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# **Understanding the Impact of Recent Government Reforms in the Disability, Ageing and Mental Health Sectors**

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# The disability, ageing and mental health sectors are entering a phase of large scale change.

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- The Commonwealth and State Governments have initiated a number of reforms across the disability, aged care and mental health sectors including the:
  - Introduction of the National Disability Insurance Scheme (NDIS)
  - "Living Longer. Living Better" reforms in the aged care sector and
  - Commonwealth and State based reforms to community mental health funding.
- The above reforms have generally been endorsed as being a positive move across the aged care, disability and mental health sectors.
- The reforms all recognise the importance of:
  - Placing the person at the centre of the service system
  - Providing individuals with greater choice and control
  - Structuring the service system to support that and
  - Supporting prevention and early intervention strategies across the life course
- They support a shift to a more competitive, market-based service system with a move away from block funded service delivery to individual, user based funding.
- The nature and scale of the reforms mean that they will require transformational change across the service system.
- It is anticipated that there will be a number of opportunities, challenges and unintended consequences that will emerge through the transition period that will need to be managed proactively, both by government and the service sector, if the full benefit of the proposed reforms are to be realised.

# The transformation will impact service users, service providers and other sector based organisations.

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- To work effectively:
  - **Individuals** covered by the above changes will need to have the information and capability to understand and influence the design of the service system and exercise choice and control in how they navigate the system and make use of support services
  - **Service delivery organisations** will need to have the capability to engage with individuals and design and deliver services in collaboration with them that meet their needs that are delivered in an effective and efficient (financially sustainable) way and
  - **Sector based organisations** (e.g. peak bodies) will need to be able to support the above transition and work with individuals, service delivery organisations and government to work through any unintended consequences associated with the changes and continue to manage other issues affecting their sector.

## National Disability Insurance Scheme (NDIS) Overview:

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- The Commonwealth and State Governments have agreed to the introduction of a National Disability Insurance Scheme (NDIS).
- The scheme will transform the way that disability services are provided in Australia and has generally been endorsed as being a positive move across the disability sector.
- The NDIS reforms are based on the transition from a block funded service system to an insurance based, individually funded system.
- The NDIS will fund reasonable and necessary individualised services and supports directly related to an eligible person's ongoing disability support needs and goals.
- In July 2013 four (4) launch sites were set up across four States (New South Wales, Victoria, South Australia and Tasmania) including one in Barwon in Victoria. Further launch sites will be set up in the Australian Capital Territory, the Northern Territory and Western Australia in July 2014.
- The full scheme will be rolled out in all States and Territories except Western Australia progressively from July 2016. All eligible residents in those States and Territories will be covered by July 2019.
- The roll out of the scheme in Western Australia will be subject to the results of a comparative trial looking at two different service delivery models in that State.<sup>1</sup>
- Commonwealth and State based funding has been (re)allocated to support the NDIS roll out.
- The impact of that reallocation on the residual service system and its ability to service non-eligible groups and carers is not yet clear.

(1) [www.aat.gov.au/ApplyingForAReview/DisabilityCareAustralia.htm](http://www.aat.gov.au/ApplyingForAReview/DisabilityCareAustralia.htm)

