

**Submission
No 38**

**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: Berrigan Shire Council

Date Received: 23 April 2024

Select Committee on Remote, Rural and Regional Healthcare

Berrigan Shire Council Response



BERRIGAN SHIRE

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Enhancing Rural and Remote Health: A Comprehensive Response from Berrigan Shire Council

This response considers 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 as outlined in the Terms of Reference provided to the Select Committee including:

1. the delivery of specific health services and specialist care in remote, rural and regional NSW, including:
 - a. maternity service, obstetrics and paediatrics (including Recommendations 19, 20, 26 and 27),
 - b. patient transport and paramedicine (including Recommendations 3, 28 and 29)
 - c. indigenous health services (including Recommendations 23, 31, 32, 33, 34, 35 and 43)
 - d. mental health services and drug and alcohol services (including Recommendation 11)
 - e. aged care and palliative care (including Recommendations 18, 23 and 24),
 - f. cancer care and oncology (including Recommendations 21 and 30),
 - g. other specialist care and allied health services, as they pertain to the Portfolio Committee No. 2 recommendations (including Recommendations 5, 10, 30, 42, 43 and 44) and
2. any updates of 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.

Introduction

As a rural council deeply invested in the welfare of our community, we welcome the opportunity to respond to the terms of reference above. Berrigan Shire Council's response aims to consider the implementation of the Portfolio Committee No. 2, 2022 report as per the NSW government's response to that report.

Overview of the Challenges Faced by Rural and Remote Communities

Rural and remote communities across NSW encounter many challenges in accessing equitable healthcare services. These challenges stem from geographical isolation, workforce shortages, infrastructure limitations, socio-economic disparities and cultural barriers. In the Berrigan



Shire Council area we must also overlay the complexities related to being a border community.

The Portfolio Committee No 2 – Health Report of May 2022 comprehensively documented the challenges faced by communities such as ours and provided a roadmap for addressing them through their 44 recommendations. Berrigan Shire Council notes the NSW government supported in full or in principle, 41 of those recommendations and noted the other three.

[Assessment of the Recommendations from Portfolio Committee No. 2 Report](#)

Investment in healthcare infrastructure

The report rightly emphasised the need for increased investment in healthcare infrastructure in rural and remote areas. Whilst there have been some developments in this regard, such as refurbishment of some facilities and the establishment of new clinics, progress is slow. Many communities in our region still lack healthcare infrastructure, leading to continued reliance on distant services.

For the Berrigan Shire Council we are actively engaged in the \$25M redevelopment of the Finley Hospital. This hospital is critical to the care of our community and those in surrounding communities. Finley Hospital has been noted as a high priority since 2016 with funding of the project only announced in 2021. Now in 2023, the scope of the project has had to be vastly reduced due to inflationary pressures, which will lead to considerably reduced outcomes for our community than if the project had been established when it was first prioritised.

Health workforce recruitment and retention

Addressing workforce shortages is crucial for improving healthcare access in rural and remote regions. The report's recommendations on workforce recruitment and retention were promising, including strategies such as incentives for healthcare professionals and enhanced training programs. However, the impact of these measures to date has been limited, with persistent shortages of doctors, nurses and allied health professionals still experienced in most areas.

In border communities such as ours the implementation of incentives for nurses in particular is acting as a disincentive for our students to study nursing. This is because both the Victorian and NSW incentivisation schemes require students to work in the relevant state at the completion of their study. While Berrigan Shire is located in NSW, 60% of our school age children attend education facilities in Victoria and many subsequently study at Victorian tertiary institutions. The effect of the incentive programs for cross border communities is that it effectively limits students' future employment options by requiring them to work in one state or another. For example, a student who studies nursing in Melbourne might like to return home to work at Finley Hospital but this would not be permitted under the incentive



scheme. This issue must be urgently addressed to ensure equitable access to educational incentives to these border students. They would very much like to return to their own communities to practice their professions and government policy is inadvertently preventing this from occurring.

Telehealth and telemedicine expansion

The COVID-19 pandemic highlighted the importance of telehealth in providing remote healthcare services. The report advocated for the expansion of telehealth and telemedicine in rural and remote communities as an adjunct to initial and regular face to face care. Whilst there has been some progress in these areas, with increased funding and support for telehealth initiatives, challenges such as limited internet connectivity and technological infrastructure continue to hinder its widespread adoption.

Again for cross border communities, there is a disparity between the types of services provided to NSW telehealth users and those of their Victorian counterparts. Those in Victoria, for example, have access to Virtual Emergency Department technology. That is not a facility accessible by neighbours on the NSW side of the border but would be of great use considering many of our most urgent care patients are transferred into the Victorian medical system.

Community engagement and health promotion

Effective community engagement and health promotion are essential for improving health literacy and addressing cultural barriers to healthcare access. The report emphasised the importance of culturally sensitive approaches and community led initiatives. There have been efforts to engage communities and raise awareness of available services however, more targeted and sustained interventions are needed to achieve meaningful change.

