

**Submission
No 86**

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

Organisation: Cancer Council NSW

Date Received: 28 April 2025

Committee Chair
Committee on Community Services
Parliament House
Macquarie St
Sydney
NSW 2000

28 April 2025

Re: Legislative Committee on Community Services Inquiry into Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025

Dear Chair,

Thank you for the opportunity to present a submission into the Committee on Community Services' Inquiry into Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025.

Cancer Council NSW is the leading cancer charity in NSW dedicated to reducing the impact of cancer and ensuring programs and services reach communities throughout NSW. Our purpose is to change the path of cancer and make sure no one walks alone. To achieve this, Cancer Council NSW:

- Supports people affected by cancer by providing evidence-based information and resources about cancer
- Provides emotional and practical supportive care services including, financial guidance, information, and support, targeted financial assistance and our Transport to Treatment service, which provides a free transport to people with cancer who cannot access Community Transport Services or have other transport barriers
- Delivers 13 11 20, a dedicated confidential phone service where anyone can call to speak with an experienced health professional who can answer any questions about cancer
- Enables the community to reduce their cancer risk through programs, information and policy efforts in skin cancer prevention, nutrition, alcohol, tobacco control and cancer screening.
- Advocates and speaks up to achieve better cancer outcomes
- Conducts and funds world-class research to reduce the impact of cancer.

Around 1.52 million people across NSW will be diagnosed with cancer between 2020 and 2044, and around 500,000 people will die of cancer¹. Although cancer outcomes in NSW are among the best in the world, for people living in remote, rural, and regional areas, cancer outcomes remain poorer. The 5-year survival for all cancers combined is lower in regional and remote areas compared to people living in a major city meaning people in regional and remote areas have poorer survival from cancer².

The age standardised incidence rate of all cancers combined is also higher in regional areas compared to major cities in 2012-16². The age-standardised incidence rate was slightly lower in remote and very remote areas; however, the rates were impacted by lower participation in population screening programs, delayed diagnosis of cancer, and lower life expectancy in remote areas.

In addition to high incidence and poorer outcomes, people with cancer in remote, rural, and regional areas face greater challenges in accessing high-quality cancer care. The challenges they face include travelling to larger regional centres and/or metropolitan areas and related arrangements, financial stress, and a lack of knowledge regarding available support services³.

Cancer Council NSW is a committed partner in delivering the NSW Cancer Plan 2022-2027 and working in collaboration with all health system and community stakeholders to achieve the best possible outcomes for people in NSW. Cancer Council NSW is a lead or partner in fourteen out of thirty-seven actions identified in the NSW Cancer Plan⁴.

We note the terms of reference for this inquiry are to explore and report on the Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025. Our response is focused on the needs of people affected by cancer living in the Hunter New England Health District and recommendations to improve the equity of cancer treatment for people in this area. However, we do not have a position on how this is done and remain neutral on whether creating a new LHD is the solution to meeting the needs of these people in a timely manner.

1. Cancer outcomes remain worse for people in regional and rural areas.

Cancer outcomes are among the best in the world in NSW, yet for people living in regional, rural, and remote, areas, cancer outcomes remain poorer. People in regional and remote areas not only have a higher incidence of cancer compared to those in major cities but also have lower 5-year survival from cancer⁵.

In addition, people living in regional NSW also have poorer preventative health care, with poorer access to GPs, longer distances to access screening, diagnosis and treatment, higher rates of smoking, alcohol consumption and overweight and obesity⁶. Adequate levels of GPs as well as available local hospitals serve an important role in regional, rural, and remote communities, and access to these services needs to remain a priority for regional NSW.

Overall, cancer incidence and mortality rates in the Hunter New England Local Health District area are higher than the NSW general population⁷. Cancer care services for adults are available at Calvary Mater Hospital, John Hunter Hospital Maitland Hospital and North West Cancer Centre in Tamworth. Offering cancer treatment in Tamworth has meant less travel for some regional patients within this LHD, but around 45% of patients living in the Hunter New England Local Health District area still travel more than 100km to receive cancer care at the North West Cancer Centre⁸.

We have been highlighting the need for policy action to reduce the disparity in cancer incidence and outcomes in regional and rural NSW since our inception, alongside many other organisations. We are encouraged that the NSW Government has been actively investigating solutions to this issue over the past five years including

- The Legislative Council – Portfolio Committee #2 Health, 2020 Inquiry into Health Outcomes and Access to Health and Hospital Services in Rural, Regional and Remote NSW.
- The establishment of a Select Committee on Remote, Rural and Regional NSW in the Legislative Assembly in 2023 and their subsequent inquiries.
- The creation of a Special Commission of Inquiry into Healthcare Funding in 2023 which is tasked with identifying opportunities to deliver higher quality, timelier, and more accessible patient-centred care across NSW.

We suggest the committee review the reports and recommendations of these inquiries with a special focus on recommendations to improve access to cancer services in regional and rural NSW. We suggest the committee encourage the NSW Government to support and take action on these recommendations. We have attached Cancer Council NSW's submission to the Special Commission of Inquiry into Healthcare Funding as it includes a number of recommendations to improve cancer treatment, care, and support across NSW. Many of these recommendations would improve cancer outcomes for people in rural and regional NSW.