## National Disability Insurance Scheme Overview (continued):

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- To be eligible, a person will need to meet criteria related to **age** (their request for support must be made prior to them turning 65 years old), **residency** (they must reside in Australia and be an Australian citizen or be the holder of a permanent visa or a special category visa (SCV) holder who is a protected visa holder) and **disability**.<sup>1</sup>
- The NDIS will cover:
  - People with a profound disability who (a) have a permanent disability that has a significant impact on their day to day life and ability to participate in community and (b) are going to need supports for the rest of their life and
  - People with an early intervention support need, defined as people who (a) have a permanent impairment where (b) there is evidence that early intervention supports will be of benefit by either reducing how much help is needed for them to do things now and in the future or by helping their family and carers to keep supporting them.<sup>1</sup>
- People with less severe levels of impairment not coming within the early intervention provision will not be eligible for the NDIS and will need to be supported by the residual service system.
- In 2009 one in five people or **four (4) million** Australians were identified as having reported a disability, equating to 18.5% of the total population. Of those, 3.5 million people (87%) had a specific limitation or restriction that inhibited their mobility, ability to communicate, ability to perform self-care activities or participate in schooling or employment. Of the people with a specific limitation **1.3 million** (5.8%) had a severe or profound disability.<sup>2</sup>
- In 2011 the Productivity Commission estimated that approximately **410,000 people** would receive NDIS funding support. That estimate included an estimated 333,000 people with intellectual, physical, sensory or psychiatric disabilities who have significantly reduced functioning and 80,000 people with early intervention support requirements.<sup>3</sup>
- A specific panel has been set up as part of the Commonwealth Administrative Appeals Tribunal to provide a mechanism through which people can appeal decisions about who is eligible to access the NDIS, the appropriateness of supports provided under the scheme and the registration of service providers.<sup>4</sup>

(1) [www.disabilitycareaustralia.gov.au](http://www.disabilitycareaustralia.gov.au); National Disability Insurance Scheme Act 2013., No. 20., 2013., Sct. 24-15.

(2) ABS 2009 A.

(3) Productivity Commission 2011., p.15.

(4) [www.disabilitycareaustralia.gov.au/roll-out-disabilitycare-australia](http://www.disabilitycareaustralia.gov.au/roll-out-disabilitycare-australia)

## National Disability Insurance Scheme Overview (continued):

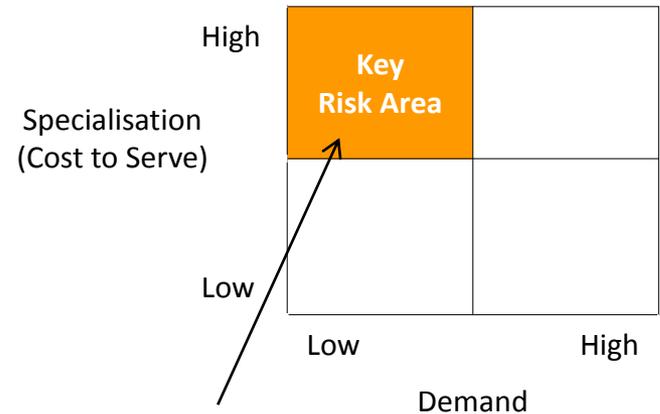
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- The change to an individual, insurance based funding model will lead to a fundamental change in the way that the service system operates.
- It will move from being a supply led to a demand led system. That will require individuals to engage with the system differently and give them a greater opportunity to influence the service system through the way that they contract services.
- It will also require service providers to change the way that they operate:
  - How they engage with prospective clients
  - How they structure, deliver and price their services
  - How they structure and manage their workforce and
  - How they structure and run their back office systems and operations.
- It is anticipated that there is likely to be significant change in the supply side of the market with the entry of more commercial (for profit) organisations and a consolidation of (particularly smaller scale) not for profit organisations.
- Australian Governments have recognised that there will be a need to assist individuals, organisations and the sector prepare for and work through the transition to the new NDIS system.
- Commonwealth funds have been allocated to support those activities (e.g. through the Sector Development Fund).
- There is a belief in the sector that additional, independent support will be required to allow it to support the transition and engage with government effectively in relation to the ongoing (co)design and implementation of the NDIS model.

