SHELTER
Because home matters

City of Ipswich

inCommunity
innovate. inspire. independent.

MORE THAN CARE
SUPPORT TEAM

ONE BRIDGE

We ndis

Supported Accommodation Access Initiative

Bridging the gap between health, housing, local government, and NDIS services to respond to long-term transiency due to severe and enduring mental illness.

HEALTH | HOUSING | COMMUNITY | LOCAL GOVERNMENT | NDIS SERVICES | HEALTH SUPPORT

DELIVERING FOR QUEENSLAND

Queensland Government

Overview of the initiative:

Target & connect
We engage with outreach teams to identify individuals experiencing chronic transiency and link them to supported housing and ongoing support.

Focus on the most vulnerable
We prioritise people who have fallen through the gaps of traditional systems, leading to failed tenancies and ongoing instability.

Stronger together
We bring together key health, housing, disability, justice and community stakeholders to deliver coordinated, person-centred support.

Housing First, always
We adopt a Housing First approach—adapting services to the person, not the other way around.

SHELTER Because home matters | City of Ipswich | MORE THAN CARE SUPPORT TEAM | inCommunity innovate. inspire. independent. | ONE BRIDGE | We ndis | DELIVERING FOR QUEENSLAND | Queensland Government

From Conversations to Outcomes

SHELTER
Because home matters

A Community Development Framework in Action

CONVERSATIONS

- Shared understanding emerged
- Frontline workers identified system gaps
- Common challenges became visible

COLLABORATION

- Initial test case demonstrated success
- Stakeholders aligned around a shared goal
- Participant placed at the centre

FORMALISED PROCESSES

- Referral pathways established
- Roles and responsibilities clarified
- Regular cross-sector meetings

MEASURABLE OUTCOMES

- Housing secured
- Support systems connected
- Sustainable long-term outcomes

LISTEN > CONNECT > COORDINATE > DELIVER

SHELTER Because home matters | City of Ipswich | MORE THAN CARE SUPPORT TEAM | inCommunity innovate. inspire. independent. | ONE BRIDGE | We ndis | DELIVERING FOR QUEENSLAND | Queensland Government

The key stakeholders:

The superstars who make this initiative possible

SHELTER
Because home matters

Ipswich City Council
Provided fiscal brokerage through their Street to Service Partnership Funding to cover some of the associate costs.

HOME & InCommunity Assertive Outreach
The 'boots on the ground' providing access, warm intakes, and identifying and referring relevant individuals.

More Than Care
The primary NDIS housing provider. Their buy-in has been key to the current success of the pilot.

QLD Health Mental Health Teams
Led by Emma Wilson, Social Work Discipline Lead for West Moreton, connecting stakeholders with relevant QLD Health case managers and services.

Nic Marcon
Clinical psychologist who provides outreach therapeutic support and assessments to assist with NDIS evidence.

Q-Shelter Service Integration
The lead platform – managing referrals, coordination, follow-ups, stakeholder communication and reporting.

One Bridge (funded by PHN)
Community nurses who assist with support letters, GP connections and general health services.

The Support Connector
Provides hands-on coordination to complete NDIS Access Requests, liaise with GP, review evidence and advocate on behalf of individuals to access support.

SHELTER Because home matters | City of Ipswich | MORE THAN CARE SUPPORT TEAM | inCommunity innovate. inspire. independent. | ONE BRIDGE | We ndis | DELIVERING FOR QUEENSLAND Queensland Government

The Process

(because we all love a good process!)

1. An individual is identified through the Outreach Teams, who seek consent from the client.
2. NDIS consent, Q-Shelter consent and a Q-Shelter referral form is completed, and sent to ISIG.
3. Meet as a stakeholder group to discuss the referral, and offer a placement.
4. Link with Queensland Health, and other relevant supports. Complete a stakeholder meeting and allocate tasks.
5. The Accommodation provider provides regular updates to the group on how the client is going in the accommodation.
6. The Support Connector links with the accommodation provider/outreach teams/ relevant health specialists/NDIA and determines next steps for potential NDIS Access.
7. The Support Connector coordinates and collates information as it comes in. Providing regular updates to the wider group and identifying barriers so that these can be resolved with support of the wider group. This work can include attending GPs, and linking with our partner OT and Psychologist.
8. Access request is submitted by the Support Connector, and our partner LAC expedites the Access Request internally through their channels, based on severe housing vulnerability.
9. Access is granted – the client then has their supports implemented, stabilised and moved to a long-term property with their individual supports.
10.

