



25 July 2025

Australian Government Consultation on the NDIS Supports Rules

Via email: NDISconsultations@dss.gov.au

To whom it may concern,

RE: Mental Health Australia's submission to the Australian Government consultation on the NDIS Supports Rules

Thank you for this opportunity to provide a brief submission to the Australian Government's consultation on the National Disability Insurance Scheme (NDIS) Supports Rules. These rules are critical to individuals, family, carers and kin in understanding what participants can and cannot purchase through the NDIS. They are also critical tools for managing the broader sustainability of the NDIS.

Mental Health Australia is the national peak for the mental health sector. We unite the sector to present a cohesive voice to government, and provide practical policy solutions to influence decision-making, which in turn, improves the mental health system and the mental health of people in Australia. Accordingly, our focus for this consultation is on the potential impact of the NDIS Supports Rules for NDIS participants with psychosocial disability, and their family, carers and kin.

In line with [Mental Health Australia's submission](#) to the Department of Social Services consultation on the draft lists of NDIS Supports in August 2024, Mental Health Australia welcomed adjustments to the final NDIS Supports Lists to include psychosocial recovery and/or psychosocial functioning in the descriptions for 'Development of daily care and life skills', 'high intensity daily personal activities', 'Support coordination' and 'Therapeutic supports'. These inclusions make it clear psychosocial recovery support, and improvement of psychosocial functioning itself, are core business for the NDIS. We also welcomed the creation of the replacement supports list outlining that in some cases the NDIS can fund supports that are not NDIS supports, if it replaces another item in a person's plan.

This current submission reinforces two recommendations from Mental Health Australia's previous submission, namely:

- in the list of 'Supports that are NDIS Supports' the support item **'Exercise physiology and personal well-being activities'** be amended to include reference to psychosocial well-being; and
- that there be **transparent processes to update** both the lists of 'Supports that are NDIS supports' and the list of 'Supports that are not NDIS supports'.



This submission also makes a recommendation to **clarify the provision of recovery-oriented support** through the NDIS and raises an issue about the **interpretation of 'Therapeutic supports'**. Finally and importantly, this submission also **refers the Australian Government to the National Mental Health Consumer Alliance's submission** as a critical contribution to this consultation informed by lived experience expertise.

Exercise physiology and personal well-being activities

Under the support titled 'Exercise physiology and personal well-being activities', the description currently states "Supports that maintain or increase physical mobility or well-being through personal training or exercise physiology to address the functional impact of a participant's disability." This focus on physical mobility or wellbeing may inappropriately exclude people with psychosocial disability from benefiting from this type of support. There are a number of studies which show various types of physical exercise result in improvement of both physical health and psychosocial functioning of people experiencing serious mental illness.¹ For example, aerobic exercise, strength exercises and yoga have all been shown to reduce psychiatric symptoms, state anxiety and psychological distress for people with schizophrenia,² which in turn enables greater psychosocial function.

Leaving this section as currently written could have the unintended consequence that people with psychosocial disability miss out on these effective supports, because they require them to address psychosocial wellbeing (and therefore lessen the impact of their impairment) rather than solely to improve their physical health.

Recommendation: that the Australian Government update the description for the 'Exercise physiology and personal wellbeing activities' support item to instead read "Supports that maintain or increase physical mobility and/or physical and/or psychosocial well-being through personal training or exercise physiology to reduce the functional impact of the participant's disability".

Transparent processes to update the lists of NDIS supports

In our previous submission, Mental Health Australia recommended there should be transparent processes both for items to be added to the 'Supports that are not NDIS Supports' list and to update the 'Supports that are NDIS Supports' list. Mental Health Australia understands the Australian Government is establishing a NDIS Evidence Advisory Committee to give independent expert advice to government on the suitability of supports for funding under the NDIS. This is a positive step in the right direction. However there must

¹ Vijay Mittal, Teresa Vargas, Juston Osborne, Derek Dean, Tina Gupta, Ivanka Ristanovic, Christine Hooker, Stewart Shankman (2018) [Exercise Treatments for Psychosis: A Review](#)

² Davy Vancampfort, Michel Probst, Liv Skjaerven, Daniel Catalan-Matamoros, Amanda Lundvik-Gyllensten, Antonia Gomez-Conesa, Rutger Ijntema and Marc De Hert (2012) [Systematic review of the benefits of physical therapy within a multidisciplinary care approach for people with schizophrenia](#)



also be a clear and transparent process through which people with lived experience of psychosocial disability, family, carers and kin, and the psychosocial support sector can raise supports that should be funded through the NDIS, which are then considered by the Evidence Advisory Committee. Information about each step in the process should be publicly available, including the rationale as to why a support was or was not included as a NDIS support.

Recommendation: that the Australian Government should establish a transparent process for input from people with lived experience of psychosocial disability, family, carers and kin and the psychosocial support sector to raise additions or changes to the 'Supports that are NDIS Supports' and 'Supports that are not NDIS Supports' lists.

Clarity on recovery-oriented services

The 'Supports that are not NDIS Supports' list includes reference to "time-limited, recovery-oriented services and therapies." Mental Health Australia understands this section refers specifically to services which are related to health treatment or provided directly after a recent medical or surgical event. In a mental health context this could include services like step-up/step down services, which are appropriately funded outside the NDIS. However, as currently written, there is potential for this section to be misinterpreted so that people with psychosocial disability may be prevented from purchasing recovery-oriented support (such as recovery coaching) in their NDIS plan, to the detriment of the NDIS participant.

Recommendation: Mental Health Australia recommends the Australian Government remove the words 'recovery-oriented' from the 'Related to health' section of the 'Supports that are not NDIS Supports' list, to prevent confusion and misinterpretation.

Lack of clarity in implementation of 'Therapeutic supports'

The 'Supports that are NDIS Supports' list includes 'Therapeutic supports', which specifically refer to improvement or maintenance of 'psychosocial functioning'. This section makes it clear that the NDIS funds allied health professionals to provide therapeutic support for people with psychosocial disability, which is focused on psychosocial functioning. However, Mental Health Australia members have reported large variation in how this is interpreted by National Disability Insurance Agency (NDIA) staff. For example, some NDIS participants are able to access psychology through their NDIS plans while others are unable to do so. While this is not an issue to be resolved in the current consultation on the NDIS Supports Rules, it is critical that the NDIA improves the consistency of access to therapeutic supports through NDIS plans, including through clarifying the NDIA's operational guidance on the provision of therapeutic supports in NDIS plans and educating staff to ensure there is consistent application.



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Referral to the National Mental Health Consumer Alliance's submission

Finally, we commend to the Australian Government the National Mental Health Consumer Alliance's submission to this consultation process. As the national peak body representing mental health consumers, the Alliance is a critical stakeholder in understanding the impact of the current NDIS Supports lists for people with psychosocial disability. The Alliance's submission provides more detail from people with lived experience of psychosocial disability about how the NDIS Supports Lists need to be improved.

Recommendation: that the Australian Government engages thoroughly with the National Mental Health Consumer Alliance's submission to this consultation process.

Please don't hesitate to contact Mental Health Australia (via policy@mhaustralia.org or 02 6285 3100) should you require any further information in relation to the issues raised in this brief submission.

Kind regards,

Carolyn Nikoloski

CEO

Mental Health Australia