## Key Concerns:

- Individuals may not be adequately supported to understand the revised system and help them to develop and strengthen the skills and capabilities that they need to engage with the system, exercise choice and control and influence the design and operation of the system.
- Particularly vulnerable families / groups may find the revised system too challenging to engage with and so not access the system and miss out on available supports for both care recipients and carers.
- Service organisations may not be adequately positioned or supported to work through the practical and cultural changes involved in moving to an individualised, consumer-led funding and service delivery model.
- It is expected that many organisations will need to fundamentally restructure their operations, build and strengthen organisational governance and develop (new) operational capabilities and will need assistance to work through that.
- The move to a market based NDIS system may lead to gaps in local service systems as service providers enter and exit the market and service offerings change.
- There are particular concerns that there may end up being gaps in more specialised (potentially less profitable high cost, low demand) services.
- Increased pressure may be placed on residual specialist and universal service systems as state based funding for disability and mental health services is redirected into the NDIS, potentially reducing the availability of appropriate services for people not eligible for NDIS support.

### Service System Coverage – Potential Risk Areas:



*Potentially less profitable and so less attractive in a competitive market*

## Key Concerns (continued):

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- Significant aspects of how the NDIS will operate remain unclear and may lead to unintended adverse consequences if not properly worked through. For example:
  - How the interface between the NDIS and aged care system will work
  - How people with mental health issues will be assessed and what steps will be taken to factor in the episodic nature of many mental health issues
  - The fit between an NDIS eligibility framework based on permanent disability and mental health and aged care service system frameworks based on recovery and re-enablement and
  - How families and carers will be supported.
- The move to the NDIS may lead to an individual rather than a 'whole of family' focus reducing the involvement of carers in the planning and support process and lead to a reduction in funding to support informal care and carer supports.
- People with a disability and their carers might be caught in gaps between the NDIS and universal service system and eligibility requirements might lead to the segregation of care recipients between NDIS and non-NDIS services and limit the ability of care recipients in NDIS programs to access broader-based community programs.
- Services that used to be covered by block funding that are now not (likely to be) funded under the NDIS may be adversely impacted including:
  - (a) Initial post-diagnosis support, assessment, information and support services
  - (b) Individual advocacy services
  - (c) Group activity / social participation programs
  - (d) Housing support (not directly linked to disability specific modifications or supports)
  - (e) Community development programs (including accessibility / built environment projects) and
  - (f) Community education and awareness building programs.

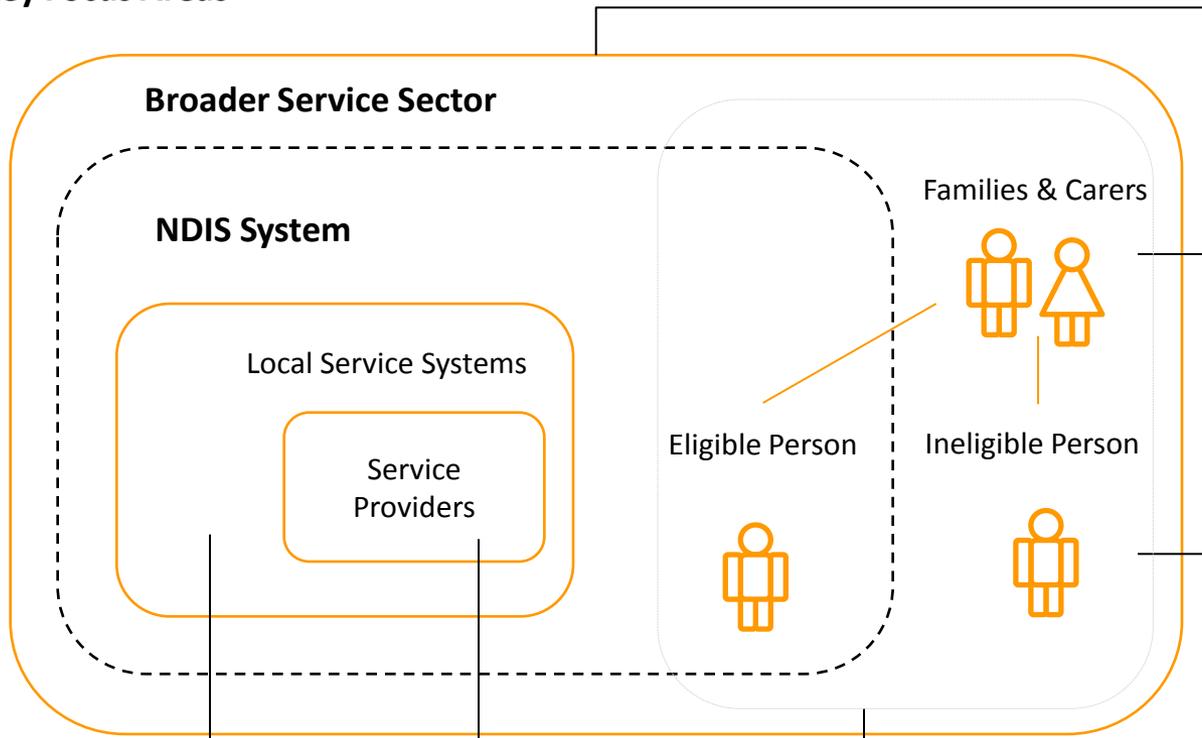
## Key Concerns (continued):

