



National
Rural Health
Alliance

Regional Telecommunications Review 2021

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... healthy and
sustainable rural,
regional and remote
communities



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Regional Telecommunications Review 2021

The National Rural Health Alliance (the Alliance) welcomes the opportunity to make a submission to the Regional Telecommunications Review 2021. The Alliance represents 43 member organisations (see Attachment A) encompassing healthcare and allied health professionals, health service and educational providers and consumers, located in or servicing rural, regional and remote (rural) Australia. The Alliance is committed to improving the health and wellbeing of Australians living in rural and remote communities.

Introduction

Access to reliable and affordable telecommunications infrastructure is crucial to the economic prosperity and wellbeing of Australians living in rural communities. Further, it is apparent, now more than ever, that connectedness is critical to the accessibility and delivery of individualised and comprehensive healthcare solutions throughout the country. Indeed, the rollout and extension of telehealth services and rebates, following COVID-19-related restrictions on movement, underscores the importance of digital solutions in overcoming the combined effects of health crises and physical isolation.

Connectivity, reliability, accessibility, affordability and digital health literacy remain ongoing barriers to enabling rural communities' participation in digital health activities. Investment in telecommunications infrastructure in rural areas is known to have the capacity to improve access to health care. However, whether these improvements are actualised is intricately linked to issues around service suitability, reliability and affordability. On these measures, rural Australians continue to face significant disadvantage. Considering these factors, it is unsurprising that rural Australians are overall less digitally connected and more heavily reliant on outdated technologies.

Adequacy

Changing Demand

1. What telecommunications services are required in regional Australia to meet current and future needs? Are there any things regional communities and businesses need to do, but can't, on their existing services?

As highlighted by Infrastructure Australia,¹ many parts of Australia's rural, regional and remote areas have no, or poor, mobile phone voice and data reception, affecting quality and reliability of services. While Australia's mobile phone networks cover most individuals at home, there is limited service in many regional and remote areas (known as mobile blackspots) reducing mobile phone access for individuals when they travel, and for some regional and remote communities.

The lack of connectivity disadvantages Australians in these areas, who rely on mobile connections for social inclusion and access to services, such as health (for example, telehealth), education (for example, online distance education) and other welfare services, as physical services are often not cost-effective to provide in these areas. Access to reliable telecommunications is also critical in emergency situations such as extreme weather, bushfires and flooding, or serious trauma incidents such as road accidents. A lack of mobile coverage can delay response times – threatening lives, property and livelihoods.

The Alliance notes that the abovementioned barriers affect not only consumer access to (and demand for) health services, but also the willingness and ability of medical and allied health providers (many of whom operate within sole trader, partnership or small business arrangements) to

supply digital health solutions to rural communities. For example, Alliance members have previously indicated that Sky Muster services have been inadequate for telehealth delivery. Additionally, bandwidth limitations in rural areas mean that concurrent access to internet and videoconferencing is not possible. These factors significantly hamper the ability of providers to utilise digital solutions as a component of service delivery in rural healthcare settings. Alliance members have commented that access to the nbn has been better than ADSL, but it is far from perfect. Improvement is needed to enable effective working from home and the capacity for videoconferencing needs to be improved.

The Alliance notes that, especially in areas outside of the nbn footprint or where mobile or satellite services are unreliable, legacy services will continue to be of importance to rural consumers into the future. Such services are likely to continue to fulfill the public interest aims of access, participation, competition and safety (particularly as it relates to healthcare access). Services of importance include access to directory assistance, untimed local calls, free emergency calling and number portability. The Alliance notes that the ongoing need for some of these obligations may dissipate in the future if viable and reliable alternatives emerge to voice and data services over Telstra's copper network. However, it is crucial that these obligations are not removed unless and until there are proven, reliable alternatives available to rural consumers which are delivered at a cost which renders them widely accessible.

