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

Organisation: Uralla Shire Council

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Mayor's Office

P: 02 6778 6300
F: 02 6778 6349
E: council@uralla.nsw.gov.au
32 Salisbury St, Uralla NSW 2358
PO Box 106, Uralla NSW 2358
ABN: 55 868 272 018

Responsible Officer: Toni Averay
In reply, please quote: UO

24 April 2025

The Chair
Legislative Assembly Committee on Community Services
Parliament of New South Wales
Parliament House
Macquarie Street
SYDNEY NSW 2000

Dear Mr Barr,

Uralla Shire Council Submission | Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025

Uralla Shire Council welcomes the opportunity to make a submission on the *Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025*.

We do not support the proposed division of the Hunter New England Local Health District (HNELHD) into two separate entities. While we appreciate the intention to improve service delivery through more localised governance, we believe the real issue is not the structure—it is the allocation of resources.

1. The Core Issue: Resourcing, Not Structure

The New England region continues to face significant challenges in health service delivery, including:

- Inadequate resourcing of Armidale Hospital, which services a wide regional catchment;

- A critical shortage of GPs, nurses, and specialist medical staff, particularly for our ageing population; and

- Limited access to health services that are equitable and sustainable across our region.

We believe that structural change alone will not resolve these systemic issues. Instead, we are concerned that the proposed split may create further fragmentation and increase administrative overheads that detract from direct investment in care and staffing.

2. Collaboration is Already Working

We commend the work of our local member, Brendan Moylan MP, who has established and facilitated regular meetings between HNELHD executives and New England regional mayors.

These forums have been effective in bringing together local government and health leadership to address resourcing needs in a coordinated and practical way.

Rather than restructuring the HNELHD, we believe these forums should be supported and expanded to improve accountability and responsiveness within the existing health district framework.

3. Concerns with the Proposed Split

Uralla Shire Council has some concerns with the proposed split:

- **Duplicated Costs and Administrative Inefficiencies**
  Establishing two separate health districts will require new governance structures, reporting mechanisms, and executive appointments—diverting already limited funding and focus away from frontline services that need to be increased in the New England region.

- **Disruption to Existing Services and Systems**
  HNELHD currently supports integrated services, including shared digital platforms, training programs, and specialist clinical networks. A split may jeopardise these efficiencies, to the detriment of patients and providers alike.

4. Recommendations

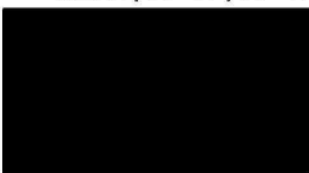Uralla Shire Council respectfully makes the following recommendations:

1. Redirect efforts toward targeted and increased resourcing of health infrastructure, workforce, and services in the New England region.

2. Prioritise the full resourcing of Armidale Hospital, ensuring it is equipped to meet regional needs.

3. Continue and strengthen collaborative forums, such as those led by Mr Moylan, to enable direct dialogue between councils and health district leadership.

Conclusion

Structural change is not the solution to the health challenges faced in New England region. The key to improving outcomes lies in fair, adequate, and strategic investment—supported by local engagement and strong regional partnerships.

We urge the Committee to consider whether the duplication and cost of a split could be more effectively directed to supporting the services our communities need most.

Thank you for your consideration.

Robert Bell
Mayor
Uralla Shire Council