

17 November 2014

Competition Policy Review Secretariat
The Treasury
Langton Crescent
PARKES ACT 2600

Dear Sir or Madam

Thank you for the opportunity to make a submission in relation to the draft report of the Competition Policy Review. We welcome the review of competition policy to ensure Australia's economy is well placed to meet the challenges of the future. There are many areas of relevance to UnitingCare Queensland in the draft report and we have noted these. This submission focuses on one area that is of particular interest to us - the move towards greater competition in the delivery of human services and the implications for rural and remote communities.

UnitingCare Queensland provides health and community services to thousands of people every day of the year through its service groups – UnitingCare Community, UnitingCare Health, Blue Care and more recently ARRCS (Australian Regional and Remote Community Services) which delivers aged and community care services in the Northern Territory. On behalf of the Uniting Church we have supported Queensland communities for over 100 years. Our 15 000 staff and 9 000 volunteers care for and support people from all walks of life, including older people, people with a disability, children, families and Indigenous people. Our staff travel thousands of kilometres to reach people in some of the more remote areas of Queensland – from Thursday Island in the far north, to just south of the Queensland border and out west, as far as Mt Isa – and now in the Northern Territory.

It is encouraging that the Review Panel recognises that the unique characteristics of some rural and remote areas do not provide a viable market for many providers. As a not-for profit organisation, UnitingCare Queensland provides health and community services in areas where many providers are unable to operate a viable service, particularly for-profit providers. A 2013 Deloitte Access Economics study commissioned by UnitingCare Queensland found 73% of Blue Care facilities are located in 60% of Queensland's most disadvantaged locations. In contrast, only 43% of for-profit providers are concentrated in similar areas.

The need to ensure a comprehensive range of well-coordinated health and human services accessible to people in rural and remote communities is increasingly important given the escalating rates of chronic disease and older people in many rural areas and the persistent decade gap in life expectancy for Indigenous people. Approaches that reduce regulation and compliance for health and human service providers, without compromising safety and quality and workforce reforms, are important factors that will make a difference to our ability to design and deliver services that meet the needs of people in rural and remote areas. In this respect there are a range of issues to consider:

- Less complex government tendering and contracting processes coupled with more streamlined financial and performance reporting has the potential to reduce duplication

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and administrative expenses. It is commendable that the Queensland and Australian Governments have committed to a program of red tape reduction. In reality achieving a tangible reduction in unnecessary administrative burden is challenging, partly because funding arrangements for programs and services remains siloed and fragmented.

- The viability and sustainability of services in regional, rural and remote communities can be compromised by a lack of critical mass or economy of scale. This is particularly the case where our community services are funded to provide a discrete service in a regional community. This drives us to consider better ways of delivering services in regional, rural and remote areas including partnerships with other providers.
- Expanding the scope of practice for nurse practitioners to perform a range of functions previously restricted to medical practitioners has provided an opportunity to provide safe and cost effective primary health care services particularly in rural and remote areas. Despite this, scope of practice restrictions for nurses and allied health professionals remain an impediment to the effective provision of comprehensive health care services in rural and remote Queensland, particularly the delivery of effective preventative health programs and services. Blue Care is actively pursuing partnerships with the private sector to develop new models of care, including telehealth in the area of chronic disease, which has significant application in rural and remote areas. Freeing up inefficient and ineffective workforce restrictions based on traditional roles and responsibilities has the significant potential to improve outcomes for telehealth and other clients.
- Recruiting and retaining a quality and sustainable workforce remains an impediment to the delivery of quality health and human services in rural and remote areas. Developing the local workforce is a critical factor in building a sustainable and quality service. Our service group ARRCs is more than an aged care provider. It is an integral part of remote communities, recruiting staff and volunteers from local areas and partnering with other community service providers, government departments and agencies, hospitals and GPs.

If you would like to further discuss the issues I have raised or would like any more information about UnitingCare Queensland and its services, please do not hesitate to contact me.

Yours faithfully
UnitingCare Queensland



Anna Moynihan
Director Strategy

On behalf of
Anne Cross
Chief Executive Officer

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