



## Request for individualised support

- If completed by the DCJ District Commissioning and Planning team (in agreement with & on behalf of TEI Service Provider), please Cc the TEI provider when submitting to NCOSS.
- If request is initiated by TEI Service Provider, we recommend working with your CPO/district on questions 7 & 11 (NCOSS will do this for you if left blank). Please Cc your CPO when submitting.
- Either way, please email the request to: [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au)

### A) ABOUT THE TEI SERVICE PROVIDER

<b>Date of request:</b>			
1) Organisation/TEI service provider			
2) Business address			
3) DCJ district			
4) TEI service provider contact person during support period	Name:	Position:	Phone: E-mail:
5) TEI funding	TEI-funded service/s relevant to this request:		

### B) ABOUT THE DCJ DISTRICT LINKED TO THIS REQUEST

6) DCJ officer (e.g. CPO/Commissioning & Planning Officer)	Name:	Position:	Phone: Email:
--	-------	-----------	------------------

### C) ABOUT THE REQUEST

The request will focus on support that TEI-funded services would need <b>in order to meet a specific Milestone or significant change</b> that was identified as a result of the contracting process.	
7) What goal or 'significant change' is the TEI service provider aiming to achieve in relation to this request?  <u>Note:</u> Going through the <a href="#">Entry Interview</a> 'self-assessment' as well as referring to the 'milestones' in the TEI Schedule will help identify a goal.	9) Is there a preferred TEI Individualised Support (IS) agency from the current list of <a href="#">IS panel members</a> ? If so, please specify:

### D) IMPORTANT

**DCJ District Officer (or NCOSS in consultation with DCJ) to provide info for this section.**

11) <b>PACKAGE ALLOCATION:</b> What is your recommended number of hours for this request (based on the 'significant change', and in relation to other district priorities). Please specify either 10 or 20 hours: _____
12) <b>ENTRY INTERVIEW</b> (optional): Districts are invited to fill out the <a href="#">entry interview form</a> to provide context for this request to the Individualised Support agency. If the District chooses to complete the Entry Interview, please submit to NCOSS along with this request form.

**What next?** Please refer to [Flowchart](#) for more information. Queries to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au)

## TEI Sector Assistance Strategy Stage 3- Individualised Support

### 'ENTRY INTERVIEW' (template updated February 2020)



To be completed by the Individualised Support (IS) agency in collaboration with the TEI service provider. Please submit to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au) with signed Support Plan. Optional: DCJ District may use this template as a guide to determine priority levels. If the District chooses to complete an Entry Interview, please attach to 'Request for Support' form when submitting a request to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au).

Date:	Individualised Support agency (name and org):	TEI Service Provider (name and org):					
Please refer to the Milestones identified in the service provider's TEI Schedule when completing this form.							
1) <b>Context:</b> What milestone (that was identified as a result of TEI contracting process) should the Individualised Support activities relate to? <i>[type response here]</i>							
2) <b>Service provider's self-assessment:</b>							
<b>A) Current NGO capabilities in relation to the Milestone</b> Please give a candid rating from 1 to 5 for each statement below, with 1 being 'Strongly Disagree' and 5 being 'Strongly Agree'.						<b>B) Areas of focus</b> Are there specific items (i.e. area of focus or evidence-informed strategy) under each of the outcome domains below that you would like to work on during the support period?  <b>Knowledge=</b>  <b>Skills=</b>  <b>Confidence=</b>	
	1 <b>Strongly Disagree</b>	2 <b>Disagree</b>	3 <b>Neither agree nor disagree</b>	4 <b>Agree</b>	5 <b>Strongly Agree</b>		
I have the <b>knowledge</b> I need to meet the Milestone identified in our TEI Schedule.							<i>[type any comments here]</i>
I have the <b>skills</b> I need to meet the Milestone identified in our TEI Schedule.							<i>[type any comments here]</i>
I feel <b>confident</b> to make decisions to meet the Milestone identified in our TEI Schedule.						<i>[type any comments here]</i>	<b>D) Factors (enablers) that will assist in enhancing NGO capabilities by the end of the support period:</b>
<b>C) Difficulties (barriers) to address in order to enhance NGO capabilities by the end of the support period:</b>							

## TEI Sector Assistance Strategy Phase 3- Individualised Support

### SUPPORT PLAN (template updated February 2020)



To be completed by TEI Individualised Support (IS) agency with TEI service provider, after entry interview and before commencement of service.

**Note:** This Support Plan serves as the Service Agreement between NCOSS, the Individualised Support agency and the TEI service provider ("requester) upon completion of all relevant fields and on sign-off of all parties. Please feel free to add an extra page.

