

Concurrent 8: Better access to housing for people living with mental health issues - the intersection of the NDIS and housing

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Partnership Approach to Educate Housing Staff on Guiding Clients through the NDIS

Acknowledgment of country



Mind acknowledges that Aboriginal and Torres Strait Islander peoples are the Traditional Custodians of the lands on which we work and we pay our respects to Elders past and present.

We recognise the intergenerational impact of the history of invasion, dispossession and colonisation and are committed to the recognition, respect, inclusion and wellbeing of Australia's First Peoples.



The Initial Project



Link Wentworth Housing and Mind Australia working together to assist social housing tenants, mainly from the Together Home stream, to access NDIS Supports.

Initially, there was one objective of the project which was to:

Work with case managers to provide Allied Health assessments to support NDIS Applications.

Evolution of the Project



Learnings from the first referrals received demonstrated a need for further education on:

- Who the NDIS is designed to assist
- What the eligibility requirements are to access the NDIS
- Levels of evidence needed to apply for NDIS
- Increased knowledge of the kind of supports people can access through NDIS funding

With an intended outcome of providing the Link Wentworth team with tools to enable improved referral quality and increased alignment to assessment criteria.



Second Phase of the Project



As a result of the identified gaps, Mind Australia developed a one day in-person training program for Link Wentworth staff. The objectives of this training were:

- Provide an overview of the NDIS and it's guiding principles
- Identify keys aspects of the NDIS access process
- Increase knowledge around disability requirements for NDIS
- Increase knowledge of the types of assistance provided by NDIS

Examples of Learning Materials

The NDIS consider functioning across 6 life areas:

Communication	Self-Care	Self-Management	Learning	Social Interaction	Mobility
<ul style="list-style-type: none"> • Understanding others • Being understood 	<ul style="list-style-type: none"> • Personal Care • Diet • Sleep • Medication • Health 	<ul style="list-style-type: none"> • Managing responsibilities <u>eg. bills etc.</u> • Budgeting • Making Decisions 	<ul style="list-style-type: none"> • Learning new skills • Memory 	<ul style="list-style-type: none"> • Making friends • Social Activities 	<ul style="list-style-type: none"> • Physical • Getting around

Types of Evidence	Examples
Evidence of disability <ul style="list-style-type: none"> • Diagnosis and treatment information 	<ul style="list-style-type: none"> • Hospital discharge plan • Mental health plan • Level of lesion SCI • ASIA Score • Modified Rankin Scale (Stroke) • DSM ID & ADS
Functional Assessments related to disability <ul style="list-style-type: none"> • Evidence of how permanent impairment impacts ability to function in ADLs • Activities the participant cannot complete in key domains • Type and frequency of assistance needed 	<ul style="list-style-type: none"> • Specialist reports relevant to impairment • Treating OT, Psychologist, Speech Pathologist reports/<u>ax</u> • <u>Ax</u> from relevant government departments (Disability, Health, Education, Housing, Justice) • Statements by family members, carers, support workers
<ul style="list-style-type: none"> • Impact of disability on daily life 	<ul style="list-style-type: none"> • Carer statement • Self report

Primary Disability	Assessment	Who can complete
Acquired brain injury	<ul style="list-style-type: none"> • CANS • WHODAS (17+) or PEDICAT (under 16) 	<ul style="list-style-type: none"> • ABI health professionals • Self, <u>carer</u>, support worker
Autism	<ul style="list-style-type: none"> • DSM-V • Vineland adaptive behaviour scale • WHODAS/PEDICAT 	<ul style="list-style-type: none"> • Clinical Psychologist • OT • Speech Pathologist • Self, carer, support worker
Psychosocial disability	<ul style="list-style-type: none"> • WHODAS • <u>HoNOS</u> • LSP-16 • CANSAS 	<ul style="list-style-type: none"> • Support worker, self, <u>carer</u>, GP • Trained support workers, • Psychologist • Social worker • GP • Mental health and allied professionals
Intellectual disability, Developmental delay, Global developmental delay, Down syndrome	<ul style="list-style-type: none"> • DSM-V • Vineland adaptive behaviour scale • WHODAS/PEDICAT 	<ul style="list-style-type: none"> • Clinical Psychologist • Psychiatrist • Pediatrician • OT • Speech pathologist

Outcome of the Project



Increased knowledge across the team, creating a higher level of confidence

From the referrals used for the trial, only 4 were suitable to proceed to assessment. The result of those post assessment were

- 1 accepted into NDIS
- 2 pending

Learnings and Challenges so far:

- Providing tools and knowledge to the team is critical
- Lack of knowledge impacted referral quality
- Lack of funding to support assessments, especially diagnostic assessment
- Transient history of clients proving difficult to get background information

Feedback from Link Wentworth Team:

Increasing their knowledge of NDIS and how to assist people with applications has resulted in more efficient application processes and higher confidence of the team when guiding people through the NDIS processes



Help, hope and purpose

Questions?