The issues experienced in our community regarding the Japanese Encephalitis outbreak in 2022 is of immediate relevance. Murrumbidgee Local Health District did very little in this space for our community. While vaccines were available from GP clinics, there is no GP clinic in Barooga which relies on health services in Victoria due to its proximity to Cobram.. Whilst Victoria Health rolled out vaccinations quite quickly, those in NSW communities were initially not eligible to access their assistance. Considerable advocacy on the part of a number of community members, including Berrigan Shire councillors, saw that stance change but the outbreak was well underway by the time our community had adequate and equitable access to those preventative measures.

Integrated healthcare models

The report highlighted the importance of integrated healthcare models that prioritise preventative care and holistic approaches to health. Some initiatives to promote integrated care have commenced such as the establishment of multidisciplinary health teams and



partnerships between primary care providers and community organisations, however systemic barriers persist, hindering the implementation of comprehensive and co-ordinated care models.

Again, the redevelopment of the Finley Hospital in the Berrigan Shire will promote the above models, however more than just the NSW healthcare systems need to know what is currently available and will be available at the Finley centre. In order to ensure patients can return home faster and indeed have access to pre and post operative care and rehabilitation, communication between NSW Health and Victoria Health, and NSW Health and the community needs to be much stronger and more directed to the communities in which the services operate.

[Evaluation of the NSW Government response to the Portfolio No 2 report](#)

The NSW government's response to the "Health outcomes and access to health and hospital services in rural, regional and remote New South Wales" report acknowledged the challenges faced by rural and remote communities and committed to addressing them through a range of initiatives and investments. These commitments were laudable but the actual impact on the ground has been mixed. Some positive developments have been observed, such as targeted funding allocations and pilot programs aimed at improving healthcare access and outcomes in rural areas. However, significant gaps and shortcomings remain, indicating a need for stronger political will, sustained investment and greater collaboration between government, healthcare providers and local communities.

[Current State of Rural and Remote Healthcare](#)

Despite the efforts of the NSW government and various stakeholders, the lived experiences of rural and remote communities paint a sobering picture of ongoing challenges and unmet needs. Accessing timely and quality healthcare services continues to be difficult for many residents, with long waiting times, limited services options and significant out of pocket expenses being common barriers. Workforce shortages persist with many communities relying on locum doctors and temporary staff to fill critical gaps. Infrastructure deficits, including inadequate facilities and outdated equipment, further exacerbate these challenges, compromising the delivery of healthcare services.

[Recommendations for Future Action](#)

Accelerated investment in healthcare infrastructure

The NSW government should prioritise accelerated investment in healthcare infrastructure in rural and remote areas, focusing on areas with the greatest need and those already prioritised



by the NSW Health Department. This includes the construction of new facilities, the upgrade of existing ones and the provision of essential medical equipment and technology.

Innovative workforce strategies

The government should explore innovative strategies to address healthcare workforce shortages, such as telehealth enabled models of care, expanded scope of practice for allied health professionals and targeted recruitment and retention incentives tailored to rural and remote areas.

Digital health solutions

Enhancing digital health infrastructure and connectivity is critical for expanding access to telehealth and telemedicine services in rural and remote communities. The government should invest in digital connectivity infrastructure throughout rural and remote communities and mobile health technology to overcome barriers related to distance and geography.

Community centred approaches

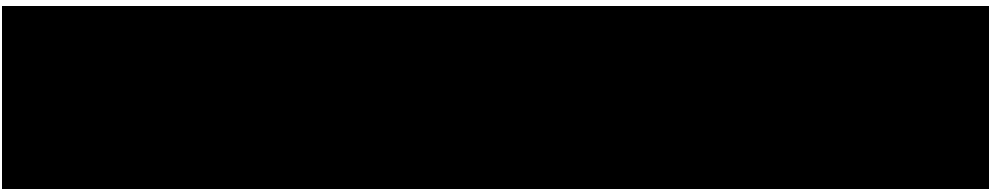
Meaningful engagement with local communities is essential for designing healthcare solutions that are responsive to their unique needs and circumstances. The government should support community led initiatives and partnerships that empower residents to actively participate in decision making processes and health promotion activities.

Long term funding commitments

Sustainable funding commitments are needed to ensure the continuity and effectiveness of healthcare initiatives in rural and remote areas. The government should allocate dedicated funding streams for rural health and commit to multi-year investment plans to provide certainty for service providers and communities.

Conclusion

In conclusion, whilst the May 2022 Portfolio Committee No 2 Report and the subsequent response from the NSW government have highlighted the pressing healthcare needs of rural and remote communities, significant challenges persist. As a rural council, Berrigan Shire urge policy makers to prioritise and expedite action on the recommendations outlined in the report to improve the healthcare access and outcomes for all residents of rural and remote NSW. By working collaboratively with stakeholders and investing in sustainable solutions, we can build a more resilient and equitable healthcare system that meets the needs of our diverse communities.





Dr Julia Cornwell McKean GAICD
Mayor
Berrigan Shire Council

Karina Ewer MBA, MCDR, GAICD, MAHRI
Chief Executive Officer
Berrigan Shire Council