<b>TEI INDIVIDUALISED SUPPORT AGENCY</b> Organisation: Support Provider Name: Date:                      Signed*:	<b>TEI SERVICE PROVIDER/"REQUESTER"</b> Name: Organisation: Date:                      Signed*:
<b>*Digital signature or 'eConsent' is allowed and preferred.</b> By signing above, you agree that you've discussed and determined that the goals/desired capabilities identified below are Significant, Measurable, Achievable, Relevant and Timely within the specified time period.	

### SUPPORT PLAN (Appointment Calendar)

Overall Goal by the end of the support period:			Total number of hours allocated (specify if 10 or 20):
Target date of commencement:		Target end date of support:	
Activity	Allocated hours	Date	Desired Outcome by the end of activity (e.g. increased knowledge, skills, or confidence level around an area of focus or identified strategy in order to meet Milestone in TEI Schedule)

### SERVICE AGREEMENT

**To Individualised Support Agency:** This section is for billing purposes. Please fill out the first 3 columns & submit to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au) for sign-off prior to commencing support.

Estimated number of billing hours:	Cost of support service per hour:	Estimated total cost:	Confirmed by NCOSS:	Date:
------------------------------------	-----------------------------------	-----------------------	---------------------	-------

# TEI Sector Assistance Strategy (SAS) Stage 3 Individualised Support

## SUPPORT AGENCY FEEDBACK/COMPLETION ADVICE



To be submitted by the TEI Individualised Support agency upon completion of support activities.

Please email to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au) along with your Invoice.

Date of completion advice:			
TEI SUPPORT AGENCY: Name of person who provided support:		TEI SERVICE PROVIDER: Name of person you worked with:	
<b>TEI SERVICE PROVIDER's GOAL</b>			
Brief description:		Support period (e.g. March to May 2020):	
Outputs (e.g. workshop/ topic, document or resources developed)	<p>We covet your candid feedback on the outcomes of the requester's goal (identified in order to meet a Milestone).</p> <ul style="list-style-type: none"> <li>Please 'rate' each of the items below, with <b>1</b> indicating 'Strongly Disagree' to <b>5</b> indicating 'Strongly Agree'.</li> <li>There is no "pass or fail" mark. A 'rating' is primarily to identify 'next steps' for continuous improvement.</li> </ul>		
		<b>'Rating'</b>	<b>Comments</b>
	1) The 'overall goal' identified in the Support Plan was achieved.		
	2) The TEI service provider has the <b>knowledge</b> needed to meet the Milestone identified in their TEI Schedule.		
	3) The TEI service provider has the <b>skills</b> needed to meet the Milestone identified in their TEI Schedule.		
	4) The TEI service provider has <b>confidence</b> to make decisions to meet the Milestone identified in their TEI Schedule.		
	5) Overall, I am satisfied with the services I provided.		
	6) Others (e.g. issues encountered or outcome not listed here)		
<b>RECOMMENDED NEXT STEPS</b>			
Next step	Recommended for... (e.g. DCJ CPO, TEI provider/organisation)		By when (if applicable)

### NCOSS Notes

'Support Completed' noted by	Date	Final recommendation/s or next step, if any

## TEI Sector Assistance Strategy Stage 3

### Individualised Support (February 2020v)



## We value your candid feedback.

**To TEI Service Provider:** Thanks again for participating in this initiative. Please fill out this form after your last appointment with your Individualised Support agency, and email it back to [teiasist@ncoss.org.au](mailto:teiasist@ncoss.org.au).

Date today:	Your name & organisation:		Name and organisation of person who gave you individualised support:				
<b>GOAL</b>							
1) Was your 'overall goal' (as identified in the Support Plan) achieved as a result of the support? (Y/N)							
a) If 'Yes', does the achievement of the goal help you meet a 'Milestone' in your TEI Schedule?			b) If the support did not result in the achievement of your goal (as identified in the Support Plan), why not?				
Please state whether you agree or disagree with each of these statements.			1- Strongly Disagree	2- Disagree	3- Neither agree nor disagree	4- Agree	5- Strongly Agree
2) <i>I have the knowledge I need to meet the Milestone identified in our TEI Schedule.</i>							
Please indicate the information or type of information that you valued most: <i>[type response here]</i>							
3) <i>I have the skills I need to meet the Milestone identified in our TEI Schedule.</i>							
Please describe or comment: <i>[type response here]</i>							
4) <i>I feel confident in making decisions to meet the Milestone identified in our TEI Schedule.</i>							
Please describe or comment: <i>[type response here]</i>							
<b>SATISFACTION</b>							
1) <i>The person who provided me with TEI Individualised Support listened to me and understood my issues.</i>							
2) <i>Over-all, I am satisfied with the support services I have received.</i>							
3) If you were not satisfied over-all with the support activities you received, please recommend 'next steps'. Thank you! <i>[type response here]</i>							