National Disability Insurance Scheme & Mental Health Community Support Services

Wimmera and South West Provider and NDIS Forum

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1. The NDIS and psychiatric disability
2. Transition arrangements for Mental Health Community Support Services
3. Data collection processes
4. Continuity of support
5. Beyond 2020......What to expect......
What the NDIS is not…………

• It is **not** the solution to all our problems

• It is **not** about diagnosis or health condition – it is about functional impairment and disability

• It is **not** a service system – it is an insurance scheme

• It is **not** about treatment or a substitute for health services – it is about disability support

• It is **not** means tested

• It is **not** capped – there is no waiting list

• It is **not** about keeping people as disabled as possible – it is about support to enable recovery and attainment of goals
A word about language

A paradigm shift ..... 

• Health ........ disability
  • Strengths ........ impairment

• Recovery ........ permanent
  • Episodic ........ Lifetime
MHCSS Programs

MHCSS Defined Programs

• Individualised Client Support Packages
• Adult Residential Rehabilitation Services
• Supported Accommodation Services (3 exclusions)

Out of Scope

• Youth Residential Rehabilitation
• Statewide Services
• Intake assessment
• Catchment based planning
• Aboriginal mental health
• Three Supported Accommodation Services

Under Consideration

• Mutual Support and Self-Help
• Planned Respite
Role of mental health and other health service providers includes:

• Assisting consumers and their family/carers to understand what the NDIS is and how it might support them in their recovery.

• Providing consumers with the evidence they need to prove they meet the disability requirements and supporting eligible consumers to connect with the NDIS.

• Coordination of treatment and support – with NDIS planner and care coordinator

• Sharing information when necessary (with consumer consent):
  • when a consumer is undergoing access and planning
  • routine review of NDIS plan
  • change in circumstances
Phasing Schedule in Victoria

2016
- From 1 July
  North East Melbourne

- From 1 July
  Barwon transition to full scheme

2017
- From 1 January
  Central Highlands

- From 1 May
  Loddon

- From 1 October
  Ovens Murray
  Inner Gippsland
  Western District

- From 1 November
  Inner Eastern Melbourne
  Outer Eastern Melbourne

2018
- From 1 March
  Hume Moreland

- From 1 April
  Bayside Peninsula

- From 1 September
  Southern Melbourne

- From 1 October
  Brimbank Melton
  Western Melbourne

2019
- From 1 January
  Goulburn
  Mallee
  Outer Gippsland

North East Melbourne Area transition – 1 July 2016

Detailed operational planning, practice and process redesign is underway to support the North East Melbourne Area. This work will inform and assist other areas in their preparation and transition to the NDIS.
MHCSS Intake Assessment Assessment and Needs Register during transition

**MHCSS Intake Assessment Service providers will:**

- Continue to screen referrals for eligibility for MHCSS and manage the Needs Register.

- Actively support people on the Needs Register to prepare for their NDIA access request.

- Continue to transfer people on the Needs Register to MHCSS providers in the service catchment.

- As capacity allows, support people on the Needs Register to access the scheme early in the transition period for each area (through the Local Area Coordinator and contingent on NDIA capacity to accept new participants).

- Prioritise clients on the MHCSS Needs Register with highest needs for early transition.

- MHCSS Intake Assessment will cease from the date MHCSS programs commence transition into the scheme.
Quality and safeguards

While the NDIS is being rolled out, all existing Victorian quality and safeguards arrangements will remain in place.

- Consumers/participants will continue to have the same avenues for raising concerns and making complaints through statutory oversight bodies during transition (July 2016 – June 2019) such as:
  - The Mental Health Complaints Commissioner
  - The Disability Services Commissioner
  - The Senior Practitioner - Disability

- DHHS policies and procedures, including those covering incident reporting, will remain the same until further notice.
Statewide Data Collection

The department is undertaking a state-wide client data collection project for clients receiving disability, Mental Health Community Support Services (in-scope programs only), and Home and Community Care (HACC) services.

Reasons for Data Collection

• To support the transition of disability clients aged 65 and over (50 years and over for Indigenous people) to Commonwealth continuity of support arrangements on 1 July 2017

• Preparation of several of the department’s largest areas transitioning early in 2017-18

• To confirm the number of clients across the state and ensure consistency with the NDIS bilateral client transition

• To inform the design of detailed phasing schedules for areas yet to roll-out

• For use in calculating the funding that will be withdrawn as clients transition to NDIS and the Commonwealth with specific focus on block funded activities.
‘continuity of support’ arrangements will ensure that existing clients of state funded services will not be disadvantaged’

- Victoria has responsibility to provide support for:
  - current clients who are not eligible for NDIS; and
  - those who are eligible but will not receive all current supports from the NDIS.