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- Concerns have also been raised that the scale and nature of the NDIS changes may mean that focus is taken away from other priority areas under the National Disability Strategy that interface with the NDIS but sit outside of the implementation of that system including:
  - Income support
  - Access to education and employment
  - Access to justice and
  - Housing etc.

# Potential Areas for Support:

## Key Focus Areas



- Proactively manage and address (potential) service system gaps, particularly during the early transition phase

- Support service organisations to work through the transition
- Support the design and implementation of innovative consumer-led service models

- Support eligible and ineligible people, their carers and families to understand and navigate the revised service system, exercise choice and control and influence the design of the service system
- Proactively manage potential gaps in the provision of previously block funded services that (potentially) will not be covered by the NDIS
- Continue to progress other issues under the national disability, ageing and mental health strategies

- Assist sector-based organisations supporting people with a disability / mental health issue and service providers to facilitate the transition and work through interface issues with the ageing and other community sectors
- Proactively manage and address issues relating to how families and carers will be supported under the NDIS and in the residual service system
- Proactively manage and address (potential) issues relating to the availability of appropriate support services in the residual and universal service system for people who are not eligible for NDIS support

## **“Living Longer. Living Better” Aged Sector Reforms Overview:**

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- The Commonwealth Government has recently introduced a series of aged sector reforms ("Living Longer. Living Better.")
- Those reforms provide for the move to a single gateway based information, needs assessment and service connection point model to help people to navigate the aged care system.
- The reforms will include the development of the Commonwealth Home Support program, the Home Care Packages program and changes to residential aged care.
- The reforms reflect a recognition on the part of the government that most people would, if given the choice, prefer to remain living in their own homes supported by appropriate care rather than move to a residential aged care facility or live with their children.
- Additional focus has been placed on providing home care to assist people to remain living at home for as long as possible with a move to introduce more choice and flexibility for people receiving care at home by adopting a Consumer Directed Care (CDC) model.
- The above reforms have a similar intent to support people to live independently and have greater choice and control in directing services as the NDIS and recent State based reforms in the mental health sector.
- The reforms have generally been endorsed as being a positive move across the aged care sector.
- Older people registering a disability who meet eligibility requirements for the NDIS before they turn 65 years old will be covered under that system. People acquiring a limitation after the age of 65 will not be eligible for the NDIS and will come under the aged care system. (The 2011 Productivity Commission Inquiry Report proposed that when people who are covered under the NDIS reach the pension age they could elect to either stay with the NDIS or move to the aged care system.)<sup>1</sup>

(1) Productivity Commission 2011., p.16-17.

