*Thursday, March 14, 2024*

Dear Minister Shorten Suite 1A, 12 Hall St, Moonee Ponds, VIC, 3039

We write to you regarding concerns we have heard from NDIS participants regarding the proposed recommendations in the final report from the Independent Review into the NDIS “Working together to deliver the NDIS”. We have collected these concerns through an online survey for Victorian consumers, as well as engagement with our program users.

We have uncertainties and concerns around Recommendation 7

VMIAC notes, Recommendation 7: “to introduce a new approach to NDIS supports for psychosocial disability, focused on personal recovery, and develop mental health reforms to better support people with severe mental illness”.

Under the proposed changes in Recommendation 7, most people accessing the NDIS for psychosocial disabilities will have their supports geared towards ‘recovery’ goals and have their NDIS access transitioned to the Section 25 early intervention pathway (see: [‘Fact Sheet 7: For](https://www.ndisreview.gov.au/sites/default/files/resource/download/psychosocial-disability_0.pdf) [people with psychosocial disability and their families.’](https://www.ndisreview.gov.au/sites/default/files/resource/download/psychosocial-disability_0.pdf)

VMIAC also notes there is scope under Recommendation 7 for participants who will likely require lifetime supports under the NDIS to access the scheme under Section 24 NDIS plan pathway. While the report acknowledges the Section 24 pathway is still an option for participants, the recommendation and its actions do not say if or how new participants can bypass the Section 25 pathway and apply straight to the Section 24 pathway. The report also does not detail the process of participants transitioning to/accessing the Section 24 pathway, how the NDIS will decide which new participants will access the Section 24 pathway, and if access to this pathway will be capped.

The Supporting Analysis document for the report also recommends early intervention supports should be re-assessed every two years, or ‘at a frequency determined by the Needs Assessor’ ([p. 311](https://www.ndisreview.gov.au/sites/default/files/resource/download/NDIS-Review-Supporting-Analysis.pdf)). VMIAC notes no minimum or maximum ‘frequency’ has been set for reassessment at this time. There is also not enough information as to how this process differs from Independent Assessments.

The report recommends early intervention supports for people with psychosocial disability should be provided for up to three years under the [Section 25 pathway](https://www.ndisreview.gov.au/sites/default/files/resource/download/psychosocial-disability_0.pdf), which includes the following features:

- If after three years participants are determined to not need ongoing support, they will be assisted by a Navigator to connect with ‘foundational supports’, which under the new recommendations will be mostly state-based.

- For participants found to need ongoing support, they will need to re-apply for NDIS

access through Section 24 with support from a Navigator through a ‘streamlined pathway’.

- Navigators will assist both people who need ongoing NDIS supports as well as those who are determined to no longer need NDIS supports through foundational supports.

We want diverse supports and equal choice and control

VMIAC is aware the Government has expressed a desire for a broader range of support options through state-based options, rather than only NDIS funded supports, that are oriented around minimising the functional impact of a person’s disability. However, consumers need assurances that the flexibility allowed in the legislation is balanced against their need for security in ensuring they won’t lose access to their funded supports.

The government must have close consultation with people who have lived experience of disability, including those with psychosocial disabilities. Consultation with the disability community should be focused on the proposed early intervention pathways, changes to the review and assessment process and to build assurances that the proposed early intervention supports are not positioned as an either/or but an additional package support.

There also remain a range of questions, such as:

* Will providers of Service Navigation be independent from other NDIS service providers?
* Will there be a cap or limitation on how many participants can access the NDIS via section 25 (early intervention) pathway?
* How will frequency of people’s reviews be determined, will participants have input into

this decision, and how will the decision be communicated with participants?

* How will the findings from the Disability Royal Commission be incorporated to ensure human rights are adequately considered where these issues were overlooked in the review recommendations?

Furthermore, while VMIAC acknowledges the importance of ‘recovery’ in many systems, we hold grave concerns about the interpretation and implementation of ‘recovery’ within the context of the NDIS. Recovery may be used to create a separate pathway for people with psychosocial disabilities, thereby being used to disadvantage people living with psychosocial disabilities both within, and outside, the NDIS. The current NDIS legislation upholds the right to 'reasonable and necessary support to live an ordinary life' for all people living with permanent and substantial disability – we believe it's important this right is upheld for all NDIS participants, including those with psychosocial disabilities.

We share the Forum’s concerns about the possible system reforms

VMIAC agrees with the National Mental Health and Consumer Carer forum who express concerns that a separate 'foundational support system' for psychosocial disability on top of already multiple existing systems of mental health, Alcohol and Other Drugs (AoD), suicide prevention, disability, NDIS, and health, is to be avoided.

In some jurisdictions, there is much trust yet to be rebuilt to ensure faith in the quality and adequate provision of early intervention supports. The creation of the NDIS led to [significant](https://www.abc.net.au/news/2017-03-23/fears-life-saving-mental-health-at-risk-for-australians/8377010) [gaps in services](https://www.abc.net.au/news/2017-03-23/fears-life-saving-mental-health-at-risk-for-australians/8377010) for people with psychosocial disability, who had trouble accessing the scheme, but whose previous support services were either folded into the NDIS or ceased to be funded by governments expecting those programs to be covered.

We support design that centres and supports people with disability.

We welcome the Government’s recent announcement last month of a significant investment to design and consult on key recommendations from NDIS Review including the creation of Foundational Supports by means of the development of a ‘Foundational Support Strategy’ and that this will change the landscape of the disability ecosystem in Australia. The Review proposed that Foundational Supports comprise of both ‘general’ supports for all people with disability, and ‘targeted’ supports including people with persistent mental illness. Given this we believe there needs to be a stream of close consultation that is supported in design by experts in these areas, with a specific focus on lived experience expertise.

We call for greater certainty on national policy.

Effective stewardship is an essential component of systems planning and monitoring. This is particularly important at the national level. The ability of the consumer community to commit to any proposed changes to the current funding landscape will be contingent on greater clarity about the future scope and powers of the National Mental Health Commission.

In the absence of greater independence from government and powers to compel information, or an equivalent independent agency to do so, any assurances made about foundational supports and other funding changes remain uncertain across states and territories. These are recommendations from the Productivity Commission’s report that still remain unactioned.

VMIAC would welcome a discussion with the Minister to examine ways this work can be collaboratively undertaken with mental health consumer peaks. I would welcome the opportunity to discuss this at your nearest convenience.

Kind Regards

Vrinda Edan (CEO) Simon Katterl (Chair)