An examination of telehealth data in response to the COVID-19 pandemic illustrates that rural communities and businesses cannot communicate in the way they need to, owing to limitations of existing telecommunication services. Despite a preference by policymakers for video consultation, the majority of telehealth consults in Australia were conducted by telephone. The pronounced dominance of telephone item numbers in utilisation data suggests there are still barriers to video-consultations, and a number of challenges remain before the well-described benefits of telehealth can be fully realised from investment in this policy². Analysis of data from the University of Queensland on telehealth usage during 2020 shows that not only was telehealth by video proportionately underutilised across all geographic areas, this underutilisation was even more extreme for areas outside capital cities. This would indicate that videoconferencing for telehealth was serving capital cities significantly more than rural Australia.³

Dykgraaf et al² also note that, in terms of current and future needs, practical and operational issues continue to require attention, including challenges to routine use of video consultations such as technical unreliability, poor interoperability with appointment and clinical systems, and lack of access to stable telecommunications infrastructure. Digital proficiency, internet affordability, lack of access to suitable technology and lack of appropriate personal spaces for patients to receive calls, have all been identified as factors limiting the safe deployment of video consultations. Lack of access to a support person at the patient end and lack of comfort utilising new technologies have also been identified by Alliance members as barriers. Doctors and nurses in Australian general practice reported both provider- and patient-end barriers to video consultation during COVID-19, including lack of necessary equipment, limits in expertise and capability, and technical disruptions.

There are currently workforce shortages in rural Australia across most health professions. It is likely that these workforce shortages will continue and may even be exacerbated in future by professional, financial and personal barriers to working rurally. Changes to the environment due to climate-change-driven extreme heat and extreme weather events is another factor reported to be affecting rural recruitment of health professionals.⁴ Innovative models of care will be an essential and growing element of accessing health care for rural Australians. Therefore, affordable, accessible and fit-for-purpose telecommunications is critical now and into the future.

2. What changes in demand, barriers or challenges need to be addressed when it comes to telecommunications services in regional, rural and remote Australia?

The digital divide between urban and rural Australia remains a barrier that must be addressed for telecommunications services in rural Australia. 'Digital divide' refers to the gap between individuals, households, businesses and geographic areas at different socioeconomic levels with regard to both their opportunities to access information and communication technologies (ICTs) and their use of the internet for a wide variety of activities⁵. The 2019 Australian Infrastructure Audit⁶ also acknowledges that mobile services in rural areas can be costly and of poor quality, and that coverage gaps affect community safety, liveability and productivity.

The Australian Digital Inclusion Index (ADII)⁷ provides a comprehensive picture of Australia's online participation by measuring three key dimensions of digital inclusion: access, affordability, and digital ability. The 2020 ADII shows improvement in some areas but also reveals that the rate of improvement has slowed. It continues to show that the digital divide follows clear economic, social and geographic fault lines. All too frequently, digital exclusion coincides with physical isolation. While some inroads have been made, rural Australians continue to fare worse on measures of digital inclusion (access, affordability and digital literacy) than their city counterparts.

Geography plays a critical role in digital inclusion in Australia. The ADII reveals substantial differences between Australians living in rural and urban areas. In 2020, digital inclusion was 7.6 points higher in capital cities (65.0) than in rural areas (57.4).⁷ The ADII data reveals significant differences between rural and urban areas with a capital city – country gap evident across all three of the dimensions measured – access, affordability and digital ability.

It is important to note that technology is not the only barrier to digital inclusion for rural Australians. Affordability and digital literacy are further barriers. The Alliance considers that continued access to low income measures is important (such as the existing telecommunications allowance), but with a focus on low income, particularly in geographic markets in which there are few (or no) viable alternatives. In such markets the limited competitive pressure is unlikely to provide sufficient impetus for service offerings which meet the needs of low-income consumers. The Alliance also supports the Regional, Rural and Remote Communications Coalition (RRRCC) proposal for the creation of a targeted concessional nbn broadband service to support low-income residents of rural areas, to reduce the divide.

In 2021, a national survey of 448 Australian general practitioners showed that the uptake of video consultations is lower in those areas with higher proportions of people aged 65 years and over, as well as in lower socioeconomic areas. There are 2.5 million Australians who do not have access to the internet because it is unaffordable or they have poor digital literacy. The majority of those without access to internet services are people aged 65 years and over, those with disabilities or chronic conditions, and those living in rural areas⁵. Investment in affordable access to digital services, together with a focus on improving digital literacy, is required if every Australian is to have access to safe, high-quality telehealth services.