Success – Bed filled
The bed is then filled with another referral.

Access NOT granted
Evidence is reviewed and the stakeholder group discusses what further information is needed and supports to obtain.

Barry's Story

When the system wasn't built for the person

SHELTER
Because home matters

2019
Featured in a news story about homelessness

7+ Years
Experiencing chronic homelessness

Multiple Failed Placements
Boarding houses, social housing and supported accommodation

Justice & Health System Contact
Periods of incarceration and psychiatric hospitalisation

Application Stalled
NDIS request on hold due to inability to maintain contact

Referred to the Initiative
Through HOME and InCommunity outreach. Consent and NDIS Consent obtained at intake.

KEY CHALLENGES

- Severe and enduring mental illness
- Substance misuse disorder
- Fragmented service delivery
- Lack of stable housing
- Vulnerability to exploitation
- Difficulty navigating complex systems

One person. Multiple systems. No single pathway to support.

Barry's Story Continued

...incarceration: a turning point, not the end

SHELTER
Because home matters

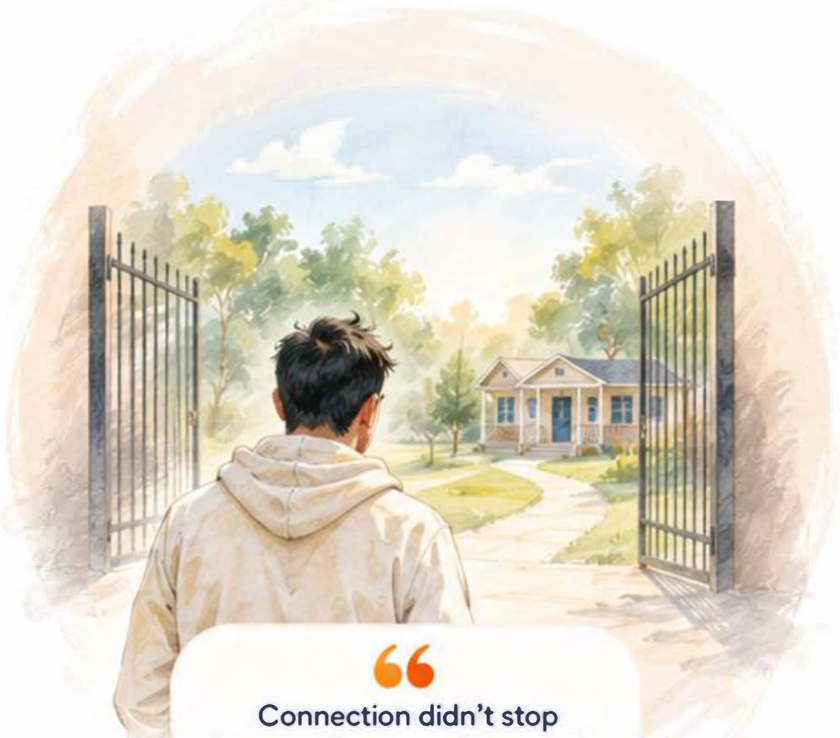
1. During this initial phase
Barry was incarcerated. This is often the critical breaking point for traditional service delivery to dissolve and the consumer to be lost to the system.

2. Through the initiative
Q-Shelter linked back through West Moreton Community Mental Health, who connected the group with the relevant Prison Mental Health Case Manager.

3. It was determined
Barry was being held in custody simply due to not having a permanent address to be bailed to.

4. The stakeholder group
Provided a position in one of the supported living placements available to initiative participants.

5. Outcome
This address was then fed back to Prison Mental Health services, who advised Barry's Legal Aid lawyer and applied for release. Barry was released from custody within 48hrs to More Than Care, where he still resides.



