

Thank you for the opportunity to respond to the Human Services: Identifying sectors for reform” issue paper.

I have outlined some comments for my feedback. I have drawn on my knowledge and skills from working predominantly in the health sector for 30 years.

With thanks

Nora

(i) Attributes

As a set of attributes (p.7.), quality, equity, efficiency, responsiveness and accountability, have the potential to encompass critical aspects of human services. The understanding is predominantly in the use of the words and clear definitions, with the ability to explore ways to better measure these “attributes” and their meanings.

Equity I believe should extend to understanding the outcomes and not merely that services are accessible to all people who need them. There are many barriers to accessibility. For example health literacy, ability to navigate systems, cultural understandings of systems and processes. As noted in the example given regarding emergency medical care in remote areas and metropolitan areas differ, but in order to address the barrier of access for someone living in a remote area requires different set of resources compared to someone living in metropolitan areas. This same approach would need to be identified to other barriers, examples as mentioned relating to health literacy, etc.

Accountability and responsiveness although connected should be considered as separate attributes. The presentation (p.7) that “service users generally do not pay the full costs of human services so being solely *responsive to their wishes* etc.” I suggest that human services are about being responsive to clients/consumer needs and not necessarily their “wishes”. For example being “responsive” to the marginalised vulnerable, dislocated or those with ill health etc.

(ii) Human services best suited to increased application of competition (reference to figure 2)

The matrix in figure 2 (p. 10.) is very comprehensive. There would need to be clarity on the definition of the sub set of “services”. For example mention is given to some human services such as general practice, dental, optical and other allied health services. In these examples there exist both for profit and not for profit organisations. This hybrid framework would need to be considered. In this context, factors influencing the potential benefits of increased competition, contestability and user choice may not necessarily be transparent. For example private allied health services may be suitable for non complex health needs client however the cost to provide a service to a client with health needs complexity may be much higher. Consequently in a competitive environment the costs associated to provide a service to a client with high needs would need to be factored in. If the reimbursement is not adequate for example the number of client throughout is diminished but resource intensive this type of service may not be financially viable for the clinician. Furthermore in this scenario, a client with complex health needs, may require multiple services, for example a multidisciplinary team, unbundling the services would require greater effort in the coordination, and consequently costs and possibly effect quality, and efficiency. A further consideration is that in a competitive environment, it

may not seem very prudent to collaborate with another organisation who may also be competitors.

I appreciate that competition can occur within the not-for-profit services' sector and between for profit and not for profit.

(iii) Demographics (Figure 2)

At the bottom of figure 2 second item "demographics" – as I am unsure of the meaning, just query if this includes data on health, wellbeing, medical conditions etc?

(iv) Scope for improving outcomes etc.

A number of years ago, a research project on Falls Prevention was conducted by Monash University Injury Research Institute. The Research Project attempted to address the cost of providing services in the prevention of falls to community dwelling older people. The analysis included the costing of service, data on client characteristics, quality of life and comparisons with hospital data. This may be of interest.

(v) Costs (p.19)

In a competitive environment there would need to be consideration on where funds would be available for innovation, research e.g. models of health care, quality improvements, co-design/co-production (relationship consumer-service organisation) etc. Some of these activities are best placed to occur within service organisations and in the field. Furthermore, these activities may take time to not only develop but also to obtain meaningful data, short term funding often does not deliver in seeing trends and meaningful data.

Furthermore, the greater the number of providers the greater the costs for government to monitor and regulate the services/sectors. Even if the role of monitoring and regulation is delegated as part of the tendering process, some organisation will still need to receive sufficient funds and have corresponding staff, resources etc. to manage the process and accountability.

(vi) Quality

It is vital to provide benchmarking of like services. Consequently research in understanding quality, outcomes, costs, resources, staffing etc. is critical in order to develop benchmarking on quality.

(v) Commercial market lens

In a competitive market space, human services require to engage in using a "commercial market lens." As the paper has already noted that some human services are provided by for profit and not for profit or hybrid. It would be interesting to understand to what extent the not for profit organisations have taken on the "mantel" of "profit organisations" in order to be considered in a more competitive space and viable to compete. Research may have already occurred in this area, but I am not familiar. If the human services sector is not performing at the standard that delivers user choice, timely access, affordable and high quality cost effective services, then perhaps what is required is an understanding of why this is not occurring. Developing (or really further developing) a competition space may be one option, perhaps there are others?