Digital literacy has been highlighted as an ongoing barrier to accessing digital health. On average, people living outside major cities are older and this is relevant for digital literacy. A 2018 report⁸ for the Australian Government's eSafety Commissioner, that surveyed 3,602 Australians over 50 years of age, found that 30 per cent of those aged 80 years and over and 12 per cent of those aged 70–79 years, did not have a digital device at home for personal use. Further, ownership of a device did not necessarily mean that it was used as, 'approximately 30 to 40 per cent had never accessed these devices'. The use of devices by older Australians was linked to digital literacy with three-in-ten being highly literate, three-in-ten moderately literate and around one-quarter of low literacy. Three-quarters of the digitally disengaged group were aged 70 years and over.

Strategies to improve digital literacy, especially for older Australians living in rural areas, will be an important element to improving access to digital health and other technologies into the future. Particularly for remote communities, one option is for people in communities to be trained or upskilled to provide basic maintenance and user support.

A further issue identified by Alliance members is provider interoperability. It is noted that, now the Mobile Black Spot Program has diversified to include providers other than Telstra, users need to have a second phone or change SIM cards as they move from, for example, an Optus service area to a Telstra black-spot-provisioned area. This affects affordability because users now need an account with both providers. This is not an equitable or sustainable model and needs to be addressed as a priority.

The demand for reliable, accessible telecommunications will also be driven by the increasing move to GP telehealth prescribing, electronic prescribing for pharmacy medicines and the use of electronic prescriptions. Equitable access to electronic prescriptions will be an important element in overcoming barriers to accessing health care for rural Australians. Digital health provides an opportunity to improve equity of access so that rural pharmacies have the infrastructure they need to be reliable and, at the very least, equal to that of urban areas.

3. How have the Government's policies and programs affected telecommunications service outcomes in regional, rural and remote Australia? How can these be improved?

The events of recent years in terms of natural disaster and COVID-19 have reinforced what rural communities have long been aware of – telecommunication services are essential. While there have been improvements in telecommunication services for rural Australia, there is still more to do to ensure equitable connectivity for rural consumers.

Whilst noting the improvements and government programs already in place, some programs rely on co-contributions from communities or other bodies for implementation. It is important to note that, for some communities, such arrangements are not commercially viable and there will be an ongoing role for government to ensure equitable access to essential digital services.

In many rural and particularly remote communities, the Alliance understands that up-front and ongoing access costs are high. These up-front and ongoing costs can be a barrier for many communities. Unless suitability, reliability and affordability issues are addressed in rural areas, the widespread rollout of digitally delivered solutions as a feature of health service provision is unlikely.

Against this background, the Alliance makes the following suggestions:

- The regulatory framework that underpins the future delivery of telecommunications infrastructure and service offerings must incentivise wholesale and retail providers to offer rural consumers suitable and reliable services, at an affordable price.
- Competitive forces alone are unlikely to provide sufficient impetus for regulatory compliance in rural areas; active compliance and enforcement is likely to be required, within a regime in which remedies and penalties are set at a level which incentivises compliant behaviour.
- Importantly, the continued provision of protections for basic services, fault reporting, and swift response and resolution timeframes for rural communities, must be captured within any redesigned regulatory framework.
- In recognition of the high cost of infrastructure provision in rural communities and the consequential barriers to market-based competition, the telecommunications regulatory framework should be designed so that service continuity for rural consumers is a priority. On this issue, the Alliance notes that, due to their physical isolation, consumers in rural communities are often heavily reliant on connectivity from a single telecommunications service offering. This makes reliability and continuity of access to that service of paramount importance, particularly in health emergency and crisis situations.

Service Reliability

4. How do service reliability issues impact on regional communities and businesses? How do outages, including in natural disasters, impact on communities and businesses?

The RRRCC, in their *Better Comms for the Bush – Priorities for Action* statement⁹ states that, wherever Australians work and live, they should have guaranteed minimum access to data and voice services. This includes services that meet the specific needs of all consumers in rural areas. Rural consumers and businesses need guaranteed access to voice and data services at all times, including during natural disasters.

