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Australian Psychosocial Alliance

Australia's leading providers of psychosocial support services

10 March 2026

Australian Government Department of Health, Disability and Ageing

Submitted to: NDISConsultations@health.gov.au

Submission to Public consultation on National Disability Insurance Scheme New Framework Planning Rules

Thank you for the opportunity to provide feedback on the National Disability Insurance Scheme (NDIS) New Framework Planning Rules. Mental Health Australia and the Australian Psychosocial Alliance provide this submission focusing on critical factors for the effectiveness of NDIS New Framework Planning for people with psychosocial disability, their carers, family and kin.

We also commend submissions from the Consumers of Mental Health Western Australia and Mental Health Carers Australia to the Department of Health, Disability and Ageing as submissions with expert advice in relation to tailoring New Framework Planning to meet the needs of people with psychosocial disability, and their family, carers and kin, drawing on direct input from these communities.

We share the deep concerns of the broader disability sector about transparency, independent oversight and review rights in relation to New Framework Planning budget and plan setting.

In this targeted submission, we focus on particular issues and priorities around supports for people with psychosocial disability, including:

- implementation of Recommendation 7 of the NDIS Review, including calling for a new approach to NDIS supports for people with psychosocial disability, focused on personal recovery – starting with ensuring there is a psychosocial approach within New Framework Planning;
- the need for psychosocial specific navigation support to assist people with psychosocial disability to transition to NDIS New Framework Planning; and
- the need for a support needs assessment process that is tailored for people with psychosocial disability.

These issues are all described in detail below alongside tangible recommendations to improve New Framework Planning so it better meets the needs of people with psychosocial disability, carers, family and kin and mitigates key risks.

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This submission has been informed by targeted consultations with Mental Health Australia and Australian Psychosocial Alliance members and stakeholders.

A new approach to NDIS supports for people with psychosocial disability, focused on personal recovery and capacity building

In the 12 months to 31 December 2025, the Australian Government invested over $6 billion in supports through NDIS plans for people with psychosocial disability.[i] Yet, outcomes for participants with psychosocial disability across social and community engagement, participant employment, and employment of family and carers, are only improving for a small percentage of people – and in some cases are going backwards.[ii]

It is critical this substantial investment delivers meaningful outcomes – through a tailored approach for participants with psychosocial disability.

The need for a new approach to NDIS supports for psychosocial disability, focused on personal recovery, was recognised by the NDIS Review.[iii] In relation to planning, this included assessment processes tailored to the specific needs of participants with psychosocial disability, an uplift in psychosocial capability of NDIA staff and support from psychosocial recovery navigators. None of these elements are evident in the proposed New Framework Planning process.

It is clear there is a need for a tailored approach to delivery of NDIS supports for participants with psychosocial disability, centred around personal recovery and capacity building. This approach can only be delivered if:

1) NDIS systems (including the transition to New Framework Planning) are reformed to meet the needs of people with psychosocial disability
2) NDIA staff whose roles impact on the lives of people with psychosocial disability have psychosocial specific skills, knowledge and experience
3) Specialist psychosocial support providers are enabled to provide high quality psychosocial specific NDIS supports.

Without an approach tailored to people with psychosocial disability within the proposed New Framework Planning process, there is a high risk that assessments will not accurately reflect participant's support needs and lead to inappropriate plans and budgets. This will only perpetuate the poor outcomes mentioned above.

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Recommendation 1:

The National Disability Insurance Agency and the Department of Health, Disability and Ageing should commence a program of work to implement Recommendation 7 of the National Disability Insurance Scheme Review. As a part of this, priority should be given to designing a psychosocial approach within the New Framework Planning process reforms.