- Victoria is currently considering options for how continuity of support will be provided.

- Continuity of support does not apply to individuals on the MHCSS needs register or new people who would previously have been referred to MHCSS.

- Important to consider aged care options for current clients over the age of 65 now.
What about people who are 65 years and older?

*Existing clients will not be disadvantaged*

- People who acquire their disability after the age of 65 years will not be eligible to become participants of the NDIS. People in receipt of services at the point of transition will be eligible for continuity of support.

- This aligns to the separate Commonwealth and Victorian agreement on transfer of responsibility of HACC services for older people in Victoria.

- Victoria will continue to have funding and administrative responsibility for providing the full range of services for Victorians 65 years and over.

- People under the age of 65 who become NDIS participants will be able to choose to continue to receive services through their NDIS plan, once they are over the age of 65.
Beyond 2020……

The market is expected to double and to change

**More funding:** The level of annual expenditure is estimated to grow from $2.6 billion to $5.1 billion in 2020.

We expect to see a shift in the type of supports provided

Example: Committed supports by support category (Vic Barwon)

- Assistance with daily life represents 70% of funded supports.
- As the scheme matures, it is expected that participants will experience increasing levels of independence in daily life through investment in other categories such as assistive technologies and innovative community participation.
Beyond 2020……

*The workforce needs to grow in response*

**Growth in workforce at full scheme**

**Current**
- 19,550 - 23,900 FTE

**Future**
- 34,400 - 42,000 FTE

**More jobs:** The workforce required to service this demand is estimated to grow from 19,550 - 23,900 to 34,400 - 42,000 FTE in 2019.
Beyond 2020……

A significant increase in the number of people accessing disability support

Forecast increase in demand

+ 27,000 participants

More people: The Victorian market for disability supports is estimated to grow from 78,000 people in 2016 to 105,000 in 2019.
### Fast forward to 2050

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
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<tbody>
<tr>
<td><strong>Increased funding</strong></td>
<td>Total annual funding for disability services under full scheme NDIS increased from $1.68 billion state funding</td>
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<tr>
<td><strong>More Victorians receiving disability support</strong></td>
<td>Number of Victorians that will receive supports under the NDIS an increase on the estimated 77,000 existing clients</td>
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<td><strong>Economic growth</strong></td>
<td>Additional GDP by 2050, a 1.4% increase on the current level</td>
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<td><strong>Increased employment participation</strong></td>
<td>Estimated number of people with disabilities participating in employment nationally by 2050, along with an estimated 80,000 carers.</td>
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<td><strong>Increased employment opportunities</strong></td>
<td>Anticipated number of disability services employees by 2019-20 (around double the current workforce)</td>
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What to expect ........

- Consumers who are currently receiving support from MHCSS will become participants in the NDIS if they meet residency and age criteria
- Continuity of support for current consumers who do not meet age and residency criteria
- Consumers on the MHCSS waiting list will receive assistance to prepare for NDIS access request
- Other consumers, and their families, will need assistance from health service providers to access the NDIS
- Greater range of supports and more flexibility in how and when support is provided
- High levels of participant and family satisfaction
What will be different?

• Delineation of health intervention and psychosocial disability support
• ‘re-calibration’ of specialist clinical mental health services:
  • Scope of core business
  • Workforce composition
  • Interface with NDIS
• Need to ensure that Victorians eligible for the NDIS are supported to access the scheme
• The social support needs of people with mental illness must be met by universal human services
Broader reform agenda in Victoria

- As well as transition to the NDIS, a great deal of other reform activity is underway which is being led by, or significantly contributed to by DHHS.

- The ambitious reform agenda seeks to address some of the most pressing social issues in Victoria, including family violence, child and family vulnerability and homelessness. These reforms include:
  - Roadmap for Reform: Strong families, safe children
  - Social housing and homelessness reforms
  - 10-Year Mental Health Plan
  - Health 2040
  - Education State

- The government’s response to the Royal Commission into Family Violence will have an impact on the entire health and human services system – not just family violence services. Ensuring the interconnection of the reforms is vital.

- Future directions of the Department will therefore be influenced heavily by the government’s reform agenda more broadly.