## Key Concerns:

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- It is not clear how the interface between the NDIS and aged care system will work and whether like supports will be available under both systems.
- It will be important to work through how the two service systems will operate and to make sure that older Australians are provided with appropriate information and advice to help them to navigate the two systems.
- Service organisations may not be adequately supported to work through the practical and cultural changes involved in moving to an individualised, consumer-led care model under the revised community and aged care system and NDIS.
- The move to a telephone (rather than face to face) based entry point assessment model under the “Living Longer. Living Better.” aged care reforms may lead to the under-assessment of individual support needs and stop people from getting access to appropriate supports in a timely way.
- While the additional focus on community based care has been welcomed, funding for those services is focused primarily on addressing the practical needs of older people and does not adequately address issues of loneliness and social isolation.
- Shortages are still likely to exist in the supply of residential and supported care options particularly in regional, rural and remote and high growth metropolitan areas.
- There continues to be a shortage in specialist mental health services for older people (including prevention and early intervention services) with much of the focus in mental health funding being placed on younger age groups.

## Key Concerns (continued):

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- Other areas that were identified as being particularly relevant and providing opportunities and / or challenges at a sector and / or grassroots level included:
  - Addressing ageism and age discrimination
  - Preventing and responding to elder abuse
  - Helping people to maintain their independence and age well in place
  - Supporting people to plan for and manage their financial security
  - Helping older people to understand their rights and make appropriate use of legal mechanisms (e.g. powers of attorney and guardianships) to protect their interests as they age and providing education and training to families, carers and service providers to make sure that they understand the effect of those mechanisms and
  - Addressing homelessness and housing insecurity.

## Mental Health Sector Reform Overview:

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- Mental health will be covered by the NDIS. The introduction of the NDIS and the inclusion of mental health in the scheme has generally been endorsed as being a positive move across the mental health sector.
- Assessment frameworks and eligibility requirements relating to mental health under the NDIS are still being negotiated. There is a possibility that some (up to 50% of) people with a mental health issue will not meet eligibility requirements for the scheme in Victoria.
- The net funding impacts associated with the introduction of the NDIS on the residual mental health service system supporting non-eligible groups, families and carers is not yet clear.
- In addition to the implementation of the NDIS the mental health sector is also dealing with the introduction of Commonwealth and State based mental health funding and service system reforms including the introduction of a new Commonwealth Partnerships in Recovery funding scheme (that is expected to ultimately roll into the NDIS) and the recontracting of approximately two thirds (~\$70M) of the State based Mental Health Community Support Services funding (previously referred to as Psychiatric Disability Rehabilitation and Support Services) (which is also designed to support the transition to the NDIS by increasing the focus on consumer directed funding).<sup>1</sup>
- The State Government is also currently in the process of revising the Victorian Mental Health Act (expected to come into law in July 2014). The legislative reforms will promote recovery-oriented practice, minimise the duration of compulsory treatment, safeguard the rights and dignity of people living with mental illness and enhance oversight while encouraging innovation and service improvement.<sup>1</sup>
- The changes in funding model associated with the NDIS and State based mental health service system reforms will lead to a fundamental change in the way that the service system operates.
- The current State based reforms are expected to result in the aggregation of funding with a smaller number of larger (lead) service providers.

(1) [www.health.vic.gov.au/mentalhealth/mhactreform/](http://www.health.vic.gov.au/mentalhealth/mhactreform/)

