INQUIRY INTO EQUITY, ACCESSIBILITY AND APPROPRIATE DELIVERY OF OUTPATIENT AND COMMUNITY MENTAL HEALTH CARE IN NEW SOUTH WALES

Name: Name suppressed

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Partially Confidential

NSW Community Mental Health in my experience working for a commercial disability organization is that any intervention is highly reactive, and initiated far beyond the time where successful early intervention can take place. We know that since the roll-out of the NDIS, the insurance scheme is heavily leaned upon by pre-existing services who, among other reasons,

- No longer have services that were once available to support individuals with mental health needs
- No longer feel a sense of accountability for supporting individuals within their role duties, under the impression that NDIS is has assumed all responsibility
- Are uninformed on the separation of responsibilities between NDIS and other service systems (and this goes both ways interagency cohesion is an equally shared responsibility).
- See NDIS Principles to determine the responsibilities of the NDIS and other service systems.

Cross-cultural health between Community Mental Health and other systems are broad in range, with an overshadowing sense of friction.

More roles within health and the NDIS to educate members of the human services sector to differentiate between different systems purpose and model will help us to stay accountable for our responsibilities, timing of intervention and engagement, and mutual leverage in supporting individuals in need.