

## **Inquiry into the National Disability Insurance Scheme (NDIS) market in Queensland**

### **Background**

The Queensland Government has directed the Queensland Productivity Commission (QPC) to undertake an inquiry into the National Disability Insurance Scheme market in Queensland. The draft report provides an opportunity for consultation on the issues raised by the inquiry, and on the Commission's preliminary analysis, findings and recommendations. The final report will be prepared after further consultation and will be provided to the Queensland Government in April 2021.

The draft report includes 39 recommendations. Through this submission, CheckUP is providing a response to Draft Recommendation 27, which states:

The Queensland Government should propose that the NDIS Thin Markets Project prioritise the development of a thin market framework that:

- establishes arrangements for identifying thin markets and developing timely responses.
- responds to the underlying causes of thin markets on a case-by-case basis.
- considers options for improved market coordination, including mechanisms to facilitate coordinated purchasing among participants.
- considers alternative commissioning models for purchasing supports where other market-oriented options are not viable.
- ensures thin market responses are adequately and consistently evaluated and reported.

### **CheckUP's Response**

We believe that our experience and existing capacity for Outreach service delivery in Queensland could be leveraged to provide an innovative service delivery model that addresses many issues identified by the *Inquiry into the NDIS market in Queensland*. The responses below may also provide further information in addressing some of the other recommendations in the report.

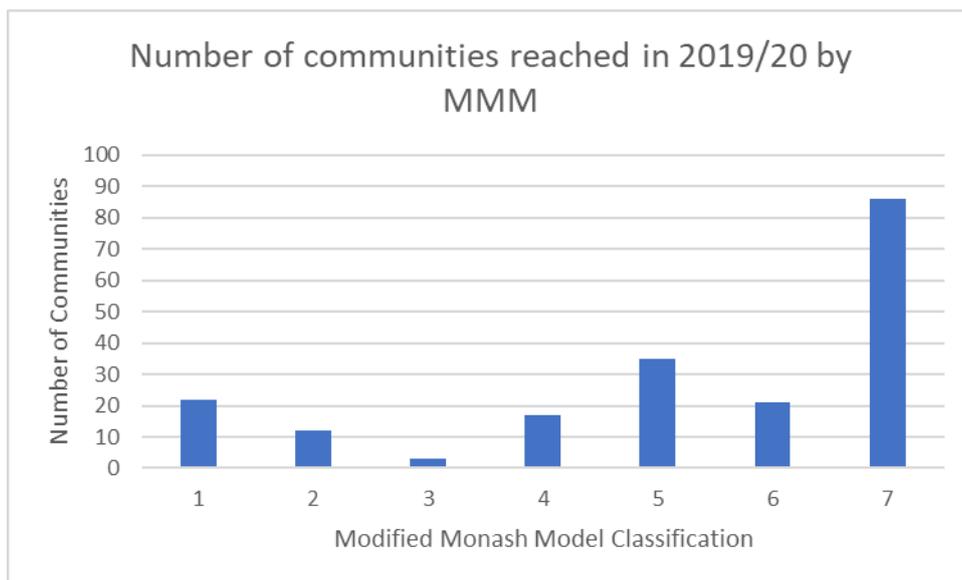
CheckUP is an independent not-for-profit organisation dedicated to advancing primary health care across Queensland. Formerly known as General Practice Queensland, CheckUP is an experienced fundholder, now having managed the suite of Commonwealth funded Outreach Programs for almost two decades.

As the current jurisdictional fundholder for the Commonwealth Government Department of Health's (DoH) suite of Outreach Programs, CheckUP, ensures they are successfully implemented across the state, increasing access to Medical Specialists, General Practitioners (GPs), and Allied Health Professionals for those living in rural, remote, regional, and select urban Queensland communities.

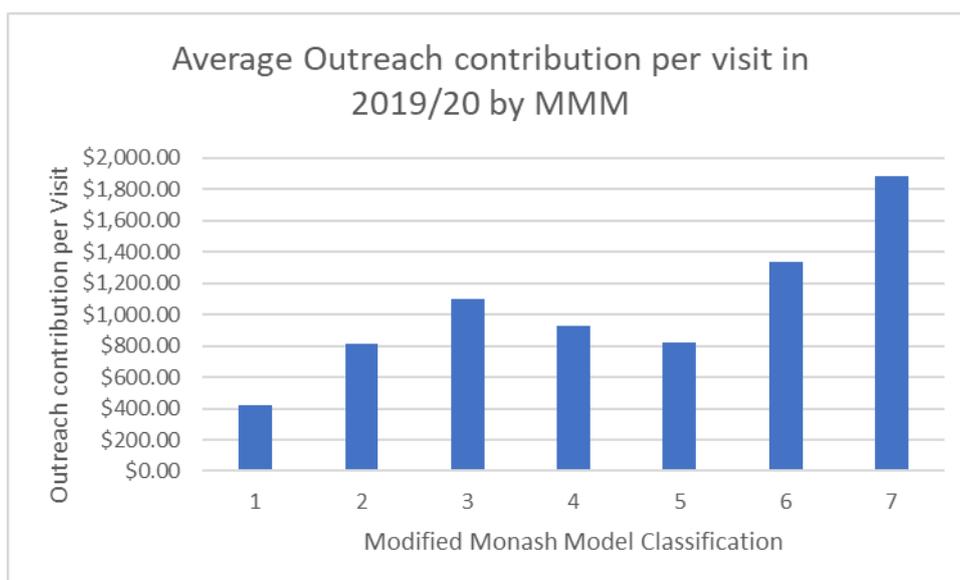
CheckUP is responsible for reporting outcomes to DoH and has developed a Project Governance Framework to ensure transparency, effectiveness, and efficiency. The Commonwealth’s funding is an example of an initiative used to address “thin markets” and increase access to primary health services in regional, rural, remote, and select urban locations throughout Queensland, including Aboriginal and Torres Strait Islander communities. Funds consist of the Medical Outreach Indigenous Chronic Disease Program (MOICDP), Rural Health Outreach Fund (RHOF), Healthy Ears (HE), Visiting Optometry Scheme (VOS) and the Eye and Ears Surgical Support (EESS) programs.