There are technologies available that can be utilised to support communities and emergency services during natural disasters. The nbn, for example, has a range of connectivity support measures including Disaster Satellite Services, Road Muster Trucks and Portable Satellite Kits.¹⁰ Field-deployable satellite connection points, as used by grey nomads, should also be made available for emergency response vehicles in remote communities. This technology is increasingly reliable, easy to use, robust and affordable.

The lack of connectivity disadvantages Australians in these areas who rely on mobile connections for social inclusion and access to services, such as health (for example, telehealth), education (for example, online distance education) and other welfare services, as physical services are often not cost-effective to provide in these areas. As noted above, access to reliable telecommunications is critical in emergency situations such as extreme weather, bushfires and flooding, or serious trauma incidents, such as road accidents. A lack of mobile coverage or extended outages can delay response times, thereby increasing the risk of lasting harm or loss of property.

Rural Australia requires telecommunication services that meet minimum standards and reliability. Updated telecommunication service guarantees and adequate service performance are needed to reflect the needs of consumers and businesses. Connection and repair timeframes, reliability, adequate performance levels and safeguards for vulnerable consumers, must be updated. Reforms must ensure rapid rectification of services when natural disasters occur.

The Alliance believes that there should be consumer protection frameworks, specific to needs of consumers in rural areas, including medical and allied health providers, which cover service reliability. There should be standards in relation to reliability and fault rectification. In rural areas, the threat of switching to another provider is unlikely to be enough incentive to drive regulatory compliance. For this reason, in scenarios where there are few (or no) alternative suppliers for voice or data services, it may be appropriate to place additional requirements on providers regarding, for example, response and resolution timeframes for service interruptions, quality issues and faults. Such measures would likely enhance both the willingness and ability of medical and allied health providers to offer digitally delivered services as a component of their health service in rural communities.

5. How might such impacts be addressed to ensure greater reliability? How can the network resilience be addressed in regional areas?

As noted above, the Alliance believes that there should be consumer protection frameworks specific to needs of consumers in rural areas, including medical and allied health providers, which cover service reliability and fault rectification.

The Alliance recommends that telecommunication retail service providers should furnish information to regulatory authorities about consumer complaints, service quality, interruptions and reliability, and fault response and resolution timeframes, on a geographical or remoteness basis. The provision of such information – and publication by the Australian Communications and Media Authority (ACMA) or the Telecommunications Industry Ombudsman, as appropriate – would shed light on whether those in rural areas are able to, in a practical sense, take advantage of advances in

telecommunications markets. It would also highlight issues around choice, fairness and the persistence of digital disadvantage.

COVID-19

6. How did the use of digital services change for regional consumers and businesses during the response to the COVID-19 pandemic? What insights for future service delivery does this provide?

The pre-existing digital divide has been compounded by COVID-19 lockdowns. While there has been an accelerated take up of digital services such as videoconferencing, remote server access, and telehealth for those with access and skills, communities that have no, or poor, access to telecommunications infrastructure are at a much greater disadvantage during the COVID-19 pandemic.¹¹

When COVID-19-specific items numbers for telehealth were introduced in March 2020, only 7.9 per cent of Medicare Benefits Schedule services were delivered by telehealth. According to the Australian Institute of Health and Welfare *The first year of COVID-19 in Australia: direct and health effects* report¹², telehealth services accounted for nearly 33 per cent of Medicare-subsidised mental health services between mid-March and the end of December 2020.

As noted earlier, looking at data on telehealth that is available by region, a distinction can be made between telehealth (for both telephone and video) for capital cities versus the rest of the state. Analysis using data from the University of Queensland, comparing the population of capital cities and the rest of the state, shows that telehealth by telephone was broadly consistent between capital cities and rest of state. However, telehealth by video was significantly underutilised in the rest of state compared to capital cities. This data would indicate that videoconferencing for telehealth was serving capital cities significantly more than rural Australia.³

So, as noted above, despite a preference by policymakers for video consultation, the majority of telehealth consults in Australia were conducted by telephone, and this was particularly the case for rural Australia. The pronounced dominance of telephone item numbers in utilisation data suggests there are still barriers to video consultations and a number of challenges remain before the well-described benefits of telehealth can be fully realised.²

As Dykegraff et al² state, practical and operational issues continue to require attention, including challenges to routine use of video consultations such as technical reliability, poor interoperability with appointment and clinical systems, and lack of access to stable telecommunications infrastructure. Digital proficiency, internet affordability, lack of access to suitable technology and lack of appropriate personal spaces for patients to receive calls, have all been identified as factors limiting the safe deployment of video consulting. Lack of access to a support person at the patient end and lack of comfort utilising new technologies have also been identified by Alliance members as barriers. Doctors and nurses in Australian general practice reported both provider- and patient-end barriers to video consultation during COVID-19, including lack of necessary equipment, limits in expertise and capability, and technical disruptions.

