

**Submission  
No 15**

**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:** Manna Institute

**Date Received:** 12 April 2024

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Select Committee on Remote, Rural and Regional Health  
Legislative Assembly

**Manna Institute response to the 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 Manna Institute welcomes the opportunity to respond to the NSW Legislative Assembly Select Committee on Remote, Rural and Regional Health (the committee) 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 inquiry).

The Manna Institute is a virtual institute of leading researchers working with industry and community partners to improve mental health and wellbeing in rural, regional and remote Australia.

Bringing together leading mental health researchers from seven universities in the Regional Universities Network (RUN) – Charles Sturt University, Central Queensland University, Federation University, Southern Cross University, the University of Southern Queensland, the University of Sunshine Coast and lead institution the University of New England the Manna Institute undertakes meaningful research, foster the development of professional workforces, and translate research findings into practical, place-based programs.

Manna Institute believes that improving mental health has the potential to change lives; boost living standards, social engagement and connectedness; and drive economic productivity in the long-term.

Our goals are to:

- work with rural and regional communities to address complex mental health challenges,
- reduce morbidity and mortality associated with mental health challenges, mental illness and suicide,
- alleviate pressure on rural, regional and remote health systems and the associated workforces.

In this submission the Manna Institute highlights:

- The need for outcome measure driven implementation of the NSW Health Workforce Plan and the NSW Regional Health Strategic Plan
- The additional development and implementation of a 10-Year Rural and Remote Medical and Health Workforces Recruitment and Retention Strategy as recommended in the original

## **Submission to the 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**

### Introduction

This submission focusses on the following recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional New South Wales, listed in the inquiry Terms of Reference:

- 1) Mental health services, and drug and alcohol services (including Recommendation 11)
- 2) Indigenous health services
- 3) Other specialist care and allied health services, as they pertain to the Portfolio Committee No. 2 recommendations
- 4) Any updates or further observations relating to the progress of implementing Portfolio Committee No. 2 recommendations relating to workforce issues, workplace culture and funding issues, as per the Select Committee on Remote, Rural and Regional Health's previous inquiry.

### The current context

As part of a systematic and qualitative examination of the lived experiences of over 3400 people in Australia experiencing distress and mental ill-health<sup>1</sup>, Manna Institute researchers highlighted the unique challenges faced by people living in rural, regional and remote communities.

These challenges ranged from accessing specialist mental health support, the additional impact of socioeconomic factors connected to regionality in ability to afford treatment through to the capacity and sustainability of workforces attempting to support these communities.

The unique needs of workforces was further identified in the 2023 National Mental Health Workforce Strategy. This strategy highlights the ongoing importance of addressing the needs of the rural, regional and remote mental health workforce.

Most recently data from the Royal Australian and New Zealand College of Psychiatrists (RANZCP) spoke to the continuing issues relating to access to psychiatrists in regional Australia. Of relevance to

*"I was living in a rural area at the time of my diagnosis. The mental health nurse only travelled to the town I lived in once a fortnight and it was an hour and a half drive. There is next to no support other than a GP in rural towns."*

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<sup>1</sup> Maple, M., Wayland, S., Carrandi, A., Hu, Y., Karger, S. & Kabir, H. *It's hard to imagine, until you live it. Experiences of Mental Illness in Australia: A systematic and qualitative examination of interventions and support needs.* A report for the National Mental Health Commission of Australia. October 2022.  
<https://www.mentalhealthcommission.gov.au/news/media-releases/2023/October/Curiosity-Compassion-and-Care>

this submission was the finding that for psychiatrists working in regional locations, 94% noted the lack of specialist healthcare as having a detrimental impact on patients.

*“We need more mental health professionals in regional NSW and in Australia. Its so hard to get in to see anyone. The waiting lists can be so long.”*

### Mental health specific

#### **Recommendation 11**

*That NSW Health work with the Australian Government collaboratively to immediately invest in the development and implementation of a 10-Year Rural and Remote Medical and Health Workforce Recruitment and Retention Strategy. This should be done in consultation with rural, regional and remote local government, schools, community services, human services, unions, professional organisations, general practice, pharmacists and community organisations. It should set out a clear strategy for how NSW Health will work to strengthen and fund the sustainability and growth of rural, regional and remote health services in each town including quantifiable targets for tangible improvement in community-level health outcomes, medical and health workforce growth, community satisfaction, and provider coordination and sustainability. It must also address hospital and general practice workforce shortages including General Practitioner, nurses and midwives, nurse practitioners, mental health nurses, psychologists, psychiatrists, counsellors, social workers, paramedics, allied health practitioners and Rural Generalists.*

Manna Institute strongly advocates for the immediate action relating to this recommendation. We note that NSW Health released the [NSW Health Workforce Plan 2022-2032](#)<sup>2</sup> however concerningly across this plan only one of the 22 listed outcome measures refers specifically to addressing the needs of the rural and remote workforces.