> Connection didn't stop because Barry was in custody. It's what changed his outcome.

A coordinated response created opportunity

- Community mental health reconnected the dots
- Prison mental health engaged
- A supported housing option was identified
- Legal Aid acted quickly
- Barry was released within 48 hours to safe, supported accommodation
- Barry continues to reside at More Than Care

When systems connect, people don't get lost.

Progress, Setbacks and Support

SHELTER
Because home matters

Recovery isn't always a straight line,
but no one has to navigate it alone.

1

Stability Begins

- Supported accommodation secured
- Health supports resumed

2

Building Momentum

- NDIS application progressed
- Daily living supports established

3

A Setback

- Housing placement challenges
- Brief return to rough sleeping

4

Coordinated Response

- Outreach re-engaged
- Stakeholders worked together

5

Stability Restored

- Better accommodation match
- Ongoing supports in place

Success wasn't avoiding setbacks. Success was responding to them.

7 YEARS
WITHOUT A HOME

6 MONTHS
OF COORDINATED SUPPORT

SAFE HOUSING

HEALTH SUPPORTS

NDIS ACCESS

LONG-TERM STABILITY

Meet the Stakeholders

Perspectives from the people behind the initiative

Melissa

Ipswich City Council

Street to Service Partnership Funding

- What challenge was Council seeking to address?
- Why did this initiative resonate?
- What outcomes have been most significant?

Casie

More Than Care

What does this initiative mean to you?

- What difference have you seen for participants?
- What role does supported accommodation play in long-term success?
- What has made this partnership work?

Darren

InCommunity

What are your thoughts on this initiative?

- Why is assertive outreach so important for this cohort?
- What barriers do people face when trying to access support?
- What have you learned through being involved?

Meet our stakeholders: Melissa – Ipswich City Council

City of Ipswich City Council

Why did Council get involved?

- Local government is the closest level to the community.
- While housing and homelessness are not direct council responsibilities...
- **Homelessness is everyone's business.**

What stood out?

- Strong partnerships and shared commitment to our community.
- Services are doing incredible work.
- But often lack the flexibility or funding to meet unmet needs.

How did Council help?

- Council provided **$20,000** in flexible brokerage funding.
- To help services respond to unmet needs and remove barriers.
- To gather data and evidence to advocate for stronger services.

What are we most proud of?

- Proud to support dedicated professionals making a real difference.
- Delivering better outcomes for Ipswich's most vulnerable.
- Working together, focusing on people, and doing things differently.

Meet our stakeholders:
Casie from More Than Care

MORE THAN CARE
SUPPORT TEAM

I want to start with a rhetorical question. How many times have you walked into a situation and thought:

"This will work." And then it... doesn't. You step back, looking at the mess in front of you, and realise the lens you're looking through doesn't show the full picture.

All of us operate through a lens shaped by experience. For most of us, that includes stability, relationships, connection... and a belief that if things go sideways, it will be okay. So, the systems we design — housing, funding, risk tolerance — are built from that same lens. But the cohort we're talking about... those living on the margins...they're not operating from that lens at all. They're on the streets, behind bins, on the edge of systems rather than inside them. I'll give you a real example.

One of our clients — at six years old, while resisting sexual assault, was injected with heroin to force compliance. That was the start of long-term addiction and continued abuse. So, when we talk about "putting the pieces back together" his reality is: there were never safe pieces to begin with.