The COVID-19 pandemic also increased reliance on online training and professional development. This served a critical role for a range of professionals, including those in the health sector, in maintaining their professional registrations.

Indigenous Australia

7. What can be done to improve the access and affordability of telecommunications services in regional, rural and remote Indigenous communities?

The digital divide increases with remoteness. First Nations people living in remote areas are much less likely to have access to the internet. According to the 2016 census, 82.8 per cent of First Nations people in major metropolitan areas accessed the internet, 73.2 per cent in regional areas, 61.3 per cent in remote areas, and only 49.9 per cent in very remote areas.¹³

The Centre for Appropriate Technology surveyed very remote First Nations communities in 2016 and found only 37 per cent of the 401 small communities surveyed had internet coverage. In 80 per cent of those communities this was only available in one household. The low rates of access for remote First Nations communities has implications for online learning, as well as access to government services, information, resources and services such as banking. For example, nationally, around 64 per cent of First Nations people access government services online. These rates become increasingly worse in remote locations, with 70 per cent in urban areas benefiting from online government services compared to 55 per cent in remote and 54 per cent in very remote Australia.¹³ Often the only internet access for communities is through community service centres rather than in their home communities.

As noted above, the pre-existing digital divide has been exacerbated by COVID-19 lockdowns. While there has been an accelerated take-up, for those with access and skills, of digital services such as videoconferencing, remote server access and telehealth, communities that are disconnected are at a much greater disadvantage at this time. The Australian Communications Consumer Action Network (ACCAN) *Remote Indigenous Communications Review*¹¹ notes that very few remote Indigenous people have the option of home schooling, working from home, or accessing basic services online. Most remote Indigenous communities have restricted all non-essential movement due to the high risks associated with COVID-19 infection, increasing the need for remote access to services, including health, education, Centrelink, MyGov, justice, banking and so on. However, with the large number of remote and very remote Indigenous people without household access to telephone or internet, and many shire and council offices, schools and other service centres closed, meaning some essential services have not been available to many remote Indigenous people.¹¹

Opportunity

Regional Development

8. How can investment in telecommunications infrastructure work with other programs and policies to encourage economic development in regional Australia?

It is important to note that the provision of reliable, affordable and accessible health services is a critical element in supporting the ongoing economic development of rural Australia. Attracting and retaining a rural health workforce is essential to providing a comprehensive rural health service, and access to reliable, affordable telecommunications is an important element in overcoming the professional, financial and social barriers to attracting and retaining health professionals to rural Australia.

The Alliance is promoting a new model of rural health care to specifically meet the needs of rural Australia: Rural Area Community Controlled Health Organisations or RACCHOs. RACCHOs would provide community-based primary health services for communities struggling to attract and retain a rural health workforce. RACCHOs would also provide a framework for partnerships with telecommunication providers to co-locate 5G or satellite services, while also allowing for others in the community to utilise a local network of connectivity.

9. What role could innovation, including new models, alternative investors or new ways of doing business, play to encourage investment in regional telecommunications infrastructure? What are the barriers?

Rural Australia has much to gain from the introduction of innovative and alternative models of service delivery and new technologies because of the particular challenges faced in delivering to a diverse and thinly populated market. However, assumptions around market forces and competition do not necessarily apply to rural, rural and particularly remote Australia, where low population density, coupled with often lower socioeconomic communities, mean that the usual commercial incentives cannot be guaranteed.

Emerging Technologies

10. To what extent will new technologies enable significant change to the delivery of telecommunications services in regional Australia over the next 5-10 years? Are there any barriers to accessing these technologies?

