

Supplementary questions – Narrabri, Tuesday 12 August 2025

Wee Waa Chamber of Commerce (sub 89)

1. What could be done to better improve communication between Hunter NE Health District Management, local hospitals, medical professionals and the community of the Hunter New England Health District?

At a minimum, quarterly open meetings between the HNELHD board, senior executives, local medical professionals and concerned community members. These meetings should be held locally in each town where a hospital or multipurpose health service operates. It should listen to the concerns of the locals as well as report on improvements / issues with providing care over the period in question. It should also allow local health staff to present honestly without fear of repercussion. Additionally, we believe an independent complaints mechanism would add useful oversight over all LHDs, ensuring the government has a less curated source of information regarding community health delivery concerns.

2. Are there improvements that could be made to the delivery of NSW Ambulance services that would better support the health outcomes of residents of the regional and remote areas of the Hunter NE Health District? Please share specific examples if you have them.

NSW ambulance services can be under significantly more strain from the tyranny of distance than patient numbers. The areas to cover are vast. Once an ambulance leaves town to travel to another hospital it is taken out of circulation for at least a couple of hours (depending on destination hospital). We firmly believe a doubling of the service in rural and remote areas would improve health outcomes and reduce stress on ambulance personnel. This should be done as an adjunct to a solid local hospital network, not as a replacement.

We also suggest the Committee discuss directly with ambulance staff with experience of regional and remote areas to get a greater understanding of the issues currently at play. They are far better placed to inform you than the Chamber.

3. Do you think that there should be more than 2 board members representing the New England/Narrabri part of the HNE Area Health Service District and could this be achieved by adding an extra position? What are the merits of potentially doing this?

We do not believe adding an extra board member to represent New England/Narrabri would achieve much as large boards become unwieldy. It is far better to ensure a fairer distribution of board members in say a 5/4 split. This would ensure remote/regional areas have an improved chance of being heard (and holding sway) in discussions relating to the remote and rural hospital network on and West of the range.