

**Submission
No 23**

**THE IMPLEMENTATION OF PORTFOLIO COMMITTEE No. 2
RECOMMENDATIONS RELATING TO WORKFORCE ISSUES, WORKPLACE
CULTURE AND FUNDING CONSIDERATIONS FOR REMOTE, RURAL AND
REGIONAL HEALTH**

Organisation: Exercise and Sports Science Australia (ESSA)

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The Select Committee inquiry into the implementation of Portfolio Committee No.2 - Recommendations relating to workforce culture and funding considerations for remote, rural and regional health.

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EXERCISE & SPORTS SCIENCE AUSTRALIA (ESSA) SUBMISSION

RE: INQUIRY INTO IMPLEMENTATIONS OF CERTAIN PC2 RECOMMENDATIONS

Select Committee on Remote, Rural and Regional Health

Dear Dr. Joe McGirr IND, LA Member,

Thank you for the opportunity to provide feedback in relation to the NSW Select Committee on Remote, Rural and Regional Health inquiry into the implementation of Portfolio Committee No. 2 recommendations relating to workforce issues, workplace culture and funding considerations for remote, rural and regional health inquiry.

Exercise & Sports Science Australia (ESSA) is the peak professional association for exercise and sports science professionals in Australia, representing more than 11,000 members comprising university qualified Accredited Exercise Physiologists, Accredited Sports Scientists, Accredited High-Performance Managers and Accredited Exercise Scientists.

Accredited Exercise Physiologists (AEPs) apply science of exercise to design and deliver physical activity and exercise-based interventions to improve health, fitness, well-being, performance and assist in preventing injury and chronic conditions. There exists a healthcare access gap between rural and urban areas. The Select Committee must prioritise innovative solutions like multidisciplinary care, advanced technologies and allied health professional's scope of practice through training. ESSA supports this approach, aligned with the [National Strategic Framework for Rural and Remote Health \[1\]](#).

This submission will address selected terms of reference related to workforce issues, workplace culture and funding considerations for remote, rural and regional health, focusing on providing better access to Exercise Physiologists services, resulting in better health outcomes and a thriving economy for NSW.

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1.0 ABOUT ACCREDITED EXERCISE PHYSIOLOGISTS

Accredited Exercise Physiologists (AEPs) are at least four-year university degree qualified allied health professionals.

They provide services to people across the entire health spectrum, from the healthy population through to those at risk of developing a health condition, and people with health conditions, a disability, and aged related illnesses and conditions, including chronic, com 2010lex conditions.

Exercise physiology services are recognised by Australian compensable schemes including Medicare, the National Disability Insurance Scheme (NDIS), the Department of Veteran Affairs (DVA), workers' compensation schemes and most private health insurers. Australia's exercise physiology profession comprises approximately 7,500 AEPs, with over 2,500 of these in NSW [2].

AEPs play a crucial role in providing services to prevent or treat chronic and complex health conditions. Exercise is a proven intervention that can improve psychosocial outcomes, physical fitness and function, and overall quality of life for cancer patients [3]. However, it is necessary to reach out to individuals living with and beyond cancer in rural and remote communities. These communities face various challenges such as geographic isolation and lack of awareness or access to exercise-oncology services, which can contribute to a decreased adoption of an active lifestyle[3]. To address this disparity in access to exercise-oncology resources between urban and rural/remote communities, it is crucial to have accessible exercise resources that can be implemented feasibly and sustainably.

2.0 SUMMARY OF RECOMMENDATIONS

Responses to the following Terms of Reference:

a) *Any challenges or opportunities relating to the implementation of recommendations relating to workforce issues, workplace culture and funding for remote, rural and regional health services and programs.*

Recommendation 1: That the Select Committee increase access to Exercise Physiology services in rural and remote areas for NSW people.

Increasing access to exercise physiology services for people with mental health conditions is essential [4], especially for those living in rural and remote communities [5].

Of the members working in regional Australia (20.1%), 26.9% worked within a private allied health clinic, and 19.1% worked within a private EP clinic. Similarly, of those members working in 'remote' and 'very remote' Australia (0.5%), 30.0% worked within a private allied health clinic, and 16.2% worked within a private EP clinic.