The [NSW Regional Health Strategic Plan 2022-2032](#)<sup>3</sup> which is noted as having been informed by the above NSW Health Workforce Plan does make reference to six strategic objectives designed to strengthen the regional health workforce however both the Regional Health Strategic Plan and Workforce Plan fail to include quantifiable targets relating to measuring of improvements.

As a research institute Manna encourages outcome measure driven implementation of both plans along with additional development of a 10-Year Rural and Remote Medical and Health Workforces Recruitment and Retention Strategy as recommended in the original report.

### Indigenous health services

#### **Recommendation 33**

*That NSW Health and the Local Health Districts, particularly those located in rural, regional and remote areas, prioritise building their Indigenous workforce across all disciplines, job types and*

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<sup>2</sup> NSW Health Workforce Plan 2022-2032, [hwp-2022-2032.pdf \(nsw.gov.au\)](#) accessed 18 March 2024

<sup>3</sup> NSW Regional Health Strategic Plan 2022-2032, [regional-health-strategic-plan.pdf \(nsw.gov.au\)](#) accessed 18 March 2024

*locations. This should include additional funding targeted at increasing the number of Aboriginal Care Navigators and Aboriginal Peer Workers*

It is important to recognise that this recommendation needs to consider not only the increasing of the Indigenous workforce as an outcome measure but to also the sustainability and development of the workforce with consideration of the challenges and opportunities unique to rural, regional and remote health workforces. For example the Indigenous Allied Health Associations Workforce Development Strategy highlights critical success factors such as Cultural Responsiveness, mentoring and leadership development and the need to build these factors in to rural, regional and remote workforces<sup>4</sup>.

### Specialist care and allied health services

#### **Recommendation 5**

*That NSW Health and the rural and regional Local Health Districts actively engage with local community groups and charities to understand the services and resources they provide, and to ensure that where possible and appropriate, service gaps are filled by government.*

Manna Institute welcomes this recommendation and highlights the challenge of measuring this without having outcome measures relating to engagement and partnerships. It is well recognised that including the perspectives and experience of people living and working in rural, regional and remote areas, this must also include the experiences of those people accessing health services as consumers or carers<sup>5</sup>.

#### **Recommendation 44**

*That the NSW Government adopt a Health in All Policies framework (similar to the policy in South Australia) to ensure that the health of people in New South Wales is central to government decision making, and which recognises that community physical and mental health is a responsibility of all Ministers and Departments of government. Further, such a framework should include a requirement that all decisions of government are assessed to determine the impact on human and environmental health to ensure a whole-of-government ownership of health outcomes for people living in New South Wales.*

As a research institute focussed on working with industry and community partners to improve mental health and wellbeing in rural, regional and remote Australia, the Manna Institute strongly supports the adoption of a health in all policies framework. Health in all policies approaches advocate for examination of the social determinants of health and the collaborative addressing of these determinants through all levels of government. Whilst not only relevant to rural, regional and remote communities Manna Institute highlights that the determinants relating to rural, regional and

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<sup>4</sup> Workforce Development Strategy, Indigenous Allied Health Association (2017), <https://iaha.com.au/workforce-support/workforce-development-strategy/> accessed 28 March 2024

<sup>5</sup> Partnerships with Purpose, n.d., Manna Institute, [Manna FactSheet Partnerships.pdf \(squarespace.com\)](#) accessed 28 March 2024

remote locations have an additional impact on health outcomes and further advocates for a social determinant approach to health.

### Conclusion

Rural, regional and remote communities deserve to have health workforces, services and programs which are not only informed by the evidence base but developed in partnership with people working and living in rural, regional and remote communities. Manna Institute advocates for the full implementation of the recommendations relating to the delivery of specific health services and specialist care in remote, rural and regional NSW.

This inquiry provides a unique opportunity to not only implement these recommendations but develop a framework for evaluating the implementation and associated outcomes to provide greater accountability and transparency in the delivery of these essential services.

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### About the Manna Institute:

[Manna Institute](#) is a virtual institute of leading researchers working with industry and community partners to improve mental health and wellbeing in rural, regional and remote Australia.

Funded by a Commonwealth grant under the Regional Research Collaboration program Manna Institute aims to:

- foster meaningful research
- enhance professional workforce development
- translate research findings into practical, place-based programs.

The institute's seven partner universities include Charles Sturt University, Central Queensland University, Federation University, Southern Cross University, the University of Southern Queensland, the University of Sunshine Coast and lead institution the University of New England.