

11 September 2025

Productivity Commission
Via 5 pillars submission portal
www.pc.gov.au

Dear Commissioner/s

Response to Interim report – Delivering quality care more efficiently

HealthWISE has been delivering government and non-government funded primary health care and social services since 2015. We are a for-purpose organisation dedicated to creating healthier communities. The people we support live in the New England and North West regions of New South Wales and the Darling Downs and West Moreton regions of southern Queensland. We are passionate about maintaining a health workforce in regional and rural areas.

HealthWISE supports the three overarching recommendations from the Interim Report *Delivering quality care more efficiently*. We welcome the Productivity Commission (PC) proposal to increase investment in prevention and develop a Prevention Framework Advisory Board.

1. Reform of quality and safety regulation to support a more cohesive care economy

- HealthWISE currently undertakes accreditation against multiple standards with increasing annual costs and hours of health workforce resources diverted to compliance.
- Alignment in quality and safety regulation would provide certainty for our organisation in our eligibility to tender for and deliver services in our regions.
- Quality regulation expectations for services in the care sector should be met equally by non-profit and commercial organisations delivering the same service.

PC question from webinar:

What quality information should be reported publicly to support improvement and innovation?

- Currently governments and commissioning bodies publish accreditation requirements on a per contract/grant basis, with minimal ability for an organisation to meet additional standards before contract award/commencement. When new standards are introduced, the Australian Commission on Safety and Quality in Health Care could publish the expectation of where standards will apply.

2. Embed collaborative commissioning to increase the integration of care services

- Collaborative Commissioning should result in longer and more secure service delivery contracts. The collaborative commissioning process should extend to including service providers, not just the LHDs and ACCHOs, to address local needs and for improved care outcomes.

3. A national framework to support government investment in prevention

- After identifying needs in local communities, HealthWISE has sought to deliver multiple initiatives in health promotion between 2023 and 2025 and has found no opportunity for local/grassroots activities focused on prevention in current federal funding opportunities. Where current funding opportunities exist (usually philanthropic organisations) they are for small amounts of money for short term (1-2 year) contracts.
- Service providers need time to embed the programs and get results. Political terms and current budget processes (described in the PC webinar) are a limitation. Need to look beyond them to achieve any benefits in both collaboration and prevention. Commitments to long term funding must be legislated, to get beyond this cycle, and as noted in the report – more immediate spending pressures always being given priority.
- State boundaries are an issue where prevention is delivered from state authorities. Cross border problems could be addressed with national approaches.
- Take a whole of community approach – health is not just hospital and primary care. It involves all the social determinants. Invest in health literacy, education etc. The potential of an advisory board working across portfolios should enable this wider approach.

PC question from webinar:

How can the need to assess early effectiveness of programs be balanced with the need to maintain consistent long-term funding?

The effectiveness of investment in local activities preventing or delaying ill-health can't be measured in the short term or by one government department. True effectiveness will be borne out in measures over the course of generations and across multiple life domains, e.g. wellbeing, education and health outcomes. Addressing lifestyle risk factors and increasing health literacy, especially for priority populations, must be part of every health and education program across the nation to level the playing field for all Australians.

If programs had short-term goals and long-term goals, monitoring the short-term goals would enable funders to check if programs are on track and having an impact.

PC question from webinar:

What is the best way to incentivise Australian, state and territory governments to invest in prevention to improve future outcomes and avoid future costs?

When viewing productivity through an intergenerational lens (wider than the tax system alone), making an investment in improving future health outcomes for Australia's younger generations, should be reason alone and reason enough for all levels of government to lift their investment in prevention. Evaluations from programs we have delivered to improve student lifestyles demonstrate that younger generations are receptive to participating in prevention programs, and the programs deliver results.

While our organisation has focused on responding to the interim report on the care sector, there should be productivity gains for our sector through "harnessing data and digital technology" as well as the three recommendations in this report.

Yours faithfully



Fiona Strang

CEO

