Dear Madam/Sir,


Primary Care Partnerships (PCPs) are a Victorian Government funded initiative bringing together health and social services who in partnership utilise a place-based approach to identify local service issues and together develop solutions. Twenty eight PCPs across the state of Victoria connect over 800 organisations from the primary health and social service sectors, as well as local government. PCPs focus on supporting service providers and the community to navigate our ever changing complex service system.

Victorian Primary Care Partnerships (VicPCPs) welcome the opportunity to provide feedback on the Draft Report ‘Introducing Competition and Informed User Choice into Human Services: Reforms to Human Services’. In relation to the Commission recommendations VicPCPs would like to highlight the following areas:

*Competition and contestability*

When developing tender submissions, encouraging collaboration and coordination and providing sufficient time for all types of organisations to develop tender documents will:

- ensure services are better designed to meet the needs of service users and therefore increase positive outcomes for service users; and
- reduce competition and encourage partnership and collaboration to develop tenders. This is especially important for services in rural and remote areas which are often smaller and have reduced capacity to win tenders on their own. It would also enable a collaborative approach in the development of tenders across partners reducing the impact on delivery of core business.

Increasing contract times will ensure:

- more stability for service users and the family and community service workforce; and
- allow time for services to ensure appropriate evaluation and monitoring to support them to evolve and improve overtime in order to achieve positive outcomes for service users.

*Achieving outcomes and increasing effectiveness of services*

Positive health and wellbeing outcomes for service users will be achieved through the recommendations within the report which cover:

- allowing service users to have more input in the planning development and delivery of services, and adjusting provider selection processes;
- supporting the development of consumer focused outcome measures; proactive sharing, coordination and use of data; robust evaluation of how providers or service systems are performing;
- as part of the identification of population health priorities, a focus on understanding the service system through mapping and analysis of the characteristics and needs of consumers;
- greater coordination of services between government agencies and providers. Seek to better understand where there is duplication of service provision and gaps (existing or potential) between agencies; and
- seek to incorporate strategies and frameworks that also consider sustainability of services.

VicPCPs recommend the adoption of a place based approach to service model development which would include mapping of services and information/data gathering to understand the needs of individual communities. VicPCPs also recommend that this type of exercise should not be implemented before investigating and understanding information which already exists across services and communities, this will avoid duplication and wasted effort.

The above measures will not only improve outcomes for individuals and families using services but will also help to reduce the cost of service provision to the economy.

Access to services

The report recommends when selecting providers of family and community services for Indigenous communities that the government should take into account community engagement, collaboration and coordination with existing services providers and community bodies, as well as addressing workforce gaps and capabilities.

VicPCPs recommends that the government should implement this approach across all services and all communities’. A strong focus on a place-based approach and co-design will support the development of services and a service system which meets the community’s needs, can be easily accessed, and achieves positive health and wellbeing outcomes.

VicPCPs also recommends further attention be given to understanding how to close the equity gap for all vulnerable populations in accessing services, especially those in rural and remote communities where disadvantage can be compounded by service gaps and less choice, lack of transport, geographic isolation and poor internet access.

In rural and remote areas increasing the choice for patients attending public outpatient services at the point of referral must also consider better resourcing to access specialist services, for example greater provision of telehealth options. This will assist in addressing service gaps, increasing access and reducing long travel times.

The introduction of greater user choice

VicPCPs would like the government to consider the possible risks to vulnerable populations when implementing consumer directed care models. For vulnerable populations, individuals with chronic and complex conditions and lower levels of health literacy the new models of care may risk exacerbating inequalities. It will be important to educate and support consumers to make informed decisions and consider how to address barriers to service choice in rural and remote communities.

Thank you for the opportunity to provide a response to the report.

Yours faithfully

Barry Hahn,
Chair, Victorian Primary Care Partnerships