

**Submission  
No 105**

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

**Organisation:** School of Rural Medicine, University of New England  
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**School of Rural Medicine**  
**A Partner of the Joint Medical Program**

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12 June 2025

Dear Mr Barr and Colleagues,

Thankyou for the opportunity to make a submission to the inquiry regarding the Health Services Amendment (Splitting of the Hunter New England Health District) Bill 2025.

This report is written on behalf of the Faculty of Medicine and Health and the School of Rural Medicine at the University of New England in Armidale. The School of Rural Medicine is a partner of the Joint Medical Program, which is a collaborative medical education initiative between the University of Newcastle, the University of New England, the Hunter New England Local Health District and the Central Coast Local Health District.

A major aim of the School of Rural Medicine is to graduate doctors who are able to meet the needs of our rural communities. Our medical program involves students undertaking the majority of their clinical placements in the Hunter New England and Central Coast footprint.

The School of Rural Medicine understands that the purpose of the bill is to improve access to health services for New England residents by moving the centre of medical administration back to Tamworth. Whilst we fully support the motivation to improve the diminishing health workforce and facilities in the New England, we recognize that there are broader issues associated with the rural health workforce that are unlikely to be solved by this measure. Australia is facing a shortage of doctors and requires an additional 1000 medical students to be trained each year to meet demand. This broader shortage of medical workforce is one of the reasons why the New England region has a shortage of medical practitioners. There needs to be evidence-based models put in place to support, train and retain medical practitioners in the New England region. There are centres of excellence in medical training in Australia that have successfully developed sustainable models of recruitment and retention of doctors for rural and remote communities. HNELHD and UNE are intending to establish this in the New England region. The NSW government and NSW Health should be investing in those types of opportunities in the New England North West, which we believe have more evidence for sustainable outcomes than the uncertain outcome of returning to separate health districts.

Splitting the health district is likely to result in duplication of administration and a period of time where the focus of recruitment is on setting up a new administration. This would be to the detriment of what the real issues are, which is the need to incentivise and recruit medical and health workforce into the region.

Yours sincerely,

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