



From hope and disruption to where?

The need for a mental health system that works for everyone.

Leith Felton-Taylor - Manager, Policy and Sector Development
CMHA NDIS Conference 2018

Peak body for community mental health services in the ACT

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ACT an ideal testing ground

- ✓ small geographic size, essentially one city with one government
- ✓ population which is relatively well educated and affluent.
- ✓ familiarity with government processes



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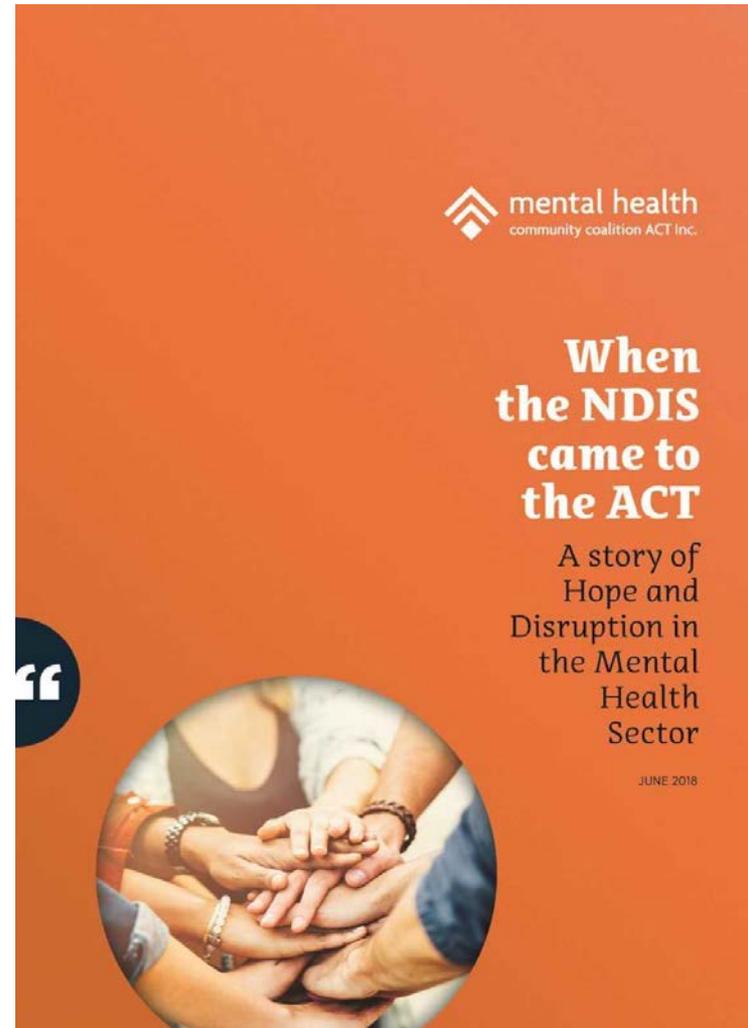
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First hand experience of the first 3 years of the NDIS

- ✓ Published material
- ✓ Meetings and forums
- ✓ Surveys
- ✓ Submissions

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Psychosocial disability not an easy fit with the NDIS

Differs from physical and sensory disability:

- May affect people's ability to seek and access services through the NDIS, and their eligibility for them
- People may be less likely to identify themselves as disabled and seek support
- People often live with additional complex issues such as homelessness and poor physical health
- People may have little/no contact with health and community services and therefore may not be readily identified as potential NDIS clients

NSW Mental Health Commission 2015

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"There is an extraordinary level of commitment to the success and sustainability of the NDIS (and to preserving the core principles of the scheme) shared by government, people with disability and their families and carers, providers of disability services and disability advocates."



Productivity Commission 2017

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Reform: “the process of making changes in (something, especially an institution or practice) in order to improve it”

Synonyms: “improve, make better, mend, rectify, correct, rehabilitate.”

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“At the moment we have the sense that the level of disillusionment and disengagement [in the ACT] with the shaping and implementation of the NDIS is high, and we feel strongly that this needs to change.”

MHCC ACT statement to the ACT Legislative Assembly
Inquiry into the NDIS, 2018

what are other
words for
disillusionment?



disenchantment, disillusion,
disappointment, frustration,
letdown, dissatisfaction,
chagrin, discontent, comedown



 Thesaurus.plus

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"At this time, the ACT HRC considers the intent of the scheme, as set out in the legislation, is yet to be fully realised in the ACT...

- The current NDIS processes are complex, bureaucratic and not user-friendly;
- There is a lack of accessible complaints management and resolution, particularly in relation to NDIA decisions;
- There is a lack of assistance to access and navigate the system, which places an increased burden on informal supports and other service systems, and results in some vulnerable people not accessing the scheme;
- The approach to plan approval appears to be to apply standardised or benchmark levels of support rather than consideration of the individual's reasonable and necessary supports as required by the legislation;
- Delays in processes, inaccessibility of NDIA staff and limited accountability of the NDIA impact on participants' outcomes;
- The developing disability services market in the ACT is not yet able to fully meet participant's needs and deliver quality supports across the sector."

