

## **Productivity Commission Inquiry into the increased application of competition, contestability and informed user choice to human services**

I am a Coordinator: Mental Health Respite and work alongside people with mental health, ID, AOD issues and their families across several large regional areas of Victoria and have been employed in the sector for 7 years. I do not believe that social and community services should be open to private (for profit) providers to tender for government funding because of inevitable outcomes that will include further reduction in the quality of services, suitability of future 'staff' recruited to perform roles and likelihood that government contracts will be awarded to multinational interests and inevitably a one-size fits all approach. Not-for-profits are better placed to deliver community services because they are more likely to be located within the communities they serve and thus attuned to regional differences e.g. delivery of services in Bendigo often requiring different approach/style to that for Mildura for example. Regional areas which now must rely on outreach workers rather than local workers with local knowledge negatively impacts on people living in those areas and clearly delivers less 'choice' and flexibility for those living there. Many people with mental health issues and their families in regional areas cannot access technology e.g. internet, because they can't afford it or experience a range of other barriers e.g. little prospect of meaningful employment or secure housing. While, for example, the DSS 'Carer Gateway' initiative may be feasible for those in metro areas it is largely inaccessible to those in regional and remote areas. Constant tendering and competition between providers creates profound uncertainty for both the workforce and people being supported. Currently DSS has extended contracts for staff to just September 2016 for Respite and PHaMS workers! This means many skilled workers are likely to seek out more secure employment in other sectors and take their skills with them. Many people with mental health issues and their families in regional and remote areas 'fall through the gaps' or receive minimal services as it is, this uncertainty heavily impacts on them and serves to further disempower an already vulnerable group and at a time when many 'unpaid community carers' are rapidly ageing and supporting those with mental health and other issues many years past the official 'retirement' age. It is common for people in their mid-eighties to be working (albeit unpaid and often unable to access other entitlement e.g. Carer Allowance) to support family members with complex needs. Another often 'forgotten' vulnerable group to have emerged since de-institutionalization are those with mental health issues who act as 'carer' to someone with a more serious illness and who like aged carers continue to fall through the gaps and experience multiple barriers. I don't know what the future holds for my organisation but feel that there are likely to be job cuts and most likely a more limited range of services being offered to people with mental health issues and their families in the not too distant future. The impact of more competition in the sector will inevitably drive many in the workforce away to seek more secure work. I believe that the only beneficiary of increased 'competition' (from for-profit organisations) will be governments in Australia.