

**Submission  
No 61**

**THE IMPLEMENTATION OF PORTFOLIO COMMITTEE No. 2  
RECOMMENDATIONS RELATING TO THE DELIVERY OF SPECIFIC HEALTH  
SERVICES AND SPECIALIST CARE IN REMOTE, RURAL AND REGIONAL NSW**

**Organisation:** Community Transport Organisation Ltd

**Date Received:** 3 May 2024

## **The implementation of Portfolio Committee No. 2 recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional NSW**

The Select Committee on Remote, Rural and Regional Health has resolved to conduct an inquiry into the implementation of Portfolio Committee No. 2 recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional NSW.

The **Committee is investigating the implementation of recommendations that were made by Portfolio Committee No. 2 (PC2)**. At this stage, the **Committee is interested to learn what progress has been made in implementing the recommendations made by PC2** (which relate to specific health services and specialist care in remote, rural and regional NSW, as outlined in the terms of reference).

The *Portfolio Committee No. 2 (PC2) recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional NSW*, made recommendations to improve transport options to enable access to health care in regional, rural, and remote NSW. Specifically, Recommendations 2 and 3 focused on the role that transport plays in accessing health services.

### **Recommendation 2**

*That the NSW Government review the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) as a matter of priority, with a view to:*

- *increasing the current reimbursement rates for accommodation and per kilometre travel*
- *expanding the eligibility criteria, with consideration given to people participating in medical trials, those that hold private health insurance and those that are referred to treatment centres that are not geographically closest to them due to the urgency of the treatment required*
- *streamlining the application process to make it easier for patients to access the scheme*
- *undertaking on an ongoing basis a public awareness program of the scheme across the state in communities and among health professionals who can then inform patients.*

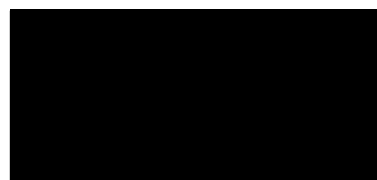
### **Recommendation 3**

*That NSW Health, the rural and regional Local Health Districts and Transport for NSW work collaboratively to ensure, where feasible, more frequent and appropriately timed affordable transport services are available to support people to attend medical appointments in rural, regional and remote areas*

The CTO recognises the work undertaken in response to the Recommendations put forward by the Inquiry. The IPTAAS Industry Reference Group meets often, and the CTO has been a very willing contributor to the group.

The CTO acknowledges improvements to IPTAAS based on the implementation of *PC2 Recommendation 2* regarding:

- Increased reimbursement rates per kilometre of travel. Which has made positive headway to ensuring the scheme is more viable to access and in turn, better respond to transport need.
- Examining and refining the application process to support easier navigation of the system for users, and
- Undertaking an extensive awareness building program across the state.



There is no doubt, the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) is a critical program to ensure people facing transport disadvantage have access to transport solutions to attend health care appointments.

Transport is a crucial enabler of access to health care, in any context or location. It becomes significantly more important in rural, regional, and remote settings where public passenger transport offerings are sparse or sporadically delivered, and any transportation is challenged by distance. For those who do not have access to a private vehicle, there is little choice and for those who do, they face long distance driving alone to attend a health appointment or scheduling appointments around a time when a neighbour or family member is available to drive with them.

Recommendation 3 calls for *more frequent and appropriately timed affordable transport services are available to support people to attend medical appointments in rural, regional and remote areas* – Community transport is a booked, door to door, safe and regulated service, able to deliver choice for consumers when needing to travel and access the IPTASS subsidy.

The Community Transport sector delivers accessible, supported transport options across all parts of NSW, with a particular focus on health-related transport. Over three-quarters of all trips delivered by the sector annually are for medical purposes. However, community transport is excluded, as a subsidised service from the IPTAAS subsidy, meaning that consumers cannot choose to travel with community transport if they want to access the subsidy.

Eligibility criteria within the IPTAAS scheme excludes the vast majority of Community Transport providers from operating under this scheme. The criteria indicates that only those Community Transport providers '*not receiving government funding*', are eligible to participate. This deems Community Transport providers within NSW ineligible because the core business for the industry is block funded through the Commonwealth Department of Health and Aged care under the CHSP Program.

In a context where the unmet need for medical related transport goes unresolved, it is counterproductive to exclude an existing transport solution. Community Transport, as an established sector, is well equipped to respond immediately to address need and expand consumer choice in how they travel within the scheme.

Removing this restriction on eligibility would not impact the cost to government of administering the IPTAAS program as the demand base of users remains unchanged. It is instead adding to the supply of transport options available to address the unmet need.

***The CTO calls for increased consumer choice under IPTAAS by removing restrictions which exclude Community Transport providers from delivering services under the scheme.***

Transport options in Rural Regional and Remote NSW for accessing medical care is a necessity for improving health outcomes, and one the government must continue to address. The CTO acknowledges the positive work implemented through *The Portfolio Committee No. 2 (PC2) recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional NSW*, however there is more to be done. IPTAAS is a vitally important scheme for people who are transport disadvantaged outside of metropolitan areas of NSW. *The current scheme must be expanded to enhance consumer choice for expanded transport options and include community transport as an eligible service offering for patients travelling within the scheme.*

