



Commonwealth Psychosocial Support
Supporting new clients and Commonwealth community mental health clients to access psychosocial support – NDIS, CoS and NPS

Purpose

The purpose of this fact sheet is to:

- outline the support for people who are not currently receiving support from a program or the NDIS, as well as Commonwealth community mental health clients of Partners in Recovery (PIR), Support for Day to Day Living in the Community (D2DL) and Personal Helpers and Mentors (PHaMs) who are yet to transition to the National Disability Insurance Scheme (NDIS), Continuity of Support (CoS) or the National Psychosocial Support (NPS) program;
- outline the role of Primary Health Networks (PHNs) in supporting the transition of Commonwealth community mental health clients; and
- outline the support that will be provided to PHNs in establishing services and transitioning clients to supports and services under new arrangements.

What’s going to change?

PIR, D2DL and PHaMs programs are ending on 30 June 2019. To ensure that existing PIR, D2DL and PHaMs clients as well as people who are not currently receiving any support receive access to appropriate psychosocial services, the following initiatives have been put in place.

Funding will be allocated to PHNs for the following:

Program	Funding	Timeframe	Purpose
<i>National Psychosocial Support</i>	\$80 m (with matched funding from states and territories)	Four years from 2017-18 to 2020-21. (Services available from 1 January 2019)	NPS will support people who are not currently receiving support, and Commonwealth community mental health clients who are yet to test eligibility for supports under the NDIS or who have not yet transitioned to the NDIS by 1 July 2019.
	\$121.29 m	12 months (Services available from 1 July 2019 – 30 June 2020)	
<i>Continuity of Support</i>	\$109.8 m	Ongoing (Services available from 1 July 2019)	CoS will support Commonwealth community mental health clients who are ineligible for support under the NDIS from 1 July 2019.

Program	Funding	Timeframe	Purpose
<i>Interface</i>	\$19.1 m	18 months (from 2018-19 to 2019-20)	Funding for PHNs to commission services for Commonwealth community mental health clients under NPS and CoS, and to support the transition of clients.

Why has the Commonwealth contributed additional funding to the NPS?

An additional \$121.29 million of funding has been contributed by the Commonwealth to the NPS to ensure that there are no gaps in service delivery and to give Commonwealth community mental health clients more time to test their eligibility for supports under the NDIS.

In particular it is to ensure that Commonwealth community mental health clients who have not yet tested their eligibility for supports under the NDIS, or are waiting to receive an access decision or plan for the NDIS, continue to receive support.

These clients will be supported for up to 12 months while they test their eligibility for supports under the NDIS and transition to appropriate ongoing supports either under the NDIS or CoS.

Can current PIR, D2DL and PHaMs service providers be funded to provide these services?

Yes, PHNs can fund current PIR, D2DL and PHaMs service providers to deliver services under the CoS and NPS programs. This will support clients to stay where they are (if they choose to) and will assist service providers to transition their clients to the NDIS, CoS or NPS.

How will people access support who are not Commonwealth community mental health clients under PIR, D2DL or PHaMs and who are not in the NDIS?

People who are not receiving supports under PIR, D2DL or PHaMs, or the NDIS will be provided support through the NPS, if they are found eligible.

What support will be provided to PHNs to assist clients to transition to the NDIS, CoS or NPS?

The Department of Health has funded Flinders University to support PHNs through the NDIS Transition Support Project. This includes training about the NDIS as well as tailored onsite support to assist the PHN to commission services for these clients. For more information see the [Flinders University Transition Support Project website](#).

When will we receive our budgets for CoS and NPS?

PHNs will receive a Letter of Comfort with indicative budgets for CoS, NPS and Interface funding around the end of March 2019.

PHNs will receive separate budget allocations for the three components: NPS, CoS; and Interface.

Summary

In the 2018-19 Federal Budget the Australian Government announced \$109.8 million from 1 July 2019 for CoS. This measure will provide current PIR, D2DL and PHaMs clients who are found ineligible for supports under the NDIS with supports to achieve similar outcomes to those in PIR, D2DL and PHaMs. These psychosocial supports will be commissioned through the PHNs.

Additionally, \$80 million was allocated over four years from 2017-18 for the NPS. States and Territories have matched funding and PHN commissioned psychosocial support services commenced on 1 January 2019 for clients who are not receiving supports under the NDIS or Commonwealth community mental health programs - PIR, D2DL and PHaMs.

In addition to the \$80 million allocated under the NPS, the Australian Government is investing \$121.29 million to provide up to 12 months support for clients from Commonwealth community mental health programs PIR, D2DL and PHaMs which cease on 30 June 2019. This is to provide additional time for clients to test eligibility for supports under the NDIS and transition to appropriate ongoing supports. While these services will be delivered under the NPS, States and Territories will not be required to match this funding under the bilateral agreements.

To support PHNs co-design and commission services for their local areas the Department of Health and the Department of Social Services committed \$19.1 million from 2018-19 to assist PHNs to strengthen the interface between the NDIS and Commonwealth psychosocial supports. This funding will assist PHNs to plan and commission services and establish pathways to support the transition of clients to new arrangements to ensure participants have access to appropriate services at the right time.

How will people get psychosocial support?

