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Global Problems, Local Solutions



Limestone Coast
Local Government
Association

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REGIONAL AOD SERVICE CHALLENGES HIGHLIGHTED IN SMLC SUBMISSION

Substance Misuse Limestone Coast (SMLC) has put forward a submission to a state Select Committee, highlighting the impact of privatisation on regional drug and alcohol services.

In a written submission to the Select Committee on the Privatisation of Public Services in South Australia, SMLC board member Dr Judy Nagy spoke about the continuing consequences of privatisation on the sector, resulting in wide-ranging effects on regional clients, staff and communities.

“Privatisation through competitive tendering no doubt provides numerous benefits to government by infusing best practice and innovation into service provision,” she said.

“However, the unintended consequences of models only emerge with time, providing the opportunity to assess effectiveness and to make changes moving forward.”

Dr Nagy said one of the consequences was insecure project-based funding for private operators often leading to discontinuity of services to vulnerable clients.

“Project and short-term funding reduces the time period of effective client relations for alcohol and other drug issues that require longer term solutions,” she said.

“Projects can often involve establishment and wind-down periods where clients are effectively left wondering whom, when and what services will be available to support them in future.”

Dr Nagy also highlighted the fact that larger organisations had access to full-time staff to prepare grant submissions, with smaller operations often unable to spare resources or staff.

“More time and effort that goes into a grant submission, the more likely you are to be successful and smaller organisations simply do not have the time or staff to do this or finances to pay a professional grant writer,” she said.

“So, this results in a concentration of services to larger agencies that tend to use ‘hub and spoke’ models that may not necessarily be aligned with the specific needs of the community.”

Dr Nagy also said there needed to be a better understanding of the unique challenges of operating in regional communities.

“Staff appointed in regions often travel significant distances to provide services and regional offices can only be staffed during certain hours or do not exist,” she said.

“There is also the matter of clients being unable to afford to travel for services and limited public transport means that services may not be as responsive, available or timely as a client requires.

“All this needs to be taken into account when it comes to KPIs in funding agreements.”

Insecure funding arrangements often meant less experienced staff at the start of their career taking up short-term or project roles in regions and leaving when better roles in capital cities beckoned, Dr Nagy said.

“This constant ‘churning’ of staff has a tremendous impact on clients who have built up a level of trust and an ongoing professional relationship with one person and may decide to leave services as a result.”

Also in her submission, Dr Nagy called for greater oversight for private operators and a commitment to separate funding for regional areas.

“There needs to be an understanding of the differences between operating in a metropolitan area and a regional town,” she said.

“Flexible service delivery models, staffing and travel challenges and customised KPIs need to be taken into account, whereas larger organisations operating on the hub and spoke model should have locally appointed boards to ensure services are tailored to each region’s needs.”

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