Recommendation 1: The NSW Government ensure that previous recommendations to improve the disparity of healthcare (and cancer care) in regional, rural, and remote LHDs are supported and implemented.

2. Travel to treatment and accommodation are a key part of receiving treatment in regional and rural communities and must be funded accordingly.

Ensuring that people are supported with accessible and affordable transport options and accommodation whilst travelling for treatment is essential to providing cancer care to people in the Hunter New England Local Health District. Often, people with rarer and more complex cancers need treatment in highly specialised centres which are, for many reasons, almost always in major metropolitan areas. Whilst people with these cancers have much better outcomes when they are treated at these centres, they should be supported wholly with transport and accommodation options to ensure there are no barriers for people to access their care.

Last financial year, 176 people affected by cancer living in the Hunter New England Local Health District accessed Cancer Council NSW's Transport to Treatment service. Our team of volunteer drivers delivered 3,032 trips to treatment centres located within the Hunter New England Local Health District. Cancer Council NSW have five Transport to Treatment services located in Armidale, Tamworth, Cessnock, Newcastle, and Taree. Tamworth is our biggest service supporting people to travel to the North West Cancer Centre or to stay at Inala House, for those patients who travel long distances.

Although travelling large distances is part of living in rural, regional, and remote areas of NSW, travelling large distances during cancer treatment is particularly challenging. Cancer treatment can be mentally and physically draining, cause pain, fatigue and nausea and the aftereffects of treatment are unpredictable. A long period of travel after treatment can exacerbate side effects from the treatment, or a patient may make it home in a stable condition but then experience a change of symptoms and face a further few hours journey to get back to medical help. This additional burden for cancer patients in rural and regional NSW impacts their access to treatment and must be accounted for by NSW Government when planning health services in regional and rural NSW.

In addition to the discomfort of travel post cancer treatment, there is a financial cost to travel or seek accommodation post treatment. Although we welcome the improvements to IPTAAS and our clients who use the scheme have reported fewer financial worries due to the improved subsidy rates, it has not eliminated the costs of travel and accommodation for cancer treatment. This ongoing cost burden places extra pressure on people with cancer and their families and can cause regional cancer patients to end their cancer treatment prematurely. Which can have disastrous effects on their health and seriously affect their chances of survival.

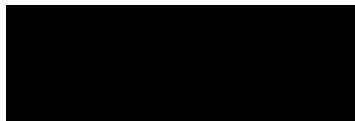
Recommendation 2: NSW Health provide ongoing adequate funding for transport and accommodation services for people affected by cancer, through reviewing IPTAAS annually with regional consumers to ensure it is continually meeting demand from people living in regional and remote NSW.

Planning and delivery of any health services in the Hunter New England region needs to meet the needs of people affected by cancer and funding should be prioritised to address inequities and disproportionate burden of care.

In summary, we recommend that this committee works to ensure that all needs of people affected by cancer remain a top priority. This includes access to health services, transport and accommodation needs, survivorship care and psychosocial support for all communities currently serviced by the Hunter New England Local Health District.

We commend the Committee on Community Services' work on this important issue and are available to answer questions or provide further information as required. Please contact Bethany Smith, Cancer Policy Lead by emailing [REDACTED] or phone [REDACTED] anytime.

Yours Sincerely,

A large black rectangular redaction box covering the signature area.

Anita Dessaix,
Director, Cancer Prevention & Advocacy
Cancer Council NSW

Reference List

- ¹ Luo Q, O'Connell DL, Yu XQ, Kahn C, Caruana M, Pesola F, et al. Cancer incidence and mortality in Australia from 2020 to 2044 and an exploratory analysis of the potential effect of treatment delays during the COVID-19 pandemic: a statistical modelling study. *The Lancet Public Health*. 2022;7(6): e537-e48.
- ² Australian Institute of Health and Welfare. Cancer in Australia 2021. Canberra: AIHW; 2021. Report No.: Cancer series no. 133. Cat. no. CAN 144.
- ³ George M, Smith A, Ranmuthugula G, Sabesan S. Barriers to Accessing, Commencing and Completing Cancer Treatment Among Geriatric Patients in Rural Australia: A Qualitative Perspective. *International Journal of General Medicine*. 2022;15(null):1583-94.
- ⁴ <https://www.cancer.nsw.gov.au/getmedia/e53d5875-78c9-432e-a4d9-5c08935c3a48/CINSW-NSW-Cancer-Plan-Dec2022-FINAL-WR.pdf>
- ⁵ Australian Institute of Health and Welfare. Cancer in Australia 2021. Canberra: AIHW; 2021. Report No.: Cancer series no. 133. Cat. no. CAN 144
- ⁶ Australian Institute of Health and Welfare. (2024). *Rural and remote health*. Retrieved from <https://www.aihw.gov.au/reports/rural-remote-australians/rural-and-remote-health>
- ⁷ <https://www.cancer.nsw.gov.au/research-and-data/cancer-data-and-statistics/data-available-now/cancer-statistics-nsw/cancer-incidence-mortality-survival/detailed-cancer-incidence-mortality>
- ⁸ <https://www.nsw.gov.au/departments-and-agencies/hnelhd/services/cancer-care#:~:text=Having%20services%20offered%20in%20Tamworth,require%20long%20courses%20of%20treatment>