As highlighted by the RRRCC, rural Australia has much to gain through access to more affordable broadband services to support low-income families and strengthen rural communities. Providing access to affordable communication supports individuals and families to access essential services and engage in education and training, which strengthens local communities. Reforms are needed that recognise the current barriers to accessing new technologies, including that remote communities often pay a higher cost for lesser quality and less reliable services compared to those in urban areas. Even greater barriers arise for low socioeconomic communities.

It is important that people living in rural Australia have equitable access to new technologies as they are rolled out. Access to the latest technology will be critical for health care, not only to support access to telehealth, but also new health technologies such as mobile and wearable applications, increased use of artificial intelligence and other interventions that require access to reliable, high-speed internet.

11. How can Government better support the rapid rollout of and investment in new telecommunications solutions in regional areas?

As noted earlier, assumptions around market forces and competition do not necessarily apply to rural, and particularly remote Australia, where low population density, coupled with often lower socioeconomic communities, mean that the usual commercial incentives cannot be guaranteed. These communities, however, often have the most to gain from innovation and new technologies supporting service delivery.

The many programs and funding initiatives have resulted in significant improvements in telecommunications coverage and access across remote Australia over recent years. In particular, the introduction of the nbn Sky Muster satellite, the Mobile Black Spot Program, state or territory government co-investment programs, the Community Phones Program, and various programs to provide shared internet services and access facilities, have helped to substantially improve connectivity in rural and particularly remote Australia.

However, as noted earlier, it is important that governments recognise the limitations of small communities to provide or initiate co-investment. In such circumstances, it is important that governments provide funding support to ensure communities with small populations, including Indigenous communities, are not left without access to services.

The RRRCC, in their *Better Comms for the Bush – Priorities for Action* statement⁹ have included a number of 'asks' relevant to this question, including that the Australian Government commit to establishing a Rural, Regional and Remote Communications Fund to resource ongoing investment in regional telecommunications through the Mobile Black Spot Program, Regional Connectivity Program and state or territory co-investment programs. As a member of the RRRCC, the Alliance would support additional Australian Government assistance to support the rapid roll-out of, and investment in, new telecommunication solutions in rural areas.

Maximising Outcomes

12. How can different levels of Government, the telecommunications industry and regional communities better co-ordinate their efforts to improve telecommunications in regional Australia?

Around two-thirds of Australia's export earnings come from regional industries such as agriculture, tourism, retail, services and manufacturing.¹⁴ Given this critical contribution to Australia's current and future economic wellbeing, there are sound economic reasons for governments, industry and regional communities to work together to improve telecommunications in regional Australia.

As noted earlier, assumptions around market forces and competition do not necessarily apply to rural and particularly remote Australia, where low population density coupled with often lower socioeconomic communities, mean that the usual commercial incentives cannot be guaranteed. These communities, however, often have the most to gain from innovation and new technologies supporting service delivery.

It is also important to note that no two rural communities are the same, and assumptions around the telecommunications requirements of rural communities should not be driving decisions on telecommunications investments. It should also not be assumed that all communities have the same level of capacity for financial contributions, or telecommunications expertise to engage in commercial projects to provide essential telecommunication services. It is critical for all players in the telecommunications delivery market to consult with local communities and develop solutions that meet the particular needs and capacities of those communities.

13. What changes to Government investment programs are required to ensure they continue to be effective in delivering improved telecommunications?

Equity of access should be an important driver of telecommunications policy. Market driven innovations and service delivery improvements, while driven by commercial imperatives in capital cities, may not deliver the same level of improved telecommunications in the often thin markets operating in rural Australia. This is evidenced by the fact that, even though expansion of mobile coverage is critical in rural areas, there remain premises, vital community hubs and high traffic areas that are at risk from having no mobile coverage. As well as ensuring widespread coverage, mobile network upgrades must allow rural Australians to harness the opportunities they offer.

The Australian Government must continue to invest in ongoing mobile network expansion through the Mobile Black Spot or similar programs, and policy settings must promote regional 5G network coverage, to ensure fair and adequate access where needed.

The Australian Government must also ensure that rural telecommunications users are not disadvantaged by the introduction of new telecommunications technology. Once again, it is important for governments to consult with rural consumers to determine their needs now and into the future.