Psychosocial specific navigation support for NDIS New Framework Planning transition

We anticipate the NDIA plans to continue to rely on the support of the current NDIS Partners in the Community to continue to deliver navigation-like services for participants throughout the New Framework Planning transition. However, members tell us that the effectiveness of these current navigation supports by NDIS Partners in the Community is variable across the country and psychosocial specific navigation support is rare. The inadequacies of current navigation support for people with psychosocial disability is clearly outlined in the Australian Psychosocial Alliance's Access Denied Report.[iv]

The NDIS Review recognised the need for a new approach to navigation supports focused on a specific navigator role, and as a part of this, recommended specialised psychosocial recovery navigators work with people with psychosocial disability. The Review recommended that a psychosocial recovery navigator should undertake "active outreach" and assist people to connect with non-NDIS mainstream and community services. It stated that for those eligible for the scheme "the navigator should help with the application process, help set and achieve goals, identify the right supports and connect with mental health, primary care and housing services".[v] Our interpretation is that there was a clear vision for psychosocial recovery navigators (with psychosocial support specific skillsets) to support people with psychosocial disability to navigate the planning and plan implementation processes. However, this reform has not featured in the New Framework Planning reforms.

We understand the rationale that there is value in staged implementation, so that the pace of change is manageable both for those implementing and for those impacted by the changes. However, it is critical that psychosocial specific navigators or at least a psychosocial specific navigation like function is on the ground in time to assist people with psychosocial disability to transition to NDIS New Framework Planning to maximise effectiveness of this transition.

The absence of psychosocial specific support for navigation of the New Framework Planning transition will lead to inappropriate preparation for support needs assessments, resulting in inaccurate assessment reports, inadequate plans and budgets, and missing critical supports. It will also mean a lack of connection with appropriate NDIS and mainstream supports once a plan and budget is approved. Relying on current NDIS Partners in the Community, where psychosocial support specific skills, knowledge and experience are rare, will also result in interactions between workers and participants that inadvertently contribute to the deterioration of the psychosocial disability itself.

Recommendation 2:

The National Disability Insurance Agency should design and implement a psychosocial recovery navigator role or psychosocial specific navigation like function to be implemented alongside New Framework Planning to assist people as they transition.

A Support Needs Assessment process that is tailored for people with psychosocial disability

We understand the NDIA will work with the University of Melbourne and the Centre for Disability Studies on the development of a Support Needs Assessment (based on the Instrument for the Classification and Assessment of Support Needs – I-CAN) and Personal Environmental Circumstances Questionnaire (PECQ). It is reassuring to see the assessment tool is intended to be person centered and strengths focused.[vi]

We understand the I-CAN itself has been validated for use with all disability types, including psychosocial disability, over the age of 16.[vii] However, there is little public information about the new core needs assessment tool (which will be based on the I-CAN), the PECQ or the targeted assessment processes the NDIA is planning to use. In addition, while we understand the I-CAN considers current assessments a person has already received, it is unclear whether the new core need assessment tool will also have this option available. There is also a lack of clarity around how the new tools and assessment process will account for the episodic nature of psychosocial disability, where a person may appear high functioning on the day of their assessment but this may vary significantly over time. This lack of clarity has raised concerns amongst the sector about whether the new tools will be validated specifically for use with people with psychosocial disability before they are rolled out,

and what information will be accepted as a part of the support needs assessment process.

In addition, we understand the intention is for NDIA staff to undertake support needs assessments.[viii] If the Agency responsible for the fiscal management of the scheme is also responsible for determining the support needs of individuals this creates a conflict of interest and is inconsistent with principles of administrative fairness and independent decision making. This is also concerning because it is highly likely the NDIA staff member assessing the person with psychosocial disability will not have an existing relationship with that person or understanding of their support needs, as is good practice for assessing psychosocial support needs. It is also unclear whether the assessors will have particular skills and experience in assessing the support needs of people with psychosocial disability.