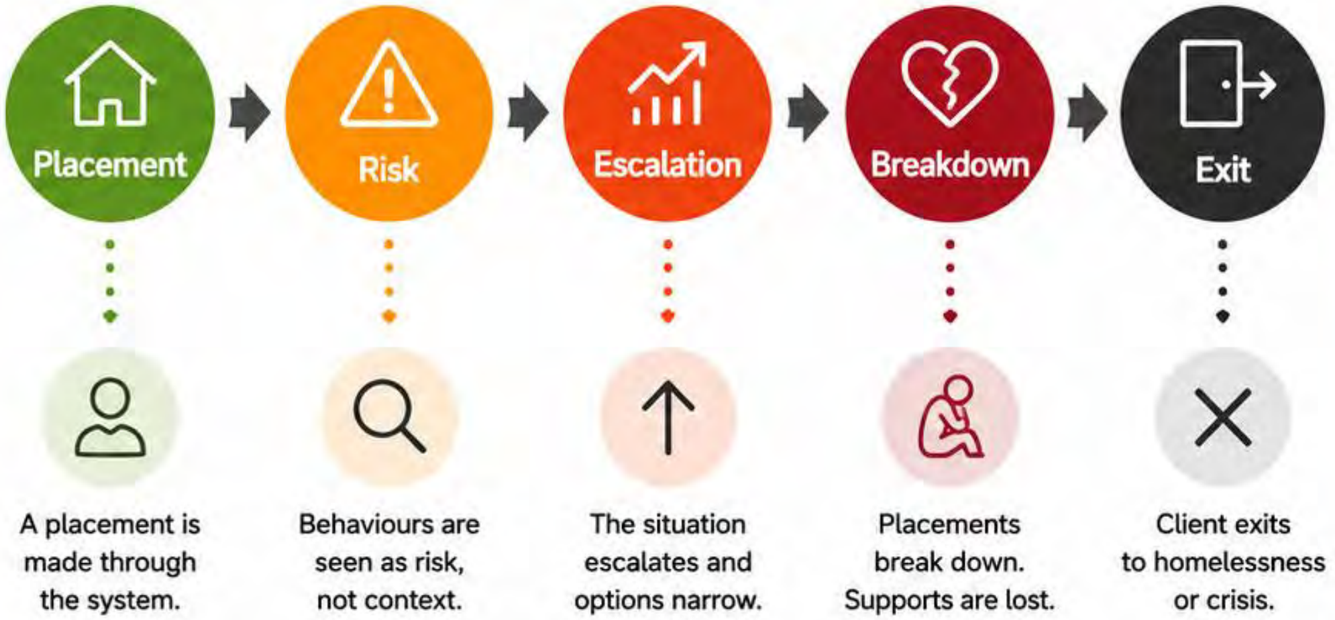
More Than Care continued...

When systems aren't built for the person in front of us

MORE THAN CARE
SUPPORT TEAM

What we're seeing

- Traditional systems manage risk.
- This cohort sits outside standard assumptions.
- Housing instability leads to repeated placement failure.
- The cycle repeats.



The challenge

Not "How do we improve the pilot?"

But:

> **How do we create a response for people that existing systems were never designed for?**

Without the right backing, brokerage and coordinated support, the outcomes we are seeing will not scale.

Meet our stakeholders:
why does this initiative inspire you?

inCommunity
innovate. inspire. independent.

InCommunity Outreach and the Home Team (Housing) work closely together in a “boots on the ground” capacity to meet with disadvantaged clients where they are. This has built trust, gained consent, and put our clients’ needs at the centre of our practice.

We bring the office to our clients, reducing stigma and building genuine relationships at the ground level. This trust allows us to connect clients with the services and supports they need, a relationship established over the past 5–6 years.

We’ve seen firsthand how chronic homelessness takes a toll. The NDIS Outreach Initiative offers a real opportunity for people like Barry. For a service that has been part of this community since 1982, this initiative is how we close the cracks.

Interesting observations...

SHELTER
Because home matters

According to the Institute for Health and Welfare

- **800,000** Australians living with severe mental illness
- **Up to 500,000** live with severe mental illness but do not have access to NDIS support
- **1 in 5** Australians experience some form of mental illness
- **88,800** clients are assisted annually by Specialist Homelessness Services who have a diagnosed mental illness
- **45,900+** of those clients are already homeless when they present for help (over half)
- **9,000** are rough sleeping (remembering that not all of these individuals are captured for reporting)

According to The Medical Journal of Australia

The annual cost of one person with mental illness experiencing rough sleeping can cost the community **$25,000**. However, this goes up to between **$55,000** and **$88,000** when counting justice system interactions and health presentations.

THANK YOU

ANY QUESTIONS?