Funding is available to cover the out-of-pocket travel and administration expenses associated with the delivery of the visiting outreach service. By removing the financial disincentives that create barriers, its flexibility allows for provision of both public and private health services if they address prioritised community needs and broaden the range and choice of health services available in regional, rural, and remote locations.

During 2019-2020 the Outreach funds were able to support approximately 150 Outreach providers delivering 168,000 occasions of service during 17,000 visits to 198 locations across Queensland, using \$16 million in Australian Government funding.



The experienced team at CheckUP calculate a unit cost for travel based on the most efficient and cost-effective means to and from the outreach service location. This may include commercial air, bus or train fares, charter flights, and/or expenses associated with the use of a private vehicle as per the national rates accepted by the Australian Taxation Office (ATO). Flights are costed at the economy class level. Other incidental costs such as fuel for hire cars, parking and taxi fares may also be covered in line with accepted ATO rates. This system ensures there is a consistent equitable distribution of funds to each provider who then book their own travel to a location, and while there, deliver a range of much needed services to community members. The funding is managed through a purpose built and CheckUP owned online portal (Outreach Reporting System (ORS), and providers are reimbursed expenses previously negotiated and agreed, once a visit is completed and a Local Visit Report (LVR) is uploaded.



CheckUP's contracted service providers include Aboriginal Community Controlled Health Services (ACCHOs) and Aboriginal Medical Services (AMS), Queensland Health Hospital and Health Services (HHS), private and not-for profit health organisations. CheckUP's methodology and systems means there are no limits to the number of communities or service gaps which can be addressed, so long as there are suitable service providers available. Many of CheckUP's existing outreach service providers also provide care under the NDIS.

CheckUP ensures that adequate highly skilled personnel are available to provide and maintain the requirements needed to plan, maintain and deliver outreach services through the programs across our many communities. Responsibilities managed by CheckUP include:

- the development and implementation of strategic service plans;
- accurate collection, collation and appropriate analysis of data, and provision of this data to the DoH;
- monitoring, management and fulfilment of reporting obligations;
- service provider contract management;
- development and implementation of clinical governance strategies and plan;
- development and application of strategies to recruit and retain health professionals;
- administration of payments to participating health professionals in accordance with services provided;
- statewide service delivery budget management (approx. \$16 million/annum)
- stakeholder communication and engagement;
- service provider education and support in relation to cultural competence, quality and safety, patient engagement and feedback etc.
- planning and supporting effective coordination of service delivery at the community level;

A regional approach is central to all aspects of the governance, planning, delivery and management of the programs, which helps to support the efficient and effective delivery of services within each region across Queensland. This structure is supported regionally by the role of Regional Coordinators (RCs).

The primary purpose of the RCs is to manage and support the integrated and coordinated planning, delivery and monitoring of regional outreach services. A cross sectoral approach is undertaken and includes Primary Health Networks (PHN), ACCHOs, community and/or consumer members, HHSs, general practice, allied health, specialists and other health care service providers, as well as visiting outreach service providers, and other key stakeholders.

A triangulation system is used to match expressed need, normative and comparative data and at the beginning of the financial year, as part of an annual needs assessment and health service planning process to identify the priority health needs and priority locations within Queensland. In undertaking the needs assessment, CheckUP consults broadly and ensures the views and expertise of Aboriginal and Torres Strait Islander people, communities and organisations are an integral part of the process.

Once developed, CheckUP's annual activity plan is endorsed by the State Advisory Forum and approved by the Commonwealth DoH. The plan contains services to be provided for the period of the grant agreement, reserve services (pre-approved services that can be activated if needed during the period), and can allow for support of new services, as well as expand established visiting outreach health services if the need increases.

Contracted service delivery is planned and monitored by the CheckUP team in collaboration with communities, facilities, service providers and other key stakeholders. This agile approach enables us to provide ongoing tailoring of visiting services to meet needs and overcome barriers as they change and emerge. In 2019/20 almost 1500 services were varied within provider contracts, ensuring responsiveness to need.

CheckUP's approach, processes and systems can be easily broadened and scaled to meet a wider range of health conditions, service providers and locations and our long-term and proven record in planning and delivering quality health care in sparsely populated and hard-to-reach communities means we are well placed to work with the NDIA to further consider applicability and transferability to the disability services sector. CheckUP therefore welcomes a discussion to further explore how we could help to address current NDIS access issues in Queensland and/or across regional, rural and remote Australia.

For further information, please contact:

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Submission date: 20/01/2021