It is critical that people assessing the support needs of people with psychosocial disability practice from a human rights based, recovery oriented and trauma-informed perspective and have skills and experience in assessing the support needs of people with psychosocial disability. In the absence of this skillset and experience there are real risks including:

- support needs assessments being inaccurate, leading to development of inappropriate plans and budgets potentially leading to the absence of critical supports;
- inappropriately skilled interactions that lead to the deterioration of the psychosocial disability itself; and
- instigation of significant numbers of requests for replacement support needs assessments to the National Disability Insurance Agency and Administrative Review Tribunal.

In keeping with the underlying premise of the NDIS of 'choice and control' and in line with a trauma informed approach, which emphasises personal agency and sense of safety, the person with psychosocial disability should be able to choose:

- a known and trusted assessor, independent of the NDIA, to undertake the assessment, or failing this be able to personally choose from a range of assessors;
- to meet with their assessor prior to the assessment to build trust and rapport
- to be accompanied by an advocate, support worker and/or informal support such as family, carers and kin; and
- the location for their assessment, including within their own home where this is their preference.

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The need for a trauma informed approach is clearly articulated by this intake worker from Mind Australia commenting on the New Framework Planning rules:

"Many people, and particularly those living with significant mental illness, will have challenges articulating what supports they need. For some people, admitting struggles in the past has meant a hospital admission. It means they can be very reluctant to share accurate reflections of areas they need support…… it is very non trauma informed to expect people who have experienced great harm from the system to tell strangers who they have just met all the things they are having trouble with"

Finally, delivering good quality assessments is complex work. It requires holding skilled conversations, that include questions relevant to psychosocial disability in particular; bringing together information between each of the support needs assessment tools; providing sound reasoning for decisions; and inferring responses and categorisations from participant input. It also requires knowing when and how to obtain information that may not be divulged by the individual, such as from their support workers, family or other carers. It is therefore critical that assessors and delegates sit within a governance model that supports sound decision making and delivery of good quality assessments that do no harm and result in consistent outcomes for people with similar needs.

It is critical that the support needs assessment process and tools are tailored to people with psychosocial disability. The absence of this tailoring will result in inaccurate assessments, which result in inadequate budgets and plans missing critical supports. The absence of this tailoring also risks subjecting people with psychosocial disability to processes and interactions that directly contribute to deterioration of the disability itself.

Recommendation 3:

When assessing the support needs of people with psychosocial disability, the NDIA should ensure the Support Needs Assessment process and tools are:

- validated for use with people with psychosocial disability, family, carers and kin;
- administered by assessors, independent of the NDIA, with expertise in undertaking support needs assessments for people with psychosocial disability;

- where possible, administered by someone known to and trusted by the person with psychosocial disability or, failing this, at least chosen by the person with psychosocial disability; and
- administered where the person with psychosocial disability chooses.

People with psychosocial disability should be able to choose to be accompanied by an advocate, support worker and/or informal supporter to their Support Needs Assessment and choose to meet their assessor ahead of the assessment to build trust and rapport.

Assessors and delegates should be overseen by a governance model that supports safe delivery of good quality assessments that result in consistent outcomes.

Transparency and independent oversight for NDIS plans and budgets

We understand a participant's reasonable and necessary budget will be determined using information in the Support Needs Assessment report, using a method set out in the new budget method rules.[ix] There is currently a significant lack of transparency around what will be included in these new budget method rules leaving key issues unanswered (for example how obtaining an accurate reflection of available informal supports will be accounted for).

In addition, we understand a NDIA delegate will check the plan, including the budget, and approve it.[x] There is a lack of clarity around who the delegate is proposed to be, what skills, knowledge and experience they will have and whether they will have had any contact with the participant. Given the power they will hold around plan and budget approvals, this lack of transparency is deeply concerning. Delegates approving plans and budgets for people with psychosocial disability should have psychosocial support specific skills, knowledge and experience.