ACT Human Rights Commission, ACT Legislative Assembly inquiry into the NDIS in the ACT, 2018

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When the NDIS came to the ACT

A story of
Hope and
Disruption in
the Mental
Health
Sector

JUNE 2018



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1. The rollout of the NDIS needs to be driven by outcomes rather than outputs



“The scheme’s rollout is outpacing the readiness of people with disabilities, disability service providers, local area coordinators and the NDIA to achieve its stated aims, and its sustainability hinges on its interface with mainstream public and community services, which is a minefield of competing priorities and jurisdictional ambiguities across federal, state, territory and local government”

Associate Professor Helen Dickinson, Director, Public Service Research Group, UNSW Canberra Public Service Research Group, et al, Submission to the ACT Legislative Assembly Standing Committee on Health, Ageing and Community Services Inquiry into the implementation, performance and governance of the National Disability Insurance Scheme in the ACT March 2018.

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Outcomes are a better driver of success:

".... [We've been] involved in many wonderful outcomes for people with NDIS plans and can see the potential of what a "good plan" can achieve for someone living with a psychosocial disability.

Having a reasonable spread of funded activities, including a focus on capacity-building activities, allows the participant and the provider to keep a recovery focus to the support provided."

Woden Community Service,
Submission to Legislative Assembly Inquiry into the NDIS, 2018

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2. There needs to be a comprehensive mental health system in place for all.

“People who are eligible are better off than before, people who aren’t eligible are worst off.” (Service Provider 4)

“For those ineligible, we have no idea what the plan is to fill the gaps, and they are really starting to appear.” (Service Provider 6)

“Perhaps they could have thought of a stronger contingency plan for people who aren’t eligible, what that means for them. Some people I see as quite deserving have been not found eligible.” (Consumer 2)

P. 32 When the NDIS came to the ACT (2018)

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3. The boundary between the NDIS and the mental health system must be clarified.

A person-centred approach is needed to ensure people do not miss out on vital services nor are bounced between systems when they encounter issues.

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4. The NDIS must address the specificities of psychosocial disability

“While the NDIS is an exciting reform for people with disability, its current structure does not fit easily with the lived experience of people with psychosocial disability ... What this report shows is that people with psychosocial disability have significant problems accessing and being accepted into the scheme, and that plans are not meeting their needs. ...

Professor Merry-Smith, in reference to the 'Mind the Gap' report, 2018

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4. cont.



“Here’s what we learnt about the planner and process: the planner was not trained properly, they had no mental health background and little understanding of psychosocial disability, they asked compulsory questions related to physical disability, they didn’t read the records, and didn’t review the last plan to see what had worked.” (Carer 1)

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5. The NDIS workforce must be qualified, experienced and skilled in working with people with psychosocial disability

"The transition into the NDIS saw the movement of a large portion of skilled and experienced mental health workers away from NDIS funded services. With providers having to significantly reduce wages to come in line with the NDIA pricing, many workers left the sector or changed roles which left people with psycho-social disabilities without familiar and skilled workers to support them.

The long-term impact of the NDIA pricing is the deskilling of a critical specialist workforce. Support workers are operating even more independently in the field, with less training, support and experience."

CatholicCare Canberra and Goulburn, submission to the LA Inquiry into the NDIS, 2018

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6. The NDIS framework must build the capacity of service providers to provide strong recovery-focused supports for participants with psychosocial disability

"The NDIS framework makes it difficult to deliver recovery services but we have forged a model that can work. It requires combining service delivery with support coordination (with two clearly different teams) but important communication between the teams to be able to support the participant with recovery activities. We have seen some fantastic results using this model but are acutely aware that it is not the preferred model of the NDIA."

MHCCACT Submission to LA Inquiry into the NDIS, 2018 – quote from a service provider

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7. Specific support for carers (in their own right) must be provided to ensure they are not left in a worse position.

"They have excluded the carer, who is looked at as part of the problem not the solution. I don't think they understand the role carers play or what they do. They have this stupid idea that the NDIS is going to set the carers free which is just not going to happen because they will still provide 87% of the care. They have cut services to carers which impacts on us and impacts on the consumer." (Carer 1)



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8. There needs to be a diversity of viable providers in the NDIS marketplace

"Purely from a business point of view, financial sustainability is very difficult to establish with the funding body of NDIS, however without services such as we provide, participants with a psychosocial disability would go completely unheard and unrecognised."



