

Submission to the Department of Social Services: Public consultation on NDIS Supports

27 July 2025



WAAMH

**Western Australian Association
for Mental Health**

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1. Introduction

WAAMH appreciates the opportunity to provide feedback on the public consultation on NDIS Supports.

As the peak body for the community managed, non-government mental health sector in Western Australia, WAAMH's members include specialist providers of psychosocial disability services under the NDIS, and others that are generalist NDIS providers who also support people with psychosocial disability.

WAAMH has drawn on feedback from a sample of service providers, participation in a forum attended by NDIS participants, service providers and family members/carers, discussion with NDIS researchers and a brief review of existing literature and articles.

2. The context for the views expressed

While we sought feedback on the specific consultation question, providers did not limit their reflections to this, as they felt that they are navigating a range of changes, the effects of which are difficult to untangle and isolate.

We heard a consistent view that the interim supports rules do not provide the clarity needed and require changes to deliver on the aim of ensuring participants with a psychosocial disability have greater choice and control over how they want to live their life.

We also heard that negative impacts are resulting for some participants and service providers from the suite of changes being implemented following the NDIS review, the NDIS Legislation and the NDIS support lists.

Views about the NDIS interim support rules must be seen in the wider context in which a series of changes are occurring in the NDIS scheme. This is seen by many as presenting mounting challenges for the scheme. Our members find it difficult to disentangle the specific impact of the interim NDIS support rules from the combined impact of all the other changes. These changes include:

- Changes to budget caps and plan budgets
- Eligibility questions, for example people's eligibility for the NDIS
- Legislative changes
- Pricing review
- Defined (reduced) funding periods
- New support needs assessments
- Restrictive access to community-based support coordinators with proposals to replace them with government employed navigators.

As Muriel Cummins notes, each of these changes represent a major shift in how people will access, manage and make use of their support.¹ Combined, they signal a major transformation of the scheme.

The view of Muriel Cummins is reflected in the feedback we are hearing:

"But these changes are not without risk. Taken individually, each reform raises complex questions about implementation and equity. Taken together, they form a wave of transformation that is snowballing with little clarity or transparency. Many of the

¹ Cummins M (2025) *Community responses to Ndis Therapy funding cuts highlight what really matters. Australia's deep commitment to the NDIS*. Every Australian Counts, 7 July 2025

proposed changes are being driven by cost-cutting rather than co-design, and advocates argue the cumulative impacts on participants have not been properly considered. Advocates are increasingly warning that the pace of reform is too fast, too top-down, and risks undermining participant safety, autonomy, and wellbeing. The call is to slow down, to listen, and to prioritise people over process.”²

WAAMH's submission provides an overview of the feedback we heard, including the difficulties experienced with the interim lists from both the sector and participant experience, and other issues related to the functioning of the NDIS.

3. Decisions being made by NDIA are narrowing and reducing access to NDIS supports for some people with psychosocial disability

The Summary Paper on NDIS Supports rules consultations states that³:

“The changes aren’t meant to reduce the levels of support a person gets through their NDIS Plan.”

Service providers and participants report that many decisions being made by NDIA on support lists appear to be arbitrary and not transparent. They report that decisions are often made without consultation or communication with participants or service providers, and that these decisions are reducing levels of support for some participants (for example through decisions which reduce the funding available for participant’s NDIS supports).

Providers report that plan budgets are being reduced (in some cases by 50 per cent) for people with complex psychosocial disabilities, without any consultation or communication with the participant or their provider. This has significant impacts on reducing and narrowing the supports the participant can access.

Providers report that some plans for people with psychosocial disability are being stripped back, resulting in reduced plan funding, less support and less flexibility to use funding to address their needs. Providers are also seeing a trend towards reduced access to allied health, such as physiotherapy, psychology and various forms of therapies, such as art therapy for people with psychosocial disability. This is also being reported by others.^{4 5}

One provider reported that the NDIA changed the ending date of a participant’s plan as well as the commencement date for a new plan, without consultation and without communicating the decision to the participant or their provider. The provider and the participants were preparing evidence for a new plan in line with the original plan end date when they found out about the change.

² Cummins M (2025) Community responses to Ndis Therapy funding cuts highlight what really matters. Australia’s deep commitment to the NDIS. Every Australian Counts, 7 July 2025

³ Australian Government (2025) *Summary Paper: NDIS Support rules consultation*, Page 1

⁴ Personal communication with Professor Jen Merry Smith, University of Sydney who is leading researcher into the impact of changes to the NDIS on psychosocial disability.