Under New Framework Planning, the Administrative Review Tribunal would be able to check whether the NDIS delegate has applied the rules correctly to the participant's Support Needs Assessment and Budget.[xi] NDIA delegates and the Administrative Review Tribunal could also arrange a replacement Support Needs Assessment or part of one.[xii] This differs to the current review rights where the Administrative Review Tribunal can review a decision made by the NDIA about a participant's statement of supports, or note to reassess or vary a participant's plan.[xiii] We understand this change means "Instead of reviewing individual supports in a plan, a review will look at the decision to accept the Support Needs Assessment as

the basis for calculating the reasonable and necessary budget".[xiv] This represents a substantive reduction in participant safeguards.

The combination of the lack of transparency of the budget development process, alongside what appears to be proposed use of an automated method to determine a participant's budget, alongside reduced review rights, is concerning. Previous experience with automated government processes determining funding amounts has reinforced the need for human oversight of automated processes, particularly when the process relates to people experiencing vulnerabilities. Given the NDIA's history in not adequately understanding and planning for people with psychosocial disability, and without a specialist psychosocial approach from notification through to plan completion, the proposal raises very specific risks for this cohort.

In addition, requiring people to undergo a second Support Needs Assessment increases unnecessary and significant stress for people with disability, family, carers and kin and administrative burden for them and the Agency itself. It also repeats the same process that was used to develop the erroneous plan and budget in the first place, without any independent third-party oversight, so is likely to result in the same outcome.

There is a significant lack of confidence amongst the sector that the proposals for NDIS New Framework Planning, and the associated lack of independent oversight, are any different from the NDIS Independent Assessments introduced in 2021, about which Professor Bruce Bonyhady stated at a Parliamentary Joint Standing Committee Inquiry:

> *"Independent assessments are not independent. They are roboplanning, and that is the term which I will use. I respectfully suggest that this committee also uses the term roboplanning, because every time you refer to the changes as independent assessments you are reinforcing a deliberate misrepresentation however unintentionally. The fact that roboplanning has reached the current stage of implementation is a disgrace. It should have been stopped long before now."*[xv]

The sector has raised similar concerns about the current NDIS New Framework Planning process, including as noted above, the lack of validation of the tool for people with psychosocial disability, lack of clarity around how the new tools and process will take account of the episodic nature of psychosocial disability and mitigate where a participant has high functioning on the assessment day but which is

not true for all days, the lack of transparency and accountability, the risks of retraumatising individuals and misrepresenting their needs.

We refer the Department of Health, Disability and Ageing to submissions made by People with Disability Australia, the Disability Advocacy Network Australia and Every Australian Counts, which will cover the issue of transparency and independent oversight of NDIS plans and Budgets and proposed recommendations in more detail.

A best practice approach to reform implementation

Transition to NDIS New Framework Planning is a major system reform that should be implemented through a best practice approach, including through engaging with the disability community and sector. The NDIS Review outlined that a best practice approach to implementation of its recommendations would include genuine design with people with disability, their family, carers and kin, representative organisations and service providers, an inclusive and proportional approach to testing all new processes, rigorous and transparent reliability and validity testing of functional and needs assessments, design of culturally safe and tailored approaches, continuous and independent evaluation and frequent and transparent communications with stakeholders.[xvi]

The current consultation process has not reflected these core elements of best practice reform implementation. For example, there is a distinct lack of transparency about several elements of the intended design of NDIS New Framework Planning (some of which have been outlined above); not least of which is the lack of exposure drafts being released with the consultation papers. It is at this level of detail that the sector can provide tangible implementation advice to the Department of Health, Disability and Ageing that would fundamentally improve the NDIS New Framework Planning related rules. In addition, holding a six-week consultation, just four months before a major scheme reform is rolled out, leaves little time for major concerns to be addressed in implementation design or new support needs assessment tools to be validated with all disability types.

Recommendation 4:

The National Disability Insurance Agency and the Department of Health, Disability and Ageing should delay commencement of NDIS New Framework Planning to:

- enable disability sector advice to be adequately addressed in reform design; and

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- commence implementation of NDIS Review Recommendation 7 to introduce a new approach to NDIS supports for people with psychosocial disability (as outlined under Recommendation 1 above).

