



**Council of Social Service  
of New South Wales**

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Mr Mark Booth  
A/First Assistant Secretary  
Primary and Ambulatory Care Division  
Department of Health and Ageing  
GPO Box 9848,  
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Email: [pcprojectsCoord@health.gov.au](mailto:pcprojectsCoord@health.gov.au)

Dear Mr Booth

I am writing to you on behalf of the Council of Social Service of NSW (NCOSS) regarding the development of the '*Regionally Tailored Primary Health Care Initiatives through Medicare Locals Fund*'.

The Council of Social Service of NSW (NCOSS) is the peak body for the non government social and community services sector in New South Wales. NCOSS provides independent policy advice and advocates in the interests of disadvantaged people and the non-government community services sector to Government. In the health portfolio, our objective is to reduce inequities for disadvantaged people and improve health outcomes through inter-sectoral action on the social determinants of health.

NCOSS believes that the primary objective of the Fund should be: "*...to make it easier for all Australians to access health services through funding to improve the availability, appropriateness, coordination and integration of services*", rather than the proposed objective, '*...to help make it easier for all Australians to navigate their local health system*'. Both the final report of the National Health and Hospital Reform Commission and the National Primary Health Care Strategy identify improving access to services as a key priority. While it is important that people can navigate the health system, the system must first have adequate and appropriate services available to meet their needs.

NCOSS receives consistent feedback from community service providers about the difficulties for their clients accessing health services. This is primarily due to a lack of: GP's and bulk-billing practices, mental health services across the spectrum of care, and affordable allied health services, particularly dental services. A lack of available and affordable health services is compounded by transport barriers to accessing services, particularly in rural and regional areas. It is also exacerbated by poor care coordination following the transfer of patient care out of hospital into community settings.

NCOSS welcomes the proposed priority to encourage and promote innovative health responses that include a focus on health promotion and prevention measures, evidence-based strategies, and robust evaluation. An explicit, planned evaluation component will be critical to assess the effectiveness of the new primary health care initiatives and services, particularly within the context of new governance framework of Medicare Locals. Monitoring and evaluation will enable on-going improvements and the sharing of successful initiatives across the Network.

The funding for health promotion and prevention measures must take a broad approach that encompasses the social determinants of health. The World Health Organisation and countries, including Australia, have recognised that improving population health and well-being requires action to address the underlying causes of ill-health. This involves responses that extend beyond the remit of the formal healthcare system (and the limited priorities of the national preventative health strategy) to incorporate inter-sectoral action on income, transport, education and housing.

NCOSS recommends that the Fund include a priority to develop and implement targeted initiatives addressing health inequities. NCOSS supports the proposed fund priority of inclusive health care initiatives. However, the National Health and Hospital Reform Commission highlighted the considerable inequities in the areas of Aboriginal health, mental health, oral health and rural/remote health. At the local level there are also specific population sub-groups that experience significantly worse health outcomes than the rest of the community. Funding must be prioritised for targeted strategies that are aimed at improving the health outcomes of those disadvantaged populations experiencing the greatest inequities.

We welcome the proposal for a consumer-centred approach and partnerships with the full range of health professionals and organisations to underpin the Fund and activities undertaken by Medicare Locals. Health consumers and the local community must be actively engaged in the planning and delivery of funded initiatives to ensure they are responsive and appropriate to meet local needs. Health and community Non-Government Organisations (NGOs) are also a key part of the primary health system and must be engaged to support a more integrated and coordinated service system.

Funding must be available to all appropriate providers, not just Medicare Locals, in order to meet identified strategic priorities. Non-government health and community service organisations are particularly effective at servicing marginalised and 'hard to reach' groups that may not access mainstream health services. The capacity for brokerage funds or sub-contracting for the delivery of specific services or initiatives under the Fund will enable greater flexibility and responsiveness across the system. Similarly, funding for capacity building should also be made available to other providers, such as existing Health NGO, where they are proven to be effective.

Guidelines must be developed to ensure fair funding practices that do not disadvantage other primary health organisations. Flexible funding is essential for Medicare Locals to be able to respond appropriately to the health needs of their local communities. However, there is a potential for conflict of interest if Medicare Locals both commission services and directly provide services. Fund guidelines must

ensure transparent and accountable funding processes for any sub-contracting arrangements.

NCOSS recommends that the overall investment in the Fund is increased consistent with the Government's commitment to implement a stronger primary care system. Making the health system more sustainable by reducing the dependence on costly acute hospital care to more efficient and effective primary health care is a central driver of national health reform. Medicare Locals will be unable to meet their strategic objectives without adequate funding to respond to service gaps and meet local health needs beyond GP services. A greater proportion of total health funding must be invested in primary health, particularly health promotion, prevention and early intervention, in order to improve the health and well-being of all Australians.

Thank you for the opportunity to contribute to the development of the Fund Guidelines. If you would like any more information please contact Ms Solange Frost, Senior Policy Officer, NCOSS on 02 9211 2599 (ext 130).

Yours sincerely

A handwritten signature in black ink, appearing to read 'Dev Mukherjee', written in a cursive style.

Dev Mukherjee  
A/Director

9 January 2012