⁵ Cummins M (2025) Community responses to Ndis Therapy funding cuts highlight what really matters. Australia’s deep commitment to the NDIS. Every Australian Counts, 7 July 2025

4. The supports rules are adding to, and creating, confusion, frustration, lack of clarity and uncertainty

Feedback from our members would suggest that changes to the support rules have not fulfilled the intention of providing greater clarity and certainty. Rather, we heard that there is greater confusion and uncertainty about many aspects of NDIS supports.

Providers told us that this confusion is compounded by poor planning, inadequate communication, varying interpretation of the support rules, and lack of transparency about the numerous changes to the NDIS being rolled out by the NDIA.

One provider said:

“All this constant change, it’s just hard to keep pace with it all... when you try to get an explanation from the NDIA, the new legislation is used to explain everything... They just use the new legislation and new rules to say no to everything.”

There are different interpretations of the NDIS transitional support rules for people with psychosocial disability. We heard that among the various ‘gatekeepers’ including plan managers, support coordinators, navigators and service providers, there exist quite different interpretations and understandings of the application of support rules.

- There is confusion about where and when the rules apply – do they apply to all plans, some plans, or plans after a certain date?
- The idea of having an ‘in and out list’ is confusing to many providers and participants, and the interpretation of rules seems to vary markedly.
- There is confusion over what can and can’t be funded. As an example, standard household items (kettles, vacuums, robot vacuum) seem to be excluded for some people but are available for others.
- There is some confusion among organisations that provide services to people with psychosocial disabilities, over the way the rules have been drafted. In some cases, there is overlap between categories such as ‘psychosocial recovery coaching’ and ‘life transition supports’. In addition, some community mental health supports such as art therapy are excluded, despite the evidence supporting their value for people with psychosocial disability.
- There is a view that the support rules are stifling innovation and there is a perception of false economy as some rules mean some services and products cost more, and limit access to more affordable services and products.
- The blanket exclusion of everyday items on the support lists has created unnecessary concern and distress for some participants.
- There is a view that there has not been enough discussion on the real-world application of the rules, which varies considerably.
- There appears to be fear amongst participants and plan managers about inadvertently doing the wrong thing.

Providers’ views about the support rules are shaped by their experiences of the pace of change, the amount of change being experienced and the difficulty the changes create. It is also influenced by the difficulties they have in getting answers to the questions they and the participants have about these changes.

The cumulative impact of these changes is causing some agencies to contemplate withdrawing from the NDIS.

5. Lack of clarity about the term ‘evidence’

Service providers have questions about a lack of clarity around the issue of supports identified as ‘not evidence based.’ This includes:

- What is considered evidence and what is considered ‘limited evidence’?
- Whose evidence is worthy of consideration? Is evidence from participants or the community considered ‘evidence’. Is the lived and living experience of participants considered ‘evidence’. And if not, why not?
- It is not clear to some participants and service providers why some therapies are excluded, and the evidence on which that decision is based.

One provider said decisions are being made to reduce access to support, contrary to evidence being presented of the need for those supports and/or the risk of ending, reducing or refusing those supports:

“They make decisions contrary to all the evidence that is given, and then they use the new legislation and new rules to say no... or they tell us to seek a review.”

Acknowledgement of Country

The Western Australian Association for Mental Health (WAAMH) acknowledges the traditional custodians of the land on which this submission was developed, the Whadjuk people of the Noongar Nation. We acknowledge their continuing and unbroken connection to land, sea and community. We pay our respects to their culture and acknowledge their ongoing contribution to Western Australian society and culture.

Acknowledgement of Lived & Living Experience

WAAMH also acknowledges the individual and collective expertise of people with a living or lived experience of mental health challenges or alcohol and other drug use, as well as the families and carers who provide support.

About WAAMH

WAAMH is the peak body for the community managed (non-government) mental health sector in Western Australia, with organisational and individual members across metropolitan and regional WA. WAAMH has been engaged in the mental health sector for nearly 60 years.

WAAMH’s membership comprises community managed organisations providing mental health services, programs or support in community settings, as well as individuals and families with lived experience of

mental health issues and suicide, with whom WAAMH engages in genuine partnership. Community managed organisations provide a critical network of services to support people affected by mental ill-health and their families, and help them live meaningful lives in their communities.