Thank you for the opportunity to provide feedback through this public consultation on the NDIS New Framework Planning Rules. Through this submission we have provided clear recommendations on critical factors for the effectiveness of NDIS New Framework Planning for people with psychosocial disability, their carers, family and kin.

Mental Health Australia and the Australian Psychosocial Alliance stand ready to assist the Department of Health Disability and Ageing in the design of rules to support implementation of NDIS New Framework Planning. Please don't hesitate to reach out to **policy@mentalhealthaustralia.org.au** should you require any further information about making NDIS New Framework Planning work for people with psychosocial disability, their family, carers and kin.

Yours sincerely,

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Mental Health Australia	Australian Psychosocial Alliance

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Attachment A

About Mental Health Australia

Mental Health Australia is the national, independent peak body for the mental health sector. We unite the mental health 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.

We have approximately 150 members, including service providers, professional bodies, organisations representing people with lived experience of mental health challenges, family, carers and kin, researchers and state and territory mental health peak bodies.

We believe that by bringing together diverse perspectives across Mental Health Australia's members, the community and governments, we will create greater change and more innovative solutions, than what any of us could do working alone.

About the Australian Psychosocial Alliance

The Australian Psychosocial Alliance (APA) is Flourish Australia, Mind Australia (incorporating One Door Mental Health and The Haven Foundation), Neami National, Ruah Community Support, Stride Mental Health, Open Minds and Wellways Australia. We are seven of the largest and longest serving specialist providers of community managed mental health and wellbeing services in Australia. We provide support to over 110,000 people with mental health challenges and psychosocial disability every year. This includes expert support to around 5,800 NDIS participants with a psychosocial disability. We come together around a shared policy agenda to improve outcomes for people with mental ill-health and psychosocial disability, and a shared understanding of quality service delivery.

Our organisations embed lived experience across our governance and service delivery. We employ a specialist cross disciplinary workforce with expertise in mental health and psychosocial disability, and with the technical skills to deliver recovery-focused, trauma-informed and person-centred support.

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[i] National Disability Insurance Agency (2025), **Psychosocial disability data to 31 December 2025**, see worksheet titled 'Table_13'
[ii] National Disability Insurance Agency (2025), **Psychosocial disability data to 31 December 2025**, see worksheets titled 'Table_21, 'Table_22' & 'Table_23'
[iii] NDIS Review (2023) **Working together to deliver the NDIS**, 8
[iv] Australian Psychosocial Alliance (2025) **Access Denied: Psychosocial Disability and the NDIS**, see page 29 onwards
[v] NDIS Review (2023) **Finding your way around with help from a navigator**
[vi] Centre for Disability Studies (ND) **Why Use the I-CAN**
[vii] Centre for Disability Studies (ND) **Why Use the I-CAN**
[viii] National Disability Insurance Scheme (2026) **Update on the new way of planning for the NDIS**
[ix] Australian Government Department of Health, Disability and Ageing (2026) **New framework planning rules: Step 3. Building a plan**
[x] Australian Government Department of Health, Disability and Ageing (2026) **New framework planning rules: Step 3. Building a plan**
[xi] Australian Government Department of Health, Disability and Ageing (2026) **Reviews and appeals under the new way of planning (from mid-2026)**
[xii] Australian Government Department of Health, Disability and Ageing (2026) **Reviews and appeals under the new way of planning (from mid-2026)**
[xiii] Administrative Review Tribunal (ND) **National Disability Insurance Scheme**
[xiv] Australian Government Department of Health, Disability and Ageing (2026) **Reviews and appeals under the new way of planning (from mid-2026)**, 2
[xv] Joint Standing Committee on the National Disability Insurance Scheme (2021) **Independent assessments – Friday 23 April 2021**
[xvi] NDIS Review (2023) **Working together to deliver the NDIS**, 272 - 273