

**Submission
No 75**

HEALTH SERVICES AMENDMENT (SPLITTING OF THE HUNTER NEW ENGLAND HEALTH DISTRICT) BILL 2025

Organisation: Australian Paramedics Association (NSW)

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Australian Paramedics Association (NSW)
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Submission for the Inquiry into the Health Services Amendment (Splitting of the Hunter New England Health District) Bill (2025)

The Australian Paramedics Association (NSW) (APA (NSW)) is a registered trade union representing the Paramedics employed by NSW Ambulance. APA (NSW) is grateful for the opportunity to give an update on the *Health Services Amendment (Splitting of the Hunter New England Health District) Bill (2025)*. Our observations and recommendations are informed by on the ground feedback from Paramedics in the Hunter New England region.

Firstly, it is important to note that the Local Health Districts (LHDs) system, in which the hospital and health system at large operates in, differs from the NSW Ambulance equivalent, which are known as 'Sectors'. The Sectors are further subdivided into 'Zones'. In this case, the Hunter New England LHD and the Hunter New England Ambulance Sector do in fact line up. However, the Ambulance Sector is subdivided into three zones: Zone 1, which covers the Newcastle area; Zone 2, which covers the greater Hunter area north of Newcastle; and the New England Zone, which covers the New England area.

There is no question that there is a significant disparity of healthcare, treatment outcomes, and funding between the two proposed LHDs. Our members in the New England Zone will frequently have to transport patients to John Hunter in Newcastle or even Orange Hospital because hospitals in places such as Wee Waa, Armidale or Tamworth are insufficient for patient needs, even in emergency situations. APA (NSW) always has and continues to

advocate for healthcare expansion in rural and regional New South Wales as a matter of priority.

However, as it stands today, the splitting of the districts as proposed comes only with platitudes that the newly formed New England North West LHD would improve hospital conditions. While the bill allows for transfer of assets, rights and liabilities between the newly split LHDs, it does not come with any promises or undertakings to improve the quality of healthcare in the New England North West LHD.

If the splitting of the district proceeds without any additional funding or services in the New England North West LHD, our members have asserted that patient outcomes may suffer. For example, Tamworth Hospital, the largest hospital in the proposed New England North West LHD, does not have many of the regular services expected of a LHD's 'flagship' hospital. Patients seeking regular and emergency care will still consistently travel to John Hunter when necessary. If the LHDs are split without a significant expansion of Tamworth Hospital, patients would now be traveling across LHD lines to seek ordinary treatment, which adds an extra bureaucratic hurdle for patient information. The same would be the case when paramedics transport patients to John Hunter, which, as noted before, is already a common occurrence.

In other words, Tamworth Hospital would need to be brought up to the current standards of John Hunter Hospital. Similarly, Moree and Armidale Hospitals would need to be brought up to the current standard of Tamworth Hospital. Without such investment, the purpose of splitting the district, that the New England North West LHD would provide the healthcare that the community deserves, would be rendered nugatory.

We thank the Committee once again for the chance to provide a submission to this inquiry and will always welcome the chance to provide further oral or written submissions if required.