

Participant File Audit Checklist

Internal audits of records, systems, policies, procedures and processes (systems and processes) help to identify issues or inconsistencies, address risks and highlight areas for improvement.

The template below is part of a series of tools developed to provide an example of what a participant file audit could look like. The structure of the tool provides a systematic approach to reviewing a file. It provides one possible structure to gather evidence and identify an action plan for improvement. The privacy of people with disability and their information is paramount and needs to be considered when selecting the most appropriate worker to carry out this kind of review.

Other templates in this series include:

- Employee file audit
- Internal audit organisational schedule
- Internal audit assessment record

The tools in this series are a starting point, are general in nature and aimed to assist providers in developing their own systems for internal audits. They do not account for the individual nature and risks of all NDIS services.

For more information on Internal Audits see NDS Organisational Internal Audits Factsheet.



Participant File Review Checklist

Auditor Name	NDIS Number
Role	Date
Service/s received	

Description	Yes	No	Not	Date/s	Recommended Actions
			applicable		
Intake	,	'			
Information about services discussed and documented					
Rights and Responsibilities: Complaints, confidentiality, advocacy discussed and documented					
Privacy statement / Information management discussed and documented					
NDIS funding information documented					
Record of paperwork provided to participant					
Communication, Consent and Decision Making					
Consent forms completed					
Supported or assisted decision-making arrangements in place					
Informal supports names and contact details (with consent)					
Communication preferences listed					



Description	Yes	No	Not	Date/s	Recommended Actions
			applicable		
Process to make changes to information, consent arrangements and services provided					
Service Agreement					
Current services agreement on file					
Signed and copy provided to participant					
Support Planning					
Current support plan on file					
Evidence support plan is reviewed at least annually or as required					
Participant actively involved in the development / review of plan					
Includes support for preventative health measures e.g. health check- ups, vaccinations, dental etc (if relevant)					
Current goals listed					
Preferences listed					
Considers participant's cultures and beliefs (if relevant)					
Key worker listed (if relevant)					
Key supports and services details and contacts listed (with consent)					
Complaint process discussed and documented					



Description	Yes	No	Not	Date/s	Recommended Actions
Risk Assessment			applicable		
Completed					
Risk management plans identified and/or attached and reviewed at least annually or as required					
Assessment of degree participant relies on services and impact if disrupted					
Medication records identify all required information for safe administration, including dosage and potential side effects					
Emergency Plan or arrangements documented					
Any identified risks with no action recorded					
Safe environment checklist completed (if relevant)					
Any identified risks with no action recorded					
Case Notes / File Notes					
Current case notes recorded					
Consent discussed as required					
Activities reflect goals					
Reports reflect outcomes and are provided within any required timeframes					



Description	Yes	No	Not	Date/s	Recommended Actions
			applicable		
Incidents					
Any outstanding actions from incidents					
Evidence participants have been consulted in incidents					
Complaints					
Any outstanding actions from complaints and feedback					
Evidence complaints have been supported					

Urgent actions for follow up: including any privacy concerns about the information or way information is being stored.

Actions to add to the Continuous Quality Improvement Register



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