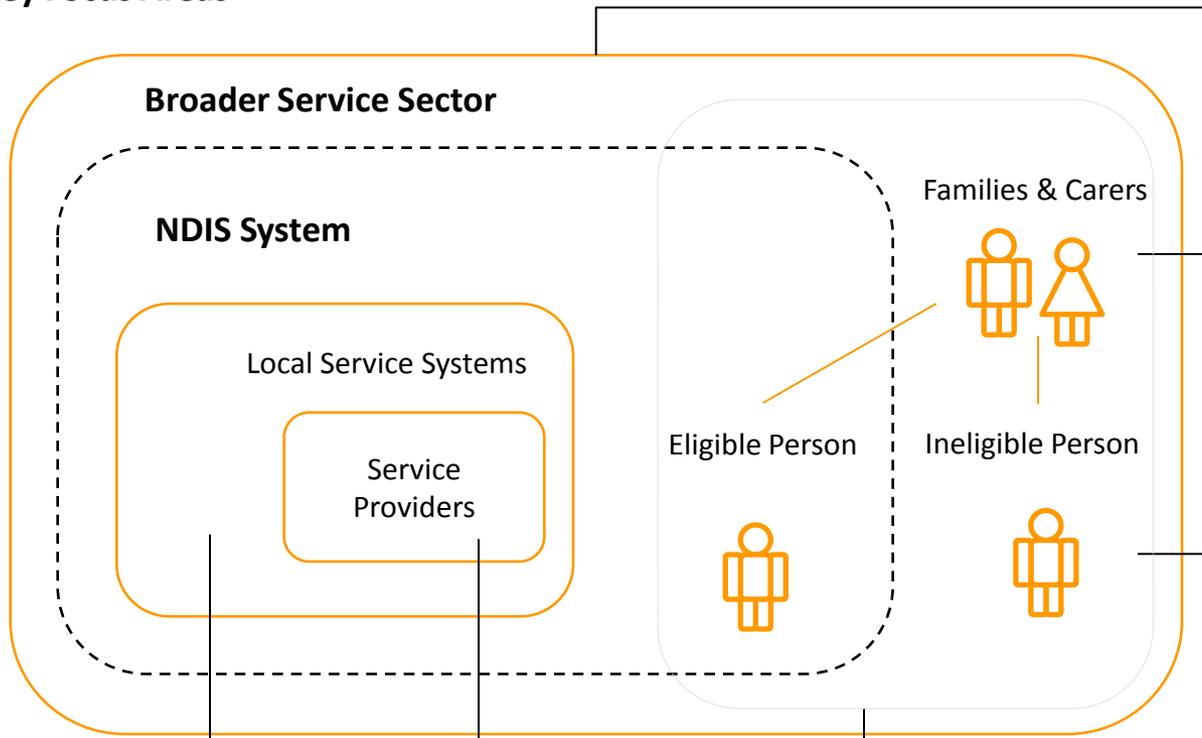
## Key Concerns:

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- It is not clear what proportion of people with a mental health issue will be covered by the NDIS. In part that is because it is not clear how people with mental health issues will be assessed and what steps will be taken to factor in the episodic nature of many mental health issues and the fit between an NDIS eligibility framework based on permanent disability and mental health system frameworks based on recovery.
- It is not clear what level of support will be available for people with a mental health issue who are not eligible for the NDIS or their families and carers.
- Other areas that were identified as being particularly relevant and providing opportunities and / or challenges at sector and / or grassroots level included:
  - Addressing discrimination and stigma
  - Social participation
  - Prevention and early intervention across the life course and
  - Access to education and employment.

# Potential Areas for Support:

## Key Focus Areas



- Proactively manage and address (potential) service system gaps, particularly during the early transition phase

- Support service organisations to work through the transition
- Support the design and implementation of innovative consumer-led service models

- Support eligible and ineligible people, their carers and families to understand and navigate the revised service system, exercise choice and control and influence the design of the service system
- Proactively manage potential gaps in the provision of previously block funded services that (potentially) will not be covered by the NDIS
- Continue to progress other issues under the national disability, ageing and mental health strategies

- Assist sector-based organisations supporting people with a disability / mental health issue and service providers to facilitate the transition and work through interface issues with the ageing and other community sectors
- Proactively manage and address issues relating to how families and carers will be supported under the NDIS and in the residual service system
- Proactively manage and address (potential) issues relating to the availability of appropriate support services in the residual and universal service system for people who are not eligible for NDIS support

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