Currently, work opportunities are limited in rural communities for AEPs. Positions have not been created in many circumstances, particularly in the public sector. This exacerbates issues of workforce shortages and access to evidence-based clinical treatment services.

b) *Staffing numbers, recruitment and retention, and related workforce management and planning issues (including Recommendations 8, 9, 11, 12, 15, 16, 17, 18, 30 and 33)*

Recommendation 2: That the Select Committee supports rural models of care to recruit Accredited Exercise Physiologists (AEPs) into the multidisciplinary rural and remote team to support the NSW remote community holistically.

To work towards addressing this gap, ESSA recommends mental health treatment services include access to structured clinical exercise by employing exercise physiologists in the following rural and remote Local Health Districts (LHD) [5].

- 2.2 FTE Level 3 and 5.0 FTE Level 2 - Illawarra Shoalhaven LHD: Shellharbour Hospital, Wollongong Hospital, Shoalhaven Hospital, Community Mental Health Services District
- 0.6 FTE Level 3 and 2.0 FTE Level 2 - Murrumbidgee LHD: Wagga Wagga Inpatient Mental Health Services, Community Mental Health Services District.

- 3.5 FTE Level 3 - Northern NSW LHD: Tallowood (Lismore), Kurrajong (Tweed Heads), Tuckeroo (Byron), Lismore Community Mental Health, Tweed/Byron Community Mental Health.
- 3.0 FTE Level 3 and 2.0 FTE Level 2 – Southern NSW LHD: The Chisholm Ross Centre, Bega Mental Health Inpatient Unit, Community Mental Health Services District.
- 4.0 FTE Level 3 and 4.0 FTE Level 2 – Western NSW LHD: mental health inpatient and community mental health services at Bathurst, Dubbo, Nyngan and Bourke. Community Mental Health at Orange.

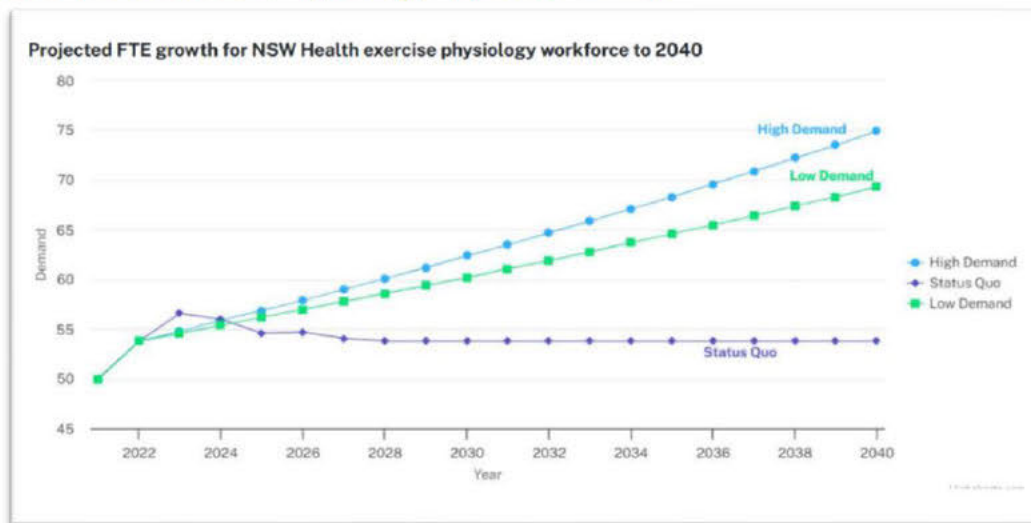
Treatment services should also be extended to people with diabetes, and the following areas of need were identified to employ 1.0 FTE exercise physiologists as part of the multidisciplinary team. This included local Health Districts of Central Coast, Hunter New England, Illawarra Shoalhaven, Mid North Coast, Murrumbidgee, Northern NSW, Southern NSW, and Western NSW [5].

