SMOOTH STRIDE SUPPORT PTY LTD

Authority to Engage an Advocate – Controlled Issue

NDIS-FORM-018 | Participant Agreement, Consent and Support Planning

Where Quality Care Meets Genuine Compassion.

Version	1.0 - Approved
Owner	Shantell Sydenham - Director
Approved by	Shantell Sydenham - Director
Effective date	28 July 2026
Planned review	28 July 2027, or earlier following material change
Status	Active - approved participant issue
Approval / effective date	28 July 2026 | Next review: 28 July 2027, or earlier following material change

Approved controlled template. Complete all participant-, worker-, event- or service-specific fields, checks, consents, clinical instructions, signatures and point-of-use authorisations that apply before relying on the completed record.

Purpose

Use this form when a participant chooses an advocate to support communication, decision-making, meetings, complaints or other dealings with Smooth Stride Support. Advocacy does not transfer decision-making authority unless separate lawful authority exists.

Your choice
You decide whether to use an advocate, what they may do, what information they may receive and when this authority ends.

Participant and advocate details

Participant name / NDIS number	_____
Preferred communication / decision support	_____
Advocate name	_____
Organisation (if any)	_____
Phone / email	_____
Relationship to participant	_____
Independent advocacy service (if applicable)	_____

Scope of authority

☐ Attend meetings and support me to communicate
☐ Help me understand information and options
☐ Help me make or progress a complaint
☐ Receive the specific information listed below
☐ Speak on my behalf as directed by me
☐ Other: _____

Information that may be shared	_____

Information that must not be shared	_____
Decisions or actions excluded from this authority	_____
Start date	_____
End date / review date	_____
How I may withdraw or change this authority	_____

Privacy and boundaries

- Only the minimum authorised information will be shared.
- The advocate must respect the participant's privacy and directions.
- Smooth Stride Support will continue to communicate directly with the participant wherever possible.
- A guardian, nominee, attorney or other substitute decision-maker requires separate authority evidence.
- This authority ends when withdrawn, expired or replaced, subject to lawful recordkeeping.

Use with / record in
Use with NDIS-FORM-020 Participant Consent Form. Record the advocate and communication arrangements in NDIS-FORM-023 and the participant file.

Agreement and signatures

Signing confirms that the document was explained in an accessible way and records the person's agreement or authority. It does not remove any legal, complaint, privacy or consumer rights.

Role	Name	Signature	Date	Authority / relationship (if applicable)
Participant / authorised representative	_____			
Smooth Stride Support representative	Shantell Sydenham / delegate			
Interpreter / witness (optional)				