21. How else can we make safeguarding better? You can share a suggestion or anything else you think is important.

About you

We would also like to know a bit about you. This will help us to understand:

- if there are things that are important to certain groups or people
- who has shared their views, and whether there are certain groups or people who haven't yet contributed.

These questions are optional and you don't have to answer them if you don't want to.

If you respond via a survey or interview, we will ask you these questions, but you don't need to answer them. If you submit a written or recorded response, please consider including your answers.

Questions

22. What role(s) best describes you? (Pick all that apply.)

- Person with disability
- Family, friend or other member of a person with disability's support network
- Disability Representative Organisation, Disabled People's Organisation or peak body
- Provider or worker in the disability support sector
- Provider or worker in the mainstream services sector (education, health, police, etc.)
- Academic, researcher or specialist in quality and safeguarding, disability or disability service provision
- Other

23. If you are a person with disability, what type of disability/disabilities do you have? (You can describe this in any way that you would like.)

24. What area do you live in:

- Capital city
- Regional city or town
- Rural or remote area

25. What state or territory do you live in?

Note: Questions continue on the next page.

3. What are the components of effective safeguarding?

Questions (continued)

26. Do you identify with any of the groups below? (Pick all that apply.)

- Aboriginal and Torres Strait Islander peoples
- LGBTQIA+ people
- People from culturally and linguistically diverse backgrounds
- Older people

27. How old are you?

28. How do you describe your gender?

- Man
- Woman
- Non-binary
- Other

29. Your name and contact details

In acknowledgement of the time taken to share your thoughts, you can enter a draw to win one of 40 gift cards valued at \$100. If you would like to enter the draw please let us know your name and phone number or email address. We will keep this information separate from your survey responses to protect your privacy.

4 What happens next?

Further consultation

We will use what we hear in this consultation to inform work on the Framework and the Strategy.

We will also be using consultation to test the Framework as it is drafted, including testing of ideas and inclusions. Opportunities for further consultation will be listed on the [consultation website](#).

Webinars

We will hold webinars to share the next steps in the development of the Framework and the Strategy.

For updates on these webinars and other aspects of this consultation, as well as broader NDIS reforms, subscribe to [the NDIS Reforms mailing list](#).

[Health.gov.au](https://www.health.gov.au)

All information in this publication is correct as at November 2025