Furthermore, people with cancer benefit from access to structured clinical exercise treatment through exercise physiology, and the following locations have been identified [5]:

- 1.2 FTE Hunter New England LHD – Manning and Mater Newcastle
- 0.6 FTE Illawarra Shoalhaven LHD – Wollongong
- 1.2 FTE Mid North Coast LHD – Port Macquarie and Coffs Harbour Health Campus
- 0.6 FTE Murrumbidgee LHD – Wagga Wagga
- 0.6 FTE Northern NSW LHD – Tweed
- 0.6 FTE Southern NSW LHD – South East Regional Hospital
- 1.8 FTE Western NSW LHD – Bathurst, Mudgee, Dubbo

The need to recruit more exercise physiologists has been identified by workforce modelling, projecting increased demand for the exercise physiology workforce in NSW Health [6].

NSW Health Exercise Physiology Projected FTE 2040



c) Staff accreditation and training (including Recommendations 13, 14, 19, 20, 23, and 29)

Recommendation 3: That multidisciplinary models of care, including AEPs be explored by the Select Committee to shift the provision of service from an institutional focus towards a patient centric model.

The Regional Health Strategic Plan for 2022-2032 is a roadmap for the future provision of health services that understand and celebrate the diverse and unique nature of regional communities[7].

ESSA has created a standard to align with the plan's vision to strengthen the regional workforce. The standard will assist in developing an educational stream for exercise physiology in the rural generalist pathway. The aim is to support access to services to address the shortage of healthcare workers in rural, regional, and remote areas of New South Wales. The Standards for the Accredited Exercise Physiology Rural Generalist Pathway are supported by a guide to assist educational providers in incorporating Exercise Physiology into their current curriculum [8].

- d) *Workplace culture, including forthcoming reviews of workplace culture and complaint handling mechanisms (including Recommendations 40 and 41).*

ESSA has no feedback on this section.

- e) *Funding for agencies, programs, and incentives (including Recommendations 1, 4, 10, 23, 24, 30 and 38), and any funding issues relating to the above recommendations.*

Recommendation 4: That the Select Committee supports early intervention and preventative models of care to achieve a long-term structural and cultural change process to implement a value-based approach to funding.

According to government policy, research prioritising prevention and early intervention in rural communities is crucial [1]. People residing in rural and remote areas of New South Wales have poorer health statuses and are more susceptible to health risks. By focusing on early intervention and preventative models of care, we can bring about a long-term shift in both structural and cultural aspects to establish a value-based approach to funding.

NSW Health has the opportunity to fund the positions identified in this submission, thus enhancing the health and wellbeing of people living in regional, rural and remote communities who lack access to clinical treatment services to support their health and wellbeing.

5.0 CONCLUSION

ESSA commends the Select Committee on this important inquiry, which presents an opportunity for action on the national strategic vision for health care for Australians living in regional, rural and remote areas. This aligns closely with the future health guiding of the next decade of care in rural and remote NSW.

Overall, exercise interventions delivered by accredited exercise physiologists are estimated to be productive and highly cost-effective in the Australian healthcare setting [8]. ESSA encourages the Select Committee to support improved access to exercise physiologist services for rural NSW residents to achieve better health outcomes and a more robust economy.

6.0 REFERENCES

1. Care, T.D.o.H.a.A., *National Action Plan for Promotion, Prevention and Early Intervention for Mental Health*. Canberra: AGPS.
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3. Lawler, S.S., K.; Masters, J.; Adams, J.; Eakin, E, *Follow-up care after breast cancer treatment: Experiences and perceptions of service provision and provider interactions in rural Australian women*. *Support. Care Cancer* 2010.
4. Kaine, C., Lawn, S., Roberts, R., Cobb, L., & Erskine, V, *Review of Physical and Mental Health Care in Australia, Lived Experience Australia 2022*: Marden, South Australia, Australia.
5. Australia, E.S.S., *New South Wales Election 2023 - Exercise for good health and a strong economy*. 2023.
6. Government, N., *Exercise Physiology Workforce Modelling 202(20/09/2023)*.
7. Health, N., *NSW Regional Health Strategic Plan 2022 - 2032*. 2023.
8. Australia, E.S.S., *Accredited Exercise Physiologist Rural Generalist Professional Standard*. 2023.