MHCC ACT Submission to the LA Inquiry into the NDIS, 2018
– quote from a Service Provider

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9. The NDIA needs to take a genuine and more transparent partnership approach with consumers, carers and service providers in the interest of optimising outcomes and minimising costs associated with the NDIS

"I would encourage [the NDIA] to see us as friends not enemies. They seem to view us as an enemy because we are the one they pay, but they can't do it without us." (Service Provider 6)

"If the NDIA went and communicated with your support network first before starting from scratch that could be really useful." (Consumer 4)

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10. A simpler, less bureaucratic approach be taken to the administration of the Scheme as it affects carers, consumers and service providers

"The process, the forms and the information coming out of the NDIA was really hard to understand, confusing and often contradictory." (Carer 2)

"The amount of bureaucracy! Families have enough trouble surviving and they can't wait for six months because of bureaucracy." (Consumer 5)

"Interpretation of [NDIS] plans especially for people with psychosocial disability is complex." (Service Provider 1)

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11. All work associated with the NDIS is billable and appropriately funded.

"The service and financial risk has been left squarely at the feet of the service provider, particularly given the inconsistency of plans. The service risk is presented through lack of communication from the planner and through the client. WCS believes the introduction of the Scheme has shifted the financial burden to service delivery agencies." Woden Community Service Submission to the Joint Standing Committee on the NDIS, 2017

"NDIS administration is 30% of our costs, not the 9% provided for by the NDIS." (Service Provider 2)

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Where are we now ...

NDIS has caused massive change in ACT NFP community mental health services, and more broadly.

- Service dis-integration: we have lost workers, services, time and energy for collaboration and innovation,
- Service gaps have opened up between the NDIS haves and have nots - many would add between those with self managed and agency managed NDIS plans
- Higher debt levels and a reliance on cross subsidising from other areas of funding.

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Signs of hope for improvement, and a mental health system that works for everyone

- ✓ NDIA: improved pathways and measures for those with psychosocial disability and complex needs
- ✓ ACT Government: Integrated Service Response program to respond to episodic nature of psychosocial disability
- ✓ PHN and ACT government: outcomes focussed design of National Psychosocial Support Measure for the ACT
- ✓ ACT Government: Lifespan suicide prevention program integrating and building on existing infrastructure
- ✓ ACT Office for Mental Health: based on social and economic determinants of mental health and wellbeing

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Richmond Fellowship ACT case study

- ❖ RF made utmost use of opportunities to prepare organisation for NDIS - generally optimistic.
- ❖ Some concern about the disparity of \$45/hr under NDIS for outreach/individual support vs the required \$60-70/hr for our skilled and well-trained staff.
- ❖ Quickly became evident from NDIS plans that neither funding nor line items reflected the needs of participants.
- ❖ Mental illness challenges not easily transferred into a disability context.
- ❖ Only other viable option: supported residential accommodation program
- ❖ Surprised at the demand for supported accommodation: from 'go live' date in October 2015 to present, all beds full and working on additional homes to be opened soon.



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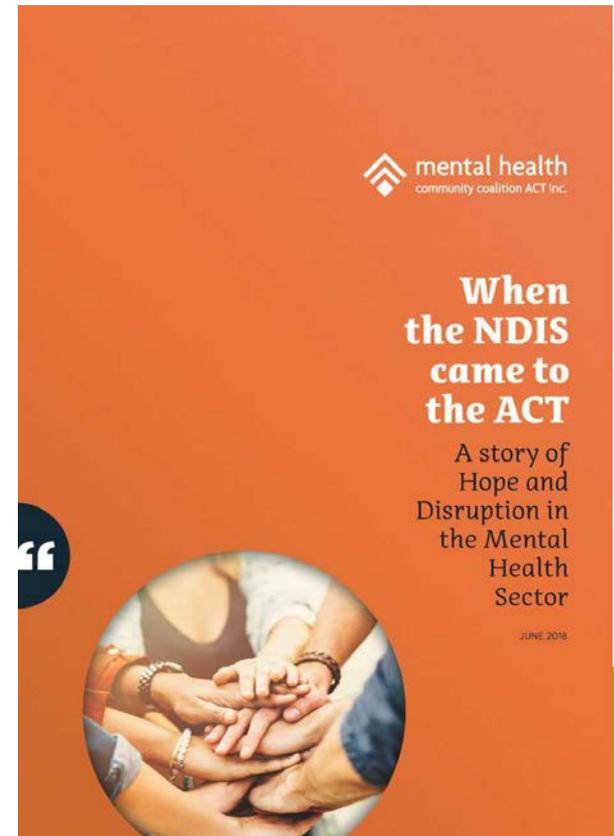
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**MHCC ACT report:
"When the NDIS came to the ACT
– A story of hope and disruption in the mental
health sector" (2018)**

**Download or watch the launch presentations at:
www.mhccact.org.au/our-work/mental-health-reform/**



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