Awareness

Education

14. How can regional consumers be better supported to identify, choose and use the best connectivity options for their circumstances, as well as to understand and use their consumer rights?

The Alliance notes the establishment of the Regional Tech Hub which provides independent, free advice about telecommunication services for rural Australians. To this end, the Australian Government should commit to evaluating the Regional Tech Hub after its initial introduction, to

assess any scope for enhancing its reach and impact, as well as supporting the Hub beyond its initial funding period – as the important service it provides will be required for the foreseeable future.

The RRRCC *Better Comms for the Bush – Priorities for Action* statement also suggests that the Australian Government work with the RRRCC, and local and state governments, to identify and deliver digital capacity-building needs beyond the remit of the Regional Tech Hub project. Suggested actions include NBN Co and the telecommunications industry working with the RRRCC to identify areas where industry can support digital capacity building, as well as simple, effective information for rural consumers.

Building on the work of the Regional Tech Hub, the Alliance would support the establishment of an Indigenous Tech Hub providing a culturally safe resource run by and for First Peoples living in rural Australia.

Public Information

15. To what extent is public information on connectivity options, including predictive coverage data and speeds, sufficient to help regional customers make informed decisions? What other information is needed?

Whilst noting the assistance that can be provided to regional consumers through the Regional Tech Hub, the Alliance understands that there are still frustrations for customers obtaining reliable and accurate information from service providers, particularly in relation to coverage areas. Some of these difficulties relate to the location of help desk staff who have little understanding of the locational difficulties and limitations of technology in certain areas. There are reports of customers being sold technology packages for services that are not available in their area. Customer service staff must have access to more detailed and accurate information in order to more effectively assist rural consumers.

ACCAN has been calling for customer service improvements driven by explicit obligations to reduce wait times, increase first contact resolution and improve customer service staff performance, combined with greater regulatory oversight with appropriate enforcement measures.¹⁵ The Alliance supports these calls.

16. What other matters should the Committee consider in its review and why are they important?

The Alliance has no additional matters to raise for consideration in the review.

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National Rural Health Alliance Members (June 2021)

Allied Health Professions Australia (Rural and Remote Committee)	Federation of Rural Australian Medical Educators
Australasian College for Emergency Medicine (Rural, Regional and Remote Committee)	Isolated Children's Parents' Association
Australasian College of Health Service Management (Regional, Rural and Remote Special Interest Group)	National Aboriginal Community Controlled Health Organisation
Australasian College of Paramedicine	National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
Australian and New Zealand College of Anaesthetists and Faculty of Pain Medicine	National Rural Health Student Network
Australian Chiropractors Association (Aboriginal and Torres Strait Islander Rural and Remote Practitioner Network)	Optometry Australia (Rural Optometry Group)
Australian College of Midwives (Rural and Remote Advisory Committee)	Pharmaceutical Society of Australia (Rural Special Interest Group)
Australian College of Nursing (Rural Nursing and Midwifery Community of Interest)	Regional Medical Specialists Association
Australian College of Rural and Remote Medicine	Royal Australasian College of Medical Administrators
Australian Dental Association (Rural Dentists' Network)	Royal Australasian College of Surgeons (Rural Surgery Section)
Australian General Practice Accreditation Limited	Royal Australian and New Zealand College of Obstetricians and Gynaecologists
Australian Healthcare and Hospitals Association	Royal Australian and New Zealand College of Psychiatrists
Australian Indigenous Doctors' Association	Royal Australian College of General Practitioners (Rural Faculty)
Australian Nursing and Midwifery Federation (rural members)	Royal Far West
Australian Paediatric Society	Royal Flying Doctor Service
Australian Physiotherapy Association (Rural Advisory Council)	Rural Doctors Association of Australia
Australian Psychological Society (Rural and Remote Psychology Interest Group)	Rural Health Workforce Australia
Australian Rural Health Education Network	Rural Pharmacists Australia
Congress of Aboriginal and Torres Strait Islander Nurses and Midwives	Services for Australian Rural and Remote Allied Health
Council of Ambulance Authorities	Society of Hospital Pharmacists of Australia
CRANApplus	Speech Pathology Australia (Rural and Remote Member Community)
Exercise and Sports Science Australia	